

REPRODUCTIVE HEALTH (RHQ)

The next series of questions are about your reproductive history. I will begin by asking some questions about your period or menstrual cycle.

RHQ.010. How old were you when you had your **first** menstrual period?

RHQ010 **FMT_NUMERIC**

|_|_|_|

Enter age in years **(If age provided, skip to RHQ.031)**

[Enter "0" if SP hasn't started yet, then skip to RHQ.281 / page 8]

Refused **77** **(Skip to RHQ.031)**

Don't Know **99**

RHQ.020. Were you...?

RHQ020 **FMT_RHQ020_**

Younger than 10 **1**

10 to 12 **2**

13 to 15 **3**

16 or older **4**

Refused **77**

Don't Know **99**

RHQ.031. Have you had **at least one menstrual period** in the **past 12 months**? (Please do not include bleedings caused by medical conditions, hormone therapy, or surgeries.)

RHQ031 **FMT_YES_NO**

Yes **1** **(Skip to RHQ.131)**

No **2**

Refused **77** **(Skip to RHQ.060)**

Don't Know **99** **(Skip to RHQ.060)**

REPRODUCTIVE HEALTH (RHQ)

RHQ.042. What is the reason that you have not had a period in the past 12 months?
RHQ042 *FMT_RHQ042_*

Pregnancy **1** (Skip to RHQ.143)

Breastfeeding **2** (Skip to RHQ.143)

Menopause/hysterectomy **3**

Medical conditions/treatments **4**

Other **5**

Refused **77**

Don't Know **99**

RHQ.060. About how old were you when you had your **last** menstrual period?
RHQ060 *FMT_NUMERIC*

||
Enter age in years (If age provided, skip to RHQ.131)

Refused **77** (Skip to RHQ.131)

Don't Know **99**

RHQ.070. Were you...?
RHQ070 *FMT_RHQ070_*

Younger than 30 **1**

30 to 34 **2**

35 to 39 **3**

40 to 44 **4**

45 to 49 **5**

50 to 54 **6**

55 or older **7**

Refused **77**

Don't Know **99**

REPRODUCTIVE HEALTH (RHQ)

The next questions are about your pregnancy history.

RHQ.131. Have you **ever** been pregnant? Please include current pregnancy, live births, miscarriages, stillbirths, tubal pregnancies and abortions.

RHQ131

FMT_YES_NO

- Yes 1
- No 2 (Skip to RHQ.281)
- Refused 77 (Skip to RHQ.281)
- Don't Know 99 (Skip to RHQ.281)

[If SP had period in past 12 months ('1' in RHQ.031) or SP has not experienced menopause/hysterectomy (not '3' in RHQ.042), continue with RHQ.143. Otherwise, skip to RHQ.160.]

RHQ.143. Are you pregnant **now**?

RHQ143

FMT_YES_NO

- Yes 1
- No 2 (Skip to RHQ.160)
- Refused 77 (Skip to RHQ.160)
- Don't Know 99 (Skip to RHQ.160)

RHQ.152. Which month of pregnancy are you in?

RHQ152

FMT_NUMERIC

____|____|
Enter number of months

- Refused 77
- Don't Know 99

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

RHQ160

FMT_NUMERIC

____|____|
Enter number of pregnancies

REPRODUCTIVE HEALTH (RHQ)

[If currently pregnant with only pregnancy, skip to RHQ.300]

Refused **77**

Don't Know **99**

REPRODUCTIVE HEALTH (RHQ)

RHQ.170. How many of your pregnancies resulted in a live birth? (Count the number of total pregnancies, not the number of live-born children. For example, if you had twins or another multiple birth, count that as a single pregnancy.)

RHQ170**FMT_NUMERIC**

|_|_|

Enter number of pregnancies

Refused **77**Don't Know **99**

RHQ.171. How many of your pregnancies resulted in a non-live birth? (Count the number of total pregnancies.. That is, if you had been pregnant with twins or multiples resulting in at least one non-live birth, count that as a single pregnancy. Do not consider abortions, or miscarriages occurring within the first 5 months of pregnancy as non-live births.)

RHQ171**FMT_NUMERIC**

|_|_|

Enter number of pregnancies

Refused **77**Don't Know **99**

RHQ.175. Did you ever have any of the following complications during any of your pregnancies? **[HAND CARD]**

Diabetes **1**Eclampsia **2**High blood pressure **3**Pre-eclampsia **4**Premature birth **5**Premature labor **6**Had a small baby (less than 5.5 pounds) **7**Had twins or other multiples **8**Had a large baby (more than 8 pounds 13 ounces) **9**None of the above **10**Refused **77**

REPRODUCTIVE HEALTH (RHQ)

Don't Know 99

PREGNANCY COMPLICATIONS 1	RHQ175_1	FMT_RHQ175_.
PREGNANCY COMPLICATIONS 2	RHQ175_2	FMT_RHQ175_.
PREGNANCY COMPLICATIONS 3	RHQ175_3	FMT_RHQ175_.
PREGNANCY COMPLICATIONS 4	RHQ175_4	FMT_RHQ175_.
PREGNANCY COMPLICATIONS 5	RHQ175_5	FMT_RHQ175_.
PREGNANCY COMPLICATIONS 6	RHQ175_6	FMT_RHQ175_.
PREGNANCY COMPLICATIONS 7	RHQ175_7	FMT_RHQ175_.
PREGNANCY COMPLICATIONS 8	RHQ175_8	FMT_RHQ175_.
PREGNANCY COMPLICATIONS 9	RHQ175_9	FMT_RHQ175_.

REPRODUCTIVE HEALTH (RHQ)

**[INTERVIEWER: If answer to RHQ.170 is 0: Skip to RHQ.281 / page 8.
 If answer to RHQ.170 is 1: Skip to RHQ.190.
 If answer to RHQ.170 is 2 or more: Go to RHQ.180.
 If SP refused or does not know answer to RHQ.170: Skip to RHQ.281 / page 8.]**

RHQ.180. How old were you at the time of your **first** live birth?
RHQ180 FMT_NUMERIC

|_|_|_|
 Enter age in years

Refused **77**

Don't Know **99**

RHQ.190. How old were you at the time of your **last** live birth?
RHQ190 FMT_NUMERIC

|_|_|_|
 Enter age in years

Refused **77**

Don't Know **99**

The next series of questions are about breastfeeding.

RHQ.210. Did you breastfeed {your child/any of your children}?
RHQ210 FMT_YES_NO

Yes **1**

No **2** (Skip to RHQ.225 / page 7)

Refused **77** (Skip to RHQ.281 / page 8)

Don't Know **99** (Skip to RHQ.281 / page 8)

REPRODUCTIVE HEALTH (RHQ)**[REPEAT FOR EACH CHILD IN BIRTH ORDER]**

RHQ.221.a-j. For how long did you feed each of the children you breastfed (starting with the first child)? [HAND CARD]	Less than 1 month (1)	1-6 months (2)	7-12 months (3)	13-24 months (4)	More than 2 years (5)	Refused (77)	Don't Know (99)
a. First child	1	2	3	4	5	77	99
b. Second child	1	2	3	4	5	77	99
c. Third child	1	2	3	4	5	77	99
d. Fourth child	1	2	3	4	5	77	99
e. Fifth child	1	2	3	4	5	77	99
f. Sixth child	1	2	3	4	5	77	99
g. Seventh child	1	2	3	4	5	77	99
h. Eighth child	1	2	3	4	5	77	99
i. Ninth child	1	2	3	4	5	77	99
j. Tenth child	1	2	3	4	5	77	99

FIRST CHILD RHQ221A FMT_RHQ221_
SECOND CHILD RHQ221B FMT_RHQ221_
THIRD CHILD RHQ221C FMT_RHQ221_
FOURTH CHILD RHQ221D FMT_RHQ221_
FIFTH CHILD RHQ221E FMT_RHQ221_
SIXTH CHILD RHQ221F FMT_RHQ221_

No respondents answered length of breastfeeding for more than six children, so variables after "F" are not included.

REPRODUCTIVE HEALTH (RHQ)

RHQ.225. What were your reasons for not breastfeeding or stopping breastfeeding? **[HAND CARD. ENTER ALL THAT APPLY.]**

- Baby preferred the bottle/cup 1
- Parents preferred the bottle 2
- Sore/cracked/bleeding nipples 3
- Felt that breasts “dried up” or “not producing enough milk” 4
- Sick/couldn’t breastfeed 5
- Baby had difficulty breastfeeding 6
- Baby not satisfied with breast milk 7
- Baby not gaining enough weight or “breastfeeding was not providing adequate nutrition” 8
- Too many other household responsibilities 9
- Right time to stop 10
- Using medication 11
- Smoking behavior or drinking behavior or other drug addiction behavior 12
- Work/school commitments prevented from continuing breastfeeding 13
- No support or location to breastfeed at workplace/school 14
- Husband/partner wanted me to stop breastfeeding 15
- Other family member/friend suggestion 16
- Health provider suggestion 17
- Baby premature/sickly 18
- Other reasons/circumstances (Specify:_____) 19
- Refused 77
- Don't Know 99

REASON 1 FOR NOT BREASTFEEDING CHILD 1	RHQ225_1A	FMT_RHQ225_.
REASON 2 FOR NOT BREASTFEEDING CHILD 1	RHQ225_1B	FMT_RHQ225_.
REASON 3 FOR NOT BREASTFEEDING CHILD 1	RHQ225_1C	FMT_RHQ225_.
REASON 4 FOR NOT BREASTFEEDING CHILD 1	RHQ225_1D	FMT_RHQ225_.
REASON 5 FOR NOT BREASTFEEDING CHILD 1	RHQ225_1E	FMT_RHQ225_.
REASON 6 FOR NOT BREASTFEEDING CHILD 1	RHQ225_1F	FMT_RHQ225_.
REASON 1 FOR NOT BREASTFEEDING CHILD 2	RHQ225_2A	FMT_RHQ225_.
REASON 2 FOR NOT BREASTFEEDING CHILD 2	RHQ225_2B	FMT_RHQ225_.
REASON 3 FOR NOT BREASTFEEDING CHILD 2	RHQ225_2C	FMT_RHQ225_.

REPRODUCTIVE HEALTH (RHQ)

REASON 4 FOR NOT BREASTFEEDING CHILD 2	RHQ225_2D	FMT_RHQ225_.
REASON 5 FOR NOT BREASTFEEDING CHILD 2	RHQ225_2E	FMT_RHQ225_.
REASON 6 FOR NOT BREASTFEEDING CHILD 2	RHQ225_2F	FMT_RHQ225_.
REASON 1 FOR NOT BREASTFEEDING CHILD 3	RHQ225_3A	FMT_RHQ225_.
REASON 2 FOR NOT BREASTFEEDING CHILD 3	RHQ225_3B	FMT_RHQ225_.
REASON 3 FOR NOT BREASTFEEDING CHILD 3	RHQ225_3C	FMT_RHQ225_.
REASON 4 FOR NOT BREASTFEEDING CHILD 3	RHQ225_3D	FMT_RHQ225_.
REASON 5 FOR NOT BREASTFEEDING CHILD 3	RHQ225_3E	FMT_RHQ225_.
REASON 6 FOR NOT BREASTFEEDING CHILD 3	RHQ225_3F	FMT_RHQ225_.
REASON 1 FOR NOT BREASTFEEDING CHILD 4	RHQ225_4A	FMT_RHQ225_.
REASON 2 FOR NOT BREASTFEEDING CHILD 4	RHQ225_4B	FMT_RHQ225_.
REASON 3 FOR NOT BREASTFEEDING CHILD 4	RHQ225_4C	FMT_RHQ225_.
REASON 4 FOR NOT BREASTFEEDING CHILD 4	RHQ225_4D	FMT_RHQ225_.
REASON 5 FOR NOT BREASTFEEDING CHILD 4	RHQ225_4E	FMT_RHQ225_.
REASON 6 FOR NOT BREASTFEEDING CHILD 4	RHQ225_4F	FMT_RHQ225_.
REASON 1 FOR NOT BREASTFEEDING CHILD 5	RHQ225_5A	FMT_RHQ225_.
REASON 2 FOR NOT BREASTFEEDING CHILD 5	RHQ225_5B	FMT_RHQ225_.
REASON 3 FOR NOT BREASTFEEDING CHILD 5	RHQ225_5C	FMT_RHQ225_.
REASON 4 FOR NOT BREASTFEEDING CHILD 5	RHQ225_5D	FMT_RHQ225_.
REASON 5 FOR NOT BREASTFEEDING CHILD 5	RHQ225_5E	FMT_RHQ225_.
REASON 6 FOR NOT BREASTFEEDING CHILD 5	RHQ225_5F	FMT_RHQ225_.
REASON 1 FOR NOT BREASTFEEDING CHILD 6	RHQ225_6A	FMT_RHQ225_.
REASON 2 FOR NOT BREASTFEEDING CHILD 6	RHQ225_6B	FMT_RHQ225_.
REASON 3 FOR NOT BREASTFEEDING CHILD 6	RHQ225_6C	FMT_RHQ225_.
REASON 4 FOR NOT BREASTFEEDING CHILD 6	RHQ225_6D	FMT_RHQ225_.
REASON 5 FOR NOT BREASTFEEDING CHILD 6	RHQ225_6E	FMT_RHQ225_.
REASON 6 FOR NOT BREASTFEEDING CHILD 6	RHQ225_6F	FMT_RHQ225_.

No respondents gave more than six reasons for not starting or stopping breastfeeding, so all variables after "F" are removed from data set.

REPRODUCTIVE HEALTH (RHQ)

The next series of questions deal with surgeries that some women may have had on the uterus or ovaries.

RHQ.281. Have you had a hysterectomy, that is, surgery to **remove** your uterus or womb?

RHQ281 **FMT_YES_NO**

Yes **1**

No **2** (Skip to RHQ.300)

Refused **77** (Skip to RHQ.300)

Don't Know **99** (Skip to RHQ.300)

RHQ.291. How old were you when you had your hysterectomy?

RHQ291 **FMT_NUMERIC**

Enter age in years

Refused **77**

Don't Know **99**

[Interviewer: Read to SP only if you haven't already done so.] *The next series of questions deal with surgeries that some women may have had on the uterus or ovaries.*

RHQ.300. Have you had at least one of your ovaries removed?

RHQ300 **FMT_YES_NO**

Yes **1**

No **2** (Skip to RHQ.360)

Refused **77** (Skip to RHQ.360)

Don't Know **99** (Skip to RHQ.360)

RHQ.310. Were both ovaries removed or only one?

RHQ310 **FMT_RHQ310_**

Both **1**

One **2**

Refused **77**

REPRODUCTIVE HEALTH (RHQ)

Don't Know **99**

REPRODUCTIVE HEALTH (RHQ)

RHQ.330. How old were you when you had your {ovary/ovaries} removed (or most recently removed if you had two removed at different times)?

RHQ330 **FMT_NUMERIC**

____|____|
Enter age in years

Refused **77**

Don't Know **99**

RHQ.360. Has a doctor or other health professional **ever** told you that you 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.)

RHQ360 **FMT_YES_NO**

Yes **1**

No **2**

Refused **77**

Don't Know **99**

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

RHQ380 **FMT_YES_NO**

Yes **1**

No **2**

Refused **77**

Don't Know **99**

You may have already given us some of the following information but it is important that we ask it again within this questionnaire. Now I am going to ask you about your birth control history.

RHQ.420 Have you **ever** taken birth control pills?

RHQ420 **FMT_YES_NO**

Yes **1**

REPRODUCTIVE HEALTH (RHQ)

No 2 (Skip to RHQ.511)

Refused 77 (Skip to RHQ.511)

Don't Know 99 (Skip to RHQ.511)

REPRODUCTIVE HEALTH (RHQ)

RHQ.430. How old were you when you began taking birth control pills?
RHQ430 FMT_NUMERIC

|_|_|
Enter age in years

Refused 77

Don't Know 99

[If SP is not currently_pregnant, has not had a hysterectomy, has at least one ovary and is not menopausal continue with RHQ.442. Otherwise, Skip to RHQ.451.]

RHQ.442 Are you taking birth control pills now?
RHQ442 FMT_YES_NO

Yes 1 (Skip to RHQ.460)

No 2

Refused 77 (Skip to RHQ.511)

Don't Know 99 (Skip to RHQ.511)

RHQ.451. How old were you when you stopped taking birth control pills?
RHQ451 FMT_NUMERIC

|_|_|
Enter age in years

Refused 77

Don't Know 99

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

RHQ460 A FMT_NUMCAT
RHQ460B FMT_FREQ_MONTHS_YEARS

|_|_|
Enter number [Enter '1' for less than one month]

Refused 77

Don't Know 99

REPRODUCTIVE HEALTH (RHQ)

Enter unit

Months **1**

Years **2**

REPRODUCTIVE HEALTH (RHQ)

RHQ.511. Have you **ever** used any of these other ways or means to prevent pregnancy?
[HAND CARD. ENTER ALL THAT APPLY.]

- Norplant 1
- Birth control patch 2
- Mirena or IUD device 3
- Depo-Provera or injectables 4
- Birth control ring (Nuva-Ring) 5
- Male condom 6
- Spermicidal foam, gel, creams, jellies, film, or suppositories 7
- Diaphragm 8
- Female condom 9
- Natural family planning 10
- Sterilization 11
- Other (Specify: _____) 12
- None 13
- Refused 77
- Don't Know 99

FIRST RESPONSE	RHQ511_A	FMT_RHQ511_
SECOND RESPONSE	RHQ511_B	FMT_RHQ511_
THIRD RESPONSE	RHQ511_C	FMT_RHQ511_
FOURTH RESPONSE	RHQ511_D	FMT_RHQ511_
FIFTH RESPONSE	RHQ511_E	FMT_RHQ511_
SIXTH RESPONSE	RHQ511_F	FMT_RHQ511_
SEVENTH RESPONSE	RHQ511_G	FMT_RHQ511_
EIGHTH RESPONSE	RHQ511_H	FMT_RHQ511_
NINTH RESPONSE	RHQ511_I	FMT_RHQ511_
TENTH RESPONSE	RHQ511_J	FMT_RHQ511_
ELEVENTH RESPONSE	RHQ511_K	FMT_RHQ511_
TWELFTH RESPONSE	RHQ511_L	FMT_RHQ511_
OTHER RESPONSE	RHQ511_OTHER	FMT_CHAR

REPRODUCTIVE HEALTH (RHQ)

Now I'm going to ask you about your exposure to other types of hormones that you might have used for treating conditions or health problems, other than infertility.

RHQ.540. Have you **ever** used female hormones such as estrogen and progesterone? Please include any form of female hormones, such as pills, creams, patches, and injectables, but **do not** include birth control methods or use for infertility.

RHQ540

FMT_YES_NO

Yes **1**

No **2** (End of questionnaire)

Refused **77** (End of questionnaire)

Don't Know **99** (End of questionnaire)

REPRODUCTIVE HEALTH (RHQ)

RHQ.541. Which forms of female hormones have you used? **[HAND CARD. ENTER ALL THAT APPLY.]**

- Pills 1
- Patches 2
- Creams/suppositories/injections 3
- Refused 77
- Don't Know 99

<i>FIRST RESPONSE</i>	<i>RHQ541_A</i>	<i>FMT_RHQ541_</i>
<i>SECOND RESPONSE</i>	<i>RHQ541_B</i>	<i>FMT_RHQ541_</i>
<i>THIRD RESPONSE</i>	<i>RHQ541_C</i>	<i>FMT_RHQ541_</i>

RHQ.550. At the time you started using female hormones or hormone replacement therapy, were you still having your periods or had you completely stopped having your periods?

RHQ550 *FMT_RHQ550_*

- Still having periods 1
- Completely stopped 2
- Refused 77
- Don't Know 99

RHQ.551. What are your reasons for having used estrogen or progesterone? **[HAND CARD. ENTER ALL THAT APPLY.]**

- Menopause-related symptoms (hot flashes, sweating, vaginal dryness, bladder problems) 1
- Depression, anxiety, emotional distress 2
- Hysterectomy or oophorectomy (ovary removal) 3
- Osteoporosis, bone loss/thinning, fracture prevention 4
- Cardiovascular disease prevention 5
- Irregular menstrual periods, to regulate periods 6
- Improve cognitive function/memory 7
- Sleep apnea 8
- Other reasons 9

REPRODUCTIVE HEALTH (RHQ)

Refused 77

Don't Know 99

REASON FOR TAKING FEMALE HORMONES 1	RHQSS1_A	FMT_RHQSS1_.
REASON FOR TAKING FEMALE HORMONES 2	RHQSS1_B	FMT_RHQSS1_.
REASON FOR TAKING FEMALE HORMONES 3	RHQSS1_C	FMT_RHQSS1_.
REASON FOR TAKING FEMALE HORMONES 4	RHQSS1_D	FMT_RHQSS1_.
REASON FOR TAKING FEMALE HORMONES 5	RHQSS1_E	FMT_RHQSS1_.
REASON FOR TAKING FEMALE HORMONES 6	RHQSS1_F	FMT_RHQSS1_.
REASON FOR TAKING FEMALE HORMONES 7	RHQSS1_G	FMT_RHQSS1_.
REASON FOR TAKING FEMALE HORMONES 8	RHQSS1_H	FMT_RHQSS1_.
REASON FOR TAKING FEMALE HORMONES 9	RHQSS1_I	FMT_RHQSS1_.

REPRODUCTIVE HEALTH (RHQ)

RHQ.552 Are you still using estrogen or progesterone?
RHQSS2 FMT_YES_NO

- Yes 1 (Skip to RHQ.554)
- No 2
- Refused 77 (Skip to RHQ.554)
- Don't Know 99 (Skip to RHQ.554)

RHQ.553. What are your reasons for having stopped using estrogen or progesterone?

- Physician recommended 1
- Worried about risks 2
- No longer necessary 3
- Side effects 4
- Other reasons 5
- Refused 77
- Don't Know 99

REASONS FOR STOPPING FEMALE HORMONES 1	RHQSS3_A	FMT_RHQSS3_.
REASONS FOR STOPPING FEMALE HORMONES 2	RHQSS3_B	FMT_RHQSS3_.
REASONS FOR STOPPING FEMALE HORMONES 3	RHQSS3_C	FMT_RHQSS3_.
REASONS FOR STOPPING FEMALE HORMONES 4	RHQSS3_D	FMT_RHQSS3_.
REASONS FOR STOPPING FEMALE HORMONES 5	RHQSS3_E	FMT_RHQSS3_.

[IF SP USED FEMALE HORMONE PILLS ('1' IN RHQ.541), CONTINUE WITH RHQ.554. OTHERWISE, SKIP TO RHQ.580.]

RHQ.554. Have you **ever** taken female hormone **pills** containing **estrogen only** (like Premarin)? (Do not include birth control methods or use for infertility.)
RHQSS4 FMT_YES_NO

- Yes 1
- No 2 (Skip to RHQ.562)
- Refused 77 (Skip to RHQ.562)
- Don't Know 99 (Skip to RHQ.562)

REPRODUCTIVE HEALTH (RHQ)

RHQ.556. How old were you when you **first** started taking pills containing estrogen only?

RHQ556 *FMT_NUMERIC*

|_|_|
Enter age in years

Refused **77**

Don't Know **99**

REPRODUCTIVE HEALTH (RHQ)

RHQ.558. Are you taking pills containing estrogen only **now**?
RHQ558 FMT_YES_NO

- Yes 1
- No 2
- Refused 77
- Don't Know 99

RHQ.560. Not counting any time when you stopped taking them, for how long **altogether** {have you taken/did you take} pills containing estrogen only?
RHQ560@A FMT_NUMCAT
RHQ560@B FMT_FREQ_MONTHS_YEARS

____|____|
Enter number [Enter "1" for less than one month.]

- Refused 77
- Don't Know 99

Enter unit
Month 1
Years 2

RHQ.562. Have you taken female hormone **pills** containing **progestin only** (like Provera)?
(Do not include birth control methods or use for infertility.)
RHQ562 FMT_YES_NO

- Yes 1
- No 2 (Skip to RHQ.570)
- Refused 77 (Skip to RHQ.570)
- Don't Know 99 (Skip to RHQ.570)

RHQ.564. How old were you when you **first** started taking pills containing progestin only?
RHQ564 FMT_NUMERIC

____|____|

REPRODUCTIVE HEALTH (RHQ)

Enter age in years

Refused **77**

Don't Know **99**

REPRODUCTIVE HEALTH (RHQ)

RHQ.566. Are you taking pills containing progestin only **now**?
RHQ566 FMT_YES_NO

- Yes 1
- No 2
- Refused 77
- Don't Know 99

RHQ.568. Not counting any time when you stopped taking them, for how long **altogether** {have you taken/did you take} pills containing progestin only?
RHQ568@A FMT_NUMCAT
RHQ568@B FMT_FREQ_MONTHS_YEARS

____|____|
Enter number [Enter "1" for less than one month.]

- Refused 77
- Don't Know 99

Enter unit
Months 1
Years 2

RHQ.570. Have you taken female hormone **pills** containing **both estrogen and progestin** (like Prempro or Premphase)? (Do not include birth control methods or use for infertility.)
RHQ570 FMT_YES_NO

- Yes 1
- No 2 (Skip to RHQ.580)
- Refused 77 (Skip to RHQ.580)
- Don't Know 99 (Skip to RHQ.580)

RHQ.572. How old were you when you **first** started taking pills containing both estrogen and progestin?
RHQ572 FMT_NUMERIC

____|____|
Enter age in years

REPRODUCTIVE HEALTH (RHQ)

Refused **77**

Don't Know **99**

REPRODUCTIVE HEALTH (RHQ)

RHQ.574. Are you taking pills containing both estrogen and progestin **now**?
 RHQ574 FMT_YES_NO

- Yes 1
- No 2
- Refused 77
- Don't Know 99

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

RHQ576@A FMT_NUMCAT
 RHQ576@B FMT_FREQ_MONTHS_YEARS

Enter number [Enter "1" for less than one month.]

- Refused 77
- Don't Know 99

Enter unit

- Months 1
- Years 2

RHQ.580. Have you **ever** used female hormone **patches** containing **estrogen only**? (Do not include birth control methods or use for infertility.)

RHQ580 FMT_YES_NO

- Yes 1
- No 2 (Skip to RHQ.596)
- Refused 77 (Skip to RHQ.596)
- Don't Know 99 (Skip to RHQ.596)

RHQ.582. How old were you when you **first** started using patches containing estrogen only?

RHQ582 FMT_NUMERIC

Enter age in years

REPRODUCTIVE HEALTH (RHQ)

Refused **77**

Don't Know **99**

REPRODUCTIVE HEALTH (RHQ)

RHQ.584. Are you using patches containing estrogen only **now**?
RHQ584 *FMT_YES_NO*

- Yes 1
- No 2
- Refused 77
- Don't Know 99

RHQ.586. Not counting any time when you stopped using them, for how long **altogether** {have you used/did you use} patches containing estrogen only?
RHQ586 @A *FMT_NUMCAT*
RHQ586 @B *FMT_FREQ_MONTHS_YEARS*

|_|_|
Enter number [Enter "1" for less than one month.]

- Refused 77
- Don't Know 99

Enter unit
Months 1
Years 2

RHQ.596. Have you used female hormone **patches** containing **both estrogen and progestin**? (Do not include birth control methods or use for infertility.)
RHQ596 *FMT_YES_NO*

- Yes 1
- No 2 (End of Questionnaire)
- Refused 77 (End of Questionnaire)
- Don't Know 99 (End of Questionnaire)

RHQ.598. How old were you when you **first** started using patches containing both estrogen and progestin?
RHQ598 *FMT_NUMERIC*

|_|_|
Enter age in years

REPRODUCTIVE HEALTH (RHQ)

Refused **77**

Don't Know **99**

REPRODUCTIVE HEALTH (RHQ)

RHQ.600. Are you using patches containing both estrogen and progestin **now**?
RHQ600 FMT_YES_NO

- Yes 1
- No 2
- Refused 77
- Don't Know 99

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

RHQ602 @A FMT_NUMCAT
RHQ602 @B FMT_FREQ_MONTHS_YEARS

Enter number [Enter "1" for less than one month.]

- Refused 77
- Don't Know 99

Enter unit

- Months 1
- Years 2