

# **Statistics Needed for National Policies Related to Fertility**

**A Report of the United States  
National Committee on  
Vital and Health Statistics**

As a basis for population policy, existing information and data collection systems on fertility-related variables are evaluated and recommendations for their improvement are made.

DHEW Publication No. (PHS) 78-1455

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## FOREWORD

Sound statistical information is needed as a basis of evolving national population policy, a major portion of which focuses on fertility. Following publication of the *Report of the Commission on Population Growth and the American Future*, the United States National Committee on Vital and Health Statistics called attention to the need to identify the specific types of information required by fertility-related policy issues articulated by that Commission. Accordingly, this report is a statement of those information requirements. It is based on a review of existing fertility data and underlying data collection systems. The utility of the current statistical information is appraised and recommendations for its improvement are made, including the need for new data and for improved methods of collection, analysis, and dissemination of information bearing on fertility.

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# CONTENTS

Foreword .....	iii
Highlights.....	1
Data Collection Systems.....	1
Analysis.....	1
Methods of Dissemination .....	2
A. Introduction: Policies and Programs Related to Fertility .....	2
B. Policy-Related Data Needs.....	4
1. Fertility Statistics and Policies Concerning Population Change.....	4
Data Sources.....	4
Data Needs.....	6
Recommendations .....	10
2. Desired and Actual Births: Timing and Number .....	10
Introduction .....	10
Measurement.....	11
Extent of Occurrence and Temporal Trends .....	12
Differentials.....	12
Causes.....	12
Implications.....	13
Recommendations .....	13
3. Marital Patterns in Relation to Fertility .....	14
Marital Fertility .....	14
Data Needs and Potential Sources.....	16
Premarital Pregnancy and Illegitimacy .....	19
Recommendations .....	21
4. Female Employment, the Status of Women, and Child Care .....	22
Introduction .....	22
Female Employment and Fertility .....	24
Status of Women and Fertility.....	25
Child Care and Fertility .....	26
Recommendations .....	27
5. Social and Economic Correlates of Fertility .....	28
Socioeconomic Variables .....	28
Religion .....	29
Data Sources .....	30
Data Needs.....	30
Recommendations .....	31
6. Methods of Fertility Control: Contraception, Sterilization, and Abortion .....	32
Introduction .....	32
Contraception.....	32
Sterilization .....	33
Abortion.....	34
Recommendations .....	37
C. Recommendations .....	37
References.....	40
Appendixes	
I. Data Collection Systems of the National Center for Health Statistics.....	44
II. Data Collection Systems of the Bureau of the Census .....	50
III. Questionnaires Relating to Fertility .....	52

## FIGURE

1. U.S. population: 2- vs. 3-child family ..... 5

## LIST OF TABLES

1. Estimated completed fertility rates for women 18-24 years, by birth order: 1967 and 1971-74 ..... 7
2. Comparison of period and cohort fertility rates, by birth order: selected years 1967-74..... 8

### SYMBOLS

Data not available-----	---
Category not applicable-----	...
Quantity zero-----	-
Quantity more than 0 but less than 0.05-----	0.0
Figure does not meet standards of reliability or precision-----	*

# STATISTICS NEEDED FOR NATIONAL POLICIES RELATED TO FERTILITY

## HIGHLIGHTS

The consultants on Statistics Needed for National Policies Related to Fertility, U.S. National Committee on Vital and Health Statistics, having reviewed existing data on fertility-related variables, have made a number of recommendations concerning the procurement, analysis, and dissemination of the most relevant statistics. The detailed list of recommendations appears in chapter C of this report and is organized into three broad categories: data collection systems, analysis, and methods of dissemination. Within each of these categories, there is a focus on the two primary official sources of fertility data, the National Center for Health Statistics and the U.S. Bureau of the Census. The recommendations highlighted here are those thought to have the greatest priority and should be given special consideration for implementation by the appropriate agencies. Many of the most important recommendations emphasize continuation of existing data collection activities, but there are also some recommendations for new kinds of data, analyses, or methods of dissemination.

### Data Collection Systems

The National Center for Health Statistics (NCHS) is urged to continue at regular intervals the National Survey of Family Growth (NSFG) and through it to continue to collect data on number, timing, wantedness, and planning status of births; data on contraception, sterilization, and abortion; and data on marital status, employment of women, child care, educational attainment, and other social and economic factors affecting fertility.

Two important additions to the NSFG are

needed. One is a prospective design, the additional cost of which would be far outweighed by potential gains in the resulting longitudinal data needed for analysis of a great number and variety of policy-related issues. Secondly, the NSFG sample should include all unmarried women in addition to the present inclusion of all ever-married women. The group presently excluded, never-married women without children living at home, is crucial to such policy areas as birth prevention methods, unwanted child-bearing, and "illegitimacy."<sup>a</sup>

NCHS should vigorously work toward complete coverage by including all States in the reporting areas for illegitimate births, for marriages and divorces, and for induced abortion. Expansion of the national abortion-reporting area is particularly important.

The Bureau of the Census should retain its annual fertility supplement to the Current Population Survey as well as the fertility items contained in past decennial censuses. Both provide invaluable time-series data needed for national policies related to fertility.

### Analysis

NCHS should develop interpretive analyses of recent and prospective trends in fertility, drawing on all relevant data collection systems. New analytical measures of fertility need to be developed and interpreted. Additional funds and

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<sup>a</sup>The consultants would prefer a term other than "illegitimacy." Despite some objections to use of this term, which refers to births out of wedlock, it is used in this report because of the convention established in many data sources.

personnel should be made available to NCHS for these new functions.

The full analytical potential of the fertility-related data collected by NCHS and the Census Bureau needs to be realized by providing each agency with additional resources for both inhouse and contract research.

### Methods of Dissemination

NCHS, or NCHS and the Census Bureau jointly, should publish biennially an interpretive

report on recent and prospective trends in fertility based on all available data sources.

Both NCHS and the Census Bureau should continue to produce reasonably priced public-use data tapes for the National Survey of Family Growth, the National Natality Followback Survey, national birth-registration statistics, the Current Population Survey (especially the June fertility supplement), and the decennial census.

Delays in public release of printed reports and computer tape data should be minimized.

## A. INTRODUCTION: POLICIES AND PROGRAMS (RELATED TO FERTILITY)

The United States, like many other countries of the world, has experienced and is experiencing marked fluctuations in its population growth rates as well as changes in population size, distribution, and composition. These have resulted from changes in fertility, mortality, and migration. Mortality and migration are clearly important factors contributing to population growth in the United States. They are complex enough, however, to be considered as subjects for separate reports. Some aspects of both are, in fact, treated in a previous report in this series and could be the subjects of future reports as well.<sup>1</sup> This report focuses on fertility.

The Commission on Population Growth and the American Future has articulated some of the issues in a yet-to-be-evolved national population policy.<sup>2</sup> The Commission report suggests that a significant part of any national population policy will focus on fertility. The U.S. National Committee on Vital and Health Statistics noted that any such policy should be based on sound statistical information about factors related to fertility. It therefore charged this group of consultants on 'Statistics Needed' for National Policies Relating to Fertility to identify data on fertility-related variables and to make recommendations concerning the procurement, analysis, and dissemination of such data.

As the data were being reviewed and evaluated it became apparent that, although a national population policy has not yet been developed, the United States has supported pro-

grams affecting aspects of fertility since 1963. At present these programs are administered by two different agencies within the Government: the Department of Health, Education, and Welfare and the Department of State.

International population programs are largely administered by the Department of State and its Office of Population Affairs, located in the Bureau of Oceans and International Environmental and Scientific Affairs. Liaison with the United Nations is maintained by the Bureau of International Organization Affairs within the Department of State, and principal responsibility for assistance to population and family planning programs of developing countries rests with the Agency for International Development.

Primary responsibility for domestic population activities rests with the Department of Health, Education, and Welfare (DHEW) through the Office of Population Affairs (OPA). OPA research activities emanate from the Center for Population Research, National Institute of Child Health and Human Development, DHEW. Although a number of other DHEW agencies are involved in population research, the National Institute of Child Health and Human Development has primary responsibility for federally supported population research except for research related to the Census Bureau. In the family planning area, program activities of OPA are related primarily to the Office for Family Planning in the Bureau of Community Health Services, Health Services Administration. The

Office of Maternal and Child Health, Bureau of Community Health Services, and the Bureau of Medical Services, Health Services Administration, are also involved in family planning services activities.

Prior to the 1960's most birth control and family planning services were provided by private groups—notably, Planned Parenthood. These were largely medically oriented programs in which family planning services were perceived as a component of health care, particularly maternal and child health. The birth control or family planning movement in the United States was largely concerned with improving the health and welfare of individual mothers and children rather than with reducing fertility. The goals of national domestic policies and programs in the 1960's focused on the delivery of improved maternal and child health care services, emphasizing the health and welfare of individuals.

Essentially, the 1970 Family Planning Services Act and its 1972 counterpart made the goals of private family planning organizations Federal policy. That is, the objective was to provide services to the poor, not to focus on the total societal consequences of population growth. In June 1974, Caspar Weinberger, then DHEW Secretary, spoke at the Planned Parenthood International Convocation on the Population Crisis, held in New York. He noted that with the Family Planning and Population Research Act of 1970 the Federal Government became involved in supporting organized family planning programs, and he emphasized that the objective of the national program had not been population control but rather the reduction of maternal and child mortality rates and enabling women to have the number of children they wanted. By 1973 more than 3.2 million women were participating in the program, almost 4 times the number served in 1968. Almost three-quarters of the total were from low-income families.<sup>3</sup> At the 1974 World Population Conference, Mr. Weinberger, as leader of the U.S. delegation, indicated that there would be no reduction in funds for domestic family planning programs.<sup>4</sup>

Various attempts have been made to evaluate the effects of Federal expenditures for family planning programs for low-income women.<sup>5</sup> The results have been somewhat am-

biguous, both because of different research goals and because of limited data. In order to evaluate family planning programs and other aspects of national policy related to fertility, new data collection systems as well as improvements in existing systems are required. This report is concerned with data needs related to domestic policy and program issues. A considerable body of data related to fertility is already available from the National Center for Health Statistics, DHEW, and the U.S. Bureau of the Census. Several of the data collection systems are described in detail in the appendixes. These existing systems provide an adequate picture of U.S. fertility levels and trends for the present and recent past. Information on the determinants of fertility and on fertility differentials, however, is less complete.

Although data on the determinants of fertility, including the norms, values, and contraceptive practices underlying fertility differentials, have been available since 1955 through both privately sponsored and publicly funded surveys, such data from Government-conducted surveys were not available until the 1970's. This report focuses on current data collection efforts with a view toward their contribution to present and future policy needs.

After reviewing the recommendations of the Commission on Population Growth and the American Future for needed fertility data and reviewing the existing fertility-related programs and policies, the following areas were identified as most pertinent to the objectives of this report.

1. Fertility statistics and policies concerning population change.
2. Desired and actual births: timing and number.
3. Marital patterns in relation to fertility.
4. Female employment, the status of women, and child care.
5. Social and economic correlates of fertility.
6. Methods of fertility control: contraception, sterilization, and abortion.

The following sections of the report consider each of these areas with respect to (1) existing types and sources of data and analyses and (2) needed data and analyses. The report concludes

with an overview of the data needs and proposed recommendations for meeting those needs. The major data collection systems that now exist are described in the appendixes.

## B. POLICY-RELATED DATA NEEDS

### 1. FERTILITY STATISTICS AND POLICIES CONCERNING POPULATION CHANGE

The Commission on Population Growth and the American Future prepared population projections showing what would happen to the total population of the United States if women had an average of two or of three children.<sup>2</sup> With two children per woman, the population of the United States would reach a maximum of around 350 million late in the 21st century. (See figure 1.) With three children per woman, however, the population would be over 1 billion before the end of the next century. Although these alternative longrun possibilities now seem remote, the attitudes and behavior patterns that determine which is the more likely to occur are now being formed.

Population change is also important in a shorter time perspective. The unexpectedly large number of children born in the 20-year period of relatively inflated fertility, 1946-65, brought with it a huge bulge in the U.S. age distribution that seriously affected the functioning of our educational and economic institutions. One goal of population policy worth considering would be to dampen such tremendous fluctuations or at least to foresee their occurrence and try to prepare for them.

At the present time the United States is recording total fertility rates below the lowest levels observed in the 1930's. Although demographers know that these rates may simply reflect changes in the age distribution of fertility rates, the reaction of some portions of the public is that the United States has already reached zero population growth. A special effort should be made to correct this misinterpretation and to provide the data needed to evaluate the long-term implications of current fertility rates. Such data would include long- and short-term birth expectations, birth spacing, attitudes toward

family size, and success in controlling fertility. Some proposals for implementing this recommendation are presented later in this report.

#### Data Sources

The fertility data needed to identify and interpret fertility trends and their effects on population change are provided by two Government agencies, the National Center for Health Statistics (NCHS) and the Bureau of the Census. The major components of their relevant data collection systems and the information they provide are described in detail in appendixes I and II. The following list provides a brief summary.

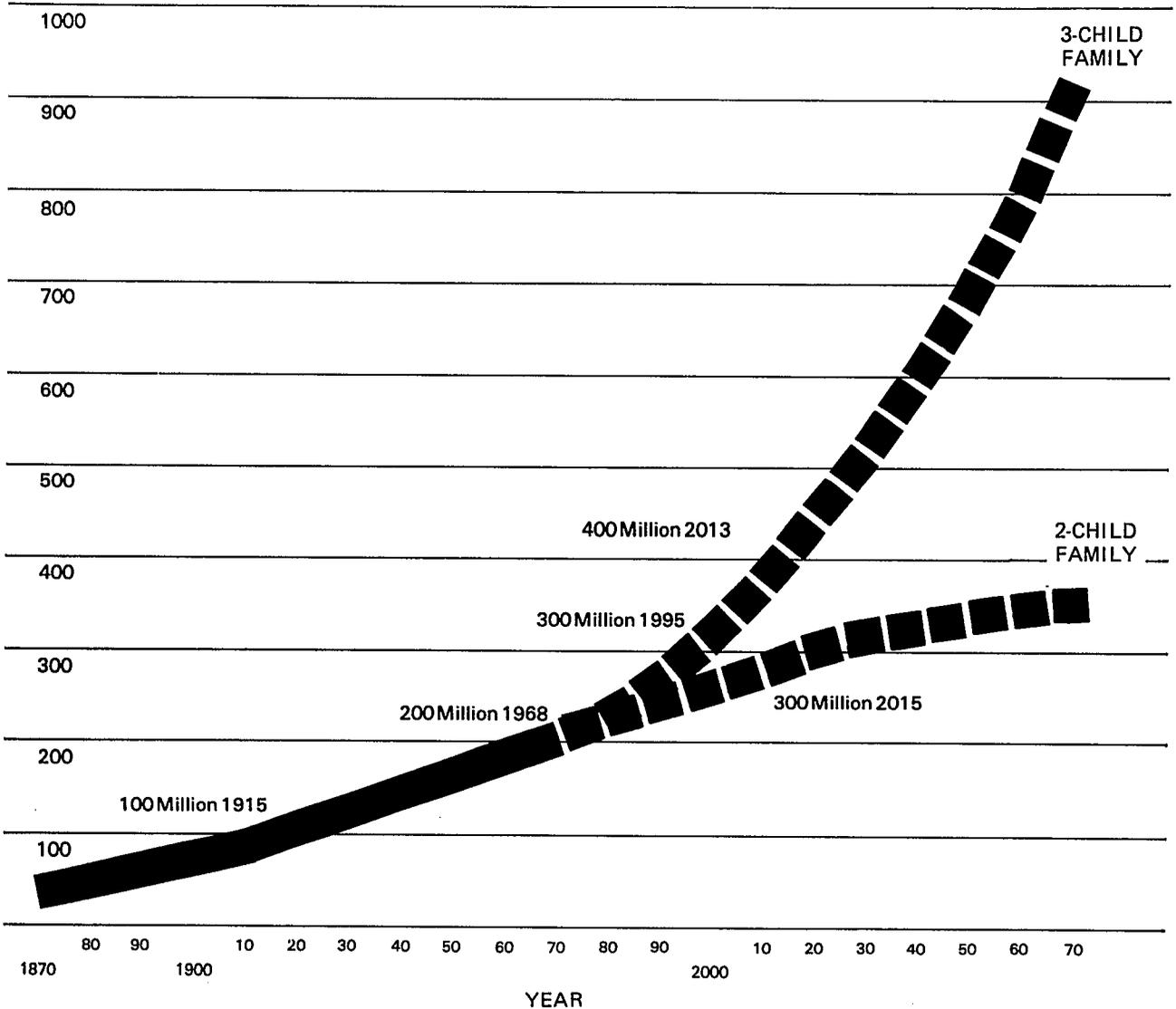
*Birth registration statistics (NCHS).*—These are based on a 50-percent sample of birth records collected by the States and independent registration areas. They include numbers of births by various geographic classifications down to urban places of 10,000 or more, all of the standard fertility measures for the United States, and cohort fertility tables for the total population and separately for white and "all other."

*National Survey of Family Growth (NCHS).*—This provides a wealth of information on such topics as fertility desires and expectations, contraceptive behavior, and child-spacing patterns. These data are needed for the interpretation of trends in fertility.

*National Natality Survey or National Natality Followback Survey (NCHS).*—This is an irregularly occurring mail survey of a small sample of mothers of births registered in a given year that provides some important data not collected in the birth registration system.

*Decennial census (Census Bureau).*—Data on number of children ever born are obtained for a sample of women in each census. The

POPULATION  
(in millions)



The population of the United States passed the 100-million mark in 1915 and reached 200 million in 1968. If families average two children in the future, growth rates will slow, and the population will reach 300 million in the year 2015. At the 3-child rate, the population would reach 300 million in this century and 400 million in the year 2013. (Projections assume small future reductions in mortality, and assume future immigration at present levels.)

Sources: Prior to 1900—U.S. Bureau of the Census, Historical Statistics of the United States, Colonial Times to 1957, 1961. 1900 to 2020—U.S. Bureau of the Census, Current Population Reports, Series P-25. 2021 to 2050—unpublished Census Bureau projections. Beyond 2050—extrapolation.

Figure 1. U.S. population: 2- vs. 3-child family.

data are especially useful because the large sample size makes it possible to identify childbearing patterns for relatively small segments of the population. The decennial census also provides data on number of own children in the household, which can be used

to derive surrogate measures of recent fertility.

*Current Population Survey (Census Bureau).*—This is a continuing survey based on a large national sample. Every June since 1971 the Census Bureau has included in this

survey questions on childbearing expectations. Because the results of the survey are usually published by October of the same year, this has proved to be an unusually valuable means of identifying trends in numbers of births expected, both for the short-term future (next 5 years) and for the eventual fertility of cohorts. In addition, the Census Bureau has also used the Current Population Survey to collect valuable data on child spacing and is attempting to regularize the collection of these data once every 5 years.

## Data Needs

At the present time, all of these data collection systems are providing information that can be used to identify and interpret trends in fertility at the national level and for major subgroups of the population (such as those identified by race or color, religion, place of residence, and income). In the opinion of the Committee members, these data collection systems are now adequate for the purposes of providing fertility data that could assist in the formulation and evaluation of policies regarding population change.

On the other hand, it also appears that simply providing the data in published volumes or on computer tapes is not sufficient. The Committee suggests rather that data analysis and dissemination be improved. Two objectives are emphasized: (1) expanded analysis, resulting in interpretive reports that will provide information about current and probable future trends in fertility and (2) development and regular publication of new measures of fertility-related variables that will give more information than those currently in common use.

*Expanded analytical publications.*—The expanded analytical program and resulting publication of interpretive reports should not necessarily be tied to each data collection instrument separately, as is now the case, but should draw on all of them and focus on the interpretation of trends in fertility rather than on topics peculiar to any one data collection system. These reports would be similar to the occasional publication “Natality Statistics Analysis” published by NCHS, but they should be considerably broader in scope. The series might be entitled “Recent

and Prospective Trends in Fertility.” An effort should be made to maintain a publication schedule of about once every 2 years.

These reports should analyze recent trends in fertility, separating the effects of changes in the timing of births from prospective changes in completed fertility. They should interpret the latest data that bear on future trends in fertility.

*Improved fertility measures.*—Along with the expanded analytical program, an effort should be made to develop new measures of fertility that will help people relate period and cohort trends. One simple set of measures that could easily and immediately be introduced, for example, would be comparisons between order-specific components of the total fertility rate and similar components of expected completed fertility rates. These comparisons would show how much period fertility rates are above or below eventual expected cohort rates at each birth order. Tables 1 and 2 illustrate how these rates might be presented.

Table 1 shows the derivation of expected completed fertility rates by birth order from distributions of young married women by total number of births expected collected in the Census Bureau’s Current Population Survey. The rates shown are for women who were 18-24 years of age in the survey year. In table 2 these expected completed cohort fertility rates are compared with actual *period* fertility rates observed in the same year that the survey was conducted. The total fertility rate in 1973, for example, was 1,868 per 1,000, or 281 points below the completed fertility rate of 2,149 expected by the 1949-55 cohorts who were then 18-24 years old.

This comparison indicates that if the fertility rates of the future are likely to resemble the birth expectations of the 1949-55 cohorts, then the period rate for 1973 can be considered relatively depressed. The detail by order of birth indicates that the 1973 rates are most depressed for first and second births. If continued indefinitely, they would result in only 1,270 first and second births per 1,000 women, although young women expect to reproduce at a rate that would yield 1,733 first and second births, a level 36 percent above the current period level. Since a large majority of women want at least two births, it seems likely that rates for first and

Table 1. Estimated completed fertility rates for women 18-24 years, by birth order: 1967 and 1971-74

Total number of births expected and birth order	Calendar year and cohort group				
	1974, 1950-56 cohort	1973, 1949-55 cohort	1972, 1948-54 cohort	1971, 1947-53 cohort	1967, 1943-49 cohort
<u>Total number of births expected</u>	Percent distribution of young married women by total number of births expected <sup>1</sup>				
Total .....	100.0	100.0	100.0	100.0	100.0
0.....	4.7	4.0	3.6	4.0	1.3
1.....	12.6	9.6	9.8	8.4	6.1
2.....	56.1	56.2	56.6	51.5	37.1
3.....	18.3	21.1	20.8	23.7	29.8
4.....	6.1	6.4	6.7	8.6	18.2
5 or 6 .....	1.9	2.4	2.3	3.4	6.6
7 or more .....	0.3	0.4	0.1	0.3	1.0
<u>Birth order</u>	Implied completed fertility rates by birth order per 1,000 married women <sup>2</sup>				
Total .....	2,165	2,262	2,255	2,375	2,852
First births .....	953	960	964	960	987
Second births .....	827	864	866	876	926
Third births .....	266	302	300	361	555
Fourth births.....	83	91	92	124	257
Fifth births.....	22	27	25	38	75
Sixth and higher order births.....	14	18	8	16	52
	Implied completed fertility rates by birth order per 1,000 women, assuming 95 percent marry				
Total .....	2,057	2,149	2,143	2,256	2,709
First births .....	905	912	916	912	938
Second births .....	786	821	823	832	880
Third births .....	253	287	285	343	527
Fourth births.....	79	86	87	118	244
Fifth births.....	21	26	24	36	71
Sixth and higher order births.....	13	17	8	15	49

<sup>1</sup>Sources—

1974: Weighted average of percentages for ages 18-19, 20-21, and 22-24 shown in Current Population Reports, Series P-20, No. 269, p. 5.

1973: Current Population Reports, Series P-20, No. 265, p. 19.

1967, 1971, and 1972: Current Population Reports, Series P-20, No. 248, p. 19.

<sup>2</sup>Sources—

1974: Current Population Reports, Series P-20, No. 269, p. 4.

1973: Current Population Reports, Series P-20, No. 265, p. 17.

1967, 1971, and 1972: Current Population Reports, Series P-20, No. 248, p. 17.

second births will increase sometime in the future to compensate for currently low levels. Such a trend was already underway at ages 25-29 in the period 1970-74.

The detail by birth order also shows that women were having more third and higher order births than the number then expected by young women of reproductive age. There are two

Table 2. Comparison of period and cohort fertility rates, by birth order: selected years 1967-74

Birth order	1974	1973	1972	1971	1970	1969	1968	1967
	Period fertility rates <sup>1</sup>							
Total .....	2,1829	1,868	2,000	2,262	2,436	2,450	2,460	2,562
First births .....	--	707	735	794	844	829	827	803
Second births .....	--	563	576	626	653	646	633	647
Third births .....	--	283	310	370	404	405	403	432
Fourth births.....	--	141	166	204	228	237	243	270
Fifth births.....	--	73	89	112	127	135	140	160
Sixth and higher order births.....	--	101	124	156	180	198	214	250
	Expected completed cohort fertility rates for women 18-24 years <sup>3</sup>							
Total .....	2,057	2,149	2,143	2,256	--	--	--	2,709
First births .....	905	912	916	912	--	--	--	938
Second births .....	786	821	823	832	--	--	--	880
Third births .....	253	287	285	343	--	--	--	527
Fourth births.....	79	86	87	118	--	--	--	244
Fifth births.....	21	26	24	36	--	--	--	71
Sixth and higher order births.....	13	17	8	15	--	--	--	49
	Period minus cohort rates							
Total .....	-228	-281	-143	6	--	--	--	-147
First births .....	--	-205	-181	-118	--	--	--	-135
Second births .....	--	-258	-247	-206	--	--	--	-233
Third births .....	--	-4	25	27	--	--	--	-95
Fourth births.....	--	55	79	86	--	--	--	26
Fifth births.....	--	47	65	76	--	--	--	89
Sixth and higher order births.....	--	84	116	141	--	--	--	201

<sup>1</sup>1967-69:Sums of central rates for cohort fertility tables published in various issues of: National Center for Health Statistics, *Vital Statistics of the United States*, Volume I, Natality.

1970-73: Unpublished data from NCHS.

<sup>2</sup>Preliminary estimate.<sup>3</sup>From table 1.

possible interpretations of this finding: (1) that third and higher order births will continue to decline until they reach the levels expected by young women or (2) that the expectations for third and higher order births are unrealistically low.

Measures suggestive of the timing of future changes in fertility might be derived from data on short-term birth expectations collected by

the Census Bureau. These could indicate whether and to what extent a "backlog" of wanted births is building up that might affect fertility over the next 5 years. Another set of measures in urgent need of development relates to birth spacing. These measures should help us to see how current patterns in the timing of births are related to eventual completed fertility rates.

Development and regular publication of these improved fertility measures are based on the general premise that data systems should produce much more than tapes and tables, especially if they are going to be useful in the essentially political processes of policy formulation.

*Additional resources.*—In order to accomplish the foregoing objectives, the resources devoted to fertility study at both NCHS and the Census Bureau should be expanded substantially. At the present time, NCHS and the Bureau of the Census combined have only 12 professional staff members engaged in fertility-related work, and much of their time is devoted to operational and administrative aspects of data collection. It is therefore recommended that the number of professional positions allocated for the purpose of preparing analytical reports on fertility at each of these agencies be increased by at least five and that the number of clerical and other support positions be expanded proportionately.

While analysis of fertility data would be their primary activity, the added staff would also provide each agency with increased flexibility to achieve its total mission. The addition of scientific staff and increased emphasis on the interpretation of data should also result in improvements in the kinds of data collected and their presentation. As different needs for data become evident to those who are trying to use them, the data collection systems can be modified in order to meet these needs. This general principle applies not only to changes in data collection instruments (questionnaires and certificates), but also to changes in tabulations. The interaction between those involved in research and those involved in data collection has always been useful, and the closer their relationship the more productive their collaboration will be.

*Data dissemination.*—NCHS is to be commended for establishing the National Survey of Family Growth (NSFG), which was largely set up along the lines recommended by the U.S. National Committee on Vital and Health Statistics. This periodic survey program includes the provision of a public-use data tape. The first NSFG was conducted in late 1973, and the second in early 1976. However, as of early 1976, reports on the findings of the first round have

not yet been published, nor has a firm date for the release of the data tape been announced. NCHS is strongly urged to improve this record. Although much of the data collected has great analytic potential which does not depend on timeliness, there are also substantial rewards to be earned by the production of up-to-date information, and the first is no substitute for the second.

A reasonable schedule to fix for the NSFG is as follows. Release simple descriptive findings of major importance within the first 12 months after the end of data collection. (Example of such findings from the first round are the incidence of abortion, estimates of unwanted births, family size desires, and the distribution of use of the various fertility-control measures.) All the most complex analytic reports are to be published within the following 12 months. Release of the public-use data tape should be targeted for the 25th month after the end of fieldwork. NCHS should give high priority to providing the Family Growth Survey Branch with staff and ancillary support needed to continuously meet such a schedule.

NCHS is also urged to meet a close schedule of data release for its National Natality Followback Survey. Public-use data tapes from the followback survey should be released within 12 months of the close of data collection. These tapes contain important fertility data on unwanted births and provide trend data needed for development of population policy and program planning.

The Bureau of the Census has in recent years included questions on birth expectations in its June Current Population Survey (CPS). A documented copy of the June CPS public-use data tape should be routinely produced at a reasonable cost to the user.

In addition, inasmuch as the great volume of data collected cannot be analyzed completely even by the increased staff proposed, it is also recommended that funds be sought by each agency to enable it to negotiate contracts with scientists outside the Government to prepare analytical reports from the data generated by the various collection systems. It is uncertain how much money would be required for such collaborative efforts with non-Government scientists, but at least \$200,000 annually should

be sought by each agency to begin such a program. This program should be continued thereafter, with a significant proportion of the budget of each agency allocated for it.

## Recommendations

1. The National Center for Health Statistics should expand its analytical program by developing and regularly publishing analyses of recent and prospective trends in fertility.
2. The National Center for Health Statistics should develop and regularly publish new fertility measures, such as those comparing order-specific components of period and cohort fertility, in order to better understand fertility trends.
3. The Census Bureau and the National Center for Health Statistics should increase the staff and financial resources devoted to fertility analysis in order to expand both in-house and extramural work on analytical reports.
4. The Census Bureau and the National Center for Health Statistics should strictly adhere to a fixed schedule in dissemination to the public of reports and data tapes from major fertility data collection programs such as annual vital statistics of natality, the National Survey of Family Growth, the National Natality Follow-back Survey, and the June Current Population Survey.

## 2. DESIRED AND ACTUAL BIRTHS: TIMING AND NUMBER

### Introduction

The number of births in a given year, and therefore the rate of population growth, is a function of the number of births that occur to each existing cohort and the timing of these births. The timing and number of births can and do vary independently. It is therefore essential that data be collected on the number and timing

of births that occur to various cohorts of women. A determination should be made of the extent to which these births are the result of conscious choices by parents. Data are needed to answer the following questions. What are the reproductive expectations and/or desires of the national population with respect to the number and timing of births? To what extent are births either not wanted or wanted but at some other time? Do parents have preferences about the timing and spacing of births and are these stable through time?

Unwanted childbearing has implications for society as well as for the individuals who have unwanted births. On the one hand, if a substantial number of births are unwanted, there exists a potential for a significant reduction in current fertility levels. On the other hand, if only a small fraction of births are not wanted, then the elimination of unwanted childbearing would not affect fertility levels very much. In the former case, suitable policies of reducing fertility would be oriented toward increased distribution and use of birth prevention techniques. In the latter case, deliberate attempts to lower levels of fertility might be most effectively aimed at reducing the number of children people want to have. This line of reasoning led Ryder and Westoff to state: "The extent of unwanted fertility is at the core of the debate over the kind of fertility policy necessary to achieve replacement."<sup>6</sup>

Unwanted fertility is of demographic relevance for other reasons. One reason is its role in producing differences in family size between various population segments. Also, unwanted births, especially those that occur to parents fairly early in the life cycle, may result in the closure of educational and/or occupational alternatives that are associated with relatively small family sizes; thus they may contribute to the formation of larger families than would otherwise be the case, had the unwanted childbearing not diminished educational and occupational opportunities.

In the foregoing discussion, unwanted fertility referred to the failure to control number of births. In addition to number failures one must also consider timing failures, i.e., births that are wanted but at some other point in time. The ability to control the timing of first births is

particularly important because of the potential impact upon a woman's role orientation of the age at which reproduction begins. For many women, a premarital pregnancy is the reason for marriage.<sup>7</sup>

Although a recent study shows that most legitimate births resulting from premarital pregnancy are wanted, they are more than twice as likely as other legitimate births of identical parity to be timing failures, i.e., to have been wanted but at a later time.<sup>8</sup> Special problems with regard to the collection and analysis of data on illegitimacy and premarital pregnancy are considered in detail in the next section (B.3). The remainder of this section deals with five major areas within which knowledge concerning unwanted childbearing may be organized: measurement, incidence, differentials, causes, and implications. The section concludes with a list of recommendations for needed data.

## Measurement

The most effective means of data collection seems to be survey research conducted among a representative sample of individuals at risk of unwanted childbearing. There are three major aspects of unwanted childbearing to be considered: the number of unwanted births that occurs, the proportion of individuals who experience an unwanted birth, and the rate of unwanted childbearing (measured as the number of unwanted births per 1,000 years of exposure).

To date, most analyses of unwanted childbearing have used one of two approaches to the problem. One is the direct approach, which consists of a pregnancy history containing a series of parity-specific questions concerning whether each pregnancy was wanted at the time it occurred, was wanted but at a later time, or was not wanted at all. The other, indirect approach compares responses to questions on desired and on either cumulative or expected completed family size. Women who would like to have fewer children than they expect to have are classified as having excess or unwanted fertility, with the numerical difference being an indicator of the number of unwanted births.

Neither the direct nor the indirect approach is entirely satisfactory. Each has its uses and

limitations. The approach that compares desires and expectations would seem preferable to the pregnancy history approach for estimating the demographic effects of programs designed to help each person to not have more than the number of children desired. This approach is not conducive to calculating rates of unwanted childbearing, however, unless the assumption is made that family size desires remain constant throughout reproductive life. To justify this assumption would require longitudinal panel data in which desired family size (among numerous variables) is measured at successive intervals, perhaps beginning as early as the onset of marriage. This longitudinal perspective would also permit an estimation of the effects, if any, of number and timing failures upon subsequent family size desires.

The pregnancy history approach was adopted by analysts of the earlier fertility studies, such as the 1965 and 1970 National Fertility Studies. This approach seems particularly suitable for estimating the extent to which persons have had more children than they wanted or have had failures in timing. On the other hand, it is not well suited for use with women who have not completed their childbearing experience, and it does not permit estimation of the extent to which persons are not having as many children as they want to have. However, one of its strengths is that it is amenable to calculating rates of unwanted childbearing, which greatly enriches the meaningfulness of comparisons between population segments at various time intervals.

Consideration should be given to the measurement of unwanted childbearing for husbands as well as wives. Childbearing tends to be the result of a complex pattern of interaction between husband and wife. To date, studies of unwanted childbearing have been concentrated on the experience of wives, largely ignoring husbands. It is not known to what extent children reported as unwanted by the wives are also unwanted by their husbands. The National Fertility Studies did ask wives to report their husband's desires concerning each birth, but other research has indicated these reports and perceptions to be relatively invalid indicators of the husband's own reports.<sup>9</sup>

## Extent of Occurrence and Temporal Trends

Data from the National Natality Followback Survey indicate that the proportion of legitimate births that are unwanted by the mother declined from 12.7 percent in 1968 to 8.2 percent in 1972. In absolute terms, the numbers of such births were about 405,000 and 234,000, respectively, enough to account for a considerable portion of the population growth in the United States that is attributable to reproductive change (births minus deaths). Moreover, about 27 percent of the legitimate births surveyed in each of these years were reported by the mother as timing failures.<sup>8</sup> National fertility surveys in 1965 and 1970 also had a substantial proportion of women reporting an unwanted birth, although the rate (but not the number) of unwanted births declined substantially from the 1961-65 to the 1966-70 interval.<sup>6</sup>

Given the extent to which unwanted childbearing seemingly occurs, and given its potential demographic and social implications, it seems essential to monitor the extent to which it occurs. Both the National Natality Followback Survey and the National Survey of Family Growth represent effective mechanisms for continuation of this monitoring if the proper items are included. Each should continue to collect data on unwanted childbearing, because each is collected from a different population of women—the former from women giving birth in a given year, the latter from women in the childbearing ages in a given year. Moreover, each survey also serves a variety of other purposes.

The Current Population Survey also presents a currently existing mode of data collection amenable to monitoring unwanted childbearing, but its length makes it hard to collect all of the auxiliary data necessary to study unwanted childbearing, and the population covered would be similar to that for the National Survey of Family Growth. However, consideration might be given to the inclusion of occasional questions on unwanted childbearing as a means of determining the validity and reliability of the items appearing in the National Survey of Family Growth. Because it already is centered around fertility behavior, the June Current Population Survey would seem the most appropriate time to accomplish this.

To date, most estimates of the extent of unwanted childbearing have been based on data collected only from ever-married women. Knowledge of the extent of unwanted fertility among other women is incomplete. The assumption has been that almost all of these births are unwanted. This may not be the case.<sup>10</sup> The National Natality Followback Survey would be an especially appropriate means of collecting information on the proportion of births that are unwanted. At present, however, information on the wantedness status of births is collected only from the mothers of legitimate births. Until a means is devised to collect data on the wantedness status of births to all unmarried women, it will be difficult to establish accurately the full national incidence of unwanted childbearing. In the meantime, the National Survey of Family Growth provides data on the wantedness status of births to ever-married women and to never-married women whose children live with them.

## Differentials

Data from the 1965 and 1970 National Fertility Studies yield considerable insight into major differentials in unwanted childbearing, as will the data from the 1968, 1969, and 1972 National Natality Followback Surveys when they are fully analyzed. The National Survey of Family Growth will perform the same function. When repeated at set intervals of time and on comparable samples with comparable measurement instruments, these surveys can provide a very effective mechanism for determining the strength of various differentials and their change over time and whether differentials in unwanted childbearing contribute to overall differentials in family size. However, a major need is to explain the unwanted childbearing differentials themselves. To do this it is necessary to have insight into the causes of unwanted childbearing, a topic discussed next, and to bear in mind that not all unwanted pregnancies result in unwanted births.

## Causes

The causes of unwanted fertility are very incompletely known. Consequently, existing differentials in unwanted childbearing are not adequately explained, and there is no secure

base of knowledge upon which to formulate policies designed to minimize its occurrence. The problem relates more to inadequate analysis of existing data than to the absence of a proper methodology.

Ryder and Westoff have argued that the number of unwanted births is the product of two components.<sup>6</sup> One is the rate of unwanted births (per 1,000 years of exposure to risk). This would be primarily the result of failure to utilize existing birth prevention techniques effectively. The second component is the mean years of exposure per woman, and it is affected by variations in the age at marriage, the timing and spacing of wanted births, the duration of marriage, and the number of children desired. It should be possible to disaggregate variations in unwanted childbearing in such a way that they can be explained in terms of their components and relative weights can be assigned to each element of each component. This would provide a much sounder basis for formulating policies aimed at reducing current levels of unwanted childbearing. Another benefit would be much richer insights into why certain segments of the population are much more likely than others to experience unwanted childbearing.

Another cause of unwanted childbearing lies in the extent to which husbands and wives do not desire the same number of children. When differences in desired family size exist, at least three possibilities are present: a family size intermediate to each spouse's desires, a family size equal to the wife's desires, or one equal to the husband's desires. In two of these outcomes, one spouse will have more children than he or she desires. Yet the causes of these births are quite different from the causes of births that are the result of failure to utilize existing birth prevention techniques properly and which occur in families in which neither spouse wants more children.

## Implications

It is advisable to distinguish between demographic and social implications of unwanted childbearing. One method of approaching the demographic effects of unwanted childbearing is to estimate the number of births that would occur if no unwanted births took place. Bumpass

and Westoff used this approach in analyzing the 1965 National Fertility Study data.<sup>11</sup> However, the value of their analyses is somewhat diminished by the absence of data on unwanted births among unmarried females, a point raised earlier. Moreover, this analysis pertained to number failures only. Cutright estimates that 31 percent of all white illegitimate births and 41 percent of illegitimate births to all other persons would not have been replaced by later legitimate births had the illegitimate birth been avoided.<sup>12</sup> Cutright also states that the effect of illegitimacy on a period fertility rate for a given year will be greater than the effect on the completed fertility of the cohort.

The demographic implications of timing failures are much more difficult to ascertain than the implications of number failures are. Timing failures have the potential to result in changes in completed family size. As pointed out earlier, timing failures may result in the closure of certain patterns of behavior outside the family (for women, alternative careers to child rearing) and hence may result in a larger family size than would otherwise be the case. Likewise, timing failures may lead to a decreased perception of personal efficacy and cause the couple to believe there is little point in attempting to control the number and spacing of their births. However, the preceding points are largely conjectural, and a great deal of empirical research is necessary before definitive statements can be made. To deal with them adequately, we need to know to what extent preferences and/or strategies of timing and spacing of births exist, to what extent these are stable, and whether timing failures produce changes in the overall plans. We also need to know whether women tolerate timing failures more than number failures. A longitudinal research design would maximize the potential for information on these matters.

## Recommendations

1. Data on the number and timing of births that occur to the various birth cohorts and the extent to which these are wanted should continue to be collected in the National Survey of Family Growth and the National Natality Followback Survey.

2. The National Natality Followback Survey should collect at regular intervals, perhaps biennially, information on the mothers' marital and pregnancy histories.
3. Data on unwanted pregnancies and their outcomes should be collected in the National Survey of Family Growth from all never-married as well as all ever-married women.
4. Longitudinal panel data should be collected in which family size desires and expectations (among numerous variables) are measured at successive intervals, beginning soon after marriage. In addition to permitting studies of the stability of desires and expectations, this would allow an estimation of the effects of number and timing failures on subsequent family size desires and expectations.
5. Data on unplanned births should be collected from husbands as well as wives.
6. Data should be collected which allow a determination of the extent to which preferences and/or strategies of timing and spacing of births exist, to what extent these are stable, and whether timing failures produce changes in the overall plans.
7. Longitudinal studies are needed in which the personal, social, and health characteristics of children reported as wanted are compared with children reported as unwanted by parents with matching socioeconomic and personality characteristics.

### 3. MARITAL PATTERNS IN RELATION TO FERTILITY

#### Marital Fertility

In the United States in recent years close to 90 percent of all live births have been to married couples. It follows that the age at which marriage begins and ends and the distribution of the population according to marital status are of

fundamental importance in accounting for variations in natality.

Marital disruption and remarriage also have important effects on fertility. This is especially so given the rapidly rising rates of divorce and remarriage. The relation between marital stability and fertility, moreover, is not one-sided. Considerations should be given to the influence of natality (in and out of marriage) on marital dissolution and subsequent remarriage. In general, there is a need to elucidate the interrelations of family formation, growth, and disruption.

*Data sources.*—Data and literature on the relation between nuptiality and natality in the United States are meager. One of the few pertinent analyses is contained in two chapters of the American Public Health Association's vital and health statistics monograph entitled *Trends and Variations in Fertility in the United States*.<sup>13</sup> Except for data used in the discussion of the fertility of birth cohorts, all data presented in that report were collected in the decennial census and the Current Population Survey. Small samples probably deterred use of nongovernmental survey data, and registration data have been and still are inadequate for this purpose. There are some main shortcomings of registration data. Many States are not in the marriage- and divorce-registration areas, and the information collected on registration forms regarding previous marital status and social and economic characteristics is quite limited. Even if these shortcomings did not exist, it would still be necessary to either link marriage and birth records—a difficult and expensive task—or, alternatively, to collect information about current and previous marital status on the birth record. Efforts to get on the birth certificate even the date of latest marriage of the parents have so far been unsuccessful.

Essentially, the registration system provides information about events (marriages, divorces, and annulments), not statuses. It reports for each specified time period on a sample of the population that is self-selected and not representative (those married in a given calendar year, for example). Hence information about current or previous marital status which can be generalized to the total population is not available. Information on the duration of marriage is also

not available from registration data nor are data on the number and duration of the various possible statuses after a marriage has ended. Despite their shortcomings, registration data offer certain advantages. Unlike retrospective census and survey data, registration data are not dependent on the accuracy of memory. (Informants may, of course, provide mistaken or false information, as in censuses or surveys.) Registration data are also not subject to another disadvantage of retrospective information—the loss of reports from persons who have died or migrated since the event surveyed occurred. (These losses may be selective with respect to marital status and fertility.) Both census enumeration and vital registration may suffer from undercounts.

The 1955 and 1960 Growth of American Families surveys obtained retrospective marital and fertility histories, but the small sizes of the samples—1,700 wives in 1955 and 3,300 wives in 1960—limit the potential for analyzing the interrelations between natality and nuptiality. Similar histories were collected in the larger 1965 and 1970 National Fertility Study samples—5,600 wives in 1965, of whom 4,800 were under age 45, and 6,000 wives of similar age in 1970. In 1965 about 800 wives aged 45-54 were also interviewed, and in 1970 information was also obtained from ever-married women who were not currently married.

The first of the periodic series of National Surveys of Family Growth was conducted by NCHS in 1973. A larger number of women, about 10,000 under age 45, were in this sample than in the National Fertility Study sample. The NSFG sampling included ever-married women as well as never-married mothers with children of their own in the household. An important innovation was the substantially larger number of black women (about 3,600) included in the 1973 sample as compared with previous surveys. In 1977 a public-use data tape is expected to make the detailed marital and fertility history information gathered in this survey available for analysis. In the future, the interval between the end of fieldwork and the release of the public-use data tape should not exceed 2 years.

Several Current Population Surveys have collected marital and fertility histories which, while not as detailed as those gathered in the surveys described above, nevertheless permit identifica-

tion of almost all of the events in the process of family formation, growth, and disruption for almost all of the ever-married population in relatively large samples. In June 1971 the CPS obtained information on the number of times married (up to three or more), the dates (month and year) of the beginning and end of each marriage, whether the first marriage ended by the death of the spouse, the date of the latest marriage, and current marital status. In addition, the dates of birth of the first, second, third, fourth, and most recent child were obtained. (Birth dates of the fifth up to and including the next to last child were estimated by linear interpolation.) The June 1975 CPS collected similar data, as did the CPS surveys in August 1959 and June 1965 and the February-March 1967 Survey of Economic Opportunity.<sup>14-17</sup>

The more detailed information available in the National Survey of Family Growth would make it preferable to the CPS, but the latter's larger sample size is a definite attraction. The June 1975 CPS included 19,500 ever-married women aged 15-44 years, while there were 9,151 women of comparable marital status and age in the 1973 NSFG sample. In addition, the CPS sample, unlike that of the NSFG, is not restricted to women in the childbearing ages (15-44). Hence the large number of ever-married women 45 years of age or more can be included in analyses of CPS, but not NSFG, data.

An important reason for stressing sample size is that a large sample is needed for the study of all but first marriages. This is because about 80-85 percent of the ever-married population in the United States is currently in a first marriage. In order to compare fertility in first marriages to that in remarriages, as well as to study the effect of marital disruption on fertility, the number of ever-married women in the sample who are no longer in their first marriage needs to be large. This is especially the case given the need to control for current age and either age at marriage or duration of marriage and the need to study the natality-nuptiality interrelation in major sectors of the population (rural and urban, upper and lower socioeconomic groups, for example).

With all these surveys, and more to come, the possibility exists of comparing the findings from each survey concerning the patterns of family formation, growth, and dissolution. Such

a comparison would permit an answer to at least two questions: (1) what is the relative reliability of the data obtained in each of these surveys? and (2) how much and what kind of change has occurred in these patterns? If there were only two surveys to compare, it would be difficult to detect whether differences between them were due to a substantive change in behavior or to differences in reliability of the surveys. While this would also be true if there were little agreement among a larger number of surveys, with a larger number the possibility exists that certain patterns would appear consistently in most, if not all, of the surveys. These patterns could provide a basis for judging trends and the extent and nature of pattern deviations observable in any of the surveys.

The largest samples by far are in the decennial census. These are the only samples large enough to permit analysis of relatively small areas (States and large metropolitan areas) or of small population categories (Puerto Ricans, American Indians, persons of Asian descent, etc.). The decennial enumeration, however, has been limited in how much information it can obtain on any one topic. In addition to direct information on cumulative fertility (i.e., number of children ever born to a person) and indirect information used to estimate current fertility (i.e., number of own children in the household and their birth dates—year and quarter), the censuses have asked for current marital status, date of first marriage, whether married more than once, and, in the 1970 census only, whether the first marriage ended because of the death of the spouse. In the 1950 census information was obtained on years in present marital status. The marital history which can be constructed from this information is quite limited. Yet, both alone and in conjunction with the natality data, the marital data have been useful.

The most detailed census data dealing with the natality-nuptiality interrelation come from the 1970 census. The 1970 Subject Report PC(2)-3A, *Women by Number of Children Ever Born*, relates cumulative fertility to age at first marriage, year of first marriage by age at marriage, years since first marriage, difference in age of husband and wife, age of husband by age of wife, and whether or not the spouse had been previously widowed or divorced. The subject re-

port on child spacing and current fertility provides a large variety of fertility measures, as well as first-marriage rates, in relation to age at first marriage, whether married more than once, current marital status, difference in spouses' ages, marriage cohort of woman, and interval since first marriage. In the preparation of that report, a procedure was developed to estimate the birth dates of own children not present in the household. The main aims are to construct patterns of family building for birth cohorts of women from 1920 to 1954 and for first-marriage cohorts of women from 1950 through 1969 and to construct birth rates for periods from 1955 to 1969. In addition to the printed report, there is a special public-use data tape which provides recodes especially useful for the study of fertility.

### Data Needs and Potential Sources

*Fertility surveys.*—As noted above, the Growth of American Families surveys, the two National Fertility Studies (NFS), and the National Survey of Family Growth sought to ascertain the dates of all pertinent events in the respondents' marital and fertility histories. These sources, then, provide opportunities (within the limits of the quality of the data and the sample size) for more detailed analyses of the interrelation between natality and nuptiality than are provided by the Current Population Surveys and the decennial census.

Two recent analyses, by Cohen and Sweet<sup>18</sup> and by Thornton,<sup>19</sup> have used the 1965 and 1970 NFS data to study the impact of the disruption of a first marriage and of remarriage on fertility. Though inconclusive for various reasons, including the retrospective nature of the data used, these studies provide some information on a complex relationship which has received little attention so far. Given the steady increase in divorce and remarriage, there is a high-priority need for further studies using more suitable data.

A prospective research design would, in principle, be desirable, but it is not feasible except for analyses limited to relatively short spans because of the long intervals the respondents would have to be followed. Unlike the 1965 survey (but like that of 1970) it would be desirable to include all ever-married women in the sample,

not just those currently married. This would avoid the bias inherent in studying marital disruption only among the currently remarried. A larger sample size would also be helpful. If large enough, it would allow for more intergroup comparisons than that between blacks and whites in the two studies cited. It might also permit more reliable conclusions to be drawn. Small numbers are evident in parts of the analysis of Cohen and Sweet and throughout Thornton's analysis. Also, given the considerable changes in nuptiality and natality during the past 50 years or so, a very large sample would be particularly valuable in permitting the analysis to be conducted for separate cohorts (preferably of intervals of 5 years but no greater than 10 years) and to include older cohorts than those sampled in the 1965 and 1970 surveys.

Using a subsample of the National Survey of Family Growth as a panel to be reinterviewed over time would provide prospective family history data. The histories obtained in the first interview would need only to be updated subsequently, requiring little interviewing time in second and later cycles. If this were done and retrospective histories were also obtained in future cycles of the NSFG from the nonpanel subsample, a rare opportunity would be available to compare retrospective and prospective data:

*Current Population Surveys.*—The Current Population Surveys described above have not collected as much detail on respondents' family history as the surveys just discussed, but what they have obtained has much the same analytic potential as these surveys have and considerably more than the decennial censuses have. The marital history information available permits construction of a dated sequence of marital status changes up to and including the end of the second marriage, except for intervening intervals of separation, for those who have been married no more than twice. This may encompass about 98 percent of the ever-married population, with the figure being greater among those currently of reproductive age than among those older. The others (those married three or more times) can be identified, and the dates of their latest marriage as well as the beginning of their current marital status if not presently married are available. A deduction for this latter group is that there have been two or more intervening mar-

riages which ended, but the sequence of marital status changes and their dates cannot be ascertained.

Natality information collected in the June CPS includes the total number of births, with the dates of the first three or four and of the last one or two. With interpolation, a fairly accurate history for at least the first six births can be obtained. Thus, fairly detailed, interrelated marital and fertility histories would be available for over 95 percent of all ever-married women, the percentage being inversely related to increasing age of women because of the increasing risk of having more than six births or of being married more than twice.

The published reports of these CPS's provide considerable detail on the relationship between natality and nuptiality, but the analytic potential of the surveys exceeds what has been done in the reports. Since these surveys provide the largest samples available, the public-use data tapes are particularly valuable and their widespread use is encouraged.

An important innovation of the June 1975 CPS is that never-married, separated, and divorced women aged 18-29 years, along with currently married women 14-39 years of age, were asked how many children they expected to have. With the trend toward delayed marriage, it would be desirable in future surveys to also ask the currently unmarried whether they expect to marry and, if so, when.

More ambitiously, a panel study of single women, perhaps from the NSFG, could be selected. If the study covered a long enough period it would provide valuable data on the degree of congruence between premarital expectations with respect to marriage and childbearing and actual family histories. Such information might enable data on the expectations of single women to be used in fertility projections. Since a large fraction of births in, say, a 5-year period occur to young women who were single at the beginning of that period, evidence of the usefulness of data on the birth expectations of these women would be quite important.

*Decennial censuses.*—It was noted above that fertility histories can be reconstructed fairly accurately from data from the decennial censuses. Much less adequate, however, is the information on marital history. From what was asked in the

1970 census it is possible to distinguish among people never married, those in intact first marriages, those whose first marriages were disrupted and who have not remarried, those in intact remarriages, and those whose remarriages were disrupted. (Which remarriage it is—first, second, third, etc.—was not ascertained.) However, except for the date of first marriage, the dates of the changes in marital status are not provided. It would be desirable, therefore, to obtain more information about this chronology.

The distribution of the ever-married population according to current marital status provides a basis for assigning priority to the additional questions desirable. Given that the vast majority of ever-married men and women (around 80-85 percent) are in intact first marriages, the date of first marriage—a question asked in a number of censuses—deserves the highest priority. Next priority would be given to the date of the end of the first marriage, since there are obviously more who have ended a first marriage than who have gone on to remarry. This is especially important because about 15-20 percent of the ever-married are no longer in an intact first marriage. (In the 1970 census, only *how* the first marriage ended—death or, by implication, divorce—was ascertained.) The next question in order of priority would be on the date of the start of the second marriage. Data from the June 1971 CPS indicate that more than half of the people ever remarried are in current second marriages.

What is known about the distribution of current marital status indicates that about 90 percent of the ever-married could be accounted for with a marital history chronology through the date of the start of the second marriage. The percentage accounted for, however, seems to vary inversely with age, so among older ever-married men and women it could be considerably less than 90 percent. For this reason, it would be desirable to obtain the date of the end of the second marriage. Carrying the chronology that far would leave only a small percentage of the ever-married—perhaps no more than 5 percent, even among the older cohorts—for whom a complete marital record would not be available.

In summary, the three most important questions to add to the decennial censuses are date first marriage ended, date second marriage began, and date second marriage ended. As men-

tioned above, asking when the first marriage ended, even if no additional question were asked, would add much to the marital history record; asking also when the second marriage began would be even more valuable. If the trend of rising divorce and remarriage continues, such information will become increasingly important. On balance, considering the need for and value of the additional information versus the difficulty of lengthening the census questionnaire, a reasonable compromise would be adding the two questions about when the first marriage ended and the second began.

In this discussion, the reference to “additional” questions means that all the family history information gathered in 1970 (number of children ever born, birth dates of own children in the household, age at first marriage, whether the first marriage ended with the death of the spouse, and current marital status) should continue to be collected in the future. One other question asked in 1970—whether married once or more than once—should be kept in spirit but revised in formulation. As in the CPS, the decennial enumeration should have a question on how many times the respondent has been married (once, twice, or three or more times). This formulation provides the ability to distinguish those married twice from those married at least three times (not possible now with decennial census data). If it becomes clear that the number of persons married three or more times is large enough to warrant separate consideration, three marriages can be distinguished from four or more.

Another feature of the 1970 census which is important to retain is the provision of a very large public-use sample data tape. In 1970, six different data tapes were made available, each containing data on 1 percent of the persons and housing units enumerated. Only three of these contained marital history information. But even if only one of these three were used (the choice depending on the geographic detail desired), the sample would still contain about 2,000,000 persons in approximately 650,000 households. A single 1-percent 1970 census sample is almost 12 times larger than the sample of approximately 55,000 households on which information is obtained in the CPS.

Aside from surveys focused on particular

subpopulations, there is no source which permits the examination of family history dynamics for such relatively small population categories as ethnic groups, e.g., people of Mexican birth or descent and American Indians. The fertility of a number of these ethnic populations is quite high. It may also be that such a large sample as in a decennial census is needed to study these dynamics on a detailed (marriage and birth) cohort basis. For these reasons, it is important that the public-use data tape for the 1980 census continue to be a 1-percent sample.

### Premarital Pregnancy and Illegitimacy<sup>b</sup>

Although most births occur to married women, significant proportions are "illegitimate" or premaritally conceived. The number of such births is sufficiently large to have an impact on our national rate of population growth. Indeed, illegitimate births in 1974 are estimated to number over 418,000, and they represent 13 percent of all live births that year. Moreover, according to data for 1972 from the National Natality Followback Survey, about 16 percent of all legitimate first births occurred within 8 months after marriage.

Since failure to control the timing of the first pregnancy contributes to premature marriage and to illegitimacy, if all first births were planned the incidence of both illegitimacy and hasty marriages presumably would be reduced. Thus for many women, planned timing of the first birth would result in a later age at marriage and motherhood. By precipitating marriage, premarital conceptions lower the average age at marriage and thus, *ceteris paribus*, the mean age at childbearing. Moreover, there is some evidence that premarital conceptions are associated with diminished economic opportunities because of early termination of education and assumption of family financial responsibilities.<sup>20</sup> However, some of these effects may be more short-run than longrun phenomena. It is not known what proportion of these women might—had they postponed pregnancy somewhat longer—

have developed less of a familial role orientation and perhaps have chosen to remain single and/or childless permanently.

Cutright reports that mothers whose first child was conceived before marriage had more children than mothers whose first child was conceived after marriage;<sup>21</sup> Freedman and Coombs report that the 20 percent of their sample who were premaritally pregnant had their subsequent children in a shorter time span than others did.<sup>20</sup> The evidence suggests that most live births resulting from a premarital pregnancy represent timing rather than number failures.

*Data on premarital pregnancy.*—Existing sources of data are of limited usefulness in establishing the incidence of premarital pregnancy, factors associated with it, and the long-range consequences. At the present time there are several major mechanisms that have the potential for collecting such data.

The Current Population Survey conducted by the Bureau of the Census has occasionally included retrospective data on the interval between marriage and birth. For total births, irrespective of birth order, the intervals since first marriage which are specified are: "before marriage," "6 months," and "9 months." The last is not helpful in identifying premarital pregnancies, and the first two provide only partial information. More useful is the greater detail supplied for first births: in addition to "before marriage," the intervals are reported for each month from the 5th to the 8th. (The report of the 1959 data, however, omits "5 months" and "before marriage" in reporting on first births, and "6 months" when dealing with total births.) These data are reported by year of first marriage cross-classified by color and by social and economic characteristics.<sup>15</sup> Hence, they provide one basis for estimating trends in the incidence of premarital pregnancy and in the relative number of births conceived prior to marriage, differentiated by color and by social and economic status. In addition to sampling error, these data are subject to variation from one survey to the next because the compositions of the marriage cohorts are influenced by mortality and migration. It is not surprising, therefore, that rates for comparable cohorts are not the same in the various reports. In some cases the differences are substantial. Although one cannot expect great precision from

<sup>b</sup>The term "illegitimacy" is briefly discussed in footnote *a* on page 1.

these data, persistent trends and pronounced differentials are expected to be consistent from one set of survey data to the next.

The National Survey of Family Growth, conducted by the National Center for Health Statistics, is the most recent Government-sponsored survey to collect data on date of marriage and date of first birth. Information from various natality followback surveys, also conducted by NCHS, permits calculation of the interval in months between marriage and first birth. With the exception of the National Natality Followback Survey, these sources of data can be useful in understanding the causes underlying and explanatory variables associated with premarital pregnancy. Because of the necessary brevity of the mailed questionnaire, followback survey data are of limited utility for this purpose. If data in the National Natality Followback Survey were collected at regular intervals, however, this survey would be a useful mechanism for monitoring trends in the incidence of premarital pregnancies that result in a live legitimate birth.

There have been several privately conducted survey research operations involving local and even national samples. Some have combined record linkage with questionnaires. Financing for these surveys has become increasingly difficult to obtain. In the 1967 Survey of Economic Opportunity, data on birth intervals were obtained which permit an estimate of the incidence of premarital pregnancy and a limited assessment of some of its long-term effects.<sup>17</sup>

None of the data sources are completely adequate for estimating the incidence of premarital pregnancy and/or any secular trends that might be present. Most take place at irregular intervals. In addition, with the exception of the Survey of Economic Opportunity, Government-sponsored surveys have tended to be restricted to married women, while privately conducted surveys tend to be restricted in terms of age groups or geographic coverage, which limits the generalizations that can be made from the data. Moreover, these sources of data miss premarital pregnancies that do not result in a live birth. What is needed is a method of collecting data on the relative frequency of the various outcomes of

nonmarital conception, which are:

1. live birth
  - a. legitimate
  - b. illegitimate
2. pregnancy termination
  - a. spontaneous
  - b. induced

Viewed from the perspective of population growth, the most relevant outcome of a premarital pregnancy is a live birth.

There are several questions about nonmarital pregnancy to which the answers are imperfectly understood. They are listed below, not necessarily in the order of their perceived importance.

1. What distinguishes women whose nonmarital pregnancies result in live births from those whose nonmarital pregnancies do not?
2. What distinguishes women whose nonmarital pregnancies lead to marriage from those whose nonmarital pregnancies result in illegitimate live births?
3. What is the association between premarital pregnancy and age at marriage?
4. What is the association between premarital pregnancy and completed family size?
5. Is premarital pregnancy associated with higher infant and child mortality than other births of the same parity that were conceived after marriage?
6. What are the consequences of a premarital pregnancy in terms of the socioeconomic development, personal satisfaction, and marital adjustment of the parents?

One problem is identification of persons who have had a live birth as a result of premarital pregnancy. Ordinarily, probability samples of women in the reproductive ages do not contain a large enough number of cases of premarital pregnancy to permit the types of detailed analyses necessary to answer the questions shown above. One way to solve this problem would be to stratify the sample according to whether or not women conceived premaritally. This could be done either through record linkage—problematic in many cases—or through

a mechanism such as the Natality Followback Survey, in which date of marriage as well as date of first birth are ascertained. It would allow cross-sectional examination of differences between the two groups with respect to the variables being examined and could be complemented by a longitudinal design in which a subsample of women—matched on key variables—would be reinterviewed at 5-year intervals until they passed through the reproductive years. The longitudinal feature would be very expensive, but it would provide some very useful data that cannot be obtained cross-sectionally.

*Data on illegitimacy.*—At the present time there are two major sources of data on illegitimacy available:

1. *Vital statistics.* Annual natality statistics, published by the National Center for Health Statistics, are based on information reported on birth certificates in 38 States and the District of Columbia. In addition to publishing these data in annual volumes of *Vital Statistics of the United States* and in the *Monthly Vital Statistics Report* series, NCHS also uses them in preparing special reports. This provides reliable and fairly valid annual estimates of the number of illegitimate births but does not yield much information concerning the characteristics of the parents or other variables associated with the birth.
2. *Special studies.* Research conducted privately in which survey data are utilized, occasionally combined with information obtained by access to official records, is a much richer source of information than data collected from birth certificates are. Data generated by special studies are usually not comparable; hence, they are rarely helpful in establishing and studying temporal trends.

There are several needs for additional data collection and processing which can be met by adaptation of existing systems.

Efforts should be made by NCHS to expand its coverage of annual natality statistics to all States. Until all States provide information on out-of-wedlock births, estimates for the non-

reporting States should continue to be made, although NCHS might consider revising its estimating procedures. (See Cutright<sup>1,2</sup> and Sklar and Berkov<sup>2,2</sup> for differing positions regarding this latter point.)

At present, illegitimacy rates can be computed by age and race at the national level only. Reporting only the number of illegitimate births or the illegitimacy ratio (number of illegitimate births per 1,000 total births) poses severe analytical problems when making comparisons between segments of the population. Emphasis should be placed on the computation of illegitimacy rates (number of illegitimate births per 1,000 unmarried women) whenever possible. It is, of course, difficult to obtain or estimate the number of unmarried women of specified characteristics for subnational populations or localities in intercensal years.

## Recommendations

1. Obtain complete coverage of all States in marriage- and divorce-registration statistics. Acquisition of information on the national incidence of marriage and divorce, particularly the latter, continues to be handicapped by the incompleteness of the marriage- and divorce-registration areas. Progress has been slow, but at least it has occurred. Continued efforts need to be made to persuade all States to join the marriage-registration area and the divorce-registration area. There are now 41 States and the District of Columbia in the marriage-registration area. A concerted effort is needed to bring in the other nine States.
2. Reduce delays in dissemination of National Survey of Family Growth and Current Population Survey reports and tapes. The valuable marital and fertility history data gathered in the 1973 and 1976 NSFG and in the 1971 and 1975 June Current Population Surveys should be made available to the public in both printed and computer-readable formats. There should be a minimum of delay in producing reports and public-use sam-

ples, and the latter should be made available in a format or formats attractive to most users at a price low enough to encourage widespread use.

3. Follow up panels from the NSFG. The limitations of retrospective data can be overcome through the use of a prospective design. NCHS is urged to select part of its NSFG sample as a panel to be interviewed repeatedly. The panel could be a representative probability sample of U.S. women of specified characteristics. This would open up many substantive analytic possibilities, some of which have been indicated above, and also make it possible to compare patterns of change based on prospective data with those derived from retrospective reports. Such a comparison would provide a valuable and rarely available check on the quality of the retrospective data.
4. Include single women in the CPS and NSFG. Young never-married women should be asked at least some questions about marriage and fertility, e.g., their desires and expectations with respect to marriage and the timing and number of births. These questions do not seem offensive, and they provide valuable information. They have just begun to be asked in the CPS, and more information should be sought. In addition, single women should be included in future NSFG samples.
5. Ask "number of times married" in the decennial census. In the 1980 decennial census of population the Census Bureau should substitute a question on the number of times married for the query on whether married once or more than once. Questions on current marital status, date of first marriage, and whether the first marriage ended with the spouse's death should be kept as in the 5-percent sample of households in 1970.
6. Ask in the decennial census the dates first and second marriages began and ended. The Census Bureau is urged to obtain additional information, as appli-

able, on when the first and second marriage ended and how the second marriage ended, as well as on the date the second marriage began. If it would be too impractical to include all of these questions in a 5-percent sample, consideration should be given to getting this information from a smaller sample, or asking only some of the questions, with priority given to the dates of end of first marriage, start of the second, and end of the second, in that order.

7. Collect more data on women with premarital pregnancies. Consideration should be given to longitudinal studies in which matched samples of women who conceive premaritally and those who do not are monitored and data are collected on family size, birth intervals, socioeconomic characteristics, infant and child mortality, marital adjustment, and personal satisfaction.
8. Obtain complete coverage of all States for illegitimacy statistics. Efforts should be made to expand the coverage of annual statistics on illegitimacy to all States. Meanwhile, NCHS should review the adequacy of its procedures for estimating illegitimacy in nonreporting States.

#### **4. FEMALE EMPLOYMENT, THE STATUS OF WOMEN, AND CHILD CARE**

##### **Introduction**

Previous sections of this report have indicated data needs with respect to family formation and dissolution, wanted and unwanted childbearing patterns, premarital pregnancy, and illegitimacy. This implies needs for data on the status of women as well. The increase in the proportion of households with female heads reflects trends like the increasing rates of divorce and of participation of women in the labor force.

The labor force participation of American women has been increasing steadily over past decades. In 1940, 27 percent of women aged 16

and over were in the labor force; by 1970, the percentage had risen to 42.<sup>23</sup> The increases continued during the early 1970's, and by 1974 it was estimated that 46 percent of all women aged 16 and over were in the labor force.<sup>24</sup>

In general, women in the labor force have lower fertility than those not in the labor force. This relationship raises many questions of interest. To what extent has the recent decline in fertility been related to the greater participation of women in the labor force? Will the negative relationship between female employment and fertility continue as increasing proportions of women enter the labor force and working women become a less selective group and more like the general population? To answer these and other relevant questions, it is necessary to gain a thorough understanding of the relationship between female employment and fertility.

A major problem in understanding this relationship is determining the causal linkages. Do women work because they have fewer children or do they have fewer children because they work and want or have to continue working? It is difficult to assess the extent of influence in each direction or how this relationship may change over the reproductive span. Data establishing the relationship between female employment and fertility generally refer to one point in time: a woman's current or past work experience in relation to her cumulative fertility (children ever born). Studies of change over time typically are based on cross-sectional comparisons rather than longitudinal observations of the same group of women; this limits our knowledge of the sequence of events. Employment histories and retrospective attitudinal questions are helpful in documenting this sequence but subject to recall error. Some studies have analyzed work experience (past or current) in relation to expected fertility, the assumption being that fertility expectations are valid projections of future behavior. While there is some support for this assumption on an aggregate basis, panel data indicate that both individual fertility expectations and family size desires change considerably over time.<sup>25, 26</sup>

The growing labor force participation of women with preschool children suggests that whatever the effect of female labor force participation on fertility, having young children is

becoming less of a deterrent for women who wish or need to work. Between 1950 and 1970, the percent in the labor force of ever-married mothers with children under 6 years of age increased from 12 to 31; considering only mothers with children under age 3, the percent in 1970 was 27.<sup>23</sup> The issue of child care, as we shall discuss shortly, is relevant to the study of female employment and fertility.

The increased participation over past decades of women in the labor force (especially young mothers) and their higher educational attainment are evidence of change in the roles of women outside the family. To what extent does this correspond to changes in women's status? How does the status of women relate to fertility?

The answer in part depends on how the status of women is defined. If the status of women is considered to be derived from their husbands, then we need to consider changes in the socioeconomic characteristics of husbands only, although this ignores nonmarried women. The status of women may also be defined in terms of the participation of women relative to men in roles both inside and outside the home. The extent to which men care for children as well as the extent to which women work outside the home become relevant considerations. It is this definition of status that will be examined in this section.

It is generally hypothesized that as women gain equality with men, their fertility will decline. The converse relationship also has been proposed: by having fewer children, women can enhance their position relative to men. These are speculations that cannot be explored without comparable data for men and women. For married couples, comparisons between spouses are also needed. Federal sources of data focus on the nonfamilial activities of men and, to a lesser extent, women. We know relatively little on a national level about the division of labor within the home in relation to female participation outside the home. Yet the status of women outside the family is undoubtedly affected by their status within the family. Women are unable to participate equally with men in activities outside the home insofar as they bear children and are the persons primarily responsible for child rearing and the performance of household

chores. Accordingly, the status of women outside the family may be enhanced if women have fewer children, and/or if men assume greater responsibility for child care and household tasks within the family, and/or if arrangements are made for nonparents to care for the children and perhaps also the household.

Clearly, the status of women and child care are related policy issues. Not only may the enhancement of women's status lower fertility and thus reduce the need for child care, but child care by others may lower subsequent fertility by enabling women to participate more fully in roles outside the family. A contrasting view is that shifting child care responsibilities away from the mother (during the time she is outside the home) may *increase* fertility because the burden of having children is reduced. These hypotheses remain to be tested. Indeed, the hypothesis that the status of women relative to men affects fertility has not been fully explored. It is of special importance from a policy perspective to evaluate the recent fertility decline in relation to both the changing status of women and to the rise in the proportion of employed women with preschool-aged children.

To what extent are Federal data available that may serve to clarify the issues raised above? What kinds of data need to be collected? These questions will be considered separately for female employment, the status of women, and child care.

### **Female Employment and Fertility**

*Data sources.*—On a national level, the main sources of published data on female employment and fertility are the decennial censuses and the Current Population Survey. The National Survey of Family Growth, begun by the National Center for Health Statistics in 1973, also provides data of this type.

The decennial census obtains information on the number of children ever born and relates this to current labor force status, previous labor force status (the year preceding the census), and whether employment was part time or full time. Neither information on previous labor force status nor information on children ever born is

collected in the form of histories—that is, with specific birth or labor force intervals specified. Work disability (including the length of disability) is cross-tabulated by number of children ever born.

In the census the number and age of own children are also cross-tabulated with labor force status, including whether employment is part time or full time. Information on the number of hours worked is available for women with a child under 6 as well as for categories of women with older children. The number of weeks worked in the year prior to the census (1969) is also cross-tabulated by the presence and age of own children, with children under age 6 being the youngest category. The only published census tabulations that relate detailed occupation (not simply labor force status) to number of children ever born is for women 35 to 44 years old—that is, women who are nearing the end of the reproductive span. Public-use data tapes from the census are available for more specific analyses.

The CPS provides data annually on number of children ever born by the labor force status of women. Some of the tabulations distinguish part-time from full-time employment. The number of months since the birth of the latest child (or since marriage, if childless) is cross-tabulated by labor force status annually. Also available for 1972 are the number of births to date and additional births expected (for wives aged 14 to 39) by labor force status. Public-use tapes from the CPS can be made available at the cost of reproducing the tapes.

The birth records of the vital registration system do not include information on labor force status. NCHS, however, does collect in its NSFG a substantial amount of data on the labor force and fertility histories of ever-married women, including employment during specific birth intervals and their future work and fertility expectations. The study design is cross-sectional, but intercohort comparisons would provide some estimates of change over time and can be obtained from this data source; public-use data tapes from the NSFG will be made available to investigators.

In the National Natality Followback Survey of women who had legitimate births in 1963

specific questions were asked on employment during pregnancy.<sup>27</sup> The analyses considered, among other variables, the trimester of pregnancy and the number of previous live births. This source provides data on the employment of women at a specific reproductive phase of their lives (pregnancy) and on the relevance of prior fertility to the employment-fertility relationship.

*Data needs.*—The decennial census and the CPS would be more revealing of the process whereby female employment is related to fertility if both variables were measured with greater specificity. In particular, there is a lack of data indicating how the timing of births is related to the timing of employment. As previously noted, a better understanding of the sequence of events is needed. The NSFG could provide such data on a longitudinal as well as a cross-sectional basis if a panel design were adopted.

Other specific data needs on female employment and fertility at the national level are the total number of years worked, the last year worked, and (for those not currently employed) the number and age of children when last worked. The data collected from the decennial census and the CPS should be sufficiently comparable that intercensal measures of the relationship between female employment and fertility are available.

### Status of Women and Fertility

*Data sources.*—Data on the activities of men and women outside the home have traditionally be collected by the Government, particularly by the Census Bureau. From Census Bureau data, the following are indicators of the nonfamilial roles of student and worker: school enrollment, educational attainment, labor force status, occupational status, and income. To varying extents data are available for each sex relating these variables to fertility. The data are available in two forms: data tapes and published tables. Data tapes provide the potential for a more detailed analysis than exists in the published form.

A review of numerous Government documents revealed the following:

1. *School enrollment.* Cross-sectional data are available on college enrollment of

persons aged 16 to 49 classified by sex and by the presence of children under 18 years old. Age breakdowns of enrolled persons are also available.

2. *Educational attainment.* Cross-sectional and cohort data are available from the decennial census and the CPS which relate years of school completed by women to number of children ever born, presence of preschool-age children, and birth intervals. Tables vary as to whether they include all women, ever-married women, or currently married women. The age range falls within the span of 15 to 49 years old. Generally, breakdowns by age are provided. Comparable data for men do not exist except for husbands of women aged 35 to 44 who have been married once and whose husband is present in the household. The birth records from the vital registration system include data on the educational attainment of the child's mother and father separately (although information on the father is often absent if the mother is unmarried). The reporting of educational attainment is not, however, complete for all States. While mother's education is cross-tabulated by such variables as mean interval since last birth and age of mother, this is not done for father's education. For further discussion of data on education and fertility, see the following section of this report, "Social and Economic Correlates of Fertility."
3. *Labor force status.* Cross-sectional data from both the decennial census and the CPS relate the labor force status of women to the number of children ever born and the ages of those children. The ages of women range from 14 to 64, and age breakdowns are available. Comparable data for men do not exist except for husbands of women 15 and older who are married and whose husband is present in the household.
4. *Occupational status.* The decennial census and the CPS offer cross-sectional

data relating the occupational status of women to number of children ever born but only for ever-married women aged 35 to 44. The data are somewhat more extensive for men and relate occupational status of employed husbands (present in the household) to number of children ever born to their wives; the age span for the wives (age 15 and over) is broken down by 5-year intervals, but this breakdown is not given by the ages of their husbands. The occupational status of heads of families (male and female heads are distinguished) is cross-tabulated with the presence of children by age of head of family. Age breakdowns are more detailed for male heads than for female heads.

5. *Income.* The decennial census and the CPS provide cross-sectional and cohort data on family income and husband's income in relation to number of children ever born, ages of children, and birth intervals. Classifications of these data by age of wife are provided within the broad range of 15 years and over. For husband-wife families, the earnings of wives are cross-tabulated by age category of husband and age categories of children. Cross-sectional data are also available for family income of heads of households by number of own children under 18. Such tables provide comparable data for female heads of households and male heads who are not in husband-wife families, and they are broken down into broad age categories.

*Data needs.*—Generally, cumulative measures of fertility (e.g., number of children ever born) relate fertility to the activities of women (and, to a lesser extent, of men) outside the family. The timing of fertility in relation to nonfamilial role behavior cannot be clearly assessed from these data for either women or men. Cohort fertility data which associate birth intervals with marriage and with nonfamilial roles are limited to women. To investigate the differential effect of nonfamilial roles on the fertility of men and women and the effect of fertility on these roles,

comparable data for men are needed. As previously noted, there is a need to develop measures which more specifically relate the timing of births to the timing of nonfamilial activities, taking into account cumulative experience (e.g., number of years worked). The analyses of such data would provide some understanding of the *process* by which differences between men and women emerge with respect to the relationships between nonfamilial roles and fertility.

Additional tabulations from data now available would fill some gaps in knowledge. Tabulations for men similar to those available for women are needed for the indicators of status like items 1 to 5 mentioned above; comparisons between spouses would be especially revealing. Data are needed on the occupational status of unmarried (including never-married) women and men by fertility of different age groups. Data on the separate incomes of women and men in the labor force are needed for cross-tabulations with the number and ages of children. Such data are especially important in the context of the cost of child-care arrangements for working people.

### **Child Care and Fertility**

*Data sources.*—Government sources of data that consider both child-care arrangements and fertility are limited. The prime source is the National Survey of Family Growth, which in 1973 asked employed women the kind of child-care arrangements they had, if any, and the extent of use. These data could be analyzed in relation to fertility and fertility desires to obtain a cross-sectional view of the association.

There have been several indepth analyses of the child-care arrangements of working mothers. The focus of these studies, however, has been on how children are cared for, not the effect of child care on fertility. Such studies include a Census Bureau survey in 1958 conducted for the Children's Bureau.<sup>28</sup> Supplementary questions regarding child care were added to the CPS of February 1965, and an extensive analysis was published by the Women's Bureau and the Children's Bureau under the authorship of Low and Spindler.<sup>29</sup> More recently, the CPS of October 1974 included questions on the after-school care of children 7 to 13 years old, and the February

1975 CPS focused on the care of children 3 to 6 years old. These two sets of data are to be combined into one CPS report, as yet unpublished. The data are for children of both working and nonworking women of all marital statuses.

A subject report on school enrollment based on the 1970 Census of Population includes data on the enrollment status of children 3 to 5 years old.<sup>30</sup> Beginning in 1964 the National Center for Educational Statistics has been issuing annual reports on nursery school and kindergarten enrollment based on the Census Bureau's October CPS. The 1973 report, prepared and published by the Bureau of the Census, includes a review of related reports.<sup>31</sup>

Nongovernmental national surveys that were federally funded include data on child-care arrangements. The National Longitudinal Survey of Young Women and the National Longitudinal Survey of Mature Women, which are both panel studies, have data on child care and fertility. They provide a potential source for analyzing the impact of various child-care arrangements on fertility. The survey of mature women began in 1967, continued with annual interviews through 1972, and was conducted again in 1974. The panel on young women ran from 1968 to 1973 and began again in 1975; an additional interview is planned for 1977. Data on child care from the 1971 National Longitudinal Survey of Mature Women have been compared with the 1965 CPS data.<sup>32</sup> Unco, Inc., a private organization, has a national survey for the Office of Child Development. The resulting information on the need for child care has not yet been published.

*Data needs.*—The question of the relationship between child care and fertility has a bearing on a large number of American women. Over 4 million women are employed and have at least one child under 6 years of age.<sup>23</sup> No published data on this subject are available on a national level for the following groups of women: unemployed women, women students, and women who do not work or go to school but who send their children to child-care centers.

The 1965 CPS data revealed that about 15 percent of the children of employed women were cared for by their father. (Many of these

women were undoubtedly employed part time.) Data are needed on the relationship between paternal child care and fertility. The composition of the household is extremely important to the study of child-care arrangements, as is the related consideration of the cost of child care, and data are needed on these topics. The consequences of various child-care arrangements for the well-being of children as well as of their parents also need to be explored, but the needed data are lacking.

The relationship between child care and fertility is essentially a longitudinal one and should be analyzed accordingly. The National Longitudinal Surveys, previously referred to, could be explored for this purpose. Hopefully, the National Surveys of Family Growth will continue to include child-care questions in subsequent years. The June CPS, which collects information on fertility, could also be used as a vehicle for the collection of such data. Both surveys could ask these questions of nonworking women as well. They could also measure the child-care needs of women who presently have no such arrangements (e.g., women who may not be going to school or working because good child-care arrangements are unavailable or too expensive). This too is an area in which we have little data, and the fertility of women with this "unmet need" is of special interest.

Overall, there is a need to obtain the kinds of data that will help assess the extent to which the responsibility for child care attributed to and assumed by women affects both their status vis-à-vis men and their fertility. This requires detailed educational and labor force data on the characteristics of men and women cross-tabulated by fertility and child-care arrangements.

## Recommendations

1. Efforts should be directed toward greater specificity in the measurement of the timing of employment, postsecondary education, and fertility in Census Bureau data, with comparable data for men and women.
2. NCHS is urged to add to the National Survey of Family Growth a panel design

of first-parity women. This addition should focus on the longitudinal relationship between nonfamilial roles and fertility for these women who have had their first birth and, if they are married, their husbands.

3. It is recommended that more questions on child-care needs and practices be included in the NSFG and in the June CPS. These questions should be asked of all women, including those who are not working.
4. Federal agencies should promote the use of public-use data tapes for more refined analyses of the relationship between the status of women and fertility.

## 5. SOCIAL AND ECONOMIC CORRELATES OF FERTILITY

This part of the report examines data needs with respect to social and economic variables. Because many of the data needs with respect to occupation and income have been noted in the previous section, education and religion are emphasized in this section. Each variable has been examined in terms of the following questions: (1) why is the variable important? (2) what data are now available? and (3) what are the data gaps? Each variable has also been viewed in the context of the downturn in U.S. fertility which has occurred during the last decade and in terms of the questions and issues raised in the report of the Commission on Population Growth and the American Future.<sup>2</sup>

### Socioeconomic Variables

*Education.*—In the study of fertility in the United States, educational attainment is routinely used as a social factor by which fertility levels have been differentiated. There is a vast literature documenting the existence of a generally negative relationship between fertility and level of educational attainment in the United States and in most other countries.<sup>33-46</sup>

A generation ago the inverse relation of fertility to educational attainment in the United States was thoroughly documented and assumed

to be fixed.<sup>35, 38</sup> Since then there has been a marked narrowing of differentials in the United States and in all modernized countries.<sup>39, 40</sup> The relationship between education and fertility is not the same for all subgroups of the population at any time. It is modified by farm or nonfarm background, color, whether or not the wife is in the labor force, and religion, among other factors.<sup>34, 47-50</sup>

Attention has been given to two specific questions about educational differentials in relation to fertility. One question is whether the wife's or the husband's educational level has the stronger relationship with fertility levels. In the United States, the wife's education seems to be more important in this respect than the husband's. The second question is on the minimum education necessary for adoption of modern fertility practices. Apparently, completion of at least a primary school level of education is necessary before any fertility reduction occurs. Evidence from Puerto Rico as well as information from attitude surveys in the United States concerning ideal or desired family size suggest that completion of a grade school education seems to be the point at which fertility differentials by education narrow significantly.<sup>33, 49</sup> Fertility differentials by years of schooling among women with some high school and college education are small, and there is some suggestion that education and fertility have a u-shaped or even a direct relationship. The latter occurs among women with relatively low levels of fertility and a narrow range of fertility and educational differentials. Studies based on the 1960 and 1970 censuses and the Current Population Surveys of 1965 and 1967 indicate that some fertility differentials by education still exist, as do differentials with respect to birth expectations and spacing of births. Those with less than a high school level of education had both higher expectations and higher fertility than others had.<sup>37, 51</sup>

*Other socioeconomic variables.*—The effect of education on fertility probably never operates completely independently of other social and economic factors. Participation of women in the labor force certainly affects the relation between education and fertility, as discussed in detail in the previous section of this report. In the United

States and other industrial and predominantly urban nations, female labor force participation tends to be associated with lower fertility. Occupations of men and women and family and individual income levels tend to operate in a similar fashion to education; that is, higher status tends to be associated with lower fertility.<sup>52</sup> Here too, however, differentials appear to have narrowed considerably since 1940. Some part of the convergence may be due to differences in the occupational classifications used. Also, despite the general convergence, the traditional inverse relationship appears to exist among some subgroups of the population, notably rural residents and persons other than white.

Recent comparisons of 1960 and 1970 census data on public-use tapes and analyses of 1967-73 CPS data suggest that the decline in fertility since the 1950's has been most pronounced and rapid among those groups which previously had the highest fertility—blacks, American Indians, and Mexican-Americans—and among low-income women.<sup>53-56</sup> The fertility measure used in the comparison of ethnic groups was not very sophisticated. Also, the poor still have higher fertility than high-income women and, according to the 1970 National Fertility Study, significantly higher rates of unwanted fertility.

What appears to be important for policy and planning purposes is that the combination of socioeconomic variables associated with high fertility in the past is characteristic of increasingly smaller proportions of women in the United States. This probably means continued low fertility with some temporary variations due to shifts in size and spacing preferences. More and better information is needed about small subgroups of the population in which differentials still appear to exist—minorities, immigrants, and some geographically classified groups. There is also a need for more cohort analysis with respect to child spacing and fertility expectations.

Ryder's critique of the national fertility surveys included some suggestions for future inquiry which are appropriate here.<sup>57</sup> It may be time to move to more narrowly focused research which would permit the identification of different groups of decision-makers with respect to

fertility and the group properties which influence fertility norms and behavior. If most future changes are likely to be shortrun changes within a narrow range and associated with shifts in norms regarding numbers and spacing, profiles of those making fertility decisions are needed. A profile of their characteristics and some analysis of the personal and social consequences of the types of fertility decisions they make within a specified time period would be useful. This might be accomplished through modification of sampling procedures in the fertility surveys, which, in spite of the problems noted, have produced significant research findings with respect to the control of fertility, the extent of unwanted fertility, and other policy-relevant data.<sup>58</sup>

### Religion

For almost as long as one can determine, there has been a relation between religion and fertility. Regional studies undertaken in the first decades of the 20th century suggested that Catholics had larger families than Protestants had and that Jewish families were the smallest. In the 1930's a number of researchers forecast an end to this differential.<sup>59</sup> The limited evidence pointed to a greater decline in fertility among Catholics than among Protestants. However, surveys after World War II, beginning with the 1955 Growth of American Families study, once again showed a significant difference in the family size plans and the contraceptive behavior of Catholics and Protestants.<sup>35</sup>

The authors of the 1955 report were somewhat suspicious of the stated family size expectations of Catholics, but the 1960 GAF survey indicated validity. It was not until the 1965 National Fertility Study that the possibility of future convergence between fertility of Catholics and Protestants was noted and this only among younger married women. By 1970 it was apparent that the process of convergence was continuing. Regional studies, such as those conducted in Rhode Island between 1967 and 1971, yielded similar results. By 1971 what differences still remained were quite small. Nevertheless, a minority of Catholics still exhibit high fertility expectations and, if they practice birth

control, rely on rhythm and abstinence. Apparently their proportion in the total U.S. Catholic population is declining, however.

Whether this pattern of convergence will continue remains to be seen. The 1930's showed similar signs, but these were not realized in the 1940's, 1950's, or even early 1960's. Is the present trend merely the result of economic disturbances, as in the 1930's? Will a new differential emerge with economic improvements or perhaps with a resurgence of religious fervor?

When discussing religion and fertility in the United States, the obvious comparison is between Catholics and others. This is understandable, given the position of the Catholic Church and the size of the population. However, other high-natality religious groups should also be studied for their impact on population growth. The Church of the Latter-day Saints, Southern Baptists, and fundamentalist sects have all exhibited relatively high fertility in the past.<sup>60</sup> Have recent developments in contraceptive technology, along with economic fluctuations, contributed to declining fertility among these groups?

#### Data Sources

Most of the data on social and economic correlates of fertility are from the Division of Vital Statistics in the National Center for Health Statistics and the Population Division of the U.S. Bureau of the Census. Current statistics and analyses produced by both organizations as well as future plans are described more completely in the appendixes.

The annual natality volumes from NCHS, however, have had special significance for policy questions related to social and economic factors affecting fertility. In general, these volumes include data on births by race, sex, nativity of mother, birth order, legitimacy, plurality, birth weight, attendant at birth, age of mother, and education of mother and father.

Until now much information on differential fertility has come from *ad hoc* surveys such as the Growth of American Families studies, the National Fertility Studies, and the Princeton studies. The current National Survey of Family Growth should yield more and better information on social, economic, and religious dif-

ferentials because the sample size is large, allowing for better controls. The National Survey of Family Growth provides a considerable amount of data on fertility expectations and preferences, contraception, and child-spacing patterns. It should richly supplement both the fertility and the socioeconomic data derived from the Standard Certificate of Live Birth.

The Census Bureau collects data on women by number of children ever born and by number of children present in the home in the decennial censuses. In Current Population Surveys the Bureau collects data on birth intervals, child spacing, and, more recently, on birth expectations. These fertility measures are tabulated by age, race, occupation, education, income, and other social variables but not by religion. For example, the subject report "Women by Number of Children Ever Born" relates fertility to years of school completed by both husband and wife, occupation of employed husbands and wives, family income, income of husband, country of origin, and urban-rural and metropolitan-nonmetropolitan residence.<sup>61</sup> Two shortcomings exist. The detail is available only down to the regional level, and most tables attribute childlessness to all single women. A special PC(S1) report (No. 21), "Fertility and Family Composition for the United States, 1970," is a rich source of data with great analytical potential.<sup>62</sup> The Current Population Survey has significantly expanded coverage since 1969, especially with respect to ethnic origin and to fertility expectations, child spacing, and marriage and fertility histories.

#### Data Needs

In both the summary and special report census volumes it would be useful to have a more clear-cut breakdown of the "Spanish Origin Population," a tabulation which includes persons of Spanish language in 42 States and the District of Columbia, persons of Spanish language or Spanish surname in five southwestern States, and persons of Puerto Rican birth or parentage in three Middle Atlantic States. Regional comparisons facilitate comparison of ethnic differentials but do not completely solve the problem. Small area data are also limited. Census tract reports, for example, show the fer-

tility of women 35-44 years of age as an indication of completed fertility, neglecting child-bearing at older ages. In tracts where large proportions of women, such as Puerto Rican and Mexican women, are under 35, this provides a misleading picture of current fertility.

The National Fertility Surveys and National Survey of Family Growth are useful mechanisms for obtaining data on single women and on ethnic differentials which are not available through the Census Bureau or in vital statistics volumes.

The Census Bureau should provide more data on fertility differentials by socioeconomic status for small areas such as census tracts. The detail now published on education and income appears to be satisfactory. As noted earlier, increasing proportions of women are entering the labor force and their occupations vary more than previously. Data from both the decennial census and the Current Population Survey should be tabulated to indicate the social and economic characteristics of women as well as those of men, along with some indicator of family socioeconomic level based on the characteristics of both spouses. In view of the good data available on socioeconomic variables and fertility, it is time to focus on aspects of data gathering and analysis which create an understanding of the consequences of socioeconomic fertility differentials for projected future employment patterns, for occupational structures, for educational attainment, and for other socioeconomic facets of American life.

The fact that questions on religion are not included in the decennial census or in vital statistics data makes it difficult to develop meaningful trends. From a data-gathering perspective, the ideal solution would be to inquire in the 1980 census as to religious affiliation (as was done in an earlier Census Bureau survey in 1959) and to include this information on birth certificates in all States. This remains an ideal, however, because of practices and viewpoints with respect to the individual's right to privacy and the separation of church and state.

Religious affiliation has been a significant factor in fertility behavior in the past, but there is increasing evidence that it now accounts for very little variation in fertility. It is nevertheless

important to monitor very closely any possible changes in the current pattern. It is equally important to understanding fertility behavior to be able to identify those groups or subgroups which continue to maintain patterns of high fertility. While it is not presently possible for the Bureau of the Census or the national vital statistics system to supply such information, national surveys can yield rich information on this subject. The National Natality Followback Survey and the National Survey of Family Growth both include questions on religion.

It is recommended that National Survey of Family Growth data be analyzed in depth to determine religious differences in actual family size, fertility desires and expectations, the use of various types of contraceptives, and attitudes toward sterilization and abortion. Furthermore, the continuing analysis of such variations is vital to determine the longrun importance of religious affiliation. The emphasis necessarily is on differentials between Catholics and non-Catholics, but with a large sample, other religious groups should also be studied.

## Recommendations

1. Continue to collect current items on education, occupation of husband and wife, and income in the Current Population Survey, National Survey of Family Growth, and National Natality Followback Surveys.
2. Improve sampling in the surveys to permit more detailed analyses of small subnational populations, ethnic groups, and place-of-residence categories.
3. Expand the analytical potential of each source by providing interpretive reports drawing on all data sources. These could be in the form of occasional papers by the National Center for Health Statistics and the Census Bureau jointly.
4. Provide indepth analyses of the religion items in the National Survey of Family Growth to determine the importance of religious affiliation as a factor affecting fertility.

## 6. METHODS OF FERTILITY CONTROL: CONTRACEPTION, STERILIZATION, AND ABORTION

### Introduction

Major shifts in acceptance and use of modern contraceptive methods, surgical sterilization, and induced abortion have taken place in recent years and probably will continue. These changes have facilitated declines in American fertility. This section deals with the impact of these practices on fertility and not with the areas of public controversy that surround some of the methods of fertility control.

Practices governing the use of contraceptives and the performing of abortions and sterilizing operations are obviously subject to potential governmental regulation; hence, policies may evolve that ultimately affect fertility through such means. Viewed historically, fertility control methods have long been subject to varying degrees of both formal and informal social control in the United States. It was not until 1966 that legal restrictions on the sale of contraceptives and dissemination of contraceptive information were removed from all jurisdictions. Legal issues affecting abortion are still being adjudicated, and although surgical sterilization is legal in all States, access to it is still restricted by administrative policies and regulations.

Government policies and programs concerning contraception, as discussed in the introductory section to this report, are directed toward the health and welfare of individual mothers and their children. Nevertheless, family planning programs obviously have some effects on the level of fertility. Despite such developments, there is a lack of adequate data on the relationship to fertility of the various fertility-control methods. Greater reliance on methods like the contraceptive pill, sterilization, and induced abortion has facilitated a reduction of unwanted fertility and contributed to a decline in the national birth rate. Available data, however, do not permit quantitative statements about the demographic impact of each one of the above-mentioned methods of fertility control.

### Contraception

Two important changes have occurred in contraceptive usage in American society during

the past decade. One is the dramatic shift to modern, highly effective methods, especially to the oral contraceptive, or "pill." The other is really the continuation of a longer term process of the spread of contraceptive knowledge and use throughout all segments of society. This process has greatly diminished differences by race, class, and religion. These major changes have been well documented for married couples in national studies, beginning with the Growth of American Families (GAF) studies of 1955 and 1960 and continuing through the 1965 and 1970 National Fertility Studies (NFS).<sup>35, 36, 58, 63</sup> From their analysis of the two NFS surveys for the Commission on Population Growth and the American Future, Ryder and Westoff attributed half of the 1965-70 decline in fertility to improved control of unwanted births.<sup>6</sup> More widespread use of effective contraceptive methods like the "pill" was undoubtedly responsible for some portion of the decline in the rate of unwanted fertility, but precise quantitative estimates of the contribution of various contraceptive methods and other factors are unavailable.

*Data sources.*—The National Survey of Family Growth continues to collect data on contraception that are comparable to the data produced by GAF and NFS, thereby facilitating analysis of trends. A detailed report from the 1973 NSFG will analyze trends in contraceptive use by socioeconomic characteristics. An advance report will provide data on the use of specific contraceptive methods by married women. The NSFG provides very detailed contraceptive information obtained from a family planning history classified by pregnancy intervals for each respondent (see the NSFG questionnaires in appendix III). In the survey, questions were asked about the specific methods used in each interval and why each method was used, and about wantedness and success in timing of each birth. Similar information, but with additional detail, was obtained for birth intervals occurring within the 3 years preceding the survey. The analytical potential of these data is further enhanced by the availability of a public-use data tape. An innovation of the NSFG is a set of questions concerning the source and funding of family planning services received by the respondents—married women of childbearing

age. The survey will obtain information on the provider of the service, specific methods recommended, and any side effects. An NCHS report from the 1973 NSFG is forthcoming. It will deal with the sources and quality of family planning services received by currently married women classified by age, race, and socioeconomic characteristics (including Spanish origin). Such data should be helpful in the operation and evaluation of national family planning programs and in formulating related policies.

In addition to the NSFG, NCHS operates two other data systems providing family planning information—the National Inventory of Family Planning Services and the National Reporting System for Family Planning Services (NRSFPS). The latter is based on a subset of the former, the Inventory being a master list of some 10,000 providers of family planning services. The Inventory yields data on institutions and their staffs as well as on the patients served.<sup>64</sup> The NRSFPS provides data on patients receiving services at most publicly funded family planning clinics, most Planned Parenthood-World Population affiliates, and some other voluntarily participating private and public organizations. The nature and size of these data bases are an important advantage over the NSFG, in which less than 10 percent of the respondents are expected to be users of public family planning programs. The incomplete coverage of the NRSFPS, however, is a major disadvantage. Like the National Inventory of Family Planning Services, the NRSFPS does not cover the many family planning services received by patients from physicians in private practice.

*Data needs.*—There is a wealth of data on contraceptive behavior of the married population of reproductive age relative to the data available for unmarried persons. Nearly all major fertility surveys have excluded the unmarried segment of the childbearing population. As noted in previous sections of this report, a substantial portion of fertility occurs out of wedlock. Little is known, however, about the control of fertility prior to marriage. The survey of females aged 15-19 reported on by Zelnick and Kantner includes data on the never-married and indicates a basic lack of knowledge about human reproduction and contraception by that segment of the population.<sup>65</sup> Most of the sexually active

had used contraception at some time, but the pattern of use was characterized as “casual” or irregular in relation to the risk of pregnancy. As mentioned earlier, a substantial proportion of first births are the result of conceptions occurring prior to marriage. A more complete analysis of the control of fertility requires data on all unmarried women at risk of pregnancy, their pregnancies, and the outcomes. The relative impact of contraception and induced abortion could then be better gauged.

Because the NSFG excludes never-married women who do not have children of their own living with them, there is a gap in the most likely potential source of data on fertility control. This gap prevents analyses of trends in contraceptive behavior among the never-married. It also restricts an understanding of how contraceptive knowledge, attitudes, and practice develop over the course of the reproductive cycle. Inclusion of the never-married along with the ever-married would greatly facilitate analysis of how use of contraception evolves and how unwanted fertility comes to be recognized and controlled.

Another major data gap concerns the relative extent to which induced abortion is used when contraception fails. Again, data on the never-married are important to the analysis. NSFG questions from an indirect form of questioning known as the randomized response—which provide group but not individual case data on induced abortion—do not permit the needed cross-classification of these methods of fertility control at the individual level. A direct abortion question is being introduced as an experiment in the 1976 NSFG. When available, the data should be analyzed in terms of the demographic impact of abortion. The related problem of access to contraceptive supplies and services should also be analyzed using the direct-approach abortion data.

### **Sterilization**

Sterilization is an effective method of contraception that is becoming increasingly popular because of its lack of long-term side effects and permanent freedom from risk of unwanted pregnancy. It has become the most popular method of fertility control among married couples with the wife between the ages of 30 and 44. Among younger wives, however, the method is much

less prevalent because of its irreversibility. Because of their age and the greater chance of marital dissolution, remarriage, and a related change in desired fertility, younger wives are more likely to avoid such a final solution. An additional drawback to sterilization is the small but real surgical risk. Such risks are less for male sterilization (vasectomy) than for the various female sterilizing operations, e.g., tubal ligation.

*Data sources and needed improvements.*—In an analysis of data from the 1965 and 1970 National Fertility Studies (NFS), Presser and Bumpass have documented the major shift that has occurred in both approval and use of sterilization for contraceptive purposes.<sup>66</sup> A majority of married couples of reproductive age now approve of both male and female sterilization. By 1970, moreover, 10 percent of the couples had been sterilized, nearly half by vasectomy. Preliminary data from the NSFG indicate a continuation of these trends toward increasing proportions of couples having sterilizing operations for contraceptive purposes. Because some sterilizing procedures are performed for a variety of purposes (e.g., hysterectomy may be performed for a health problem), it is important to distinguish between sterilizations for contraceptive and for noncontraceptive purposes. This distinction should be included in analyses of trends in sterilization so that the data can be useful for formulations of fertility policy.

Sterilization is a method of controlling the number but not the spacing of births. Until and unless research uncovers an attractive, easily reversible sterilizing procedure, other effective methods like oral contraceptives, the IUD (intrauterine device), and induced abortion will be used to control the spacing of births. Because such methods are more prevalent, sterilization may have had relatively little impact on the birth rate. Data from the 1970 NFS show that most sterilized couples had previously used highly effective contraceptive methods like the "pill" or IUD's. Hence, sterilization has probably represented a substitution of one effective method for another among substantial proportions of couples for whom unwanted births have already been minimized.

The NSFG will provide more data on sterilization as a contraceptive method. In order to

properly assess the impact of the method on fertility, it is important to include sterilization categories in tabulations and analyses of use of contraceptive methods. It is also important to cross-tabulate sterilization with methods previously used and reasons for changing methods. Because of racial and socioeconomic differentials in attitude toward and choice of sterilization (particularly of vasectomy) shown in the 1965 and 1970 NFS, analyses of the NSFG data should include these variables. Finally, data are needed on sources of contraceptive sterilization and on administrative, economic, or other institutional barriers to access to such services. The policies underlying such barriers, though formulated for other purposes, may have a latent effect on fertility.

### Abortion

Until recently most induced (as opposed to spontaneous) abortions performed in the United States were illegal. Thus data have been very scant with reference to the number of abortions, the characteristics of women having abortions, and the demographic effects on abortion. The liberalization of State laws governing abortions beginning in 1967, together with the January 22, 1973, U.S. Supreme Court "abortion on demand" decision, have generated a tremendous increase in the number of legal induced abortions in the Nation. The Supreme Court decision legalized abortions induced in the first trimester of pregnancy at the request of the pregnant woman and the concurrence of a licensed physician. This created the potential for a large accumulation of data. Available data, which are incomplete and imprecise, show that the number of reported legal induced abortions increased from less than 25,000 in 1969 to more than 615,000 in 1973.<sup>67</sup> It is important to gather and compile this kind of information at higher levels of reliability and with complete national coverage. The characteristics of persons having abortions are needed as well as the extent of abortions.

There is an obvious relationship between the extent of abortions and the rate of fertility, yet it is difficult to estimate precisely the extent to which abortion contributes to declining fertility. At one totally unrealistic extreme, 1 million

abortions in any given year would have been 1 million births were it not for the availability of abortion. At the other equally implausible extreme, perhaps these 1 million abortions would have taken place anyway through legal or illegal channels and irrespective of the number of births. Obviously, neither extreme is valid. Much more knowledge about abortions and about the psychological and sociological factors contributing to the decision to have an abortion is needed before a determination can be made of the effect of abortions on fertility.

As Tietze pointed out in his report to the Presidential Commission on Population Growth and the American Future:<sup>68</sup>

“. . . the initial demographic impact of liberalized abortion laws, including New York's law authorizing elective abortion, has been comparatively minor. A similar modest initial effect may be expected on a nationwide scale if restrictive abortion laws were to be struck down by the Supreme Court or repealed by legislation. The impact will almost certainly become greater over the years; but, neither its ultimate level, nor the speed at which this level will be attained, can be predicted.”

More recently, Tietze found that increased utilization of legal abortion, made possible by the liberalization of the law in 1970, accounted for 17,000-21,000 births averted, or about half of the decline in births, in New York City during 1971 and 1972.<sup>69</sup> Whatever the intensity of its effect, fertility is lower than it would be without liberalized abortion laws.

Induced abortion and the use of effective means of contraception have both facilitated declines in the Nation's birth rate. According to Tietze and Dawson, abortion and contraception have a common objective, the prevention of unwanted births. When societies and individuals are motivated to begin the effort to control their fertility, abortion and contraceptive use can rise simultaneously.<sup>70</sup> Later, if the contraceptives being used are effective, less reliance is placed on abortion. In any case, abortion is part of the overall package called “family limitation.” As such, better information is needed to ascertain its effect on fertility rates. Thus a number of related questions need answering.

1. How many women do not use contraceptives, or do not insist on their use by

males, primarily because of the availability of legal abortion? If abortion were not readily available, would they be more likely to rely on contraceptives? In other words, how many abortions result from the fact that some people consider them another method of birth control—another “contraceptive”?

2. Of all the induced abortions, how many would have resulted in spontaneous abortions anyway? The World Health Organization estimates that spontaneous abortions terminate between 15 and 20 percent of all pregnancies.<sup>71</sup> It is reasonable to assume that at least some of the pregnancies intentionally aborted would never have come to full term.
3. How many pregnant women who had legal abortions would have resorted to illegal abortions if the former were not available?
4. How many of the births that would have occurred if abortions were not performed would have resulted in neonatal deaths?

Such information must be gathered or estimated in order to gauge the relative role of abortion in the achievement of low fertility.<sup>72</sup>

*Data sources.*—Past surveys have been unreliable sources for estimating the incidence or prevalence of induced abortion (legal as well as illegal) in the United States. Campbell, in referring to the very low fertility of the 1920's and 1930's, concluded: “It seems probable that there was widespread resort to illegal abortion in these decades.”<sup>73</sup> Yet the actual extent can be inferred only indirectly.

More recently, estimates of the incidence of legal abortions have been made by the Center for Disease Control of the U.S. Public Health Service in its *Abortion Surveillance: 1973* report, in which it is stated: “This report summarizes information received from collaborators in state health departments, hospitals, and other pertinent sources.”<sup>67</sup> By definition, these data are limited. They are of variable quality and content. The Joint Program for the Study of Abortion (JPSA) has provided data on medical compli-

cations associated with legal abortions in the United States, based on a limited number of participating institutions in a few States.<sup>74</sup> A promising source of data is the question on abortion experience included in the 1973 NCHS National Survey of Family Growth. This is asked in an experimentally different manner—a randomized response technique. The additional direct-question approach to abortion introduced in the 1976 NSFG should permit comparisons and reliable estimates about the incidence of induced abortion in the 12 months preceding the interview.<sup>75</sup>

There now exists a comprehensive summary of almost all previous reports and studies on abortion both in the United States and elsewhere.<sup>76</sup> It can serve as a base for more indepth analysis of earlier studies to determine their value to the present needs. In addition, the numerous articles that have appeared in such journals as *Family Planning Perspectives*, based on New York City data, can serve as useful guides to help determine what national data are needed in the future.

*Data needs.*—Numerous recommendations have been made in the past. Perhaps repetition of some may be of value at this time. In 1970 a report of the U.S. National Committee on Vital and Health Statistics recognized the need for national reporting of induced abortion.<sup>1</sup>

Three years later, the Committee to Evaluate the National Center for Health Statistics stated as follows:

“A serious gap in the vital statistics reporting system is the lack of reporting of the abortion component of fetal deaths. The policy of the NCHS has been to collect and publish data only on fetal deaths with a gestation age of 20 weeks or more . . . .

“The growing importance of legal or therapeutic abortion as a determinant of fertility and the recent sharp changes in laws covering this area reinforce the need for collection and analysis of the vital records for such pregnancy terminations. The NCHS has lagged behind New York City and those other jurisdictions which have taken leadership in reporting in this field, analyzing the social and demographic characteristics of the women and reporting their receipt of medical care.

“As improved abortion reporting through the vital event registration system will require

the solution of difficult problems involving confidentiality and differences in legal reporting requirements by States and other jurisdictions, the path to adequate data will be difficult and lengthy. NCHS should continue to work with State and local vital registration officials to obtain implementation of necessary changes in the legal registration systems. Meanwhile, a way to produce better nationwide data is to develop supplemental national sample reporting programs by hospitals and other health service providers. The Center for Disease Control is experimenting with a system based on service reports from hospitals, which may serve as a basis for further NCHS development.”<sup>77</sup>

It is important to add that this same committee explicitly recommended that NCHS establish an abortion-reporting program as part of the vital statistics program. Yet the 1970 recommendations remain appropriate today. Indeed, since the Supreme Court decision, some of the objections to these recommendations have been eliminated. The 1972 recommendation that NCHS establish an abortion-reporting program as part of the vital statistics program has not yet reached the implementation stage and remains a basic recommendation of this report. At present the abortion data collection systems of very few States meet the reporting standards required by NCHS for other vital events. NCHS is now developing reporting standards for legal abortions and is recommending the adoption of a standard reporting form for the few States ready to join an abortion-reporting area.

The National Center for Health Statistics should consider publishing annual reports and the release of public-use data tapes derived from State data on abortion similar to those now available for fertility, mortality, marriage, and divorce. Each State should be encouraged to gather the necessary information from each woman having an abortion and compile the information. This information could include marital status, number of previous live births, number of previous abortions, race, age, religion, and education. In a hospital setting much of this information would be relatively easy to collect. More medical information could also be collected: type of procedure, possible aftereffects, etc. Together, these data would yield significant

information leading to better analyses of the relationships between abortion and fertility and between abortion and other demographic variables as well as improved evaluation of the various abortion techniques.

The recently developed U.S. Standard Report of Induced Termination of Pregnancy is endorsed as the recommended abortion-reporting form. The form provides demographic and medical information about the patient and the abortion without naming the patient. States that have not yet adopted that form or met the NCHS abortion-reporting standards are urged to proceed toward these goals while continuing to report abortion data to the Center for Disease Control. The ultimate objective, of course, is for all States to meet the NCHS criteria and to become part of the national vital statistics system through inclusion in a national abortion-reporting area.

Some of the questions raised above concerning the effect of abortion on fertility cannot be answered through vital statistics records systems alone. Funding should be made available for properly prepared surveys of the population at risk to allow a more complete understanding of the forces behind the decision to have an abortion. The National Survey of Family Growth, through use of its "blind" question on abortion, is another potential source of information. If this technique is proven successful, much national data could be derived that would complement the registration data provided by States.

All these recommendations, present and past, can be utilized to develop regular compilations of data on abortion for the entire Nation. These data are vital to a better understanding of

declining fertility rates in recent years. They are also vital to better understanding characteristics of the persons having abortions. Finally, there is need for data on attitudes regarding abortion. An attitude in favor of abortion does not necessarily coincide with actually having an abortion. Because an unwanted pregnancy can very quickly result in the rationalization of a person's ideals concerning abortion, attitudinal information for the general population could serve as guidelines toward the development of policies on both fertility and abortion.

### **Recommendations**

1. The National Center for Health Statistics should continue its collection of information on contraception, sterilization, and abortion through the National Survey of Family Growth. The NSFG has become the major source of data on these methods of fertility control, and the information is crucial to formulation of national policies related to fertility.
2. The National Inventory of Family Planning Services and the National Reporting System for Family Planning Services should be continued by NCHS. The data bases of these systems provide the large numbers of users of clinics needed for analysis and policy formulation and evaluation.
3. A national abortion-reporting area should be implemented by NCHS to obtain complete coverage of all States and fulfillment of NCHS reporting standards for abortions.

## C. RECOMMENDATIONS

A summary of the recommendations accorded highest priority appears in the "Highlights" section at the beginning of this report. Those were distilled from the following, more detailed list. The recommendations were developed from the preceding textual material and organized into three main classes: I. data collection systems, II. analysis, and III. methods of dissemination. Within each of these classes a distinction is made as to whether the recommendation is addressed primarily to: A. National Center for Health Statistics or B. Bureau of the Census. This distinction was made in order to facilitate implementation of the recommendations, which is largely the responsibility of the respective Government agencies.

### I. Data Collection Systems

#### A. National Center for Health Statistics should:

1. Continue its collection of information on contraception, sterilization, and abortion through the National Survey of Family Growth. The NSFG has become the major source of data on these methods of fertility control, and the information is crucial to formulation of national policies related to fertility.
2. Continue to collect data on number and timing of births by cohort and planning status and data on unplanned pregnancies and their outcomes (adding information from husbands) in the NSFG.
3. Through the NSFG collect data on the existence, stability, and effect on overall plans of strategies or preferences in birth timing and spacing.
4. Include a prospective design in the NSFG in order to provide data on change, evaluate retrospective data, and analyze the family building process, non-

familial roles of women, and wanted and unwanted children.

5. Sample all unmarried women, including those who have children not living with them, in the NSFG.
6. In the NSFG data for women, increase specificity of measurement for timing of employment, education, and fertility and add comparable data for men.
7. For all women, including the nonworking, collect data in the NSFG on child-care needs and practices.
8. Continue to collect data on education, occupation of husband and wife, and income in both the NSFG and the National Natality Followback Survey.
9. Design samples of the NSFG and the National Natality Followback Survey to enable detailed analyses of small subnational populations, ethnic groups, and place-of-residence categories.
10. Collect data on marital and pregnancy histories of mothers through the National Natality Followback Survey on a regular (biennial) cycle.
11. Work for complete coverage of all States in marriage- and divorce-registration areas and of States in birth-registration areas that report legitimacy.
12. Implement a national abortion-reporting area to obtain complete coverage of all States and fulfillment of NCHS reporting standards for abortions.
13. Continue the National Inventory of Family Planning Services and the National Reporting System for Family Planning Services. The data bases of these systems provide the large numbers of

users of clinics needed for analysis and policy formulation and evaluation.

**B. Bureau of the Census should:**

1. Retain on an annual basis the fertility supplement to the Current Population Survey in order to continue the time series on birth expectations.
2. Retain in the CPS and decennial censuses all questions on fertility (e.g., children ever born) and on marital history.
3. In the decennial census, ask additional questions on beginning and ending dates of first and second marriages and on total number of times married.

**II. Analysis**

**A. National Center for Health Statistics should:**

1. Develop interpretive analyses of fertility trends (recent and prospective changes), drawing on all pertinent sources. The requisite additional personnel and funds should be provided.
2. Develop new measures comparing order-specific components of period and cohort total fertility so that fertility trends may be better understood.
3. Develop new measures of birth timing in relation to completed family size.
4. Use a longitudinal design to compare children of wanted and unwanted births in terms of their personal, health, and social characteristics and to compare women who conceive premaritally with those who do not in terms of fertility behavior, socioeconomic, and other characteristics.
5. Analyze the information on religion in the NSFG to determine the importance of religious affili-

ation as an explanatory variable with respect to fertility.

6. Provide a significant amount of additional resources for inhouse fertility analysis and to contract for analytical fertility reports.

**B. Bureau of the Census should:**

1. Make efforts to fully exploit public-use data tapes for more refined analyses of the relationship between status of women and fertility.
2. Provide a significant amount of additional resources for inhouse fertility analysis and to contract for analytical reports.

**III. Methods of Dissemination**

**A. National Center for Health Statistics should:**

1. Publish a report on recent and prospective trends in fertility biennially. (See recommendation II-A-1.)
2. Release NSFG descriptive reports within 1 year of data collection, most analytic reports within 2 years, and public-use data tapes within 25 months.
3. Release National Natality Followback Survey public-use data tapes within 1 year of data collection.
4. Reduce delays in public release of printed reports and computer tape data from the NSFG, the National Natality Followback Survey, and the national vital statistics systems.

**B. Bureau of the Census should:**

1. Continue to produce a reasonably priced public-use data tape for the Current Population Survey of June (when the fertility supplement is added).
2. Reduce delays in public release of printed reports and computer tape data from the CPS.

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# APPENDIXES

## CONTENTS

I.	Data Collection Systems of the National Center for Health Statistics.....	44
	Basic Vital Statistics.....	44
	National Natality Followback Surveys.....	47
	National Survey of Family Growth.....	47
	National Reporting System for Family Planning Services.....	49
II.	Data Collection Systems of the Bureau of the Census .....	50
	Decennial Census .....	50
	Current Population Survey.....	50
III.	Questionnaires Relating to Fertility .....	52
	Sample Questionnaire, 1973 National Survey of Family Growth .....	52
	Sample Questionnaire, 1976 National Survey of Family Growth.....	100
	Questionnaire, June 1975 Current Population Survey.....	150
	Supplement to Questionnaire, June 1976 Current Population Survey.....	154

## APPENDIX FIGURE

I.	U.S. Standard Certificate of Live Birth .....	46
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## APPENDIX I

# DATA COLLECTION SYSTEMS OF THE NATIONAL CENTER FOR HEALTH STATISTICS

### Basic Vital Statistics

Basic vital statistics provided through the registration system come from records of live births, deaths, fetal deaths, marriages, and divorces or other dissolutions of marriages. Registration of these events is a local and State function, but uniform registration practices and use of the records for national statistics have been established over the years through cooperative agreements with the National Center for Health Statistics (NCHS) and predecessor agencies having a coordinating responsibility. The program was initiated in the 1800's. The present authority for the national program is Public Law 93-353, Section 306, 93d Congress (H.R. 11385), July 23, 1974, titled "Health Services Research, Health Statistics, and Medical Libraries Act of 1974."

The civil laws of every State provide for a continuous and permanent birth and fetal death registration system. In general, the local registrar of a town, city, county, or other locality collects the records of births and deaths occurring in the area; inspects, queries, and corrects if necessary; maintains a local copy, register, or index; and transmits the records to the State health department. There the vital statistics office inspects the records for promptness of filing and for completeness and consistency of information; queries if necessary; numbers, indexes, and processes the statistical information for State and local use; and binds the records for permanent reference and safekeeping. Microfilm copies of individual records or machine-readable data are transmitted to NCHS for use in compiling national vital statistics.

The system for collecting national data on marriages and divorces is not as well developed as the system for births and deaths is. All States have marriage and divorce laws, but as of January 1, 1975, only 47 States had a central file of marriage records and 46 States had a central file of divorce records. Forty-one States and the District of Columbia had been admitted to the marriage-registration area (MRA) and 29 States to the divorce-registration area (DRA). It is these registration-area States that provide microfilm copies of their marriage and divorce certificates or machine-readable data from which NCHS derives data on characteristics of marriages and divorces and the persons involved. Only counts of events are provided by States that have central files but are not in the registration areas. For States without central registration, counts are collected from individual counties either by the State vital statistics office or by NCHS. Some counties report only marriage licences issued and divorce petitions filed rather than marriages performed and divorces granted.

Provisional vital statistics are collected and published monthly and summarized annually. They are derived from monthly reports of the States to NCHS, giving the number of certificates accepted by the State for filing between two dates a month apart, without regard to date of occurrence. These reports to NCHS are to be mailed on or before the 25th of the month following the data month. They are the source of the provisional vital statistics published in the *Monthly Vital Statistics Report*.

Final counts and detailed national statistics on births, deaths, and fetal deaths are obtained

from copies of the original certificates prepared at the local level, but final counts of marriages (by month and county) and divorces (by county) are collected annually by NCHS on special forms.

To promote uniformity in the statistical information collected from States and local areas for national purposes, NCHS recommends standard certificates of births, deaths, marriages, and divorces. The standard certificates are developed in cooperation with the States, local areas, and the Federal agency, taking into account the needs and problems expressed by the major providers and users of the data. The standard certificates are reviewed about every 10 years to assure that they meet, to the fullest extent feasible, current needs and legal records and are adequate sources of vital and health statistics. Although the use of standard certificates by States is voluntary, and the form and content of the certificates vary according to the laws of each State, the certificates in most States follow closely the standard certificates. The Standard Certificate of Live Birth (1968 revision) is shown in figure I. The States are scheduled to adopt new standard certificates in 1978. Revisions are expected to be minor.

Machine-readable data are accepted from States participating in the Cooperative Health Statistics System (CHSS). Data from all other States are coded and entered on magnetic tape either by NCHS or under reimbursable agreement with the Bureau of the Census. Currently, mortality data, both demographic and medical, are processed by the Data Preparation Branch, Division of Operations; natality, marriage, and divorce data are processed under contract with the Bureau of the Census.

For States not participating in CHSS, a 50-percent sample of live births is processed by selecting records with image numbers terminating in an even number. For CHSS States, the entire birth file is utilized.

In general, all States in the marriage- and divorce-registration areas that do not submit data under CHSS send microfilm copies of all their marriage or divorce certificates to NCHS, where a sample of the records is selected and processed.

Vital statistics data reach the public through the *Monthly Vital Statistics Report* (MVSR),

supplements to the MVSR, *Vital Statistics of the United States* (bound volumes issued annually), microdata tapes (issued annually), and *Vital and Health Statistics* series reports and special reports (issued on an irregular basis). Unpublished tabulations are available upon request.

MVSR publications containing provisional monthly counts are published within 60 days following the end of the data month; advance supplements to the MVSR releasing final annual statistics are published within 12 months of the data year; data tapes and unpublished tabulations are released at the same time as these advance MVSR supplements and have a corresponding lag; series and special reports are issued as resources permit; and the annual bound volumes are expected to soon be distributed with no more than a 1.5-year lag.

NCHS policy requires that data not be released in a manner that will in any way compromise the confidentiality guaranteed the respondents who supplied the original data. Names and addresses for vital records are not coded and never appear on data tapes or tabulations, certificate numbers are never released without written permission from the States whose records are involved, and data tapes including data from localities having less than 250,000 population are classified to reflect population size but do not reveal specific geographic names.

Vital statistics data are collected, processed, and made available for public use. In addition to their use in fertility-related policy matters, the data serve a wide variety of purposes. Vital statistics are used in making population estimates and projections; in assessing the health of the U.S. population; in pinpointing health problems; in measuring progress made by national health programs; in epidemiological studies; in marketing research; in demographic, sociological, and economic studies; in studies of the family; and in numerous and varied other aspects of research aimed at understanding our society and its problems and progress.

Among the principal users of the data are parts of the Public Health Service, such as the Center for Disease Control, the Food and Drug Administration, and the National Institutes of Health; other Federal agencies, such as the Bureau of Labor Statistics and Departments of

U.S. STANDARD  
CERTIFICATE OF LIVE BIRTH

DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE—PUBLIC HEALTH SERVICE—NATIONAL CENTER FOR HEALTH STATISTICS  
 1968 REVISION  
 PHIS-796—REV. 1-68  
 MULTIPLE BIRTHS  
 ENTER STATE FILE  
 NUMBER FOR  
 MATE(S)  
 LIVE BIRTH(S)  
 FETAL DEATH(S)

TYPE, OR PRINT IN  
PERMANENT INK  
SEE HANDBOOK FOR  
INSTRUCTIONS

LOCAL FILE NUMBER		BIRTH NUMBER	
CHILD—NAME FIRST MIDDLE LAST			DATE OF BIRTH (MONTH, DAY, YEAR)
1. SEX			2a. HOUR
3. THIS BIRTH—SINGLE, TWIN, TRIPLET, ETC. (SPECIFY)		4. IF NOT SINGLE BIRTH—BORN FIRST, SECOND, THIRD, ETC. (SPECIFY)	
5a. COUNTY OF BIRTH		5b. M.	
3. CITY, TOWN, OR LOCATION OF BIRTH		5c. INSIDE CITY LIMITS (SPECIFY YES OR NO)	5d. HOSPITAL—NAME (IF NOT IN HOSPITAL, GIVE STREET AND NUMBER)
MOTHER—MAIDEN NAME FIRST MIDDLE LAST			AGE (AT TIME OF THIS BIRTH)
6a. RESIDENCE—STATE			6b. STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY)
7a. COUNTY		7c. CITY, TOWN, OR LOCATION	6c. STREET AND NUMBER
7b. INSIDE CITY LIMITS (SPECIFY YES OR NO)		7d. AGE (AT TIME OF THIS BIRTH)	7e. STATE OF BIRTH (IF NOT IN U.S.A., NAME COUNTRY)
FATHER—NAME FIRST MIDDLE LAST			8b. RELATION TO CHILD
8a. INFORMANT			9b. DATE RECEIVED BY LOCAL REGISTRAR
9a. I CERTIFY THAT THE ABOVE NAMED CHILD WAS BORN ALIVE AT THE PLACE AND TIME AND ON THE DATE STATED ABOVE.			10c. ATTENDANT—M.D., D.O., MIDWIFE, OTHER (SPECIFY)
10a. SIGNATURE		10b. DATE SIGNED (MONTH, DAY, YEAR)	
CERTIFIER—NAME (TYPE OR PRINT)		10c. MAILING ADDRESS (STREET OR R.F.D. NO., CITY OR TOWN, STATE, ZIP)	
10d. REGISTRAR—SIGNATURE			11b. MONTH DAY YEAR
11a.			

CONFIDENTIAL INFORMATION FOR MEDICAL AND HEALTH USE ONLY

RACE—FATHER		EDUCATION—SPECIFY HIGHEST GRADE COMPLETED		PREVIOUS DELIVERIES—HOW MANY OTHER CHILDREN		
WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY)		ELEMENTARY (0, 1, 2, 3, 4, ... OR 8)	HIGH SCHOOL (1, 2, 3, OR 4)	COLLEGE (1, 2, 3, 4, OR 5 +)	ARE NOW LIVING	WERE BORN ALIVE—NOW DEAD
12.		13.		14a.		14c. WERE BORN DEAD (FETAL DEATH AT ANY TIME AFTER CONCEPTION)
RACE—MOTHER		EDUCATION—SPECIFY HIGHEST GRADE COMPLETED		DATE OF LAST LIVE BIRTH		DATE OF LAST FETAL DEATH
WHITE, NEGRO, AMERICAN INDIAN, ETC. (SPECIFY)		ELEMENTARY (0, 1, 2, 3, 4, ... OR 8)	HIGH SCHOOL (1, 2, 3, OR 4)	COLLEGE (1, 2, 3, 4, OR 5 +)	MONTH DAY YEAR	MONTH DAY YEAR
15.		16.		17a.		17b.
18. DATE LAST NORMAL MENSES BEGAN MONTH DAY YEAR		19a. MONTH OF PREGNANCY PRENATAL CARE BEGAN FIRST, SECOND, THIRD, ETC. (SPECIFY)		19b. PRENATAL VISITS TOTAL NUMBER (IF NONE, SO STATE)		20. LEGITIMATE (SPECIFY YES OR NO)
18.		19a.		19b.		21. BIRTH WEIGHT
22. COMPLICATIONS RELATED TO PREGNANCY (DESCRIBE OR WRITE "NONE")				23. BIRTH INJURIES TO CHILD (DESCRIBE OR WRITE "NONE")		
24. COMPLICATIONS NOT RELATED TO PREGNANCY (DESCRIBE OR WRITE "NONE")				25. CONGENITAL MALFORMATIONS OR ANOMALIES OF CHILD (DESCRIBE OR WRITE "NONE")		
26. COMPLICATIONS OF LABOR (DESCRIBE OR WRITE "NONE")						

Agriculture, Defense, and Transportation; members of the U.S. Congress; State and city governments; public and private research institutions; life insurance companies; faculty and students of universities; newspaper reporters and feature writers; and physicians and workers in health information and education groups.

### **National Natality Followback Surveys**

The national followback surveys were initiated in 1961. Mortality surveys were conducted annually from 1961 through 1968 and natality surveys from 1963 through 1969 and again in 1972. A National Infant Mortality Survey was conducted for 1964-66. These surveys are based on samples of registered births and deaths occurring during a calendar year.

The national followback surveys extend for statistical purposes the range of items which are normally included on the vital records. They provide national estimates of births and deaths by characteristics not available from the vital registration system. They also serve as a basis for evaluating the quality of information reported on the vital records.

The procedures for conducting the national followback surveys involve utilizing the national system for the registration of vital events. The birth or death record serves as the sampling unit, and samples of these units are selected from a frame of records representing births or deaths registered during a given period of time.

The sampling frame for the National Natality Surveys is the file of microfilm birth certificates received each month by NCHS from the birth-registration areas of the United States. As a general rule, each registration area assigns a number to each certificate prior to or during filming of the birth record. Each 1,000 consecutive images constitutes a primary sampling unit. From each 1,000 records, 1 record is chosen at random. Thus a sample of 1 out of every 1,000 births is selected from the records for each registration area.

Data for all the followback surveys were collected primarily by mail. In the natality surveys, addresses were taken from the birth certificate, and questionnaires were sent to the mother, the physician who delivered the baby, and the medical facility where the baby was

born. After all methods of obtaining complete questionnaires had been exhausted, the data were edited, coded, and transcribed onto punch cards. Basic range edits were made to eliminate punching errors, and the cards were then used as input for magnetic tape. Computer processing included consistency checks, interval edits, estimation or assignment of weights, and imputation of missing data.

The followback survey data have been released as they became available through the *Vital and Health Statistics* series reports, supplements to the *Monthly Vital Statistics Report*, and microdata tapes.

Data provided through the natality surveys are used by agencies and individuals responsible for or studying maternal and child health care programs and by researchers and others studying social and demographic issues. They have provided data on such subjects as unwanted pregnancies, prenatal and postpartum care, health status of mother and infant at delivery, health insurance coverage for medical bills related to pregnancies, illegitimacy, and other related subjects.

### **National Survey of Family Growth**

The National Survey of Family Growth (NSFG) is a multipurpose statistical survey that provides a wide range of information serving needs of persons and organizations concerned with the dynamics of population change, family planning, and maternal and child health. Developmental funds and necessary positions were provided for establishing the NSFG in NCHS in fiscal year 1971, and full funding for the program was provided in the budget for fiscal year 1972 and subsequent years. Fieldwork for 1973 was begun in July 1973 and completed in February 1974.

The NSFG is designed primarily to produce data on factors influencing trends and differentials in fertility, family planning practices of the population, sources from which family planning advice and services are obtained, effectiveness and acceptability of the various methods of family planning, and those aspects of maternal and child health that are most directly related to fertility and family planning. The survey is based on personal interviews with women in child-

bearing ages selected from a nationwide area probability sample of households.

The NSFG is based upon a cross-sectional sample of women in the conterminous United States 15-44 years of age who are or have been married or who have never been married but have children of their own living with them in the household. Excluded from the sample are women living in group quarters and never-married women without children. The design is a multistage area probability sample.

In the first (or 1973) survey, the first-stage primary sampling units (PSU's) included 101 standard metropolitan statistical areas, counties, parts of counties, and independent cities. Secondary sampling units consisted of enumeration districts or block groups within selected PSU's. Where feasible, secondary units were subdivided into third-stage listing units with a probability of selection proportional to estimated housing. In the fourth stage, housing units within the third-stage listing units were chosen by systematic sampling. A fifth level of sampling among eligible women within a household was required to obtain one and only one interview in each household with at least one eligible respondent. To assure sufficient precision for presenting intragroup comparisons on various fertility variables, the black population was oversampled. The overall sample design called for 10,000 completed interviews, comprising approximately 3,600 black women and 6,400 women of white and other racial groups. The provisional estimate of the response rate is an overall 83 percent, with approximately 79 percent among eligible black women and 85 percent among eligible women of white and other races. The final number of interviews was 9,800, comprising 3,859 black respondents and 5,941 white and other respondents.

The NSFG is a continuing program of NCHS based upon periodic cycles of data collection. Data collection is done under contract with private survey organizations which have capability in the design and execution of national probability samples and have a national field interviewing staff. In the 1973 survey, interviews were conducted with 9,800 eligible women from July 1, 1973, into February 1974. Fieldwork for the 1976 survey was conducted from January through September 1976.

The questionnaires for the NSFG are designed by the Family Growth Survey Branch of the Division of Vital Statistics and cover such topical areas as marital history, detailed pregnancy history, fecundity, expected or intended future births, pregnancy planning practices and utilization of specific contraceptive methods, source and financing of family planning services, and a broad range of socioeconomic and demographic characteristics. The 1973 questionnaire for currently married women is reproduced in appendix III. A similar questionnaire not shown here was used for post-married women. In the 1973 survey the average length of an interview was 73 minutes. In 1976 the average time had been reduced to 55 minutes in the pretest. The 1976 questionnaire for the currently married is reproduced in appendix III. Again, a similar questionnaire was administered to the post-married.

It is anticipated that once the basic survey instrument and procedures are well established, subsamples of respondents will be selected as panels for longitudinal followup interviews. This procedure will provide prospective data and the opportunity to "verify" them in relation to actual subsequent experience.

For 1973, initial preparation of the data tape was accomplished under a reimbursable agreement with the U.S. Bureau of the Census. NCHS is now processing the data through all stages required to edit, impute, recode, and weight the data records to be used for input to table production. For 1976, preparation of edited, unweighted data tapes was performed by the contractor for the fieldwork. NCHS is again responsible for producing the final imputed, recoded, and weighted data records.

Tabulation specifications and programs are prepared in NCHS, except in the case of certain specific analytical reports that are prepared under contract by private researchers. NCHS establishes the scope and specifications for these contracted reports and releases them in its *Vital and Health Statistics* series.

The publication program for the NSFG includes: (1) advanced reports in the form of supplements to the MVSR, (2) methodological reports and indepth substantive analyses to be presented in one of the *Vital and Health Statistics* series, and (3) a public-use tape. Publications

from the 1973 survey were scheduled for release between fall 1975 and the end of 1976. It is anticipated that the public-use tape for 1973 will be available early in 1977. This schedule is substantially longer after the close of fieldwork than is planned for future cycles due to the sizable amount of developmental work in the 1973 survey.

### National Reporting System for Family Planning Services

The National Reporting System for Family Planning Services (NRSFPS) is an ongoing reporting system to collect data on the number and characteristics of persons receiving family planning services, the number and types of visits made to clinics, and the number and types of services provided. In addition, the system collects data about clinics and projects through which the patients are served. The projects that participate in NRSFPS include both federally-funded and non-federally-funded family planning projects.

NRSFPS was developed in two stages. An interim reporting system was operated by NCHS from May 1969 through December 1971. During 1971 NCHS revised and improved the interim system and thus developed NRSFPS.

Participation in NRSFPS is limited to clinics that provide family planning services. It involves the completion of a report form (Clinic Visit Record for Family Planning Services) for each patient visit at which family planning services are provided except those visits the sole purpose of which is to pick up contraceptive supplies. The completed forms are then sent to the NCHS contractor either weekly or biweekly depending on the patient load at each clinic.

The form, which contains 18 items, is used to collect social, demographic, and family planning service information. The form also contains a section for agency use only. This section greatly increases the flexibility of NRSFPS since it allows the participating agencies and clinics to

obtain information relevant to their specific operations but not required for the national data system.

All completed forms are transmitted to the processing firm under contract to NCHS. A typing optical-character-recognition input system is used to convert recorded patient data to magnetic tape.

Since there were some established automated systems in existence when NRSFPS was developed, NCHS accepts data from these systems on either magnetic tape or punched cards according to specifications established by NCHS.

A variety of computer-generated tables are produced by the reporting system as follows:

- (1) *Monthly*.—Tabulations showing number of clinics and number of patients aggregated to regional levels.
- (2) *Quarterly*.—Number of patients and type of service aggregated at the agency, State, regional, and national levels.
- (3) *Annually*.—Demographic and social characteristics of patients for the United States, regions, and States.

In addition to the regular tabulations, special tabulations may be obtained from NRSFPS. Agencies desiring such tabulations submit a written request to NCHS stating what information is desired and the purpose for which this information will be used. NCHS reviews the request with regard to any confidentiality implications and the feasibility of compliance. Further, data tapes are available for public distribution beginning with calendar year 1971 and will be available for subsequent years.

The primary users of the data are the clinics that provide the data, project directors, Planned Parenthood-World Population and their affiliates, DHEW, DHEW regional directors, State maternal and child health directors, the Bureau of Community Health Services, and State departments of health.



## APPENDIX II

# DATA COLLECTION SYSTEMS OF THE BUREAU OF THE CENSUS

The U.S. Bureau of the Census collects data concerning the fertility of American women from a sample of the female population in the decennial census and in a series of surveys which have periodically supplemented the monthly Current Population Survey.

### Decennial Census

In the censuses of 1890, 1910, 1940, 1950, 1960, and 1970 samples of women were asked how many children they had ever borne. The question on number of children ever born, which is a cumulative fertility measure, is the only direct question regarding fertility that has ever been asked in the decennial censuses. However, scholars and researchers have developed various techniques for estimating current period fertility, based principally on the number of children under 3 or under 5 years old who are identified as living with their mothers. Prior to 1970, only women who had ever been married were asked to report on numbers of children ever born. In 1970 the item was extended to single women as well.

The sample size for the census question on children ever born has varied over time. In 1970 this question was asked of 20 percent of the population. In 1960 the item was on the 25-percent sample. Most published tabulations from the 1960 and 1970 censuses, however, are from smaller samples. In the censuses prior to 1960 the sample sizes have usually been 5 percent or less, with the exception of the 1910 census, where the sample was approximately 9 percent.

In Census Bureau publications and in the public-use samples from the 1960 and 1970 censuses, other data from census schedules are

available for purposes of cross-classifying numbers and rates of children ever born. Chief among these are race, marital status, whether married more than once, age at census, age at first marriage, family income, husband's income for the calendar year preceding the date of the census, years of school completed, occupation of employed husband, and labor-force status of women.

Census Bureau publication of fertility data from the 1960 and 1970 decennial censuses includes some limited tabulations in Chapter C of the Volume I reports, *Characteristics of the Population* for the respective years. More detailed data were presented in a series of Subject Reports. Three Subject Reports were published from the 1960 census: PC(2)-3A, *Women by Number of Children Ever Born*; PC(2)-3B, *Childspacing*; and PC(2)-3C, *Women by Children Under 5 Years Old*. The 1970 census Subject Reports on fertility included PC(2)-3A, *Women by Number of Children Ever Born*, and PC(2)-3B, *Childspacing and Current Fertility*. In addition to the published reports, public-use samples of basic household and person records from the censuses of 1960 and 1970 were made available on magnetic tape. Computer-tape publication includes a sample from the 1970 census with special recodes which facilitate the study of child spacing and period fertility.

### Current Population Survey

The Current Population Survey (CPS) has periodically served as a vehicle for collecting information on children ever born, marital and fertility histories, and expectations of future

births. Since 1971 the June survey has been used for this purpose annually. In addition, the 1967 Survey of Economic Opportunity was used to collect data on marital and fertility histories and birth expectations.

Specifically, in August 1959, June 1971, and June 1975, data were collected on marital and fertility histories. The 1975 questionnaire is reproduced in appendix III. The June surveys of 1972-74 collected data on both numbers of children ever born and expectations for future births. Information on birth expectations was also collected in the 1971 and 1975 surveys mentioned above. Typical pages of the fertility supplement to the CPS questionnaire for June 1976 are also shown in appendix III.

In 1975 the sample for the CPS contained about 55,000 households, as compared with 40,000 in 1965. Vacancies and various types of noninterview situations resulted in interviews being taken in only approximately 47,000 households in 1975. In 1976 the sample was expanded to 68,000 households, of which about 55,000 were interviewed. The primary purpose of the CPS is to collect employment statistics for the Bureau of Labor Statistics, although supplemental information on various topics of interest are collected almost every month.

When questions on marital and fertility histories are included, statistics are available on

cumulative numbers of children born to date, spacing of births in terms of the mother's age and date of first marriage, spacing of births between one order and the next, age at completion of childbearing, and median age at first marriage and births. Birth expectations yield statistics on the number of children expected in the next 5 years and in all future years and on the timing of the next expected birth. In combination with data on children ever born to date, data on birth expectations provide information on expected lifetime fertility.

The basic demographic data collected in the CPS are available for use in analyzing the fertility statistics. These data include age, race, marital status, age at first marriage, labor force participation, family income, occupation of husband, and years of school completed.

Official publication of data from the CPS (and from the Survey of Economic Opportunity) is in the *Current Population Reports*, Series P-20. For additional information regarding fertility-related data collected by the Bureau of the Census, write or telephone:

Fertility Statistics Branch  
Population Division  
U.S. Bureau of the Census  
Washington, D.C. 20233  
Tel. (301) 763-5303



APPENDIX III

QUESTIONNAIRES RELATING TO FERTILITY

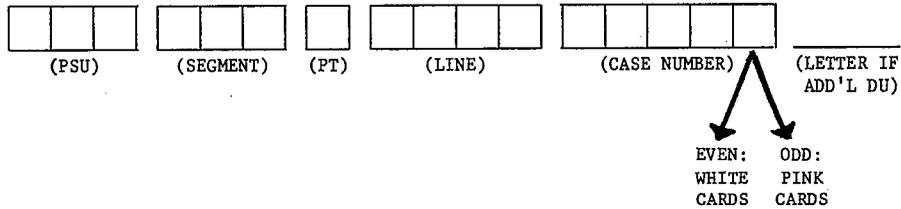
Sample Questionnaire, 1973 National Survey of Family Growth

Survey 4604  
July, 1973

OMB No. 68-S72170  
Expires: April 30, 1974

Collected for the National  
Center for Health Statistics

NATIONAL OPINION RESEARCH CENTER  
University of Chicago



NATIONAL SURVEY OF FAMILY GROWTH

CURRENTLY - MARRIED QUESTIONNAIRE

NOTICE: All information which would permit identification of any individual will be held in strict confidence, will be used only by persons engaged in and for the purpose of the survey, and will not be disclosed or released to others for any purpose, as in accordance with Section 305(a) of the Public Health Service Act, Section 1.103(a) of the Public Health Service Regulations [42 CFR 1.103(a)] and under Public Health Service Delegation of Authority Number 31.

TIME: _____	AM
	PM

SECTION I

10 11 12

13

We hear a lot of talk these days about the birth rate and the number of babies being born. So, to begin with, we are asking women about the number of children people have.

1. What do you think is the ideal number of children for the average American family today?

14 15

NUMBER OR RANGE

There is no ideal number . . . . . 97

Depends, God's will, don't know, etc. (ASK A) . 98

A. IF DEPENDS, ETC.: Many people feel that way, but still they have some idea. As things are now for the average American family, how many children would you say is the ideal number?

16 17

NUMBER OR RANGE

There is no ideal number . . 97

Depends, God's will, don't know, etc. . . . . 98

2. Before you and Mr. (NAME OF PRESENT HUSBAND) were married, did the two of you talk about the number of children you would like to have together?

18

Yes . . . . . 1

19

No . . . . . (SKIP TO Q. 4) . . . . . 2

Don't know, don't remember . (SKIP TO Q. 4) . 8

Volunteered either R or husband sterile (SKIP TO Q. 5)

3. Did you agree or disagree on a particular number of children at that time?

Agree . . . (ASK A) . . . . . 1

20

Disagree . (ASK B AND C) . . . . . 2

One or both undecided . (ASK D). 3

IF AGREE:

A. How many was that? \_\_\_\_\_ (SKIP TO Q. 5) 21 22

NUMBER OR RANGE

IF DISAGREE:

B. How many did he want? \_\_\_\_\_ 23 24

NUMBER OR RANGE

C. How many did you want? \_\_\_\_\_ (SKIP TO Q. 5) 25 26

NUMBER OR RANGE

IF ONE OR BOTH UNDECIDED:

D. Did you have a number in mind, did your husband have a number in mind, or were you both undecided?

Wife had number . [ASK (1)] . . . 1

27

Husband had number [ASK (1)] . . . 2

Both undecided . (SKIP TO Q. 5) . . 3

(1) How many did (you/he) want? \_\_\_\_\_ (SKIP TO Q. 5) 28 29

NUMBER OR RANGE

4. Well, before you were married to Mr. (NAME OF PRESENT HUSBAND), did you have an idea of the number of children you would like to have?

Yes . . (ASK A) . . . . . 1

30

No . . . . . 2

A. IF YES: How many was that? \_\_\_\_\_ 31 32

NUMBER OR RANGE

5. How many babies were born to your mother altogether, including any who died after birth?

(Number of Babies Born)

33 34

IF VOLUNTEERED: Respondent adopted . . . . 97

6. When were you born?

(Month)	(Day)	(Year)		

35 40

**7. WHITE CARDS ONLY**

In what month and year was your mother born?

(Month)	(Year)		

41 42

Don't know . . . 98

8. And Mr. (NAME OF PRESENT HUSBAND). How many babies were born to his mother altogether, including any who died after birth?

(Number of Babies Born)

43 44

IF VOLUNTEERED: Husband adopted . . . . . 97

9. When was your husband born?

(Month)	(Day)	(Year)	

45 50

10. Have you ever been married before?

Yes . . (ASK A) . 1 } RECALL 51  
 No . . . . . 2 } CHART (A)

A. IF YES: Including your present marriage, how many times have you been married?

(Number of Times)

52

11. When were you and Mr. (NAME OF PRESENT HUSBAND) married?

(Month)	(Day)	(Year)	

53 58

IF R MARRIED ONLY ONCE: YEAR ON RECALL CHART (B); CHECK  IF INFORMAL UNION 59  
 AND SKIP TO SEC. II, P. 4.

ASK Q'S 12-15 FOR EACH PREVIOUS MARRIAGE BEFORE GOING ON TO NEXT MARRIAGE. 60 72/R

12. <u>IF MARRIED MORE THAN ONCE:</u> When were you married the (1st/2nd/3rd, etc.) time? CHECK BOX BELOW DATE IF INFORMAL UNION	13. How did that marriage end? (READ CATEGORY IF NECESSARY)			14. <u>IF DIVORCE OR ANNULMENT:</u>		15. <u>IF DIVORCE, ANNULMENT, OR SEPARATION:</u>																					
	Di- vorce/ Annul- ment	Separ- ation (SKIP TO Q.15)	Death of Hus- band	What was the date of your (divorce/ annulment)?	When did your (1st/ 2nd/ etc.) husband die?	When did you and your (1st/2nd/ etc.) husband stop living together?																					
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(MONTH)	(YEAR)																										
50 53																											
(MONTH)	(YEAR)																										
54 57																											

IF MORE THAN FOUR MARRIAGES, GO TO CONTINUATION BOOKLET, PAGE 3.

Q's 16 & 17 OMITTED.

RECALL CHART

- |     |                              |  |            |  |  |
|-----|------------------------------|--|------------|--|--|
| (A) | Married more than once?      | Yes . . . 1  | No . . . 2 |  |  |
| (B) | Year first married           | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> |            |  |  |
|     |                              |  |            |  |  |
| (C) | Number of live births        | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> |            |  |  |
|     |                              |  |            |  |  |
| (D) | Children in household?       | Yes . . . 1  | No . . . 2 |  |  |
| (E) | Currently pregnant?          | Yes . . . 1  | No . . . 2 |  |  |
| (F) | Ever pregnant?               | Yes . . . 1  | No . . . 2 |  |  |
| (G) | Year sterile or<br>menopause | <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> |            |  |  |
|     |                              |  |            |  |  |
| (H) | Currently using method?      | Yes . . . 1  | No . . . 2 |  |  |

		<u>Current</u>	<u>Past</u>
A.	Pill . . . . .	1	2
B.	Douche . . . . .	1	2
C.	Foam . . . . .	1	2
D.	Jelly, Cream, Sup. . . . .	1	2
E.	IUD . . . . .	1	2
F.	Condom, Rubber . . . . .	1	2
(I) G.	Diaphragm . . . . .	1	2
H.	Diaphragm & Jelly . . . . .	1	2
J.	Rhythm-calendar . . . . .	1	2
K.	Rhythm-temperature . . . . .	1	2
L.	Not having intercourse to avoid pregnancy- abstinence . . . . .	1	2
M.	Withdrawal . . . . .	1	2
N.	Sterile-wife . . . . .	1	2
P.	Sterile-husband . . . . .	1	2
S.	Abortion . . . . .	1	2
W.	Other . . . . .	1	2

--BIRTH AND PREGNANCY RECORD--

6 7 10 15 16 17 18

OFFICE USE ONLY	Y (FROM Q. 19A) BIRTH DATE OF CHILD			Z (FROM Q. 19B) NAME OF CHILD (FROM Q'S 24-26)		
	PREGNANCY ENDED			Preg. Loss?		# Months Pregnant
	Month	Day	Year	Yes	No	
				1	2	
				1	///	
				1	///	
FIRST CHILD						
				1	2	
				1	///	
				1	///	
SECOND CHILD						
				1	2	
				1	///	
THIRD CHILD						
				1	2	
				1	///	
FOURTH CHILD						
				1	2	
				1	///	
FIFTH CHILD						
				1	2	
				1	///	
SIXTH CHILD						
				1	2	
				1	///	
SEVENTH CHILD						
				1	2	
				1	///	
EIGHTH CHILD						
				1	2	
				1	///	
NINTH CHILD						
				1	2	
				1	///	
CP				CURRENT PREGNANCY		

DRAW A WAVY LINE JUST ABOVE FIRST PREGNANCY ENDING AFTER JUNE 30, 1970.

SECTION II

In a study of family growth in this country, one of the most important things is knowing some basic facts about pregnancies and births that women have.

18. Have you had a baby born to you at any time? Yes . . . (ASK A) . . . . 1 10  
 No . (SKIP TO Q. 21) . . . 2

A. IF YES: Altogether, how many babies have you had born to you, including any who died very young? (Number of live births)   Recall Chart **C**

19. Now I'd like to get some information about (each of) your (baby/babies).

(ASK A-F FOR EACH LIVE BIRTH.)

	FIRST CHILD	SECOND CHILD	THIRD CHILD
A. When was your (first, second, etc.) child born? (ENTER DATE IN COL. Y OF BIRTH & PREG. RECORD BETWEEN HEAVY LINES.)			
B. What did you name the baby? (ENTER IN COL. Z OF BIRTH & PREG. RECORD NEXT TO DATE OF BIRTH.)			
(ENTER C-F IN CHILD COLS. TO RIGHT)			
C. Was that baby a boy or a girl?	Boy Girl 1 2	Boy Girl 1 2	Boy Girl 1 2
D. How much did (CHILD) weigh at birth?	Lb ___ Oz ___	Lb ___ Oz ___	Lb ___ Oz ___
<u>IF DON'T KNOW TO D:</u>	More . . . . 1 5½ or less . 2 Don't know . 8	More . . . . 1 5½ or less . 2 Don't know . 8	More . . . . 1 5½ or less . 2 Don't know . 8
E. <u>IF NOT LISTED IN HOUSEHOLD, ASK:</u>			
I do not have (CHILD) listed in the household. Is (he/she) still living?	Yes[ASK(1)]. 1 No [ASK(4)]. 2	Yes[ASK(1)]. 1 No [ASK(4)]. 2	Yes[ASK(1)]. 1 No [ASK(4)]. 2
<u>IF YES, ASK:</u>			
(1) Is this where (CHILD) usually lives or does (he/she) live somewhere else most of the time?	Lives here . 1 Lives some-where else. 2 [ASK(2)&(3)]	Lives here . 1 Lives some-where else. 2 [ASK(2)&(3)]	Lives here . 1 Lives some-where else. 2 [ASK(2)&(3)]
(2) When did (CHILD) last live with you regularly?	<input type="text"/> <input type="text"/> Month Year	<input type="text"/> <input type="text"/> Month Year	<input type="text"/> <input type="text"/> Month Year
(3) Where is (he/she) living now?	(His/her) own household . . . . 1 Long-term care institution . . . . 2 College/away at school . . . . 3 With other relatives . . . . 4 Other (SPECIFY) . . . . 5	(His/her) own household . . . . 1 Long-term care institution . . . . 2 College/away at school . . . . 3 With other relatives . . . . 4 Other (SPECIFY) . . . . 5	(His/her) own household . . . . 1 Long-term care institution . . . . 2 College/away at school . . . . 3 With other relatives . . . . 4 Other (SPECIFY) . . . . 5
<u>IF NO, ASK:</u>			
(4) When did (CHILD) die?	<input type="text"/> <input type="text"/> Month Year	<input type="text"/> <input type="text"/> Month Year	<input type="text"/> <input type="text"/> Month Year
F. <u>IF (CHILD) LIVED WITH MOTHER AT LEAST TWO MONTHS, ASK:</u>			
(1) When (CHILD) was an infant, did you breastfeed (him/her) at all?	Yes[ASK(2)]. 1 No . . . . 2	Yes[ASK(2)]. 1 No . . . . 2	Yes[ASK(2)]. 1 No . . . . 2
(2) How many weeks old was (he/she) when you quit breastfeeding (him/her) altogether? RECORD VERBATIM IF R DOES NOT ANSWER IN "WEEKS."	<input type="text"/> Weeks	<input type="text"/> Weeks	<input type="text"/> Weeks
Still feeding . . . . .	97	97	97
R definitely does not remember	98	98	98

20. Sometimes we miss a baby who died shortly after birth or never lived at home. Have we listed all your babies now? Yes . . . . . 1  
 No . (ASK A) . . . 2

A. IF NO: How many did we miss?  GO BACK TO Q. 19 AND ASK A-F FOR EACH BABY MISSED? ENTER INFORMATION ABOUT MISSED BABIES AND INDICATE PROPER BIRTH ORDER BY ARROW ON BIRTH AND PREGNANCY RECORD AND IN COLUMNS ABOVE.

KEYPUNCH:  
GO TO PAGE 6

BEGIN DECKS 41

6 7

FOURTH CHILD	FIFTH CHILD	SIXTH CHILD	SEVENTH CHILD	EIGHTH CHILD	NINTH CHILD 10 11
Boy Girl 1 2					
Lb Oz					
More . . . . 1 5½ or less . 2 Don't know . 8	More . . . . 1 5½ or less . 2 Don't know . 8	More . . . . 1 5½ or less . 2 Don't know . 8	More . . . . 1 5½ or less . 2 Don't know . 8	More . . . . 1 5½ or less . 2 Don't know . 8	More . . . . 1 5½ or less . 2 Don't know . 8
Yes[ASK(1)]. 1 No [ASK(4)]. 2					
Lives here . 1 Lives some- where else. 2 [ASK(2)&(3)] <input type="text"/> <input type="text"/> Month Year ..... 1 ..... 2 ..... 3 ..... 4 ..... 5	Lives here . 1 Lives some- where else. 2 [ASK(2)&(3)] <input type="text"/> <input type="text"/> Month Year ..... 1 ..... 2 ..... 3 ..... 4 ..... 5	Lives here . 1 Lives some- where else. 2 [ASK(2)&(3)] <input type="text"/> <input type="text"/> Month Year ..... 1 ..... 2 ..... 3 ..... 4 ..... 5	Lives here . 1 Lives some- where else. 2 [ASK(2)&(3)] <input type="text"/> <input type="text"/> Month Year ..... 1 ..... 2 ..... 3 ..... 4 ..... 5	Lives here . 1 Lives some- where else. 2 [ASK(2)&(3)] <input type="text"/> <input type="text"/> Month Year ..... 1 ..... 2 ..... 3 ..... 4 ..... 5	Lives here. 1 Lives some- where else. 2 [ASK(2)&(3)] <input type="text"/> <input type="text"/> Month Yr. 20- ..... 1 24 ..... 2 ..... 3 ..... 4 ..... 5 28
Yes[ASK(2)]. 1 No . . . . 2 <input type="text"/> Weeks ..... 97 ..... 98	Yes[ASK(2)]. 1 No . . . . 2 <input type="text"/> Weeks ..... 97 ..... 98	Yes[ASK(2)]. 1 No . . . . 2 <input type="text"/> Weeks ..... 97 ..... 98	Yes[ASK(2)]. 1 No . . . . 2 <input type="text"/> Weeks ..... 97 ..... 98	Yes[ASK(2)]. 1 No . . . . 2 <input type="text"/> Weeks ..... 97 ..... 98	Yes[ASK(2)]. 1 No . . . . 2 <input type="text"/> Weeks ..... 97 ..... 98

IF MORE THAN  
9 LIVE BIRTHS,  
GO TO CONTINUA-  
TION BOOKLET,  
PAGE 4.

21. Are your monthly menstrual periods regular--that is, about the same number of days between each period?

Yes . . . . . 1 13  
 No . . . . . 2  
 No periods -- operation/menopause . . 3  
 Never had period ("No" AT (E) & (F) ON RECALL CHART & SKIP TO Q. 28) . 4

22. What was the date your last normal period began?

Month	Day	Year

(IF LESS THAN ONE MONTH AGO:  
 CODE "No" TO Q. 23 & RECALL CHART (E) 14 19  
 THEN SKIP TO INTRO. FOR Q'S 24-26.)

IF "operation/menopause" TO Q. 21,  
 ENTER YEAR ON RECALL CHART (E) &  
 SKIP TO INTRODUCTION FOR Q'S 24-26.

23. Are you pregnant now?

Yes . . . . . (ASK A) . . 1 } RECALL 20  
 No . . . . . 2 } CHART  
 Don't know . . (ASK B) . . 8 (E)

A. IF YES: When do you expect the baby to be born? ENTER DATE ON LAST LINE OF COLUMN Y ON BIRTH AND PREGNANCY RECORD.

B. IF DON'T KNOW: Well, do you think you probably are pregnant or not?

Probably am . . (ASK C) . . 1 } RECALL 21  
 Probably not . . . . . 2 } CHART  
 (E)

C. IF PROBABLY PREGNANT: If you are pregnant, when do you think the baby will be born? ENTER DATE ON LAST LINE OF COLUMN Y ON BIRTH AND PREGNANCY RECORD.

INTRODUCTION FOR Q'S 24 - 26

Many pregnancies do not end in live births. We are talking with women about all their pregnancies that did not end in live births, including those which ended very early and are easily forgotten. We are not asking whether these pregnancies ended in abortion, miscarriage, or stillbirth.

INTERVIEWER:  
 SEE RECALL CHART: (C)

"R" HAS HAD

- MORE THAN ONE LIVE BIRTH; GO TO Q. 24.
- ONE LIVE BIRTH: GO TO Q. 25.
- NO LIVE BIRTHS: GO TO Q. 26.

Keypunch:  
 Go to  
 page 8

24. MORE THAN ONE LIVE BIRTH (ASK A, B, & C)

- A. Before you were pregnant with (FIRST CHILD) were you pregnant at any time?  
 ASK FOR EACH INTERVAL  
 Yes . . . [ASK (1)-(3)]  
 No (CIRCLE 2 IN COL. Z ON BIRTH & PREG. RECORD)
- B. Were you pregnant at any time between (1st and 2nd, 2nd and 3rd, etc.)  
 Yes . . . [ASK (1)-(3)]
- C. (Besides your present pregnancy) have you been pregnant at any time since (LAST CHILD) was born?  
 No (CIRCLE 2 IN COL. Z OF BIRTH & PREG. RECORD, THEN SKIP TO Q. 27)

(1) How many times? RECORD BELOW AND CIRCLE 1 IN COL. Z ON SEPARATE LINE IN PROPER BIRTH INTERVAL FOR EACH PREGNANCY LOSS. ASK (2) AND (3) FOR EACH.

Before 1st	1st-2nd	2nd-3rd	3rd-4th	4th-5th	5th-6th	6th-7th	7th-8th	8th-9th	Since last

- (2) When did that pregnancy end? ENTER DATE IN COL. Y IN PROPER BIRTH INTERVAL.
- (3) How many months were you pregnant at that time? ENTER # OF MOS. IN COL. Z IN PROPER BIRTH INTERVAL AND PROCEED TO NEXT PREGNANCY OR NEXT BIRTH INTERVAL.

IF MORE THAN NINE LIVE BIRTHS  
GO TO CONTINUATION BOOKLET, PAGE 6.

AFTER LAST PREGNANCY LOSS, SKIP TO Q. 27

25. ONE LIVE BIRTH (ASK A, THEN ASK B)

- A. Before you were pregnant with (ONLY CHILD) were you pregnant at any time?  
 Yes . . . [ASK (1)-(3)]  
 No . . . (CIRCLE 2 IN COL. Z ON BIRTH & PREG. RECORD & ASK B)
- B. (Besides your present pregnancy) have you been pregnant since (ONLY CHILD) was born?  
 Yes . . . [ASK (1)-(3)]  
 No . . . (CIRCLE 2 IN COL. Z ON BIRTH & PREG. RECORD & SKIP TO Q. 27)

(1) How many times? RECORD BELOW AND CIRCLE 1 IN COL. Z ON SEPARATE LINE FOR EACH PREGNANCY LOSS, THEN ASK (2) & (3) FOR EACH.

Before	Since
<input style="width: 40px; height: 20px;" type="text"/>	<input style="width: 40px; height: 20px;" type="text"/>

- (2) When did that pregnancy end? ENTER DATE IN COL. Y.
- (3) How many months pregnant were you that time? ENTER # OF MOS. IN COL. Z.

AFTER LAST PREGNANCY LOSS, SKIP TO Q. 27

26. NO LIVE BIRTHS

- A. Have you ever been pregnant (before your present pregnancy)?  
 Yes . . . . . (ASK B) . . . . . 1  
 No (CIRCLE 2 IN COL. Z ON BIRTH & PREG. RECORD & GO TO Q. 27) . . . . . 2
- B. How many times? \_\_\_\_\_ CIRCLE 1 IN COL. Z ON SEPARATE LINE FOR EACH PREGNANCY LOSS, THEN ASK (1) AND (2) FOR EACH.
- (1) When did (that/the 1st/etc.) pregnancy end? ENTER DATE IN COL. Y.
- (2) How many months were you pregnant that time? ENTER # OF MOS. IN COL. Z.

AFTER LAST PREGNANCY LOSS, GO TO Q. 27

REVIEW

27. Now, let me be sure that I have everything recorded correctly.

A. IF ANY LIVE BIRTHS:

Your (first) child (NAME) was born in (YEAR) . . .  
and (NAME) was born in (YEAR) . . .  
and your youngest child (NAME) was born in (YEAR).

B. IF NO LIVE BIRTHS:

You have had no children.

C. IF ANY PREGNANCY LOSSES:

[Before (FIRST CHILD)]: you lost a pregnancy in (YEAR) . . .  
Between (FIRST AND SECOND CHILD, ETC.) you lost a pregnancy in (YEAR) . . .  
Since (YOUNGEST CHILD) you lost a pregnancy in (YEAR).

D. IF NO PREGNANCY LOSSES:

You have not lost any pregnancies.

E. You (are/are not) pregnant now.

F. Do I have all of that right?

Yes . . . . . 1  
No (REVIEW & CORRECT) . . 2 } EVER PREGNANT  
RECALL CHART (E)

G. IF ANY PREGNANCIES:

Altogether, then, you have had \_\_\_\_\_ pregnancies (counting this one),  
(TOTAL NO.) 22 23  
and \_\_\_\_\_ of these ended in live births. 24 25  
(NO.)

H. IF ANY MULTIPLE BIRTHS:

That is, you have had \_\_\_\_\_ children altogether. 26 27  
(NO.)

INTERVIEWER: WERE ANY CHANGES MADE AS A RESULT OF THIS REVIEW?

Yes . . . . . 1 28  
No . . . . . 2

R. HAS ANY OF HER OWN CHILDREN IN HOUSEHOLD? YES OR NO ON RECALL CHART (D)

28. (In addition to the children born to you) has your husband had any children whom you are bringing up or have brought up?

Yes . . . . . (ASK A) . . . . . 1 29  
No . . . . . 2

A. IF YES: How many children is that?

NUMBER OF HUSBAND'S CHILDREN: \_\_\_\_\_ 30 31

29. Have you adopted any children?

Yes . . . . . (ASK A) . . . . . 1 32  
No . . . . . 2

A. IF YES: How many children have you adopted?

NUMBER OF CHILDREN ADOPTED: \_\_\_\_\_ 33 34

SECTION III

We are talking with women about their uses of family planning methods, if any, and how this has affected the number and timing of their pregnancies.

HAND  
CARD  
1

This card lists both old and new methods men and women use to plan their families. Please look it over carefully before I go on with my questions.

INTERVIEWER:

CHECK

- IF R NEVER PREGNANT, SKIP TO Q. 50, PAGE 14.
- IF FIRST PREGNANCY ENDED BEFORE JULY 1, 1970, START WITH INTERVIEWER INSTRUCTIONS AT TOP OF PAGE 10; THEN Q. 30.
- IF FIRST PREGNANCY ENDED SINCE JULY 1, 1970, OR IS A CURRENT PREGNANCY, FOLLOW INSTRUCTIONS BELOW:

FILL IN TOP OF INTERVAL COLUMNS ON PAGE 13  
FROM INFO IN COLS. Y & Z OF BIRTH & PREG. RECORD;  
THEN START AT TOP OF PAGE 12.

(IF MORE THAN FOUR INTERVALS AFTER JULY 1, 1970,  
FILL IN COLUMNS IN CONTINUATION BOOKLET, PAGE 10.)

NOTE: IF RESPONDENT VOLUNTEERS AT ANY POINT IN THIS SECTION THAT SHE IS "OPPOSED TO OR NEVER USED A METHOD," YOU MAY CODE Q. 30, Q. 37, OR Q. 50 "No" WITHOUT ASKING IN ALL SUBSEQUENT INTERVALS. HOWEVER, BE SURE R HAS READ LIST OF METHODS!

<p><b>INTERVIEWER:</b>                  FILL IN TOP OF INTERVAL COLS FROM INFO IN COLS Y &amp; Z OF BIRTH &amp; PREG. RECORD.                  ENTER ON P. 10 &amp; 11 ONLY DATES/EVENTS FOR INTERVALS ENDING <u>BEFORE</u> JULY 1, 1970.                  ENTER ON P. 13 ONLY DATES/EVENTS FOR INTERVALS ENDING <u>SINCE</u> JULY 1, 1970, AND                  FILL IN TOP OF PAGE 14.                  (IF MORE THAN 7 INTERVALS <u>BEFORE</u> JULY 1, 1970, GO TO CONTINUATION BOOKLET, P. 8)</p>	Before first pregnancy <hr/>								
<p><b>30.</b> (Before you became pregnant the first time/Between DATES/EVENTS THIS INTERVAL) did you ever use <u>any</u> method to delay or prevent a pregnancy?                  Yes . . . (CODE <u>1</u> IN BOX I AND ASK A)                  No . . . (CODE <u>2</u> IN BOX I &amp; GO TO Q. 31)</p> <p>A. <u>IF YES</u>: Had you stopped using all methods before you became pregnant?                  Yes . . . (CIRCLE 1 &amp; GO TO Q. 31)                  No . . . (CIRCLE 2 &amp; SKIP TO Q. 32)</p>	BOX I <input style="width: 30px; height: 30px; margin: 10px auto;" type="checkbox"/> <table style="margin-left: auto; margin-right: auto; border: none;"> <tr> <td style="padding: 0 10px;">Yes</td> <td style="padding: 0 10px;">No</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </table>	Yes	No	1	2				
Yes	No								
1	2								
<p><b>31.</b> Was the reason you (were not/stopped) using any methods because you, yourself, wanted to become pregnant?                  Yes . . . (CIRCLE 1 &amp; CODE <u>1</u> IN BOX II &amp; SKIP TO Q. 33)                  No . . . (CIRCLE 2 AND GO TO Q. 32)</p>	<table style="border: none;"> <tr> <td style="padding: 0 10px;">Yes</td> <td style="padding: 0 10px;">No</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> </tr> </table>	Yes	No	1	2				
Yes	No								
1	2								
<p><b>32.</b> At the time you became pregnant (THIS INTERVAL) did you, yourself, actually want to have a(nother) baby at some time?                  Yes . . . (ASK A)      Don't know, didn't care . . . (ASK C)      No. (ASK B)</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-right: 1px solid black; padding: 5px;"> <p>A. As you recall, is that how you felt <u>before</u> you became pregnant, or did you come to feel that way later?                              Before (CODE <u>2</u> IN BOX II &amp; GO TO Q. 33)                              Later (CODE <u>3</u> IN BOX II &amp; GO TO Q. 33)</p> </td> <td style="width: 50%; padding: 5px;"> <p>B. As you recall, is that how you felt <u>before</u> you became pregnant, or did you come to feel that way later?                              Before (CODE <u>4</u> IN BOX II &amp; CODE <u>5</u> IN BOX III &amp; SKIP TO Q. 34)                              Later (CODE <u>5</u> IN BOX II &amp; CODE <u>6</u> IN BOX III &amp; SKIP TO Q. 34)</p> </td> </tr> </table> <p>C. It is sometimes difficult to recall these things, but as you look back to <u>just before</u> that pregnancy began, would you say you probably wanted a(nother) baby some time or probably not?                  Probably yes. (CODE <u>6</u> IN BOX II &amp; GO TO Q. 33)                  Probably no. (CODE <u>7</u> IN BOX II &amp; III &amp; SKIP TO Q. 34)                  Don't know. . . (CODE <u>8</u>)</p>	<p>A. As you recall, is that how you felt <u>before</u> you became pregnant, or did you come to feel that way later?                              Before (CODE <u>2</u> IN BOX II &amp; GO TO Q. 33)                              Later (CODE <u>3</u> IN BOX II &amp; GO TO Q. 33)</p>	<p>B. As you recall, is that how you felt <u>before</u> you became pregnant, or did you come to feel that way later?                              Before (CODE <u>4</u> IN BOX II &amp; CODE <u>5</u> IN BOX III &amp; SKIP TO Q. 34)                              Later (CODE <u>5</u> IN BOX II &amp; CODE <u>6</u> IN BOX III &amp; SKIP TO Q. 34)</p>	BOX II <input style="width: 30px; height: 30px; margin: 10px auto;" type="checkbox"/>						
<p>A. As you recall, is that how you felt <u>before</u> you became pregnant, or did you come to feel that way later?                              Before (CODE <u>2</u> IN BOX II &amp; GO TO Q. 33)                              Later (CODE <u>3</u> IN BOX II &amp; GO TO Q. 33)</p>	<p>B. As you recall, is that how you felt <u>before</u> you became pregnant, or did you come to feel that way later?                              Before (CODE <u>4</u> IN BOX II &amp; CODE <u>5</u> IN BOX III &amp; SKIP TO Q. 34)                              Later (CODE <u>5</u> IN BOX II &amp; CODE <u>6</u> IN BOX III &amp; SKIP TO Q. 34)</p>								
<p><b>33.</b> (IF PREGNANCY LOSS, CODE <u>1</u> IN BOX III AND GO TO Q. 34)                  ASK ONLY FOR LIVE BIRTHS: Did you become pregnant sooner than you actually wanted, later than you actually wanted, or just about the right time?                  Sooner (CODE <u>2</u> IN BOX III &amp; ASK A)      Right time (CODE <u>4</u> IN BOX III)      Later (CODE <u>3</u> IN BOX III &amp; ASK B)</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border-right: 1px solid black; padding: 5px;"> <p>A. How much later did you want to become pregnant? (ENTER # OF MOS. IN INTERVAL COLUMN.)</p> </td> <td style="width: 50%; padding: 5px;"> <p>B. How much sooner did you want to become pregnant? (ENTER # OF MOS. IN INTERVAL COLUMN.)</p> </td> </tr> </table>	<p>A. How much later did you want to become pregnant? (ENTER # OF MOS. IN INTERVAL COLUMN.)</p>	<p>B. How much sooner did you want to become pregnant? (ENTER # OF MOS. IN INTERVAL COLUMN.)</p>	BOX III <input style="width: 30px; height: 30px; margin: 10px auto;" type="checkbox"/> <table style="margin-left: auto; margin-right: auto; border: none;"> <tr> <td style="padding: 0 10px;">33A.</td> <td style="padding: 0 10px;">33B.</td> </tr> <tr> <td style="text-align: center;"># Mos.</td> <td style="text-align: center;"># Moc.</td> </tr> </table>	33A.	33B.	# Mos.	# Moc.		
<p>A. How much later did you want to become pregnant? (ENTER # OF MOS. IN INTERVAL COLUMN.)</p>	<p>B. How much sooner did you want to become pregnant? (ENTER # OF MOS. IN INTERVAL COLUMN.)</p>								
33A.	33B.								
# Mos.	# Moc.								
<p><b>34.</b> (IF BEFORE LAST LIVE BIRTH, CODE <u>2</u> IN BOX IV &amp; SKIP TO INSTR. BELOW Q. 35.)                  ASK ONLY FOR LAST LIVE BIRTH AND SUBSEQUENT PREG. LOSSES: And what about your husband at the time you became pregnant (THIS INTERVAL), did he want you to have a(nother) baby at some time?                  Yes . . . (CIRCLE 1 &amp; GO TO Q. 35)                  No . . . (CIRCLE 2 &amp; CODE <u>3</u> IN BOX IV &amp; SKIP TO INSTR. BELOW Q. 35)                  Don't know (CIRCLE 8 &amp; CODE <u>8</u> IN BOX IV &amp; SKIP TO INSTR. BELOW Q. 35)                  R not married at time became pregnant . . . (CIRCLE 7 &amp; CODE <u>7</u> IN BOX IV &amp; SKIP TO INSTR. BELOW Q.35)</p>	<table style="border: none;"> <tr> <td style="padding: 0 10px;">Yes</td> <td style="padding: 0 10px;">No</td> <td style="padding: 0 10px;">DK</td> <td style="padding: 0 10px;">NM</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">2</td> <td style="text-align: center;">8</td> <td style="text-align: center;">7</td> </tr> </table>	Yes	No	DK	NM	1	2	8	7
Yes	No	DK	NM						
1	2	8	7						
<p><b>35.</b> (IF PREG. LOSS SINCE LAST LIVE BIRTH, CODE <u>1</u> IN BOX IV &amp; GO TO INSTR. BELOW Q.35)                  ASK ONLY FOR LAST LIVE BIRTH: Did you become pregnant sooner than he wanted, later than he wanted, or just about the right time?                  Sooner. (CODE <u>4</u> IN BOX IV)      Later. (CODE <u>5</u> IN BOX IV)      Right time. (CODE <u>6</u> IN BOX IV)                  Don't know . . . (CODE <u>8</u> IN BOX IV)</p>	BOX IV <input style="width: 30px; height: 30px; margin: 10px auto;" type="checkbox"/>								

**INTERVIEWER INSTRUCTIONS:**

IF NEXT PREGNANCY ENDED BEFORE JULY 1, 1970, GO BACK TO Q. 30, NEXT INTERVAL.  
 IF NEXT PREGNANCY ENDED SINCE JULY 1, 1970, GO TO PAGE 12.  
 IF NO ADDITIONAL PREGNANCIES, GO TO PAGE 14.

# INTERVALS ENDING BEFORE JULY 1, 1970

Btwn: _____					
And: _____					
BOX I <input type="checkbox"/> Yes No 1 2	BOX I <sup>8 9/R</sup> <input type="checkbox"/> Yes No 1 2 <sup>6 7</sup> 10 11 <sup>59/R</sup> 2 60				
Yes No 1 2	Yes No 1 2 <sup>61</sup>				
BOX II <input type="checkbox"/>	BOX II <sup>62</sup> <input type="checkbox"/>				
BOX III <input type="checkbox"/>	BOX III <sup>63</sup> <input type="checkbox"/>				
33A. <input type="checkbox"/> 33B. <input type="checkbox"/> <sup>64</sup>					
# Mos. # Mos.	# Mos. # Mos. <sup>65</sup>				
Yes No DK NM 1 2 8 7	Yes No DK NM 1 2 8 7 <sup>66</sup>				
BOX IV <input type="checkbox"/>	BOX IV <sup>67</sup> <input type="checkbox"/>				

For pregnancies ending in the last three years, we are talking with women about particular methods of family planning they have used, if any, and about other matters which affect the timing of their pregnancies. Please look again at the card.

36. DO NOT ASK FOR INTERVAL BEFORE FIRST PREGNANCY. Between (DATES/EVENTS THIS INTERVAL), were there any periods of one month or more in which you were not having intercourse-- such as after your pregnancy ended, when one of you was away, sick, or for some other reason?

Yes . . . (ASK A) No . . . (CIRCLE 2 IN APPROPRIATE INTERVAL COL.)

A. What months & year were those? PROBE: What other months? ENTER MO. & YR. IN INTERVAL COL.

37. (Before you became pregnant the first time/Between DATES/EVENTS THIS INTERVAL) did you ever use any method to delay or prevent a pregnancy?

Yes . . . (CODE 1 IN BOX I & GO TO Q. 38) No . . . (CODE 2 IN BOX I & SKIP TO Q. 42)

38. Starting with the first method used during this time, please tell me all methods in the order you used them. (INTERVIEWER: DO NOT COUNT METHODS USED FOR LESS THAN ONE MONTH.)

PROBE: What other methods? IF MORE THAN ONE METHOD: Did you use any of these together? (IF YES, CIRCLE METHODS USED TOGETHER AND TREAT AS SINGLE METHOD.)

39. In what month and year did you start to use (METHOD)? ENTER MONTH & YEAR IN APPROPRIATE INTERVAL COLUMN.

40. While you were using (METHOD) were there some times when you skipped using any method at all? Yes . . . (ASK A) No . . . (CIRCLE 1 IN INTERVAL COLUMN)

A. Would you say you skipped using (METHOD) often, sometimes, or only once or twice?

Often . . . (CIRCLE 2) Sometimes . . . (CIRCLE 3) Only once or twice . . . (CIRCLE 4)

41. In what month and year did you stop using (METHOD)? ENTER MONTH AND YEAR IN APPROPRIATE INTERVAL COLUMN.

IF LAST METHOD, CONTINUE; OTHERWISE GO BACK TO Q. 39 FOR NEXT METHOD.

42. In what month and year did you become pregnant? ENTER MONTH & YEAR IN APPROPRIATE INTERVAL COLUMN.

IF NO METHOD THIS INTERVAL, SKIP TO Q. 44. AFTER LAST METHOD STOPPED, SKIP TO Q. 44. IF PREGNANCY BEGAN BEFORE LAST METHOD STOPPED, SKIP TO Q. 45. IN SAME MONTH LAST METHOD STOPPED, CONTINUE WITH Q. 43.

43. Had you stopped using (METHOD) before you became pregnant?

Yes . . . (CIRCLE 1 & GO TO Q. 44) No . . . (CIRCLE 2 & SKIP TO Q. 45)

44. Was the reason you (were not/stopped) using any methods because you, yourself, wanted to become pregnant?

Yes . . . (CIRCLE 1 & CODE 1 IN BOX II & SKIP TO Q. 46) No . . . (CIRCLE 2 & GO TO Q. 45)

45. At the time you became pregnant (THIS INTERVAL) did you, yourself, actually want to have a(nother) baby at some time?

Yes . . . (ASK A) Don't know, didn't care . . . (ASK C) No . . . (ASK B)

A. As you recall, is that how you felt before you became pregnant, or did you come to feel that way later?

Before (CODE 2 IN BOX II & GO TO Q. 46) Later (CODE 3 IN BOX II & GO TO Q. 46)

B. As you recall, is that how you felt before you became pregnant, or did you come to feel that way later?

Before (CODE 4 IN BOX II & CODE 5 IN BOX III & SKIP TO Q. 47) Later (CODE 5 IN BOX II & CODE 6 IN BOX III & SKIP TO Q. 47)

C. It is sometimes difficult to recall these things, but as you look back to just before that pregnancy began, would you say you probably wanted a(nother) baby some time or probably not?

Probably yes. (CODE 6 IN BOX II & GO TO Q. 46) Probably no . (CODE 7 } IN BOX II & III & Don't know . (CODE 8 } SKIP TO Q. 47)

46. (IF PREGNANCY LOSS, CODE 1 IN BOX III AND GO TO Q. 47) ASK ONLY FOR LIVE BIRTHS & CURRENT PREGNANCY: Did you become pregnant sooner than you actually wanted, later than you actually wanted, or just about the right time?

Sooner (CODE 2 IN BOX III & ASK A) Right time (CODE 4 IN BOX III) Later (CODE 3 IN BOX III & ASK B)

A. How much later did you want to become pregnant? ENTER # OF MONTHS IN INTERVAL COLUMN.

B. How much sooner did you want to become pregnant? ENTER # OF MONTHS IN INTERVAL COLUMN.

47. And what about your husband at the time you became pregnant (THIS INTERVAL), did he want you to have a(nother) baby at some time?

Yes . . . (CIRCLE 1 & GO TO Q. 48) No . . . (CIRCLE 2 & CODE 3 IN BOX IV & SKIP TO INSTR. BELOW Q. 48) Don't know (CIRCLE 8 & CODE 8 IN BOX IV & SKIP TO INSTR. BELOW Q. 48) R not married at time became pregnant . (CIRCLE 7 & CODE 7 IN BOX IV & SKIP TO INSTR. BELOW Q. 48)

48. (IF PREGNANCY LOSS, CODE 1 IN BOX IV AND GO TO INSTRUCTION BELOW Q. 48) ASK ONLY FOR LIVE BIRTH & CURRENT PREGNANCY: Did you become pregnant sooner than he wanted, later than he wanted, or just about the right time?

Sooner . (CODE 4 IN BOX IV) Later . (CODE 5 IN BOX IV) Right time . (CODE 6 IN BOX IV) Don't know . . . (CODE 8 IN BOX IV)

IF ADDITIONAL PREGNANCY, GO BACK TO Q. 36 NEXT INTERVAL. IF NO ADDITIONAL PREGNANCY, GO TO PAGE 14.

# INTERVALS ENDING SINCE JULY 1, 1970

Between: _____ & _____ or before 1st pregnancy		Between: _____ And: _____		Between: _____ And: _____		Between: _____ And: _____		6 7
Month(s)/Year(s) No _____ _____ 2		Month(s)/Year(s) No _____ _____ 2		Month(s)/Year(s) No _____ _____ 2		Month(s)/Year(s) No _____ _____ 2		8 9
BOX I <input type="checkbox"/>		BOX I <input type="checkbox"/>		BOX I <input type="checkbox"/>		BOX I <input type="checkbox"/>		10
1st 2nd 3rd 4th (METHOD SYMBOL)		1st 2nd 3rd 4th (METHOD SYMBOL)		1st 2nd 3rd 4th (METHOD SYMBOL)		1st 2nd 3rd 4th (METHOD SYMBOL)		11- 14
<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	15- 22- 23- 30
1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	1 2 3 4	31- 34
<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	<input type="checkbox"/> Mo. <input type="checkbox"/> Yr.	35- 42 43- 56
<input type="checkbox"/> <input type="checkbox"/> Month Year		<input type="checkbox"/> <input type="checkbox"/> Month Year		<input type="checkbox"/> <input type="checkbox"/> Month Year		<input type="checkbox"/> <input type="checkbox"/> Month Year		51 55/R
Yes No 1 2		Yes No 1 2		Yes No 1 2		Yes No 1 2		56- 59
Yes No 1 2		Yes No 1 2		Yes No 1 2		Yes No 1 2		60 61
BOX II <input type="checkbox"/>		BOX II <input type="checkbox"/>		BOX II <input type="checkbox"/>		BOX II <input type="checkbox"/>		62
BOX III <input type="checkbox"/>		BOX III <input type="checkbox"/>		BOX III <input type="checkbox"/>		BOX III <input type="checkbox"/>		63
46A. # Mos.		46B. # Mos.		46A. # Mos.		46B. # Mos.		64- 65
Yes No DK NM 1 2 8 7	Yes No DK NM 1 2 8 7	Yes No DK NM 1 2 8 7	Yes No DK NM 1 2 8 7	Yes No DK NM 1 2 8 7	Yes No DK NM 1 2 8 7	Yes No DK NM 1 2 8 7	Yes No DK NM 1 2 8 7	66
BOX IV <input type="checkbox"/>		BOX IV <input type="checkbox"/>		BOX IV <input type="checkbox"/>		BOX IV <input type="checkbox"/>		67

# OPEN INTERVAL

CURRENTLY PREGNANT: CHECK  AND SKIP TO Q. 56.

IF NO PREGNANCIES SINCE JULY 1, 1970, READ: We are talking with women about particular methods of family planning they have used during the last three years. Please look again at the card.

CHECK	RESPONDENT:	OPEN INTERVAL BEGINS:	
<input type="checkbox"/>	NEVER PREGNANT		
<input type="checkbox"/>	LAST EVENT ENDED BEFORE JULY 1, 1970	JULY 1, 1970	TO: PRESENT
<input type="checkbox"/>	LAST EVENT ENDED SINCE JULY 1, 1970	→ (DATE/NAME) LAST EVENT SINCE JULY 1, 1970	6 7/88

<p>49. <u>DO NOT ASK IF NEVER PREGNANT.</u>                  Since (your last pregnancy/July 1, 1970) have there been any periods of one month or more in which you were not having intercourse such as (after your pregnancy ended) when one of you was away, or sick or for any other reason?                  Yes..(ASK A) No..(CIRCLE 2)</p> <p>A. What months and years were those?                  PROBE: What other months?</p>	Month(s)/Year(s)  _____  _____  _____	No  2   8 9/R																
<p>50. Since (your last pregnancy/July, 1970), did you ever use any method to delay or prevent a pregnancy?                  Yes.(CODE 1 IN BOX I) No.(CODE 2 IN BOX I, RECALL CHART (H) AND SKIP TO Q. 56)</p>	BOX I  <input style="width: 40px; height: 30px;" type="checkbox"/>	10																
<p>51. Starting with the first method used during this time, please tell me all methods in the order that you used them. (INTERVIEWER: DO NOT COUNT METHODS USED FOR LESS THAN ONE MONTH.)                  PROBE: What other methods?                  IF MORE THAN ONE METHOD: Did you use any of these together? (IF YES, CIRCLE METHODS USED TOGETHER AND TREAT AS SINGLE METHOD.)</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%;">1st</td> <td style="width: 12.5%;">2nd</td> <td style="width: 12.5%;">3rd</td> <td style="width: 12.5%;">4th</td> </tr> <tr> <td colspan="4" style="text-align: center;">(METHOD   SYMBOL)  </td> </tr> <tr> <td style="height: 40px;"></td> <td></td> <td></td> <td></td> </tr> </table>	1st	2nd	3rd	4th	(METHOD   SYMBOL)								11- 14				
1st	2nd	3rd	4th															
(METHOD   SYMBOL)																		
<p>52. In what month and year did you start to use (METHOD)? ENTER MONTH AND YEAR.                  IF R OR HUSB. STERILIZATION OPERATION, SKIP TO Q.56</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; text-align: center;">Mo</td> </tr> <tr> <td style="width: 12.5%; text-align: center;">Yr</td> </tr> </table>	Mo	Mo	Mo	Mo	Yr	Yr	Yr	Yr	15- 22 23- 30								
Mo	Mo	Mo	Mo															
Yr	Yr	Yr	Yr															
<p>53. While you were using (METHOD) during this time, were there some times when you skipped using any method at all?                  Yes..(ASK A) No .. (CIRCLE 1)                  A. Would you say you skipped using (METHOD) often, sometimes, or only once or twice?                  Often..(CIRCLE 2) Sometimes..(CIRCLE 3)                  Only once or twice..(CIRCLE 4)                  IF LAST METHOD, SKIP TO Q. 55;                  OTHERWISE CONTINUE WITH Q. 54.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%;">1</td> <td style="width: 12.5%;">1</td> <td style="width: 12.5%;">1</td> <td style="width: 12.5%;">1</td> </tr> <tr> <td>2</td> <td>2</td> <td>2</td> <td>2</td> </tr> <tr> <td>3</td> <td>3</td> <td>3</td> <td>3</td> </tr> <tr> <td>4</td> <td>4</td> <td>4</td> <td>4</td> </tr> </table>	1	1	1	1	2	2	2	2	3	3	3	3	4	4	4	4	31- 34
1	1	1	1															
2	2	2	2															
3	3	3	3															
4	4	4	4															
<p>54. In what month and year did you stop using (METHOD)?                  GO BACK TO Q. 52 FOR NEXT METHOD.</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%; text-align: center;">Mo</td> </tr> <tr> <td style="width: 12.5%; text-align: center;">Yr</td> </tr> </table>	Mo	Mo	Mo	Mo	Yr	Yr	Yr	Yr	35- 42 43- 50								
Mo	Mo	Mo	Mo															
Yr	Yr	Yr	Yr															
<p>55. <u>LAST METHOD THIS INTERVAL, ASK:</u> Are you and your husband still using (METHOD)?                  Yes . . (CIRCLE 1 AND GO TO Q. 56) RECALL CHART (H)                  No . . (CIRCLE 2 AND ASK A)                  A. In what month and year did you stop using (METHOD)? ENTER MONTH AND YEAR AND GO TO Q. 56.</p>	Yes                      No  1                              2   <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> <td style="width: 12.5%;"></td> </tr> <tr> <td style="text-align: center;">Month</td> <td style="text-align: center;">Year</td> <td colspan="2"></td> </tr> </table>					Month	Year			51   52 55 56 67/R								
Month	Year																	

56. Now let me review the past three years with you - month by month - to be sure I have recorded the information correctly.

PROCEDURE FOR 3 YEAR CHART

REFERRING TO INTERVAL PAGES, ENTER DATA ON 3 YEAR CHART FOR PERIOD SINCE JULY 1, 1970 TO THE PRESENT.

READ THE ENTRIES TO THE RESPONDENT AS YOU RECORD THEM TO GIVE HER A CHANCE TO MAKE ADDITIONS OR CORRECTIONS.

EACH MONTH MUST HAVE A SYMBOL.

ENTER SYMBOLS IN BEGINNING AND ENDING MONTHS FOR EACH METHOD AND PERIOD. THEN DRAW A CONNECTING LINE BETWEEN THEM.

- ENTER PERIODS OF PREGNANCY -- V
- ENTER PERIODS OF NO INTERCOURSE -- Z
- ENTER PERIODS OF USE FOR EACH METHOD -- A-W
- ENTER PERIODS OF NO METHOD -- 0
- ENTER X IN ALL MONTHS WHICH HAVE NOT OCCURRED

IF A CORRECTION IS MADE TO THE 3 YEAR CHART, BE SURE TO CORRECT THE CORRESPONDING INTERVAL COLUMNS, IF APPROPRIATE.

LIST OF METHODS

SYMBOLS

- A Pill
- B Douche
- C Foam
- D Jelly, Cream, Suppository
- E IUD, Coil, Loop
- F Condom, Rubber
- G Diaphragm
- H Diaphragm and Jelly
- J Rhythm or safe period - Calendar
- K Rhythm or safe period - Temperature
- L Not having intercourse to avoid pregnancy - abstinence
- M Withdrawal, Coitus interruptus
- N Operation; sterilization - Wife
- P Operation; sterilization - Husband
- S Abortion
- W Other (SPECIFY) \_\_\_\_\_
  
- O No method
- V Pregnant
- X Months which have not yet occurred
- Z Not having intercourse, post partum

THREE-YEAR CHART

MONTH	YEAR			
	1970	1971	1972	1973
January	X	17	30	43
February	X	18	31	44
March	X	19	32	45
April	X	20	33	46
May	X	21	34	47
June	X	22	35	48
July	10	23	36	49
August	11	24	37	50
September	12	25	38	51
October	13	26	39	52
November	14	27	40	53
December	15	28	41	54

INTERVIEWER:

WERE ANY CHANGES MADE AS A RESULT OF THIS REVIEW?

Yes . . . 1      56  
 No . . . 2

METHOD(S) SINCE JULY, 1970?

RECALL CHART (1)

SECTION IV

IF R HAS ALREADY MENTIONED HER OR HUSBAND'S STERILITY, CHECK  AND SKIP TO Q. 59. 10

We are talking with women about children they may have in the future, as well as about those they already have. For the moment we are talking only about babies who may be born to you.

- 57. Some couples find it difficult to have children. Do you have any reason to believe it would be difficult or impossible for you and your husband to have a(nother) baby (after this one)?
  - Yes . . . . . 1 11
  - No (SKIP TO Q. 60) . 2

- 58. Have you or your husband talked with a doctor about this?
  - Yes . . (ASK A) . . . . 1
  - No . . (ASK B) . . . . 2 12

- |                             |  |
|-----------------------------|--|
| A. What did the doctor say? | B. Why do you think it would be difficult or impossible? |
|-----------------------------|--|

RECORD VERBATIM AND CODE CATEGORY CLOSEST TO RESPONDENT'S RESPONSE

- Husband has had a sterilizing operation . . (GO TO Q. 59) . 01 13 14
- "R" has had an operation . . . . . (GO TO Q. 59) . 02
- Impossible due to accident . . . . . (GO TO Q. 59) . 03
- "R" or husband sterile for other reasons . . (GO TO Q. 59) . 04
- "R" has reached menopause (SKIP TO Q. 65) . 05
- It is difficult for "R" to carry baby the full nine months . . . . . (SKIP TO Q. 60) . 06
- There is a physical difficulty getting pregnant, but no danger . . . . . (SKIP TO Q. 60) . 07
- It is difficult for husband to father a child . . . . . (SKIP TO Q. 60) . 08
- "R" has difficulty getting pregnant but reason is unknown . . . . . (SKIP TO Q. 60) . 09
- There is a non-medical/non-physical reason . . . . . (SKIP TO Q. 60) . 10
- It would be dangerous for "R" to become pregnant (again) . . . . . (SKIP TO Q. 60) . 11
- It would be dangerous for the baby . . . . (SKIP TO Q. 60) . 12



67. IF NOT CURRENTLY PREGNANT, CONTINUE; OTHERWISE SKIP TO Q. 85. SEE RECALL CHART (E)  
Do you and your husband intend to have a(nother) baby?

Yes . (GO TO	R/Husband disagree . . . 3	No . (SKIP TO
Q. 68) . 1	D.K., Up to God, etc.	Q. 71) . 2 10
	(SKIP TO Q. 73) . . . 8	

68. How many (more) do you intend to have?

\_\_\_\_\_  
(NUMBER/RANGE) 11 12

Don't know . (SKIP TO Q. 73) . . 98

69. Of course, sometimes things do not work out exactly as we intend them to, or something makes us change our minds. In your case, how sure are you that you will have (NUMBER/RANGE IN Q. 68) (more) babies? Would you say you are very sure or not very sure?

Very sure (SKIP TO INTERV. 13  
CHECK ITEM, PAGE 19) . . . . 1

Not very sure . . . . . 2

70. Even though you are not completely sure, still you probably have some idea about how close you will come to the number of babies you now intend to have. As things are likely to work out for you,

A. What is the largest number of (additional) babies you expect to have?

\_\_\_\_\_  
(NUMBER) 14 15

Don't know . . . . . 98

B. What is the smallest number of (additional) babies you expect to have?

\_\_\_\_\_  
(NUMBER) 16 17

Don't know . . . . . 98

SKIP TO INTERV. CHECK ITEM, P. 19

71. Of course, sometimes things do not work out exactly as we intend them to, or something makes us change our minds. In your case, how sure are you that you will have no (more) babies? Would you say you are very sure or not very sure?

Very sure (SKIP TO INTERV. 18  
CHECK ITEM, PAGE 19) . . . . 1

Not very sure . . . . . 2

72. Even though you are not completely sure, still you probably have some idea about how close you will come to the number of babies you now intend to have. As things are likely to work out for you,

What is the largest number of (additional) babies you expect to have?

\_\_\_\_\_  
(NUMBER) 19 20

Don't know . . . . . 98

SKIP TO INTERV. CHECK ITEM, P. 19

73. Many people aren't sure, but still have some idea about the future. As things are working out for you,

A. What is the largest number of (additional) babies you expect to have?

\_\_\_\_\_  
(NUMBER) NONE, GO TO INTERVIEWER 21 22  
CHECK ITEM, PAGE 19.

Don't know . . . . . 98

B. What is the smallest number of (additional) babies you expect to have?

\_\_\_\_\_  
(NUMBER) 23 24

Don't know . . . . . 98

INTERVIEWER CHECK ITEM		
"R" INTENDS (MORE) CHILDREN --Q. 67 VERY SURE OF _____ (MORE) (Q. 68)	"R" AND HUSBAND DISAGREE Don't know, Up to God, etc. --Q. 67	"R" INTENDS (NONE/NO MORE) --Q. 67
NOT VERY SURE OF (LARGEST NUMBER) _____ (Q. 70)	SEE RECALL CHART (H)	SEE RECALL CHART (H)
SEE RECALL CHART (H)		
CURRENT METHOD USE: YES, CHECK <input type="checkbox"/> AND SKIP TO Q. 79	CURRENT METHOD USE: YES, CHECK <input type="checkbox"/> AND SKIP TO Q. 84	CURRENT METHOD USE: YES, CHECK <input type="checkbox"/> AND SKIP TO Q. 75
NO, CHECK <input type="checkbox"/> AND GO TO Q. 76	NO, CHECK <input type="checkbox"/> AND GO TO Q. 74	NO, CHECK <input type="checkbox"/> AND SKIP TO Q. 74

74. What is the reason you are not using a method to delay or prevent pregnancy?  
RECORD VERBATIM.

25 26  
27 28

75. ASK ONLY IF R INTENDS (NONE/NO MORE) IN Q. 67; OTHERWISE SKIP TO Q. 84.  
What is the main reason you and your husband do not intend to have any (more)  
babies in the future? RECORD VERBATIM

SKIP TO Q. 84.

76. Is the reason you are not using a method to delay or prevent pregnancy because  
you, yourself, want to become pregnant as soon as possible?

Yes . . . . . 1 29  
No . . . . . 2

77. Does your husband want you to have a(nother) baby as soon as possible?

Yes . . (SKIP TO Q. 80) . . 1 30  
No . . . . . 2

78. ASK ONLY IF NO TO BOTH Q'S 76 and 77; OTHERWISE, SKIP TO Q. 80.  
Since neither of you want to have a baby as soon as possible, what is the reason  
you are not using a method to delay or prevent pregnancy?  
RECORD VERBATIM.

31 32  
33 34

SKIP TO Q. 80.

79. How long from now do you think it will be until you stop using a method so you can  
become pregnant?

\_\_\_\_\_ (MONTHS FROM NOW) 35 36  
Don't know . . . . . 98  
37 57/R

80. When do you expect your (first/next) baby to be born? \_\_\_\_\_ (YEARS FROM NOW)  
 Don't know . (ASK A) . . . 98 58 59

A. Well, no one can be sure, but do you think it will probably be within two years from now, between two and five years from now, or five or more years from now?

Within 2 years from now . . . . 1 60  
 Between 2 and 5 years from now . 2  
 Five or more years from now . . 3  
 Don't know . . . . . 8

81. ASK ONLY IF "2 OR MORE" IN INTERV. CHECK ITEM, P. 19; OTHERWISE, SKIP TO Q. 83.  
 When do you expect your last baby to be born--that is, about how many years from now?

NUMBER OF YEARS FROM NOW: \_\_\_\_\_ 61 62  
 (IF 5 YEARS OR LESS, SKIP TO Q. 83)  
 Don't know . . . . . 98

82. ASK ONLY IF "3 OR MORE" IN INTERV. CHECK ITEM, P. 19, OR "DK" TO Q. 81, OTHERWISE, SKIP TO Q. 83.  
 If you do have (NUMBER IN INTERVIEWER CHECK ITEM) (more) babies, how many of these do you expect to have in the next five years?

(NUMBER/RANGE) 63  
 Don't know . . . 8

83. If it should turn out that you and your husband are not able to have (the one more child/all the children) you expect, would you adopt a child?

Yes . . . . . 1 64  
 No . . . . . 2  
 Maybe . . . . . 3

84. Once they have all the children they expect, some people take extra steps to be sure they have no more; others do not feel it's so important. In your case, (now that/once) you have all the children you expect, what will you and your husband do to be sure you will have no more babies? DO NOT READ CATEGORIES. IF MORE THAN ONE METHOD, RECORD VERBATIM AND CODE ALL THAT APPLY BELOW. 65

Don't know . (CHECK  & ASK A) A. Of course, we cannot be sure about the future, but considering the methods on this card (HAND CARD 1), what will you and your husband do, if anything, to be sure you will have no more babies than you expect? CODE BELOW.

Use contraception [CODE METHOD(S)]:

- Pill . . . . . A 66
- Douche . . . . . B
- Foam . . . . . C 67
- Jelly, Cream Suppository . D
- IUD, Coil, Loop . . . . . E
- Condom, Rubber . . . . . F
- Diaphragm . . . . . G
- Diaphragm & Jelly . . . . . H
- Rhythm - Calendar . . . . . J } SKIP TO Q. 109
- Rhythm - Temperature . . . K
- Not having intercourse to avoid preg., abstinence . L
- Withdrawal . . . . . M
- Respondent have operation . N
- Husband have operation . . P
- Abortion . . . . . S
- Other (SPECIFY) \_\_\_\_\_ W
- No method . . . . . O
- Don't know to A . . . . . 8

68 70/R

85. IF CURRENTLY PREGNANT, CONTINUE; OTHERWISE SKIP TO Q. 109.  
Do you and your husband intend to have another baby after this one is born?

Yes . (GO TO Q. 86) 1 R/Husband disagree . . . .3  
Don't know, Up to God, etc. (SKIP TO Q. 91) . . . . 8 No . (SKIP TO Q. 89) . 2 10

86. How many more babies do you intend to have, not counting this one?

(NUMBER/RANGE) 11 12  
Don't know . (SKIP TO Q. 91) . 98

87. Of course, sometimes things do not work out exactly as we intend them to, or something makes us change our minds. In your case, how sure are you that you will have (NUMBER/RANGE IN Q. 86) more babies? Would you say you are very sure or not very sure?

Very sure (SKIP TO INTERV. CHECK ITEM, PAGE 22) . . . . 13  
Not very sure . . . . . 2

88. Even though you are not completely sure, still you probably have some idea about how close you will come to the number of babies you now intend to have. As things are likely to work out for you,

A. What is the largest number you expect to have after this one?

(NUMBER) 14 15  
Don't know . . . . . 98

B. What is the smallest number you expect to have after this one?

(NUMBER) 16 17  
Don't know . . . . . 98

SKIP TO INTERV. CHECK ITEM, P. 22

89. Of course, sometimes things do not work out exactly as we intend them to, or something makes us change our minds. In your case how sure are you that you will have no more babies? Would you say you are very sure or not very sure?

Very sure (SKIP TO INTERV. CHECK ITEM, PAGE 22) . . . . 18  
Not very sure . . . . . 2

90. Even though you are not completely sure, still you probably have some idea about how likely you are to have more babies in the future. As things are likely to work out for you,

What is the largest number you expect to have after this one?

(NUMBER) 19 20  
Don't know . . . . . 98

SKIP TO INTERV. CHECK ITEM, P. 22

91. Many people aren't sure, but still have some idea about the future. As things are working out for you,

A. What is the largest number of babies you expect to have after this one?

NONE, GO TO INTERVIEWER  
(NUMBER) CHECK ITEM, PAGE 22. 21 22  
Don't know . . . . . 98

B. What is the smallest number of babies you expect to have after this one?

(NUMBER) 23 24  
Don't know . . . . . 98

INTERVIEWER CHECK ITEM		
"R" INTENDS MORE--Q. 85 AND VERY SURE OF _____ MORE (Q.86) OR NOT VERY SURE OF (LARGEST NUMBER) _____ (Q. 88) AND <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 0 auto;">SKIP TO Q. 97</div>	"R" AND HUSBAND DISAGREE Don't know, Up to God, etc. --Q. 85  CHECK <input type="checkbox"/> AND <div style="text-align: center;">↓</div> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 0 auto;">SKIP TO Q. 97</div>	"R" INTENDS NO MORE--Q. 85  CHECK <input type="checkbox"/> AND <div style="text-align: center;">↓</div> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 0 auto;">GO TO Q. 92</div>

25 36/R

92. Are you and your husband going to use a method to delay or prevent pregnancy after this baby is born?

Yes . . . . . 1 37  
 No . (SKIP TO Q. 95) . 2

93. What method or methods do you intend to use? \_\_\_\_\_ 38  
 [METHOD(S)] 39

94. After this baby is born, how long do you think it will be until you start using [METHOD(S) IN Q. 93]?  
 \_\_\_\_\_ WEEKS } SKIP TO Q. 96  
 \_\_\_\_\_ MONTHS } 40 41

95. What is the reason you will not use a method? RECORD VERBATIM. 42 43  
 44 45

96. What is the main reason you and your husband do not intend to have any (more) babies after this one is born? RECORD VERBATIM.

SKIP TO Q. 106

97. Are you and your husband going to use a method to delay or prevent pregnancy after this baby is born?  
 Yes . . . . . 1 46  
 No . . . (SKIP TO Q. 101) . . 2

98. What method or methods do you intend to use? \_\_\_\_\_ 47  
 [METHOD(S)] 48

99. After this baby is born, how long do you think it will be until you start using [METHOD(S) IN Q. 98.]?  
 \_\_\_\_\_ WEEKS } IF "DK" OR "DISAGREE"  
 \_\_\_\_\_ MONTHS } Q. 85, SKIP TO Q. 106,  
 OTHERWISE CONTINUE. 49 50

100. How long do you think it will be until you stop using a method so you can start your next pregnancy?  
 \_\_\_\_\_ MONTHS (SKIP TO Q. 102) 51 52

101. Is the reason you will not use a method after this baby is born because you want to become pregnant as soon as possible?  
 Yes . (SKIP TO INSTR. BELOW A) . 1 53  
 No . . . . . (ASK A) . . . . . 2

A. IF NO: What is the reason you will not use a method? RECORD VERBATIM. 54 55

56 57

IF "DK" OR "DISAGREE" TO Q. 85, SKIP TO Q. 106, OTHERWISE CONTINUE.

102. And when do you expect your next baby to be born?

\_\_\_\_\_ (YEARS FROM NOW) 58 59  
Don't know . (ASK A) . 98

A. IF DON'T KNOW: Well, no one can be sure, but do you think it will probably be within two years from now, between two and five years from now, or five or more years from now?

Within 2 years from now . . . . . 1 60  
Between 2 and 5 years from now . . . . . 2  
5 or more years from now . . . . . 3  
Don't know . . . . . 8

103. ASK ONLY IF "2 OR MORE" IN INTERV. CHECK ITEM, P. 22; OTHERWISE SKIP TO Q. 105. When do you expect your last baby to be born?

NUMBER OF YEARS FROM NOW: \_\_\_\_\_ 61 62  
(IF 5 YEARS OR LESS, SKIP TO Q. 105)  
Don't know . . . . . 98

104. ASK ONLY IF "3 OR MORE" IN INTERV. CHECK ITEM, P. 22, OR "DK" TO Q. 103; OTHERWISE SKIP TO Q. 105.

If you have (NUMBER IN INTERV. CHECK ITEM, P. 22) more babies after this one, how many of these do you expect to have in the next five years?

\_\_\_\_\_ (NUMBER/RANGE) 63  
Don't know . . . . . 8

105. If it should turn out that you and your husband are not able to have (the one more child/all the children) you expect, would you adopt a child?

Yes . . . . . 1 64  
No . . . . . 2  
Maybe . . . . . 3

106. Once they have all the children they expect, some people take extra steps to be sure they have no more; others do not feel it's so important. In your case, (now that/once) you have all the children you expect, what will you and your husband do to be sure you have no more babies? DO NOT READ CATEGORIES. IF MORE THAN ONE METHOD, RECORD VERBATIM AND CODE ALL THAT APPLY BELOW. 65

Don't know . (CHECK  & ASK A) A. Of course, we cannot be sure about the future, but considering the methods on this card (HAND CARD 1), what will you and your husband do, if anything, to be sure you will have no more babies than you expect? CODE BELOW.

Use contraception [CODE METHOD(S)]:

- Pill . . . . . A
- Douche . . . . . B 66
- Foam . . . . . C
- Jelly, Cream, Suppository. D 67
- IUD, Coil, Loop . . . . . E
- Condom, Rubber . . . . . F
- Diaphragm . . . . . G 68 70 /R
- Diaphragm & Jelly . . . . . H
- Rhythm - Calendar . . . . . J
- Rhythm - Temperature . . . . . K
- Not having intercourse to avoid pregnancy; abstinence . . . . . L
- Withdrawal . . . . . M
- Respondent have operation. N
- Husband have operation . . . . . P
- Abortion . . . . . S
- Other (SPECIFY) \_\_\_\_\_ W
- No method . . . . . O
- Don't know to A . . . . . 8

Q'S 107 & 108 OMITTED.

ASK EVERYONE:

109. The number of children people expect is not always the same as the number they would like to have. Now, if you could start over, knowing things would turn out just about the way they have for you and your husband, how many children would you most like to have by the time you are through having children?

\_\_\_\_\_ (NUMBER) ----->

IF NONE, SKIP TO SECTION V IF 1 THROUGH 5, CIRCLE APPROPRIATE NUMBER ON LEVEL I; THEN ASK D. IF 6 OR MORE, ASK A.	10 11
--	-------

\_\_\_\_\_ (GO TO B)  
 \_\_\_\_\_ (RANGE)

Don't know, up to God, etc. . . . . (GO TO C) . . . . . 98

A. If you couldn't have (NUMBER), would you choose one more or one less?

One more . . . 1	}	(GO TO Q. 110)	12
One less . . . 2			

B. If you had to choose a single number between (NUMBERS IN RANGE), which would you choose?

\_\_\_\_\_ (NUMBER) ----->

IF NONE, SKIP TO SECTION V. IF 1 THROUGH 5, CIRCLE APPROPRIATE NUMBER ON LEVEL I; THEN ASK D. IF 6 OR MORE, GO TO Q. 110.	13
--	----

C. A lot of people feel that way, but if you could choose, how many would you have?

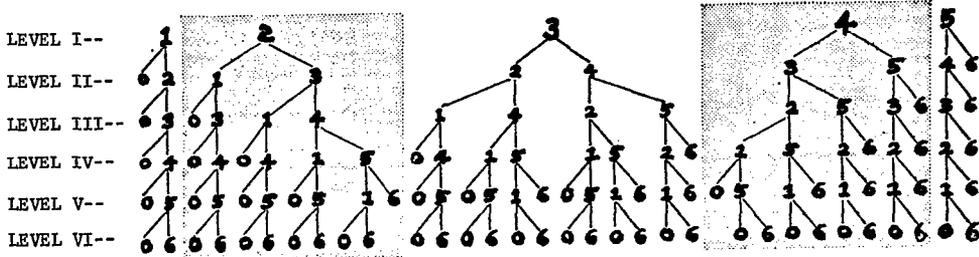
\_\_\_\_\_ (NUMBER) ----->

IF NONE, SKIP TO SECTION V. IF 1 THROUGH 5, CIRCLE APPROPRIATE NUMBER ON LEVEL I; THEN ASK D. IF 6 OR MORE, GO TO Q. 110.	14
--	----

Don't know . (GO TO Q. 106) . . . . . 8

D. The next questions may seem a little unusual. However, it will be helpful if you try to give the answers that seem most natural to you. Suppose you couldn't have (NUMBER), but you had to choose between \_\_\_\_\_ and \_\_\_\_\_. Which would you choose? CIRCLE NUMBER ON LEVEL II.

E. If you couldn't have that, would you choose \_\_\_\_\_ or \_\_\_\_\_? CIRCLE NUMBER ON LEVEL III AND CONTINUE UNTIL R. CHOOSES "0" OR "6."



15 20					

110. Sometimes the number of boys and girls makes a difference. If you had exactly three children, how many would you want to be boys, and how many girls?

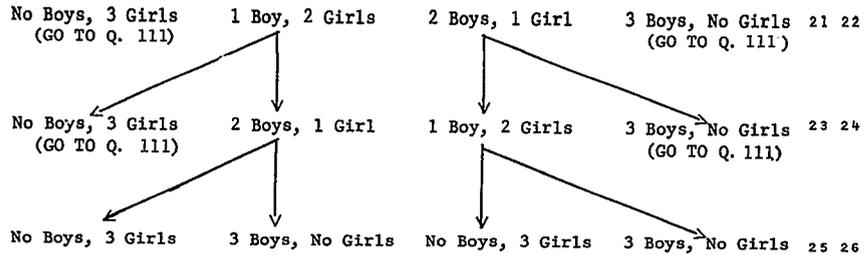
No difference, don't know . . CHECK  & PROBE:

Many people feel as you do, but if they had to choose they could. If you had to choose and you had 3 children, how many would you want to be boys, and how many girls?

CIRCLE R'S CHOICE IN THE TOP ROW. BELOW. THEN FOLLOW THE ARROWS FROM R'S FIRST CHOICE TO THE SECOND ROW, AND ASK A. (IF R CHOOSES EITHER NO BOYS OR NO GIRLS, GO TO Q. 111.)

A. If you could not have that combination, would you choose \_\_\_ or \_\_\_?  
CIRCLE R'S CHOICE IN THE SECOND ROW. THEN FOLLOW ARROW TO THE THIRD ROW, AND ASK B. (IF R CHOOSES NO BOYS OR NO GIRLS, GO TO Q. 111.)

B. If you could not have that combination, would you choose \_\_\_ or \_\_\_?  
CIRCLE R'S CHOICE IN THIRD ROW.

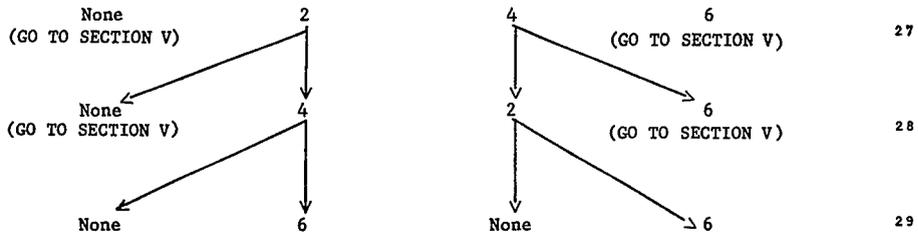


111. If you had the same number of boys and girls, how many children in all would you most like to have--none, two, four, or six?

CIRCLE R'S CHOICE IN THE TOP ROW, THEN FOLLOW ARROWS TO SECOND ROW, AND ASK A. (IF R CHOOSES EITHER "0" OR "6," GO TO SECTION V.)

A. If you could not have \_\_\_\_, would you most like to have \_\_\_\_ or \_\_\_\_?  
CIRCLE R'S CHOICE IN THE SECOND ROW. FOLLOW ARROWS TO THIRD ROW, AND ASK B. (IF R CHOOSES "0" OR "6," GO TO SECTION V.)

B. And if you could not have \_\_\_\_, would you most like to have \_\_\_\_ or \_\_\_\_?  
CIRCLE R'S CHOICE IN THIRD ROW.



SECTION V

In this survey, we are also talking with women about where they go for medical services and information about planning their families, and about medical conditions which they have experienced.

IF NEVER PREGNANT, OR CURRENTLY PREGNANT WITH FIRST PREGNANCY, SKIP TO Q. 118. (SEE RECALL CHART (C) AND (E))

112. This card lists some of the places where women go for prenatal care. During your last pregnancy, to which of these places did you go for prenatal care, or did you go to some other place? CODE ONLY ONE.

HAND CARD 2	Own medical doctor or group of doctors . . . . .	1	30
	A hospital out-patient clinic where they assign a doctor to you . . . . .	2	
	A separate clinic which is not in a hospital . . . . .	3	
	A midwife . . . . .	4	
	Some other place (SPECIFY) . . . . .	5	
	_____		
No care during pregnancy. (SKIP TO Q. 114) . . . . .		6	

113. This card lists some of the ways in which prenatal care could be paid for. During your last pregnancy, in which of these ways was the care paid for, or was it paid for in some other way? CODE ONLY ONE.

HAND CARD 3	Your own income only . . . . .	1	31
	Insurance only (which you carry or is carried for you) . . . . .	2	
	Own income and insurance . . . . .	3	
	Medicaid (Welfare) . . . . .	4	
	Other government (such as military) . . . . .	5	
	Parents or relatives . . . . .	6	
	Some other way . . . . . (SPECIFY) . . . . .	7	

114. ASK ONLY IF ANY LIVE BIRTHS; OTHERWISE SKIP TO Q. 117 (SEE RECALL CHART (C)) This card lists some of the ways in which hospital bills can be paid. When your (last) baby was born, in which of these ways was the hospital bill paid, or was the bill paid for in some other way? CODE ONLY ONE.

HAND CARD 3	Your own income only . . . . .	1	32
	Insurance only (which you carry or is carried for you) . . . . .	2	
	Own income and insurance . . . . .	3	
	Medicaid (Welfare) . . . . .	4	
	Other government (such as military) . . . . .	5	
	Parents or other relatives . . . . .	6	
	Some other way . . . . . (SPECIFY) . . . . .	7	

\_\_\_\_\_

No hospital care . . . . . (SKIP TO Q. 116) . . . . .		0
---	--	---

115. Did (LAST CHILD) come home from hospital at the same time you did, or did (he/she) stay longer?

Same time (or before mother) . . . . .	1	33
Stay longer (or was transferred to another institution) . . . . .	2	

116. Did (LAST CHILD) have to be hospitalized any time during the first year after (he/she) was born?

Yes . . . . .	1	34
No . . . . .	2	

117. Other than hospitalization for normal delivery or false labor, have you ever been hospitalized because of pregnancy? Yes . (ASK A & B) . 1 35  
 IF YES: No . . . . . 2 36  
 A. How many times? \_\_\_\_\_  
 B. In what year were you (first) hospitalized for a complication of pregnancy?   37 38  
 (YEAR)

118. Have you ever experienced any of these conditions? READ CONDITIONS SLOWLY AND DISTINCTLY.  
 A. Diabetes or sugar? Yes . [ASK (1)] . . 1 39  
 No . (GO TO B) . . 2  
 (1) IF YES TO A: In what year did you first know you had diabetes?   40 41  
 (YEAR)  
 B. High blood pressure when you were not pregnant? Yes . [ASK (1)] . . 1 42  
 No . (GO TO C) . . 2  
 (1) IF YES TO B: In what year did you first know you had high blood pressure?   43 44  
 (YEAR)  
 C. Anemia or thin blood of any kind when you were not pregnant? Yes [ASK (1) & (2)] 1 45  
 No . . . . . 2  
 IF YES TO C:  
 (1) In what year did you first know you had anemia?   46 47  
 (YEAR)  
 (2) Did a medical doctor tell you what kind? What did (he/she) say? Iron-deficiency anemia 1 48  
 Cooley's anemia . . . 2  
 Sickle cell anemia . . 3  
 Other (SPECIFY) . . . 4  
 Not medically diagnosed, doctor didn't say, don't know . . . 8

119. ASK ONLY IF FIRST MARRIED SINCE JAN. 1968; OTHERWISE, SKIP TO Q. 120 (SEE RECALL CHART (B))  
 Around the time you were (first) married, did you see a medical doctor in connection with your marriage? Yes . (ASK A-D) . . 1 49  
 No (GO TO Q. 120) . 2  
 IF YES:  
 A. Did you have a pelvic or internal examination at that time? Yes . (GO TO B) . . 1 50  
 No . [ASK (1)] . . 2  
 (1) IF NO TO A: Have you had a pelvic exam at any time within the last five years? Yes . (GO TO B) . . 1 51  
 No . (GO TO B) . . 2  
 B. Did you have a Pap smear to test for cancer at the time you saw the doctor in connection with your marriage? Yes . (GO TO C) . . 1 52  
 No . [ASK (1)] . . 2  
 (1) IF NO TO B: Have you had a Pap smear at any time within the last five years? Yes . (GO TO C) . . 1 53  
 No . (GO TO D) . . 2  
 C. In what year did you last have a Pap smear?   54 55  
 (YEAR)  
 D. Did the doctor prescribe or talk with you about methods for delaying or preventing a pregnancy? Yes . . . [ASK (1)] . . . . . 1 56  
 No . . . (SKIP TO Q. 121) . . 2  
 (1) IF YES TO D: Did you bring up the subject or did (he/she)? Respondent (SKIP TO Q. 122) . . 1 57  
 Doctor . (SKIP TO Q. 122) . . 2  
 Don't remember (SKIP TO Q. 122) 8

120. Have you seen a medical doctor for any reason within the past five years?  
 Yes . (ASK A & B) . 1 58  
 No . . . . . 2

IF YES:

A. Have you had a pelvic or internal exam during the past five years?  
 Yes . . . . . 1 59  
 No . . . . . 2

B. Have you had a Pap smear to test for cancer within the past five years?  
 Yes . [ASK (1)] . . 1 60  
 No . . . . . 2  
 Don't know . . . . 8

(1) IF YES TO B: In what year did you last have a Pap smear?   61 62  
 (YEAR)

121. IF STERILE BEFORE JAN. 1968, CHECK  , AND SKIP TO Q. 129 (SEE RECALL CHART Ⓢ); OTHERWISE, CONTINUE.  
 During the past five years, has a doctor or other trained person prescribed, or talked with you about a method for delaying or preventing pregnancy?  
 Yes . . . . . 1 63  
 No (SKIP TO Q.124) 2

122. When was the last time you talked about methods of family planning with a doctor or trained person?  
    →(ASK A) 64 67  
 (MONTH) (YEAR)

A. Where was this? CODE ONLY ONE.

HAND CARD 4	Own doctor's office/group of doctors . . . . . 1	}	(ASK B)	68
	General medical clinic, hospital outpatient clinic or public health clinic . . . . . 2			
	Family planning clinic or office . . . . . 3			
	While R was in the hospital [ASK (1)] . . . . . 4			
	Somewhere else (SPECIFY AND ASK B) . . . . . 5			

(1) IF WHILE R WAS IN HOSPITAL:  
 Was this with your regular doctor, a doctor assigned to you, or someone else?  
 Regular doctor . . . . . 1  
 Assigned doctor . . . . . 2 } (ASK B) 69  
 Someone else (SPECIFY) . . 3

B. Did you bring up the subject or did (he/she)?  
 Respondent . . . . . 1 70  
 Trained person . . . . . 2  
 Don't remember, don't know . . . . . 8

123. At that time did the doctor or trained person recommend a change in method or that you start a method?

Yes . . (ASK A-D) . 1 10
No (GO TO Q. 124). 2

IF YES:

A. What method was recommended? (CODE AS MANY AS MENTIONED.)

- Pill . . . . . A 11
Douche . . . . . B
Foam . . . . . C 12
Jelly, Cream, Suppository . . . . . D
IUD, Coil, Loop . . . . . E
Condom, Rubber . . . . . F
Diaphragm . . . . . G
Diaphragm and Jelly . . . . . H
Rhythm or safe period - calendar . . . . . J
Rhythm or safe period - temperature . . . . . K
Not having intercourse to avoid pregnancy,
abstinence . . . . . L
Withdrawal, Coitus interruptus . . . . . M
Operation; sterilization - Wife . . . . . N
Operation; sterilization - Husband . . . . . P
Abortion . . . . . S
Other . . . . . W

B. Did (he/she) say how effective (METHOD was/METHODS were)?

Yes . . . . . 1 13
No . . . . . 2

C. Did (he/she) discuss possible side effects or problems with you or your husband?

Yes . . . . . 1 14
No . . . . . 2

D. Did (he/she) tell (you/your husband) to return for a check-up in connection with using (METHOD)?

Yes . [ASK (1)] . . 1 15
No . . . . . 2

(1) IF YES TO D: How soon?

(MONTHS FROM VISIT) 16 17

124. IF R IS: STERILE, OR USING
(SEE NO METHOD,
RECALL ABSTINENCE,
CHART RHYTHM,
(8 & 9) WITHDRAWAL

} SKIP TO Q. 125; OTHERWISE CONTINUE.

You are now using (METHOD). Where did you go the last time for (METHOD/supplies)?

- Clinic . . . . . 1 18
Drugstore . . . . . 2
Medical doctor . . . . . 3
Other . (SPECIFY) . . . . . 4

125. In the past five years, have you talked with a medical doctor or to any other trained person about increasing your chances of having a baby? Yes (ASK A&B) 1 19  
 No . . . . . 2

IF YES:

A When did you last go for help?     20 23  
 (MONTH) (YEAR)

HAND  
CARD  
5

B. On this card are listed some places people go for this kind of help. To which of these places did you go, or did you go someplace else? Your own medical doctor or group of doctors . . . 1 24  
 A separate medical clinic not in a hospital . . . 2  
 A hospital out-patient clinic . . . . . 3  
 A family counselling service . . . . . 4  
 Somewhere else (SPECIFY) 5

126. IF STERILE BEFORE JULY 1, 1970, CHECK  AND SKIP TO Q. 129 (SEE RECALL CHART ©); OTHERWISE CONTINUE.

In the past three years, have you used a calendar or temperature method of rhythm to increase your chances of becoming pregnant? That is, in order to know the days when you are most likely to become pregnant. Yes (ASK A) . 1 25  
 No . . . . . 2

A. IF YES: Can you tell me in which months you were trying to become pregnant this way? (IF MORE THAN ONE PREGNANCY ATTEMPTED, ENTER DATES IN APPROPRIATE BOXES.)

Started First Time Second Time 34 37 CHECK  42  
  26 29   IF MORE THAN  
 (MONTH) (YEAR) (MONTH) (YEAR) TWO TIMES  
 Stopped   30 33   38 41

127. In the past three years, have you used the Pill for medical reasons only--not for delaying or preventing pregnancy? Yes (ASK A) . 1 43  
 No (GO TO Q. 128) . 2

A. IF YES: Can you tell me when you started and when you stopped using the Pill this way? (IF MORE THAN ONE PERIOD, ENTER DATES IN APPROPRIATE BOXES.)

Started First Time Second Time 52 55 CHECK  60  
  44 47   IF MORE THAN  
 (MONTH) (YEAR) (MONTH) (YEAR) TWO TIMES  
 Stopped   48 51   56 59

128. Do you regularly douche after intercourse? Yes (ASK A) . 1 61  
 No . . . . . 2

A. IF YES: How soon after intercourse do you usually douche? Would you say less than a half hour or more than a half hour? Less than a half hour [ASK (1)] . 1 62  
 More than a half hour . . . 2

(1) IF LESS THAN HALF HOUR: In what year did you start to douche regularly after intercourse?   63 64  
 (YEAR)

129. IF R. HAS SAID THAT SHE IS OPPOSED TO OR NEVER USED A METHOD, CHECK  AND SKIP TO Q. 130; OTHERWISE CONTINUE.

<b>A</b>			<b>B</b>
<p>CIRCLE "1" FOR LAST (CURRENT) METHOD; CIRCLE "2" FOR ALL OTHERS USED. (SEE RECALL CHART (4))</p> <p>[In addition to (METHODS CIRCLED)], have you or your husband <u>ever</u> used any (other) method to delay or pre- vent a pregnancy?</p> <p>Yes . . . 2 Which ones? CIRCLE No . . . 3 (GO TO Q. 130)      ↓</p>			<p>FOR EACH METHOD USED, <u>EXCEPT</u> LAST (CURRENT) METHOD, ASK:</p> <p>You used (METHOD). Why did      9 you change to another method?</p> <p>RECORD REASON ON LINE FOR THAT METHOD.</p>
Type of Method	Last (Current) Method	Other Methods	Reason
A) Pill	1	2	10 11 12 13
B) Douche	1	2	14 15 16 17
C) Foam	1	2	18 19 20 21
D) Jelly, Cream, Suppository	1	2	22 23 24 25
E) IUD, Coil, Loop	1	2	26 27 28 29
F) Condom, Rubber	1	2	30 31 32 33
G) Diaphragm	1	2	34 35 36 37
H) Diaphragm and Jelly	1	2	38 39 40 41
J) Rhythm - Calendar	1	2	42 43 44 45
K) Rhythm - Temperature	1	2	46 47 48 49
L) Not having inter- course to <u>avoid</u> pregnancy, ab- stinence	1	2	50 51 52 53
M) Withdrawal	1	2	54 55 56 57
N) Operation: Wife	1	2	58 59 ..... .....
P) Operation: Husband	1	2	60 61 ..... .....
S) Abortion	1	2	62 63 64 65
W) Other	1	2	66 67 68 69

SECTION VI

130. CODE RACE OF RESPONDENT BY OBSERVATION.

Black . . .	1	10
White . . .	2	
Other . . .	3	

131. These questions are about your family background. When you were growing up, that is, between the ages of 6 and 16, did you live on a farm most of the time? (Half of the time, or more.)

Yes . . . .	1	11
No . . . .	2	

132. When you were growing up, that is, between the ages of 6 and 16, in what state or foreign country did you live most of the time? (Half of the time, or more.)

REFER TO STATE CODES BELOW AND  
 ENTER CODE NUMBER IN BOX . . . .   12 13

IF FOREIGN COUNTRY, ENTER CODE NUMBER IN BOX AND  
 SPECIFY HERE: \_\_\_\_\_

STATE CODES					
Alabama . . . . .	63	Louisiana . . . . .	73	Oklahoma . . . . .	72
Alaska . . . . .	94	Maine . . . . .	11	Oregon . . . . .	92
Arizona . . . . .	87	Maryland . . . . .	52	Pennsylvania . . . . .	23
Arkansas . . . . .	71	Massachusetts . . . . .	14	Rhode Island . . . . .	16
California . . . . .	93	Michigan . . . . .	34	South Carolina . . . . .	57
Colorado . . . . .	86	Minnesota . . . . .	41	South Dakota . . . . .	45
Connecticut . . . . .	15	Mississippi . . . . .	64	Tennessee . . . . .	62
Delaware . . . . .	51	Missouri . . . . .	43	Texas . . . . .	74
Washington, D.C. . . . .	55	Montana . . . . .	81	Utah . . . . .	85
Florida . . . . .	59	Nebraska . . . . .	46	Vermont . . . . .	12
Georgia . . . . .	58	Nevada . . . . .	84	Virginia . . . . .	54
Hawaii . . . . .	95	New Hampshire . . . . .	13	Washington . . . . .	91
Idaho . . . . .	82	New Jersey . . . . .	22	West Virginia . . . . .	53
Illinois . . . . .	32	New Mexico . . . . .	88	Wisconsin . . . . .	31
Indiana . . . . .	33	New York . . . . .	21	Wyoming . . . . .	83
Iowa . . . . .	42	North Carolina . . . . .	56		
Kansas . . . . .	47	North Dakota . . . . .	44	Foreign country . . . . .	
Kentucky . . . . .	61	Ohio . . . . .	35		01

133. When you were 14, were you living with both your own mother and your own father?

Yes . . . .	1	14
No (ASK A).	2	

A. IF NO: Was that because one or both of them had died, they were divorced, or for some other reason?

One or both died . .	3	15
They were divorced .	4	
Some other reason .	5	

134, What is your origin or descent? CODE ALL THAT APPLY.

HAND CARD 6

ORIGIN CODES

German . . . . .	1 16	Puerto Rican . . . . .	2	24
Italian . . . . .	2 17	Cuban . . . . .	3	25
Irish . . . . .	3 18	Other Spanish (HISPANO) . . . . .	4	26
French . . . . .	4 19	Black, African, Negro . . . . .	5	27
Polish . . . . .	5 20	American Indian . . . . .	6	28
Russian . . . . .	6 21	Asian -- Chinese, Japanese, etc. . . . .	7	29
English, Scot, Welsh . . . . .	7 22	Other (SPECIFY) . . . . .	1	30
Mexicano, Chicano, Mexican American . . . . .	1 23	Don't know . . . . .	8	31

135, What is the highest grade or year of regular school or college you have attended?

REFER TO GRADE CODES AND ENTER CODE NUMBER IN BOX . . . . .

32 33

GRADE CODES

No formal schooling . . . . .	00	(SKIP TO Q. 140)	
<b>Elementary:</b>		<b>High School:</b>	
1st grade . . . . .	01	1st year . . . . .	09
2nd grade . . . . .	02	2nd year . . . . .	10
3rd grade . . . . .	03	3rd year . . . . .	11
4th grade . . . . .	04	4th year . . . . .	12
5th grade . . . . .	05	<b>College:</b>	
6th grade . . . . .	06	1 year . . . . .	13
7th grade . . . . .	07	2 years . . . . .	14
8th grade . . . . .	08	3 years . . . . .	15
		4 years . . . . .	16
		5 years . . . . .	17
		6 years or more . . . . .	18

136, Did you complete that grade or year? Yes . . . . . 1 34 No . . . . . 2

137, Have you had any other schooling, such as business college, nursing, or technical school? Yes . . (ASK A & B) . . 1 35 No . . . . . 2

IF YES:

A. How many years of such schooling have you had? Less than one year . . . 0 36 1 year . . . . . 1 2 years . . . . . 2 3 years . . . . . 3

B. Did you include any of this schooling in answering the question on the highest grade of regular school you have attended? Yes . . (GO BACK AND CORRECT CODE IN Q. 135) . . . . . 1 37 No . . . . . 2

138. Did you get any of your education in a church-related school (or college)?

Yes . . (ASK A & B) . . . 1 38
No . . . . . 2

IF YES:

A. Which grades of school (and/or college) were in a church-related school?

CODE ALL THAT APPLY

Elementary: 1st grade . . . . . 01
2nd grade . . . . . 02
3rd grade . . . . . 03
4th grade . . . . . 04
5th grade . . . . . 05
6th grade . . . . . 06
7th grade . . . . . 07
8th grade . . . . . 08
High school: 1st year . . . . . 09
2nd year . . . . . 10
3rd year . . . . . 11
4th year . . . . . 12
College: 1st year . . . . . 13
2nd year . . . . . 14
3rd year . . . . . 15
4th year . . . . . 16 39
5th year . . . . . 17 40
6th year or higher . 18 41

B. Which church or religious group was that?

Roman Catholic . . . . . 1 42
Baptist, Lutheran, or other
Protestant . . . . . 2
Jewish . . . . . 3
Muslim . . . . . 4
Other (SPECIFY) . . . . . 5

139. What was the highest grade or year of regular school (or college) you had completed at the time of your (first) marriage?

REFER TO GRADE CODES IN Q. 135, AND ENTER CODE NUMBER IN BOX . . . . . 43 44

140. ASK ONLY IF MARRIED MORE THAN ONCE (SEE RECALL CHART (A)); OTHERWISE SKIP TO Q. 142. What was the highest grade or year of regular school or college your first husband had completed, at the time of your marriage?

REFER TO GRADE CODES IN Q. 135, AND ENTER CODE NUMBER IN BOX . . . . . 45 46

141. When was your first husband born?

MONTH DAY YEAR 47 52

Don't know (ASK A & B) . 98

IF DON'T KNOW:

A. How old was he when you were married? AGE: . . . . . 53 54

B. When is his birthday? MONTH DAY 55 58

142. Before you were (first) married, did you ever work for pay? Yes . . (ASK A) . . 1 59 No . . . . . 2

A. IF YES: Altogether, how long did you work before you were (first) married? (YEARS) 60 61 Less than one year 00

143, IF R HAS NEVER HAD A LIVE BIRTH, SKIP TO Q. 148 (SEE RECALL CHART ©); OTHERWISE CONTINUE.

Between the time of your (first) marriage and the birth of your (first) child, did you ever work for pay? Yes . . . (ASK A) . 1 10  
No . . . . . 2

A. Altogether, how long did you work between the time of your (first) marriage and the birth of your (first) child? (YEAR) 11 12  
Less than one year . 00

144, IF R HAS HAD ONLY ONE LIVE BIRTH, SKIP TO INTERV. CHECK ITEM BELOW (SEE RECALL CHART ©); OTHERWISE CONTINUE.

Between the birth of your first child and the birth of your second child, did you ever work for pay? Yes . . . (ASK A) . 1 13  
No . . . . . 2

A. Altogether, how long did you work between the birth of your first child and the birth of your second child? (YEARS) 14 15  
Less than one year . 00

145, IF R HAS HAD ONLY TWO LIVE BIRTHS, SKIP TO INTERV. CHECK ITEM BELOW (SEE RECALL CHART ©); OTHERWISE CONTINUE.

Between the birth of your second child and the birth of your third child, did you ever work for pay? Yes . . . (ASK A) . 1 16  
No . . . . . 2

A. Altogether, how long did you work between the birth of your second child and the birth of your third child? (YEARS) 17 18  
Less than one year . 00

146, IF R HAS HAD ONLY THREE LIVE BIRTHS, SKIP TO INTERV. CHECK ITEM BELOW (SEE RECALL CHART ©); OTHERWISE CONTINUE.

Between the birth of your third child and the birth of your last child, did you ever work for pay? Yes . . . (ASK A) . 1 19  
No (SKIP TO Q. 149). 2

A. Altogether, how long did you work between the birth of your third child and the birth of your last child? (YEARS) 20 21  
Less than one year . 00

INTERVIEWER CHECK ITEM

MORE THAN ONE LIVE BIRTH:

DID R WORK BETWEEN BIRTH OF NEXT TO LAST CHILD AND LAST CHILD?  
Yes . . . . CHECK  & CONTINUE WITH Q. 147.  
No . . . . CHECK  & SKIP TO Q. 149.  
Don't know . CHECK  CONTINUE WITH Q. 147.

ONLY ONE LIVE BIRTH:

DID R WORK BEFORE BIRTH OF CHILD?  
Yes . . . . CHECK  & CONTINUE WITH Q. 147.  
No . . . . CHECK  & SKIP TO Q. 149.

147, How long before the birth of your (last) child did you stop working?  
Less than one month (SKIP TO Q. 149) . 00 22 23  
Number of months \_\_\_\_\_ (SKIP TO Q. 149)  
One year or more (SKIP TO Q. 149) . . 12

148, Since you were (first) married, have you ever worked for pay? Yes (ASK A) . . . . 1 24  
No . . . . . 2

A. Altogether, how long have you worked since your (first) marriage? (YEAR) 25 26  
Less than one year . 00

149. ASK EVERYONE: Last week, were you working full time, part time, going to school, keeping house, or what?

CIRCLE ONE CODE ONLY. IF MORE THAN ONE RESPONSE, CODE RESPONSE WITH SMALLEST NUMBER.

- Working full time (35 hours or more) . . . . . 1 27
  - Working part time (1 to 34 hours) . . . . . 2
  - With a job, but on maternity leave . . . . . 3
  - With a job, but not at work because of temporary illness, vacation, strike . . . . . 4
  - Unemployed, laid off, looking for work . . . . . 5
  - Retired . . . . . 6
  - In school . . . . . 7
  - Keeping house . . . . . 8
- } SKIP TO Q. 153

150. ASK ONLY IF R. HAS CHILDREN IN HOUSEHOLD (SEE RECALL CHART (D)); IF R. HAS NO LIVE BIRTHS, SKIP TO Q. 157 (SEE RECALL CHART (C)); IF R. HAS NO CHILDREN IN HOUSEHOLD, SKIP TO Q. 154.

Do you have any regular arrangement for the care of your child(ren) while you are working?

- Yes . . . . . 1 28
- No . (SKIP TO Q. 155). 2

151. Who takes care of your child(ren), and where? RECORD VERBATIM AND CODE AS MANY AS APPLY.

- In own home, by relative. . . . . 1 29
- In own home, by nonrelative . . . 2 30
- In relative's home . . . . . 3 31
- In nonrelative's home . . . . . 4 32
- In day care center or other special organized facility . . 5 33
- Other . . . . . 6 34

152. During the average week of the school year, how many hours per week of child care do you use for (your child/each of your children)? RECORD HOURS FOR EACH CHILD, AND ADD UP.

CHILD	HOURS NEEDED	
1	_____	
2	_____	
3	_____	
4	_____	
5	_____	
6	_____	
7	_____	
8	_____	
9	_____	
TOTAL	_____ (SKIP TO Q. 155)	35 37

153. Do you expect to look for, or return to, a job sometime in the future?

- Yes . . . (ASK A) . . . 1 38
- No . . . . . 2
- Don't know . . . . . 8

A. About how soon will that be?

- Less than one year . 00 39 40
- Number of years . \_\_\_\_\_
- Don't know . . . . . 98

154. IF NO LIVE BIRTHS, SKIP TO Q. 157 (SEE RECALL CHART (C)); OTHERWISE CONTINUE. Have you worked for pay at any time since your (last) child was born?

- Yes . . . . . 1 41
- No . (SKIP TO Q. 157) . 2

155. Altogether, how long have you worked since the birth of your (last) child? Less than one year . . . . 00 42 43  
 Number of years . . . . .

156. In what month and year did you begin to work after your (last) child was born?     44 47  
 (MONTH) (YEAR)

157. ASK ONLY IF R HAS EVER WORKED; OTHERWISE SKIP TO Q. 161.  
 A. What (is/was) your (last) occupation. That is, what (is/was) your job called?  
 JOB TITLE: \_\_\_\_\_ 48 50  
 B. What (are/were) your most important activities or duties?  
 DUTIES: \_\_\_\_\_ 51 52  
 C. What kind of place (do/did) you work for? What do they make or do?  
 INDUSTRY: \_\_\_\_\_

158. How much (do/did) you earn per hour on this job? AMOUNT: \_\_\_\_\_ per HOUR 53 56  
 OR WEEK . . 1 62  
 AMOUNT: \_\_\_\_\_ per MONTH . 2  
 57 61 YEAR . . 3

159. How many hours a week (do/did) you usually work at this job? HOURS PER WEEK \_\_\_\_\_ 63 64

160. IF R HAS NOT WORKED SINCE LAST CHILD WAS BORN (Q. 154), SKIP TO Q. 161.  
 In the past 12 months--that is, since (MONTH), 1972--how many weeks did you work either full-time or part-time, including paid vacations and paid sick leave?  
 NUMBER OF WEEKS \_\_\_\_\_ 65 66  
 None . . . . . 00

ASK EVERYONE:

161. Are you Protestant, Roman Catholic, Jewish or something else?  
 Roman Catholic . . . (SKIP TO Q. 163) . . 10 67 68  
 Protestant . . . . (ASK A) . . . . . 20  
 Jewish . . . . . (GO TO Q. 162) . . . 30  
 \_\_\_\_\_ < Other (SPECIFY AND GO TO Q. 162) . . . 40  
 None . . . . . (SKIP TO Q. 164) . . 50

A. IF PROTESTANT: What specific denomination is that, if any:  
 Baptist . . . . . 21  
 Lutheran . . . . . 22  
 Methodist . . . . . 23  
 Presbyterian . . . . . 24  
 Episcopalian . . . . . 25  
 No specific denomination . . . 28  
 \_\_\_\_\_ < Other (SPECIFY) . . . . . 00

162. IF PROTESTANT, JEWISH, OR OTHER: About how often do you usually attend religious services? Once a week or more . . . 1 69  
 2 or 3 times a month . . . 2  
 Once a month . . . . . 3 (SKIP TO Q.164)  
 Several times a year . . . 4  
 About once a year . . . . 5  
 Less than once a year . . . 6  
 Never . . . . . 7

163. IF ROMAN CATHOLIC: How often do you receive Communion? More than once a week . . . . . 1 70  
 Once a week . . . . . 2  
 2 or 3 times a month . . . . . 3  
 Once a month . . . . . 4  
 Several times a year . . . . . 5  
 About once a year . . . . . 6  
 Less than once a year . . . . . 7  
 Never . . . . . 8

ASK EVERYONE:

164. Now about Mr. (PRESENT HUSBAND). When he was growing up, that is between the ages of 6 and 16, did he live on a farm most of the time? (Half of the time, or more.)

- Yes . . . . . 1 10
- No . . . . . 2
- Don't know . . . . . 8

165. In what state or foreign country did he live most of the time (between the ages of 6 and 16)?

REFER TO STATE CODES BELOW,  
AND ENTER CODE NO. IN BOX . . . . .

11 12

IF FOREIGN COUNTRY, ENTER CODE NUMBER IN BOX AND  
SPECIFY HERE: \_\_\_\_\_

STATE CODES

Alabama . . . . . 63	Louisiana . . . . . 73	Oklahoma . . . . . 72
Alaska . . . . . 94	Maine . . . . . 11	Oregon . . . . . 92
Arizona . . . . . 87	Maryland . . . . . 52	Pennsylvania . . . . . 23
Arkansas . . . . . 71	Massachusetts . . . . . 14	Rhode Island . . . . . 16
California . . . . . 93	Michigan . . . . . 34	South Carolina . . . . . 57
Colorado . . . . . 86	Minnesota . . . . . 41	South Dakota . . . . . 45
Connecticut . . . . . 15	Mississippi . . . . . 64	Tennessee . . . . . 62
Delaware . . . . . 51	Missouri . . . . . 43	Texas . . . . . 74
Washington, D.C. . . . . 55	Montana . . . . . 81	Utah . . . . . 85
Florida . . . . . 59	Nebraska . . . . . 46	Vermont . . . . . 12
Georgia . . . . . 58	Nevada . . . . . 84	Virginia . . . . . 54
Hawaii . . . . . 95	New Hampshire . . . . . 13	Washington . . . . . 91
Idaho . . . . . 82	New Jersey . . . . . 22	West Virginia . . . . . 53
Illinois . . . . . 32	New Mexico . . . . . 88	Wisconsin . . . . . 31
Indiana . . . . . 33	New York . . . . . 21	Wyoming . . . . . 83
Iowa . . . . . 42	North Carolina . . . . . 56	
Kansas . . . . . 47	North Dakota . . . . . 44	Foreign country . . . . . 01
Kentucky . . . . . 61	Ohio . . . . . 35	

166. What is his origin or descent? CODE ALL THAT APPLY.

HAND  
CARD  
6

ORIGIN CODES

German . . . . . 1 13	Puerto Rican . . . . . 2	21
Italian . . . . . 2 14	Cuban . . . . . 3	22
Irish . . . . . 3 15	Other Spanish (HISPANO) . . . . . 4	23
French . . . . . 4 16	Black, African, Negro . . . . . 5	24
Polish . . . . . 5 17	American Indian . . . . . 6	25
Russian . . . . . 6 18	Asian -- Chinese, Japanese, etc. . . . . 7	26
English, Scot, Welsh . . . . . 7 19	Other (SPECIFY) . . . . . 1	27
Mexicano, Chicano, Mexican American . . . . . 1 20	Don't know . . . . . 8	28

167. When your husband was 14, was he living with both his own mother and his own father?

- Yes . . . . . 1 29
- No . . (ASK A) . . . . . 2

A. IF NO: Was that because one or both of them had died, they were divorced, or for some other reason?

- One or both died . . . . . 3 30
- They were divorced . . . . . 4
- Some other reason . . . . . 5

168. What is the highest grade or year of regular school or college your husband has attended?

REFER TO GRADE CODES AND ENTER CODE NO IN BOX . . . . .

31 32

GRADE CODES

No formal schooling . . . . . 00	(SKIP TO Q. 170)
<b>Elementary:</b>	<b>High School:</b>
1st grade . . . . . 01	1st year . . . . . 09
2nd grade . . . . . 02	2nd year . . . . . 10
3rd grade . . . . . 03	3rd year . . . . . 11
4th grade . . . . . 04	4th year . . . . . 12
5th grade . . . . . 05	
6th grade . . . . . 06	<b>College:</b>
7th grade . . . . . 07	1 year . . . . . 13
8th grade . . . . . 08	2 years . . . . . 14
	3 years . . . . . 15
	4 years . . . . . 16
	5 years . . . . . 17
	6 years or more . . . . . 18

169. Did he complete that grade or year? Yes . . . . . 1 33  
 No . . . . . 2  
 Don't know . 8

170. Is this your husband's only marriage, or has he been married before? Only marriage . . . . . 1 34  
 Married before . . . . . 2

171. Is he Protestant, Roman Catholic, Jewish, or something else?  
 Roman Catholic . (SKIP TO Q. 173) . . . . . 10 35 36  
 Protestant . . . . . (ASK A) . . . . . 20  
 Jewish . . . . . (GO TO Q. 172) . . . . . 30  
 ← Other (SPECIFY AND GO TO Q. 172) . . . . . 40  
 None . . . . . (SKIP TO Q. 174) . . . . . 50  
 Don't know . . . . . (GO TO Q. 172) . . . . . 98

A. IF PROTESTANT: What specific denomination is that, if any?  
 Baptist . . . . . 21  
 Lutheran . . . . . 22  
 Methodist . . . . . 23  
 Presbyterian . . . . . 24  
 Episcopalian . . . . . 25  
 No specific denomination . . . . . 28  
 ← Other (SPECIFY) . . . . . 00

172. IF PROTESTANT, JEWISH, "OTHER," OR DON'T KNOW: About how often does he usually attend religious services?  
 Once a week or more . . . . . 1 } 37  
 2 or 3 times a month . . . . . 2 }  
 Once a month . . . . . 3 } SKIP  
 Several times a year . . . . . 4 } TO  
 About once a year . . . . . 5 } Q. 174  
 Less than once a year . . . . . 6 }  
 Never . . . . . 7 }

173. IF ROMAN CATHOLIC: How often does he receive Communion?  
 More than once a week . . . . . 1 38  
 Once a week . . . . . 2  
 2 or 3 times a month . . . . . 3  
 Once a month . . . . . 4  
 Several times a year . . . . . 5  
 About once a year . . . . . 6  
 Less than once a year . . . . . 7  
 Never . . . . . 8

174. ASK EVERYONE: Last week, was your husband working full time, part time, going to school, keeping house, or what?

- CIRCLE ONE CODE ONLY. IF MORE THAN ONE RESPONSE, CODE RESPONSE WITH SMALLEST NUMBER. Working full time (35 hours or more) . . . . . 1 39 Working part time (1 to 34 hours) . . . . . 2 With a job, but not at work because of temporary illness, vacation, strike . . . . . 3 Unemployed, laid off, looking for work . . . . . 4 Retired . . . . . 5 In school . . . . . (ASK A) . . . . . 6 Keeping house . . . . . (ASK A) . . . . . 7 Other (SPECIFY AND ASK A) . . . . . 8

A. IF IN SCHOOL, KEEPING HOUSE, OR OTHER: Did he ever have a job or business for pay? Yes . . . . . 1 40 No (SKIP TO Q. 180) 2

175. A. What (is/was) your husband's (main) occupation? That is, what (is/was) his job called? JOB TITLE: \_\_\_\_\_ 41 43

B. What (are/were) his most important activities or duties? DUTIES: \_\_\_\_\_ 44 45

C. What kind of place (do/did) he work for? What do they make or do? INDUSTRY: \_\_\_\_\_ 46/R

176. In the past 12 months--that is, since (MONTH), 1972--how many weeks did your husband work at his (main) job, including paid vacations and paid sick leave? \_\_\_\_\_ weeks 47 48 None (SKIP TO Q. 180) 00

177. How many hours a week does he usually work at that job? \_\_\_\_\_ hours per week 49 50

178. In the past 12 months, how many weeks has your husband worked at any other jobs or business for pay? \_\_\_\_\_ weeks 51 52 None (SKIP TO Q. 180) 00

179. How many hours a week does he usually work at (that job/those jobs)? \_\_\_\_\_ hours per week 53 54

180. ASK ONLY IF R WORKED IN LAST 12 MONTHS (Q. 160); OTHERWISE GO TO Q. 181. In the past 12 months--that is, since (MONTH), 1972--what did you earn in wages, salary or in your own business or profession? Total earnings: \_\_\_\_\_ 55 59 Don't know, refused (ASK A)

A. IF DON'T KNOW OR REFUSED: Here is a card showing amounts of weekly and yearly incomes. Next to each amount is a letter. Would you tell me what letter represents the income before taxes and other deductions that you earned in wages, salary or in your own business or profession during the past 12 months?

HAND CARD 7

CARD 7 table with columns Weekly Income and Yearly Income, listing ranges from Under \$20 to \$481 or more.

ENTER LETTER: \_\_\_\_\_ 60 61 Don't know . . . 98 Refused . . . . 97

181. ASK ONLY IF R'S HUSBAND WORKED IN LAST 12 MONTHS (Q. 176); OTHERWISE GO TO Q. 182. In the past 12 months--that is, since (MONTH) 1972--what did your husband earn in wages, salary, or in his own business or profession?

Total earnings: \_\_\_\_\_ 10 14

Don't know, refused . (ASK A)

A. IF DON'T KNOW OR REFUSED: Here is a card showing amounts of weekly and yearly incomes. Next to each amount is a letter. Would you tell me what letter represents the income before taxes and other deductions that your husband earned in wages, salary or in his own business or profession during the past 12 months.

HAND CARD 7

ENTER LETTER: \_\_\_\_\_ 15 16

Don't know . . . . . 98

Refused . . . . . 97

182. ASK ONLY IF OTHER FAMILY MEMBERS LIVING IN HOUSEHOLD; OTHERWISE SKIP TO Q. 183. Did any other members of your family living here have earnings from wages, salary or their own business or profession?

Yes . . (ASK A AND B) . . . 1 17

No . . . . . 2

A. How many other family members had earnings in the past twelve months?

Number of other earners: \_\_\_\_\_ 18

B. How much did (EACH ADDITIONAL EARNER) earn?

First \_\_\_\_\_ Total Earnings Don't know . . . . 99998 19 23

Second \_\_\_\_\_ Total Earnings Don't know . . . . 99998 24 28

Third \_\_\_\_\_ Total Earnings Don't know . . . . 99998 29 33

183. ASK ONLY IF R'S PLUS HUSBAND'S EARNINGS ARE LESS THAN \$10,000; OTHERWISE SKIP TO Q. 184.

In the past 12 months, did you or anyone else in the family here receive any welfare payments for aid to your dependent children?

Yes . . . . (ASK A) . . 1 34

No . . . . . 2

A. Altogether, how much did you receive in the past twelve months for support of the children?

Total Amounts: \_\_\_\_\_ 35 38

Don't know (ASK B AND C). 9998

IF DON'T KNOW TO A:

B. How much did you receive per month?

Monthly rate: \_\_\_\_\_ 39 41

C. In how many of the last 12 months did you receive welfare aid for your dependent children?

\_\_\_\_\_ Months 42 43

184. Did you or any members of your family living here receive income in the past twelve months from any of these sources? READ ITEM (1). THEN ASK A AND B AS NECESSARY BEFORE ASKING NEXT ITEM.

Source of Income	IF YES: ASK A AND B			A. How much total income did your family receive from (SOURCE)?		B. How much of <u>this</u> income did your husband receive?	
	Yes	No	Don't know	Don't know	Amount	Don't know	Amount
(1) Dividends, interest, property rental? . .	1	2	8	9998	\$ 11 14	9998	\$ 15 18
(2) Unemployment or Workmen's Compensation?	1	2	8	9998	\$ 20 23	9998	\$ 24 27
(3) Social Security or retirement? . . . .	1	2	8	9998	\$ 29 32	9998	\$ 33 36
(4) Any (other) public assistance or welfare payments? (INCLUDE old age assistance, aid to the blind or totally disabled, general assistance) . . . .	1	2	8	9998	\$ 38 41	9998	\$ 42 45
(5) NOT ASKED FOR CURRENTLY MARRIED	//////////			////	//////////	////	////////// 46-50/R
(6) Regular contributions from persons not in this household, or anything else? . .	1	2	8	9998	\$ 52 55	9998	\$ 56 59

BEGIN DECK 16

185. ASK EVERYONE: Taken altogether, then, about what was the total income of your family during the past twelve months?

Total Amount \$ \_\_\_\_\_ 10 14

Don't know, refused . . . . . (ASK A)

A. IF DON'T KNOW OR REFUSED: Here is a card showing amounts of weekly and yearly incomes. Next to each amount is a letter. Would you tell me what letter represents the income of your family during the past 12 months? This includes income from all sources that you, your husband, and all other members of your family living here received, before taxes and other deductions.

HAND CARD  
7

ENTER LETTER: \_\_\_\_\_ 15 16

Don't know . . . . . 98

Refused . . . . . 97

186. Are there any other persons not living with you now who are dependent upon your family's income for at least half of their support? Don't forget to include any children of this or a former marriage, other relatives, adopted children, and so on.

Yes . . . . (ASK A) . . 1 17

No . . . . . 2

A. IF YES: How many persons? \_\_\_\_\_ persons 18 19

187. **PINK CARDS ONLY**

This time last year, did you live in a different county or state than this one? (IF THE RESPONDENT NOW LIVES IN LOUISIANA, SAY: "different parish or state." IF R. NOW LIVES IN THE NEW ENGLAND STATES, SAY: "different township or state.")

Yes . . . . . 1 20

No . . . . . 2

188. ASK EVERYONE: As far as you know now, where will you be living this time next year?

Same address (RECORD ADDRESS BELOW) . 1

Other (GET BEST POSSIBLE ADDRESS AND OBTAIN MAILING ADDRESS IF R IS IN RURAL AREA AND RECORD BELOW) . . . . 2

_____		_____	
(Number)	(Street)		
_____		_____	_____
(City/Town)	(State)	(Zip)	

189. At some time in the future, we will need to talk again with some of the women we are interviewing now. We don't know who these women will be, as they will be chosen by chance. In case we need to get in touch with you again . . .

A. Would you please give me the names of two close relatives or friends who would be likely to know where you have moved? ENTER NAMES BELOW. THEN ASK B-E FOR EACH.

	_____	_____
	(Name)	(Name)
B. How is (PERSON) related to you?	_____	_____
	(Relationship)	(Relationship)
C. What is (his/her) address?	_____	_____
	(Number) (Street)	(Number) (Street)
	_____	_____
	(City/Town & State) (Zip)	(City/Town & State) (Zip)
D. What is (his/her) telephone number?	_____	_____
	(Area Code-Phone No.)	(Area Code-Phone No.)
E. <u>IF PERSON IS MARRIED FEMALE, ASK:</u>		
What is her husband's first name?	_____	_____
	(Husband's First Name)	(Husband's First Name)
	Single . . . X	Single . . . X

<input type="checkbox"/>									
PSU	SEG.	PT	LINE			CASE			

CONTINUE WITH Q. 190 ON PAGE 45.







Time \_\_\_\_\_ am  
 \_\_\_\_\_ pm

BEGIN DECK 01

SECTION A

In this study, we are talking with women about their families and about the children they may want to have in the future. To begin --

A-1. What do you think is the ideal number of children for the average American family today?  
 (PROBE "NONE" RESPONSE) NUMBER \_\_\_\_\_ (A-3)  
 There is no ideal number . . . 7 (A-3) 13 14  
 Depends, God's will, DK, etc.. 8 (A-2)

A-2. Many people feel that way, but still they have some idea. As things are now for the average family, how many children would you say is the ideal number?  
 (PROBE "NONE" RESPONSE) NUMBER \_\_\_\_\_  
 There is no ideal number . . . 7  
 Depends, God's will, DK, etc.. 8

A-3. Before you were married, did you and Mr. (NAME OF PRESENT HUSBAND) agree on a number of children you would like to have together?  
 Yes . . . . . 1 (A-4)  
 No . . . . . 2 (A-5) 15  
 Never discussed. . . . . 3 (A-6)  
 DK, Don't remember . . . . . 8 (A-6)

A-4. At that time, what number did you agree on?  
 NUMBER \_\_\_\_\_ (A-7) 16

A-5. At that time, how many children did Mr. (NAME OF PRESENT HUSBAND) want you to have together?  
 NUMBER \_\_\_\_\_ 17   
 Had no preferred number. . . . 7  
 DK, Never discussed. . . . . 8

A-6. At that time, how many children did you yourself want to have in this marriage?  
 NUMBER \_\_\_\_\_ 18   
 Had no preferred number. . . . 7  
 DK . . . . . 8

A-7. When were you born? 19 20 21 22 23 24  
 \_\_\_\_\_  
 MONTH/DAY/YEAR

**Box 1. IF R WAS BORN BEFORE 1931 OR AFTER 1961, TERMINATE INTERVIEW. OTHERWISE, WHITE CARDS CONTINUE, PINK CARDS GO TO A-9.**

**A-8. WHITE CARDS ONLY:** 25 26  
 Counting yourself and any children who died very young, how many babies did your mother give birth to?  
 Number Babies \_\_\_\_\_

A-9. When was your husband born? 27 28 29 30 31 32  
 \_\_\_\_\_  
 MONTH/DAY/YEAR

A-10. Have you ever been married before? Yes . . . . . 1 (A-11) 33  
 No. . . . . 2 (A-12)

A-11. Including your present marriage, how many times have you been married? 34  
NUMBER OF TIMES  

A-12. When were you and Mr. (NAME OF PRESENT HUSBAND) married?  
 ENTER DATE AND IF NO PREVIOUS MARRIAGES, ALSO ENTER BELOW B & P RECORD.  
 IF INFORMAL UNION, CHECK HERE  COLUMNS 42-50: BLANK FILL

MONTH / DAY / YEAR	MONTH / DAY / YEAR	MONTH / DAY / YEAR
35 36 37 38 39 40	41 42 43 44 45 46	47 48 49 50 51 52

Box 2. IF NO PREVIOUS MARRIAGES, GO TO SECTION B. OTHERWISE, ASK A-13 THROUGH A-17 SEQUENTIALLY FOR RESPONDENT'S FIRST AND SECOND MARRIAGES ONLY.

BEGIN DECK 02

	FIRST MARRIAGE	SECOND MARRIAGE																
A-13. When were you married the (1st, 2nd) time?  (ENTER DATE OF FIRST MARRIAGE HERE AND BELOW B & P RECORD.)  CHECK CIRCLE IF INFORMAL UNION	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">MONTH / DAY / YEAR</td> <td style="text-align: center;">MONTH / DAY / YEAR</td> </tr> <tr> <td style="text-align: center;">51 52 53 54 55 56</td> <td style="text-align: center;">57 58 59 60 61 62</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> </td> <td style="border: 1px solid black; text-align: center;"> </td> </tr> <tr> <td style="text-align: center;"><input type="radio"/> 57 <input type="checkbox"/></td> <td style="text-align: center;"><input type="radio"/> 19 <input type="checkbox"/></td> </tr> </table>	MONTH / DAY / YEAR	MONTH / DAY / YEAR	51 52 53 54 55 56	57 58 59 60 61 62			<input type="radio"/> 57 <input type="checkbox"/>	<input type="radio"/> 19 <input type="checkbox"/>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">MONTH / DAY / YEAR</td> <td style="text-align: center;">MONTH / DAY / YEAR</td> </tr> <tr> <td style="text-align: center;">13 14 15 16 17 18</td> <td style="text-align: center;">19 20 21 22 23 24</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> </td> <td style="border: 1px solid black; text-align: center;"> </td> </tr> </table>	MONTH / DAY / YEAR	MONTH / DAY / YEAR	13 14 15 16 17 18	19 20 21 22 23 24				
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MONTH / DAY / YEAR	MONTH / DAY / YEAR																	
13 14 15 16 17 18	19 20 21 22 23 24																	
A-14. How did that marriage end?  Death of your husband . . . . . 3 (A-15) Divorce or annulment. . . . . 4 (A-16) Separation. . . . . 5 (A-17)	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;">58</td> <td style="width: 50%; text-align: center;">20</td> </tr> <tr> <td style="text-align: center;">. . . . . 3 (A-15)</td> <td style="text-align: center;">. . . . . 3 (A-15)</td> </tr> <tr> <td style="text-align: center;">. . . . . 4 (A-16)</td> <td style="text-align: center;">. . . . . 4 (A-16)</td> </tr> <tr> <td style="text-align: center;">. . . . . 5 (A-17)</td> <td style="text-align: center;">. . . . . 5 (A-17)</td> </tr> </table>	58	20	. . . . . 3 (A-15)	. . . . . 3 (A-15)	. . . . . 4 (A-16)	. . . . . 4 (A-16)	. . . . . 5 (A-17)	. . . . . 5 (A-17)									
58	20																	
. . . . . 3 (A-15)	. . . . . 3 (A-15)																	
. . . . . 4 (A-16)	. . . . . 4 (A-16)																	
. . . . . 5 (A-17)	. . . . . 5 (A-17)																	
A-15. When did your husband die?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">MONTH / YEAR</td> <td style="text-align: center;">MONTH / YEAR</td> </tr> <tr> <td style="text-align: center;">(Go to Box 3)</td> <td style="text-align: center;">(Go to Box 3)</td> </tr> <tr> <td style="text-align: center;">59 60 61 62</td> <td style="text-align: center;">21 22 23 24</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> </td> <td style="border: 1px solid black; text-align: center;"> </td> </tr> </table>	MONTH / YEAR	MONTH / YEAR	(Go to Box 3)	(Go to Box 3)	59 60 61 62	21 22 23 24			<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">MONTH / YEAR</td> <td style="text-align: center;">MONTH / YEAR</td> </tr> <tr> <td style="text-align: center;">(Go to Box 3)</td> <td style="text-align: center;">(Go to Box 3)</td> </tr> <tr> <td style="text-align: center;">25 26 27 28</td> <td style="text-align: center;">29 30 31 32</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> </td> <td style="border: 1px solid black; text-align: center;"> </td> </tr> </table>	MONTH / YEAR	MONTH / YEAR	(Go to Box 3)	(Go to Box 3)	25 26 27 28	29 30 31 32		
MONTH / YEAR	MONTH / YEAR																	
(Go to Box 3)	(Go to Box 3)																	
59 60 61 62	21 22 23 24																	
MONTH / YEAR	MONTH / YEAR																	
(Go to Box 3)	(Go to Box 3)																	
25 26 27 28	29 30 31 32																	
A-16. What was the date of your (divorce/annulment)?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">MONTH / YEAR</td> <td style="text-align: center;">MONTH / YEAR</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> </td> <td style="border: 1px solid black; text-align: center;"> </td> </tr> </table>	MONTH / YEAR	MONTH / YEAR			<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">MONTH / YEAR</td> <td style="text-align: center;">MONTH / YEAR</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> </td> <td style="border: 1px solid black; text-align: center;"> </td> </tr> </table>	MONTH / YEAR	MONTH / YEAR										
MONTH / YEAR	MONTH / YEAR																	
MONTH / YEAR	MONTH / YEAR																	
A-17. And when did you and your husband stop living together?	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">MONTH / YEAR</td> <td style="text-align: center;">MONTH / YEAR</td> </tr> <tr> <td style="text-align: center;">63 64 65 66</td> <td style="text-align: center;">25 26 27 28</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> </td> <td style="border: 1px solid black; text-align: center;"> </td> </tr> </table>	MONTH / YEAR	MONTH / YEAR	63 64 65 66	25 26 27 28			<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">MONTH / YEAR</td> <td style="text-align: center;">MONTH / YEAR</td> </tr> <tr> <td style="text-align: center;">67 68 69 70</td> <td style="text-align: center;">29 30 31 32</td> </tr> <tr> <td style="border: 1px solid black; text-align: center;"> </td> <td style="border: 1px solid black; text-align: center;"> </td> </tr> </table>	MONTH / YEAR	MONTH / YEAR	67 68 69 70	29 30 31 32						
MONTH / YEAR	MONTH / YEAR																	
63 64 65 66	25 26 27 28																	
MONTH / YEAR	MONTH / YEAR																	
67 68 69 70	29 30 31 32																	

Box 3. Go BACK TO A-13 FOR SECOND MARRIAGE, IF APPLICABLE. OTHERWISE, GO TO SECTION B.

A-18 TO A-24 OMITTED.

COLUMNS 29-41: BLANK FILL

BIRTH AND PREGNANCY RECORD

CHILD #	DATE OF CHILD'S BIRTH OR PREGNANCY LOSS			Z Child's Name or Pregnancy Loss Information					
				Preg. Loss?		P Nos. Preg.	HOW ENDED		
	Mo.	Day	Yr.	Yes	No		Still	Misc.	Abort.
				1	2		1	2	3
				1	-		1	2	3
				1	-		1	2	3
1ST									
				1	2		1	2	3
				1	-		1	2	3
				1	-		1	2	3
2ND									
				1	2		1	2	3
				1	-		1	2	3
3RD									
				1	2		1	2	3
				1	-		1	2	3
4TH									
				1	2		1	2	3
				1	-		1	2	3
5TH									
				1	2		1	2	3
				1	-		1	2	3
6TH									
				1	2		1	2	3
				1	-		1	2	3
7TH									
				1	2		1	2	3
				1	-		1	2	3
8TH									
				1	2		1	2	3
				1	-		1	2	3
9TH									
				1	2		1	2	3
				1	-		1	2	3
CP	CURRENT PREGNANCY								

DATE OF (FIRST) MARRIAGE:            /            /             
MONTH / DAY / YEAR

SECTION B.

BEGIN DECK Q 3

In a study of family growth in this country, one of the most important things is knowing some basic facts about pregnancies and births that women have.

B-1. Have you given birth to a baby at any time? Yes . . . . . 1 (B-2) 13  
No . . . . . 2 (B-13)

B-2. Altogether, how many babies have you given birth to, including any who died very young? 14 15  
NO. LIVE BIRTHS   

DECK Q 3 CONTINUES WITH B-13.

Now, I'd like to get some information about ( your baby/each of your babies ).

LIVE BIRTHS BEGIN DECK Q 5

Box 4. ASK B-3 TO B-12 FOR EACH LIVE BIRTH BEFORE GOING TO THE NEXT BIRTH.	FIRST CHILD	SECOND CHILD	THIRD CHILD
B-3. When was your (1st, 2nd, etc.) child born? (ENTER DATE IN COL. Y OF B & P RECORD BETWEEN HEAVY LINES.)	THIS SPACE FOR OFFICE USE ONLY		
B-4. What did you name the baby? (ENTER CHILD'S NAME IN B & P RECORD IN COL. Z NEXT TO DATE.)	13 14 15 16	13 14 15 16	13 14 15 16
B-5. Was (CHILD) a boy or a girl?	Boy . . . . 1 Girl . . . . 2 17	Boy . . . . 1 Girl . . . . 2 17	Boy . . . . 1 Girl . . . . 2 17
B-6. How much did (s/he) weigh at birth?	(Box 5) LBS./OZS. DK. . . 8 (B-7) 18 19 20 21	(Box 5) LBS./OZS. DK. . . 8 (B-7) 18 19 20 21	(Box 5) LBS./OZS. DK. . . 8 (B-7) 18 19 20 21
B-7. Did (s/he) weigh more than 5 1/2 lbs. or less?	More . . . . 1 5½ or less. 2 DK. . . . 8 22	More . . . . 1 5½ or less. 2 DK. . . . 8 22	More . . . . 1 5½ or less. 2 DK. . . . 8 22

**Box 5. IF CHILD LISTED IN HOUSEHOLD (SEE SCREENER), GO TO B-11. OTHERWISE, CONTINUE.**

B-8. (CHILD) is not listed in the household, is (s/he) still living?	Yes..1 (B-9) No...2 (B-10) 23	Yes..1 (B-9) No...2 (B-10) 23	Yes..1 (B-9) No...2 (B-10) 23
B-9. Where is (s/he) living now?	1. ( His/Her ) own household . . . . 01 } 24-25 2. Long term care institution. . . . 02 } 3. College/away at school. . . . . 03 } 4. With ( his/her ) father . . . . . 04 } (B-11) 5. With other relatives. . . . . 05 } 6. In foster home. . . . . 06 } 7. With adopted parents. . . . . 07 } 8. Other (SPECIFY) . . . . . 08 }	1. ( His/Her ) own household . . . . 01 } 24-25 2. Long term care institution. . . . 02 } 3. College/away at school. . . . . 03 } 4. With ( his/her ) father . . . . . 04 } (B-11) 5. With other relatives. . . . . 05 } 6. In foster home. . . . . 06 } 7. With adopted parents. . . . . 07 } 8. Other (SPECIFY) . . . . . 08 }	1. ( His/Her ) own household . . . . 01 } 24-25 2. Long term care institution. . . . 02 } 3. College/away at school. . . . . 03 } 4. With ( his/her ) father . . . . . 04 } (B-11) 5. With other relatives. . . . . 05 } 6. In foster home. . . . . 06 } 7. With adopted parents. . . . . 07 } 8. Other (SPECIFY) . . . . . 08 }
B-10. When did (CHILD) die?	MONTH/YEAR 26 27 28 29	MONTH/YEAR 26 27 28 29	MONTH/YEAR 26 27 28 29

**Box 6. IF CHILD LIVED AT LEAST TWO MONTHS, CONTINUE. OTHERWISE, GO TO BOX 7.**

B-11. When (CHILD) was an infant, did you breast feed (him/her) at all?	Yes..1(B-12) No...2(Box 7) 30	Yes..1(B-12) No...2(Box 7) 30	Yes..1(B-12) No...2(Box 7) 30
B-12. How many weeks old was (s/he) when you quit breast feeding ( him/her ) altogether? (RECORD VERBATIM IF "R" DOES NOT ANSWER IN WEEKS.)	WEEKS: _____ 31 32	WEEKS: _____ 31 32	WEEKS: _____ 31 32
Still feeding . . . . .	.95	.95	.95
Definitely doesn't remember . . . . .	.98	.98	.98

**Box 7. IF MORE LIVE BIRTHS, GO BACK TO B-3 (USE CONTINUATION BOOKLET IF NECESSARY). OTHERWISE, GO TO B-13.**

LIVE BIRTHS CONTINUED

FOURTH CHILD	FIFTH CHILD	SIXTH CHILD	SEVENTH CHILD	EIGHTH CHILD	NINTH CHILD
THIS SPACE FOR OFFICE USE ONLY					
13 14 15 16	13 14 15 16	13 14 15 16	13 14 15 16	13 14 15 16	13 14 15 16
Boy . . . . 1 Girl . . . . 2 17	Boy . . . . 1 Girl . . . . 2 17	Boy . . . . 1 Girl . . . . 2 17	Boy . . . . 1 Girl . . . . 2 17	Boy . . . . 1 Girl . . . . 2 17	Boy . . . . 1 Girl . . . . 2 17
(Box 5) LBS./OZS.					
DK. . . 8 (B-7) 18 19 20 21	DK. . . 8 (B-7) 18 19 20 21	DK. . . 8 (B-7) 18 19 20 21	DK. . . 8 (B-7) 18 19 20 21	DK. . . 8 (B-7) 18 19 20 21	DK. . . 8 (B-7) 18 19 20 21
More . . . . 1 5½ or less . 2 DK . . . . 8 22	More . . . . 1 5½ or less . 2 DK . . . . 8 22	More . . . . 1 5½ or less . 2 DK . . . . 8 22	More . . . . 1 5½ or less . 2 DK . . . . 8 22	More . . . . 1 5½ or less . 2 DK . . . . 8 22	More . . . . 1 5½ or less . 2 DK . . . . 8 22
Yes..1 (B-9) No...2 (B-10) 23					
. . 01 } 24-25 . . 02 } . . 03 } . . 04 } (B-11) . . 05 } . . 06 } . . 07 } . . 08 }	. . 01 } 24-25 . . 02 } . . 03 } . . 04 } (B-11) . . 05 } . . 06 } . . 07 } . . 08 }	. . 01 } 24-25 . . 02 } . . 03 } . . 04 } (B-11) . . 05 } . . 06 } . . 07 } . . 08 }	. . 01 } 24-25 . . 02 } . . 03 } . . 04 } (B-11) . . 05 } . . 06 } . . 07 } . . 08 }	. . 01 } 24-25 . . 02 } . . 03 } . . 04 } (B-11) . . 05 } . . 06 } . . 07 } . . 08 }	. . 01 } 24-25 . . 02 } . . 03 } . . 04 } (B-11) . . 05 } . . 06 } . . 07 } . . 08 }
MONTH/YEAR 26 27 28 29					
Yes..1(B-12) No...2(Box ?) 30					
WEEKS: _____ 31 32 .....95 .....98					

B-13. Sometimes we miss a baby who died shortly after birth or never lived with you.  
 a. IF ANY LIVE BIRTHS:.....Have we listed all your babies now?  
 b. IF NO LIVE BIRTHS:.....You haven't given birth to any children, is that right?

Yes. . . . . 1 (B-15) 16  
 No . . . . . 2 (B-14)

B-14. How many did we miss?  
 (CORRECT B-2, THEN ASK B-3 THROUGH B-12 FOR EACH BABY MISSED. INDICATE PROPER BIRTH ORDER BY ARROW ON B & P RECORD AND IN COLUMN HEADINGS ON PAGES 4 AND 5.)

NUMBER  17

B-15. In this survey, we are also talking with women about health and medical matters related to having children. At what age did you start having your monthly menstrual periods?

AGE: \_\_\_\_\_ (B-16)  18  19  
 Never had a period (R IS STERILE) . . . . . 96 (B-43)

B-16. Are your monthly menstrual periods regular - that is, about the same number of days between each period?

Yes. . . . . 1 (B-17) 20  
 No . . . . . 2 (B-17)  
 No periods: operation/  
 menopause (R IS STERILE) . . . 3 (Top of P. 7)

B-17. What was the date your last normal period began?

21  22  23  24  25  26  
 MONTH/DAY/YEAR

**Box 8. IF LESS THAN ONE MONTH AGO, CODE "NO" TO B-18, THEN GO TO TOP OF PAGE 7. OTHERWISE, ASK B-18.**

B-18. Are you pregnant now?

Yes. . . . . 1 (B-20) 27  
 No . . . . . 2 (Top of P. 7)  
 Don't Know . . . . . 8 (B-19)

B-19. Well, do you think you are probably pregnant or not?

Probably Yes . . . . . 1 (B-20) 28  
 Probably Not . . . . . 2 (Top of P. 7)

B-20. Do you expect this pregnancy to go full term?

(Probably) Yes . . . . . 1 (B-21) 29  
 (Probably) No. . . . . 2 (B-21)  
 Definitely Don't Know. . . . . 8 (Top. of P. 7)

B-21. (If you are pregnant,) when do you expect the (pregnancy to end/  
 baby to be born)?  
 (ENTER DATE ON LAST LINE OF COLUMN Y, B & P RECORD.)

**Box 9. IF FULL TERM PREGNANCY EXPECTED, CONTINUE. OTHERWISE, GO TO TOP OF PAGE 7.**

B-22. Would you prefer to have a boy or a girl?

Boy. . . . . 1  
 Girl . . . . . 2 30  
 Makes no difference. . . . . 3

PREGNANCY LOSSES, BIRTH BY BIRTH

Many pregnancies don't end in live births. We are talking with women about all their pregnancies that did not end in live births, including those which ended very early and are easily forgotten.

**Box 10. IF NO LIVE BIRTHS, CONTINUE. OTHERWISE, GO TO B-28.**

B-23. Have you ever been pregnant (before your current pregnancy)?

Yes. . . . . 1 (B-24)  
 No (CIRCLE "2" IN 1ST ROW UNDER COLUMN **Z**  
 OF B & P RECORD) . . . . . 2 (B-43)

31

B-24. How many times?

NUMBER

32

(CIRCLE "1" FOR EACH LOSS UNDER COLUMN **Z** OF B & P RECORD.)

B-25. When did ( that/the 1st, etc. ) pregnancy end? (ENTER DATE UNDER COLUMN **Y** OF B & P RECORD.)

B-26. How many months were you pregnant at the time? (ENTER NO. OF MONTHS UNDER COLUMN **Z** OF B & P RECORD.)

B-27. How did that pregnancy end? (CIRCLE WHETHER MISCARRIAGE, STILLBIRTH OR ABORTION UNDER COLUMN **Z** OF B & P RECORD.)

**Box 11. IF MORE PREGNANCY LOSSES, GO BACK TO B-25 FOR NEXT LOSS. OTHERWISE, GO TO BOX 17, PAGE 9.**

B-28. Before you were pregnant with (NAME OF 1ST/ONLY CHILD), were you pregnant at any time?

Yes. . . . . 1 (B-29)  
 No (CIRCLE "2" IN 1ST ROW UNDER COLUMN **Z**  
 OF B & P RECORD) . . . . . 2 (Box 13)

33

B-29. How many times?

NUMBER

34

(CIRCLE "1" FOR EACH LOSS UNDER COLUMN **Z** OF B & P RECORD.)

B-30. When did ( that/the 1st, etc. ) pregnancy end? (ENTER DATE UNDER COLUMN **Y** OF B & P RECORD.)

B-31. How many months were you pregnant at the time? (ENTER NO. OF MONTHS UNDER COLUMN **Z** OF B & P RECORD.)

B-32. How did that pregnancy end? (CIRCLE WHETHER MISCARRIAGE, STILLBIRTH OR ABORTION UNDER COLUMN **Z** OF B & P RECORD.)

**Box 12. IF MORE PREGNANCY LOSSES BEFORE FIRST LIVE BIRTH, GO BACK TO B-30 FOR NEXT LOSS. OTHERWISE, GO TO BOX 13.**

**Box 13. IF 2 OR MORE LIVE BIRTHS, CONTINUE. IF ONLY 1 LIVE BIRTH, GO TO B-38.**

B-33. Were you ever pregnant between the births of (NAME) and (NEXT NAME)?

IF "YES," GO TO B-34.

IF "NO," CIRCLE "2" IN APPROPRIATE ROW UNDER COLUMN Z OF B & P RECORD, THEN GO TO BOX 15.

B-34. How many times? (ENTER NUMBER ON LINE BELOW AND CIRCLE "1" IN APPROPRIATE ROW[S] FOR EACH LOSS UNDER COLUMN Z OF B & P RECORD.)

BETWEEN BIRTHS	NO. OF LOSSES	BETWEEN BIRTHS	NO. OF LOSSES
1 and 2: _____		5 and 6: _____	
2 and 3: _____		6 and 7: _____	
3 and 4: _____		7 and 8: _____	
4 and 5: _____		8 and 9: _____	

- 35
- 36
- 37
- 38
- 39
- 40
- 41
- 42

B-35. When did ( that/the 1st, etc. ) pregnancy end? (ENTER DATE UNDER COLUMN Y OF B & P RECORD.)

B-36. How many months were you pregnant that time? (ENTER NO. OF MONTHS UNDER COLUMN Z OF B & P RECORD.)

B-37. How did that pregnancy end? (CIRCLE WHETHER MISCARRIAGE, STILLBIRTH OR ABORTION UNDER COLUMN Z OF B & P RECORD.)

Box 14. IF MORE PREGNANCY LOSSES BETWEEN THESE 2 LIVE BIRTHS, GO BACK TO B-35 FOR NEXT LOSS. OTHERWISE, GO TO BOX 15.

Box 15. IF MORE "BETWEEN BIRTH" INTERVALS, GO BACK TO B-33. OTHERWISE, CONTINUE

B-38. (Besides your current pregnancy,) have you been pregnant at any time since (NAME OF LAST/ONLY CHILD)?

Yes. . . . . 1 (B-39)

No (CIRCLE "2" IN ROW AFTER LAST CHILD UNDER COLUMN Z OF B & P RECORD). . . . . 2 (Box 17) \*3

B-39. How many times?

(CIRCLE "1" IN ROW[S] AFTER LAST CHILD FOR EACH LOSS UNDER COLUMN Z OF B & P RECORD.)

NUMBER

\*\*

B-40. When did ( that/the 1st, etc. ) pregnancy end? (ENTER DATE UNDER COLUMN Y OF B & P RECORD.)

B-41. How many months were you pregnant at the time? (ENTER NO. OF MONTHS UNDER COLUMN Z OF B & P RECORD.)

B-42. How did that pregnancy end? (CIRCLE WHETHER MISCARRIAGE, STILLBIRTH OR ABORTION UNDER COLUMN Z OF B & P RECORD.)

Box 16. IF MORE PREGNANCY LOSSES SINCE BIRTH OF LAST CHILD, GO BACK TO B-40. OTHERWISE, GO TO BOX 17.

**Box 17. B & P REVIEW**

(A) DRAW A WAVY LINE ON THE B & P RECORD JUST BELOW THE LAST PREGNANCY ENDING BEFORE JANUARY 1, 1973, AND SAY:  
 Now let me be sure I have everything recorded correctly.

---

(B) REVIEW ALL OF R'S PREGNANCIES IN ORDER: READING ALOUD TO R, TRANSFER --  
 PREGNANCIES ABOVE THE WAVY LINE TO HEADINGS ON PAGE 13,  
 PREGNANCIES BELOW THE WAVY LINE TO HEADINGS ON PAGE 17.  
**NOTE:** ENTER NAME AND DATE OF LIVE BIRTH OR DATE AND OUTCOME (M, S, OR A) OF PREGNANCY LOSS ON LINE "B" OF THE PROPER PREGNANCY INTERVAL AND ON LINE "A" OF THE NEXT PREGNANCY INTERVAL.

---

(C) WHEN DONE, SAY: Do I have (all of) that right?  
 Yes. . . . . 1 (B-43)  
 No (CORRECT B & P RECORD). 2 (B-43)

B-43. (In addition to the [ child/children ] born to you), has your husband had any children whom you are bringing up or have brought up?  
 Yes. . . . . 1 (B-44) <sup>45</sup>  
 No . . . . . 2 (B-45)

B-44. How many children is that?  
 NUMBER OF HUSBAND'S CHILDREN R BRINGING UP/BROUGHT UP:          <sup>46</sup>  
 NUMBER

B-45. Have you adopted any children (other than your husband's children)?  
 Yes. . . . . 1 (B-46) <sup>47</sup>  
 No . . . . . 2 (Section C)

B-46. How many children have you adopted?  
 NUMBER OF CHILDREN ADOPTED:          <sup>48</sup>  
 NUMBER

**CODER USE ONLY**

1. Number pregnancies ending in at least one live birth.	<input type="text"/> <input type="text"/>	49 50
2. Number pregnancies ending in pregnancy loss.	<input type="text"/> <input type="text"/>	51 52
3. Currently pregnant	<input type="text"/>	53
4. Total pregnancies	<input type="text"/> <input type="text"/>	54 55

SECTION C

We are talking with women about their uses of family planning methods, if any, and how this has affected the number and timing of their pregnancies.

C-1. This card lists methods that many people use to plan their families. Please follow the list with me; as I read each method will you tell me if you know how it is used. Just give me a "yes" or "no" answer. (READ METHODS)

HAND CARD 1		<u>Yes</u>	<u>No</u>
A.	Pill . . . . .	1	2 13
B.	Foam . . . . .	1	2 14
C.	Diaphragm. . . . .	1	2 15
D.	Jelly, Cream, Suppository. . . . .	1	2 16
E.	Diaphragm and Jelly. . . . .	1	2 17
F.	Douche . . . . .	1	2 18
G.	IUD, Coil, Loop. . . . .	1	2 19
H.	Abortion . . . . .	1	2 20
J.	Operation: Female Sterilization. . . . .	1	2 21
K.	Operation: Male Sterilization. . . . .	1	2 22
L.	Condom, Rubber . . . . .	1	2 23
M.	Rhythm or safe period by temperature . . . . .	1	2 24
N.	Rhythm or safe period by calendar. . . . .	1	2 25
P.	Withdrawal or coitus interruptus . . . . .	1	2 26
R.	Abstinence (non-intercourse to avoid pregnancy). . . . .	1	2 27
S.	Do you know of any other method? (IF YES, SPECIFY _____) . . . . .	1	2 28

Box 18 INTERVIEWER ROUTING

CHECK:

IF R NEVER PREGNANT: GO TO C-36, P. 18. OPEN INTERVAL BEGINS JANUARY 1, 1973.

IF FIRST PREGNANCY ENDED BEFORE JANUARY 1, 1973: CONTINUE WITH P. 12.

IF FIRST PREGNANCY ENDED JANUARY 1, 1973 OR LATER, OR IS A CURRENT PREGNANCY: GO TO C-16, P. 14.

DECK Q 6 CONTINUES WITH C-34.

ASK C-2 THROUGH C-13 FOR EACH PREGNANCY ENDING BEFORE JANUARY 1, 1973.

C-2,	( Before you became pregnant the first time/Between [ A and B ] ) did you ever use <u>any</u> method to prevent or delay a pregnancy?	Yes . . . . . No. . . . .
C-3,	Had you stopped using all methods before you became pregnant?	Yes . . . . . No. . . . .
C-4,	Was the reason you ( were not/stopped ) using any methods because you yourself wanted to become pregnant?	Yes . . . . . No. . . . .
C-5,	At the time you became pregnant with (B), did you yourself actually want to have a(nother) baby at some time?	Yes . . . . . No. . . . . DK. . . . .
C-6,	As you recall, is that how you felt <u>before</u> you became pregnant, or did you come to feel that way later?	Before. . . . . Later . . . . .
C-7,	As you recall, is that how you felt <u>before</u> you became pregnant, or did you come to feel that way later?	Before. . . . . Later . . . . .
C-8,	It is sometimes difficult to recall these things but, as you look back to just before that pregnancy began, would you say you probably wanted a(nother) baby at <u>some</u> time or probably not?	Probably Yes. . . . . Probably No . . . . .
C-9,	IF PREGNANCY LOSS, CODE 1. OTHERWISE ASK: Did you become pregnant sooner than you actually wanted, later than you actually wanted, or just about the right time?	Preg. loss. . . . . Sooner. . . . . Later . . . . . Right time. . . . .
C-10,	How much later did you want to become pregnant?	No. months Later . . . . .
C-11,	How much sooner did you want to become pregnant?	No. months Sooner. . . . .
C-12,	And what about your husband at the time you became pregnant with (B), did he want you to have a(nother) baby at some time? (IF VOLUNTEERS NOT MARRIED AT THAT TIME, CODE 3.)	Yes . . . . . No. . . . . Not married . . . . . DK. . . . .
C-13,	IF PREGNANCY LOSS, CODE 1. OTHERWISE ASK: Did you become pregnant sooner than he wanted, later than he wanted, or just about the right time?	Preg. loss. . . . . Sooner. . . . . Later . . . . . Right time. . . . . DK. . . . .

Box 19. ● IF NEXT PREGNANCY ENDED:  
 BEFORE JANUARY 1, 1973, GO BACK TO C-2, NEXT INTERVAL.  
 ON OR SINCE JANUARY 1, 1973 OR IS CURRENT PREGNANCY, SAY:  
 For pregnancies ending in the last three years, we are talking with women about particular methods of family planning they have used, if any, and about other matters which affect the timing of their pregnancies.  
 THEN GO TO C-14, PAGE 14.  
 ● IF NO ADDITIONAL PREGNANCIES, SAY:  
 We are talking with women about particular methods of family planning they have used since their last pregnancy.  
 THEN GO TO BOX 23, PAGE 18. OPEN INTERVAL BEGINS SINCE (LAST) PREGNANCY.



ASK C-14 THROUGH C-33 FOR EACH INTERVAL ENDING JANUARY 1, 1973  
OR LATER.

C-14. FOR INTERVAL BEFORE FIRST PREGNANCY, START WITH C-16.  
Between (A and B) were there any periods of one month or  
more in which you were not having intercourse -- such as  
after your pregnancy ended, when one of you was away,  
sick, or for some other reason?

C-15. What months and years were those?

PROBE: What other months?

C-16. (BEFORE ASKING THE 1st TIME, HAND CARD 1 AND SAY: Please  
look again at the card.) (Before you became pregnant the  
first time /Between [A and B]), did you ever use any method  
for one month or more to delay or prevent a pregnancy?

HAND  
CARD 1

C-17. Starting with the earliest method you used during this  
period, please tell me all the methods you used for one  
month or more in the order that you used them.  
PROBE: What other methods? (ENTER IN ORDER IN ANSWER AREA.  
IF ABORTION IS ONLY METHOD, GO TO C-22.)

(ASK C-18 THROUGH C-21 SEQUENTIALLY FOR EACH METHOD IN AN INTERVAL.)

C-18. In what month and year did you start to use (METHOD)?

C-19. While you were using (METHOD), were there some times when you skipped using any method at all?

Yes...1 (C-20)  
No....2 (C-21)

C-20. Would you say that you skipped using all methods often, sometimes, or only once or twice?

Often.....1  
Sometimes....2  
Once/Twice...3

C-21. In what month and year did you stop using (METHOD)?

Box 20. IF NO OTHER METHODS THIS INTERVAL OR IF NEXT METHOD IS  
ABORTION, CONTINUE. OTHERWISE, GO BACK TO C-18.

C-22. In what month and year did you become pregnant?

Box 21. IF NO METHOD THIS INTERVAL, . . . . . Go to C-24

IF (LAST) METHOD

- ABORTION . . . . . Go to C-25
- STOPPED SAME MONTH PREG. BEGAN  
(OR TIMING NOT KNOWN) . . . . . Go to C-23
- STOPPED BEFORE PREG. BEGAN . . . . . Go to C-24
- STOPPED AFTER PREG. BEGAN. . . . . Go to C-25

14

13-14   13-14   13-14   13-14    
 15  ① BEGIN DECK 08 ② 15  ③ 15  ④ 15

BEFORE FIRST PREGNANCY, OR BETWEEN A. _____ and B. _____	BETWEEN A. _____ and B. _____	BETWEEN A. _____ and B. _____	BETWEEN A. _____ and B. _____
---	--	--	--

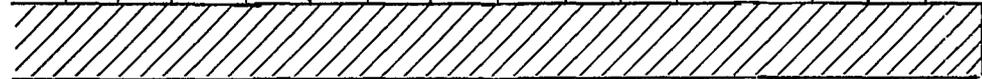
Yes.....1 (C-15) No.....2 (C-16)	Yes.....1 (C-15) No.....2 (C-16)	Yes.....1 (C-15) No.....2 (C-16)	Yes.....1 (C-15) No.....2 (C-16)
-------------------------------------	-------------------------------------	-------------------------------------	-------------------------------------

From	Month											
	Year											
To	Month											
	Year											

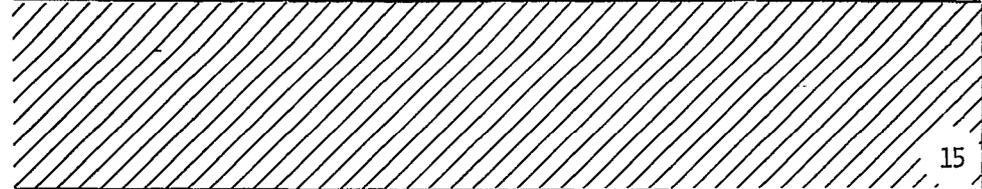
Yes.....1 (C-17) No.....2 (C-22)	Yes.....1 (C-17) No.....2 (C-22)	Yes.....1 (C-17) No.....2 (C-22)	Yes.....1 (C-17) No.....2 (C-22)
-------------------------------------	-------------------------------------	-------------------------------------	-------------------------------------

1st Meth	2nd Meth	3rd Meth	Last Meth	1st Meth	2nd Meth	3rd Meth	Last Meth	1st Meth	2nd Meth	3rd Meth	Last Meth	1st Meth	2nd Meth	3rd Meth	Last Meth
MO.	MO.	MO.	MO.												
YR.	YR.	YR.	YR.												
..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1
..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2
..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3
(If 2, go to C-21)				(If 2, go to C-21)				(If 2, go to C-21)				(If 2, go to C-21)			
..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1	..1
..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2	..2
..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3	..3

MO.															
YR.															



MONTH/YEAR	MONTH/YEAR	MONTH/YEAR	MONTH/YEAR
------------	------------	------------	------------



- 
- C-23. Had you stopped using all methods before you became pregnant?
- 
- C-24. Was the reason you (were not/stopped) using any methods because you yourself wanted to become pregnant?
- 
- C-25. At the time you became pregnant with (B), did you yourself actually want to have a(nother) baby at some time?
- 
- C-26. As you recall, is that how you felt before you became pregnant or did you come to feel that way later?
- 
- C-27. As you recall, is that how you felt before you became pregnant or did you come to feel that way later?
- 
- C-28. It is sometimes difficult to recall these things, but as you look back to just before that pregnancy began, would you say you probably wanted a(nother) baby at some time or probably not?
- 
- C-29. IF PREGNANCY LOSS, CODE 1. OTHERWISE, ASK: Did you become pregnant sooner than you actually wanted, later than you actually wanted, or about the right time?
- 
- C-30. How much later did you want to become pregnant?
- 
- C-31. How much sooner did you want to become pregnant?
- 
- C-32. IF NOT MARRIED AT THAT TIME, CODE 3. OTHERWISE, ASK: And what about your husband at the time you became pregnant with (B), did he want to have a(nother) baby at some time?
- 
- C-33. IF PREGNANCY LOSS, CODE 1. OTHERWISE, ASK: Did you become pregnant sooner than he wanted, later than he wanted, or just about the right time?
-

13-14 <input type="checkbox"/>	13-14 <input type="checkbox"/>	13-14 <input type="checkbox"/>	13-14 <input type="checkbox"/>
15 <input type="checkbox"/> ① BEGIN	DECK 08 ② 15 <input type="checkbox"/>	③ 15 <input type="checkbox"/>	④ 15 <input type="checkbox"/>
BEFORE FIRST PREGNANCY, OR BETWEEN	BETWEEN	BETWEEN	BETWEEN
A. _____ and B. _____	A. _____ and B. _____	A. _____ and B. _____	A. _____ and B. _____
Yes.....1 (C-24) <sup>16</sup> No.....2 (C-25)			
Yes.....1 (C-29) <sup>17</sup> No.....2 (C-25)			
Yes.....1 (C-26) <sup>18</sup> No.....2 (C-27) Don't Know.8 (C-28)			
Before.....1 (C-29) <sup>19</sup> Later.....2 (C-29)			
Before.....1 (C-32) <sup>20</sup> Later.....2 (C-32)			
Probably Yes.....1 (C-29) <sup>21</sup> Probably No.....2 (C-32)			
Pregnancy Loss.....1 (C-32) <sup>22</sup> Sooner.....2 (C-30) Later.....3 (C-31) Right time.4 (C-32)	Pregnancy Loss.....1 (C-32) <sup>22</sup> Sooner.....2 (C-30) Later.....3 (C-31) Right time.4 (C-32)	Pregnancy Loss.....1 (C-32) <sup>22</sup> Sooner.....2 (C-30) Later.....3 (C-31) Right time.4 (C-32)	Pregnancy Loss.....1 (C-32) <sup>22</sup> Sooner.....2 (C-30) Later.....3 (C-31) Right time.4 (C-32)
Months later (C-32) <sup>23 24</sup>			
Months sooner (C-32) <sup>25 26</sup>			
Yes.....1 (C-33) <sup>27</sup> No.....2 (Box 22) Not married..3 (Box 22) Don't Know.....8 (Box 22)	Yes.....1 (C-33) <sup>27</sup> No.....2 (Box 22) Not married..3 (Box 22) Don't Know.....8 (Box 22)	Yes.....1 (C-33) <sup>27</sup> No.....2 (Box 22) Not married..3 (Box 22) Don't Know.....8 (Box 22)	Yes.....1 (C-33) <sup>27</sup> No.....2 (Box 22) Not married..3 (Box 22) Don't Know.....8 (Box 22)
Pregnancy Loss.....1 <sup>28</sup> Sooner.....2 Later.....3 Right time.....4 Don't Know.....8			

**BOX 22. IF MORE PREGNANCIES, GO BACK TO C-14 ON PAGE 14. OTHERWISE, GO TO BOX 23, PAGE 18. OPEN INTERVAL BEGINS SINCE (LAST) PREGNANCY.**

# OPEN INTERVAL

CONTINUE DECK C 6

**Box 23. IF CURRENTLY PREGNANT, GO TO C-43. OTHERWISE, CONTINUE.**

C-34. Since your (last) pregnancy, have there been periods of one month or more in which you were not having intercourse, such as after your pregnancy ended, when one of you was away or sick, or for any other reason?

Yes . . . . . 1 (C-35) 29  
No . . . . . 2 (C-36)

C-35. What months and years were those?  
PROBE: What other months?

FROM	TO	30	31	32	33	34	35	36	37
MO./YR.	MO./YR.								
MO./YR.	MO./YR.	38	39	40	41	42	43	44	45
MO./YR.	MO./YR.	46	47	48	49	50	51	52	53
MO./YR.	MO./YR.								

C-36. Please look again at the card. Since ( your [last] pregnancy/January, 1973 ), have you ever used any method for one month or more to delay or prevent a pregnancy?

Yes . . . . . 1 (C-37) 54  
No . . . . . 2 (C-43)

HAND CARD 1

BEGIN DECK 07

C-37. Starting with the earliest method you used during this period, please tell me all the methods you used for one month or more in the order you used them. PROBE: What other methods? (ENTER IN ORDER IN ANSWER AREA.)

1st METHOD	2nd METHOD	3rd METHOD	LAST METHOD
55 56	68 69	13 14	26 27
[ ] [ ]	[ ] [ ]	[ ] [ ]	[ ] [ ]
MO./YR.	MO./YR.	MO./YR.	MO./YR.
57 58 59 60	70 71 72 73	15 16 17 18	28 29 30 31
[ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ]

(Ask C-38 THROUGH C-42 SEQUENTIALLY FOR EACH METHOD.)

C-38. In what month and year did you start to use (METHOD)?

**Box 24. IF THE METHOD IS STERILIZATION ('J' OR 'K' ABOVE) GO TO BOX 26. OTHERWISE, CONTINUE.**

C-39. While you were using (METHOD) during this time, were there times when you skipped using any method at all?

	61	74	19	32
Yes . . . . .	1 (C-40)	1 (C-40)	1 (C-40)	1 (C-40)
No . . . . .	2 (Box 25)	2 (Box 25)	2 (Box 25)	2 (Box 25)

C-40. Would you say you skipped using all methods often, sometimes, or only once or twice?

Often . . . . .	1	1	1	1
Sometimes . . . . .	2 62	2 75	2 20	2 33
Once/Twice . . . . .	3	3	3	3

**Box 25. IF LAST METHOD, ASK C-41. OTHERWISE, C-42.**

C-41. Are you and your husband still using (METHOD)?

	63	76	21	34
Yes . . . . .	1 (C-43)	1 (C-43)	1 (C-43)	1 (C-43)
No . . . . .	2 (C-42)	2 (C-42)	2 (C-42)	2 (C-42)

C-42. In what month and year did you stop using (METHOD)?

MO./YR.	MO./YR.	MO./YR.	MO./YR.
64 65 66 67	77 78 79 80	22 23 24 25	35 36 37 38
[ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ]	[ ] [ ] [ ] [ ]

**Box 26. GO TO NEXT METHOD (C-38), IF ANY. OTHERWISE, GO TO C-43.**

C-43. Now let me review the past three years with you -- month by month -- to be sure I have recorded the information correctly. (REFERRING TO PAGES 15 AND 18, ENTER IN 3-YEAR METHOD CALENDAR, SYMBOLS FOR PREGNANCY, NONINTERCOURSE, AND METHODS. ACCOUNT FOR ALL MONTHS FROM JANUARY, 1973 TO THE PRESENT.)

C-44. ( In addition to [METHODS MENTIONED] ) have you or your husband ever used any (other) method to delay or prevent a pregnancy?

Yes . . . . . 1 (C-45) 33  
No . . . . . 2 (Box 27)

C-45. Which ones have you or your husband used? (CODE ALL THAT APPLY)

- A. Pill . . . . . 01 40 41
- B. Foam . . . . . 02 42 43
- C. Diaphragm. . . . . 03 44 45
- D. Jelly, Cream, Suppository. . . . . 04 46 47
- E. Diaphragm and Jelly. . . . . 05 48 49
- F. Douche . . . . . 06
- G. IUD, Coil, Loop. . . . . 07
- H. Abortion . . . . . 08
- J. Operation: Female Sterilization. . . . . 09
- K. Operation: Male Sterilization. . . . . 10
- L. Condom, Rubber . . . . . 11
- M. Rhythm or safe period by temperature . . . . . 12
- N. Rhythm or safe period by calendar. . . . . 13
- P. Withdrawal or coitus interruptus . . . . . 14
- R. Abstinence (non-intercourse to avoid pregnancy) . . . . . 15
- S. Other (SPECIFY) \_\_\_\_\_ 16

Box 27. IF IUD CURRENT OR MOST RECENT METHOD, CONTINUE. OTHERWISE, GO TO SECTION D.

C-46. You told me you ( are/were ) using a(n) ( IUD/COIL/LOOP ). Here is a list of IUD's. Can you tell me which type it ( is/was )?

HAND CARD 2

Letter (MOST RECENT ONE) \_\_\_\_\_  
Other (SPECIFY) \_\_\_\_\_  
Don't know . . . . . 98

50 51

C-47. When was it inserted most recently?

MONTH/DAY/YEAR 52 53 54 55 56 57

LIST OF METHODS

- A. Pill
- B. Foam
- C. Diaphragm
- D. Jelly, Cream, Suppository
- E. Diaphragm and Jelly
- F. Douche
- G. IUD, Coil, Loop
- H. Abortion
- J. Operation: Female Sterilization
- K. Operation: Male Sterilization
- L. Condom, Rubber
- M. Rhythm or safe period by temperature
- N. Rhythm or safe period by calendar
- P. Withdrawal or Coitus Interruptus
- R. Abstinence (non-intercourse to avoid pregnancy)
- S. Other
  
- O. No method
- V. Pregnant
- W. Non-use because of sterility
- X. Months which have not occurred
- Z. Not having intercourse - Absent husband, not married, post-partum, etc.

METHOD CALENDAR

MONTH	YEAR			
	1973	1974	1975	1976
January				
February				
March				
April				
May				
June				
July				
August				
September				
October				
November				
December				

(GO BACK TO C-44.)

SECTION D

BEGIN DECK 15

We are talking with women about children they may have in the future, as well as about those they already have. (IF "R" HAS ALREADY MENTIONED STERILITY, MENOPAUSE, ETC.: I think we have already covered some of these next questions, but I'd better go through them with you to be sure that I record the answers correctly.)

- D-1. It is physically impossible for some couples to have children. As far as you know, is it possible or impossible for you and your husband to conceive a (nother) baby, that is, to get pregnant (again)?
- Possible. . . . . 1 (D-6)  
 Impossible. . . . . 2 (D-2) <sup>13</sup>  
 Don't Know, Not Sure. . . . . 8 (D-6)

D-2. What is the reason that you are unable to have a (nother) baby? (RECORD VERBATIM ON LINES AT LEFT, CODE ALL THAT APPLY, THEN FOLLOW SKIP INSTRUCTION FOR SMALLEST CODE NUMBER. IF RESPONSE INDICATES A PROBLEM OTHER THAN STERILITY, CHANGE D-1 TO "POSSIBLE" AND GO TO D-6.)

	14 15 16 17				
_____	"R" has had sterilizing operation. . . . .	.01	(D-3)		
_____	Impossible for "R" due to accident or illness . . . . .	.02	(D-3)		
_____	"R" sterile for other reasons. . . . .	.03	(D-3)		
_____	"R" has reached menopause . . . . .	.04	(D-14)		
_____	Husband has had sterilizing operation. . . . .	.05	(D-3)		
_____	Impossible for husband due to accident or illness . . . . .	.06	(D-3)		
_____	Husband sterile for other reasons. . . . .	.07	(D-3)		
_____	Couple unable to conceive, don't know reason. . . . .	.08	(Probe)		

PROBE: How many years altogether have you gone without using any birth control method and still not become pregnant? (RECORD VERBATIM ON LINES AT LEFT AND ENTER NUMBER OF YEARS.)

	18 19		
_____	NO. OF YRS.		

(Box 27A)

Box 27A. IF 3 YEARS OR LESS, SAY: I know that you've talked about the reasons that you haven't become pregnant but could you tell me a little bit more your difficulty in getting pregnant?  
 THEN CODE "YES" IN D-6 AND RECORD RESPONSE IN D-7,  
 IF MORE THAN 3 YEARS, CODE 6 IN D-3 AND CONTINUE.

D-3,	D-4,	D-5,
(ASK QUESTION ONLY IF D-2 IS FEMALE OPERATION; OTHERWISE, CODE WITHOUT ASKING.) What kind of operation was it?	CHOOSE APPROPRIATE QUESTION: (A) When was the operation done? (B) When did (you/your husband) become sterile? (If D.K., PROBE: . . . learn of the sterility)	Was <u>one</u> reason for the operation because you had all the children you wanted?
One ovary removed ("R" not sterile) . . . <input type="radio"/>	CHECK THE APPROPRIATE CIRCLE IN D-3 AND PROBE TO FIND OUT IF SHE IS SURE THAT SHE IS STERILE.  If she is sure, circle Code "6 - other reasons" in D-3 and follow the appropriate skip instruction for that category. If she is not sure, record her answer verbatim and skip to D-8.	
One tube tied or removed ("R" not sterile) . . . <input type="radio"/>		
Both ovaries removed. . . . . 1 (D-4A)	MONTH / YEAR (D-5)	Yes . . . 1 (D-76) No . . . 2 (D-14)
Both tubes tied or removed . . . . . 2 (D-4A)	MONTH / YEAR (D-5)	Yes . . . 1 (D-76) No . . . 2 (D-14)
Hysterectomy (Removal of uterus) . . . . . 3 (D-4A)	MONTH / YEAR (D-5)	Yes . . . 1 (D-76) No . . . 2 (D-14)
Vasectomy (cutting male sperm ducts) . . . . . 4 (D-4A)	MONTH / YEAR (D-5)	Yes . . . 1 (D-76) No . . . 2 (D-14)
Other operation or type unknown . . . . . 5 (D-4A)	MONTH / YEAR (D-5)	Yes . . . 1 (D-76) No . . . 2 (D-14)
Accident, illness or other reasons. . . . . 6 (D-4B)	MONTH / YEAR (D-14)	

- D-6. Some people are able to have a(nother) baby, but they have difficulty getting pregnant or holding onto the baby. As far as you know, is there any problem or difficulty for you and your husband to conceive or deliver a(nother) baby?
- Yes . . . . . 1 (D-7) 26  
 No . . . . . 2 (D-8)
- 
- D-7. What is the reason it would be difficult for you to have a(nother) baby?  
 (RECORD VERBATIM ON LINES AT LEFT AND CIRCLE APPROPRIATE CODE BELOW.)
- \_\_\_\_\_ Physical difficulty getting pregnant . . . . . 1  
 \_\_\_\_\_ Difficult for husband to father child . . . . . 2  
 \_\_\_\_\_ Dangerous for "R" to become pregnant (again). . . . . 3  
 \_\_\_\_\_ Dangerous to the baby . . . . . 4 27  
 \_\_\_\_\_ Difficult to carry pregnancy full 9 months. . . . . 5  
 \_\_\_\_\_ Other . . . . . 6
- 
- D-8. At any time has a medical doctor advised you never to become pregnant (again)?
- Yes . . . . . 1 (D-9) 28  
 No . . . . . 2 (Box 28)
- 
- D-9. Did he or she say it would be dangerous for you, and/or for the baby, or was it for some other reason?
- Dangerous for R . . . . . 1  
 Dangerous for baby. . . . . 2  
 Dangerous for both. . . . . 3 29  
 Other reason (SPECIFY) \_\_\_\_\_  
 \_\_\_\_\_ 4
- 
- D-10. When did you talk with the doctor about this?
- 30 31 32 33
- |  |  |  |  |
|--|--|--|--|
|  |  |  |  |
|--|--|--|--|
- \_\_\_\_\_/\_\_\_\_\_  
 MONTH / YEAR
- 
- D-11. Will you have an operation to be sure you don't become pregnant (again)?
- Yes . . . . . 1 (D-14)  
 No . . . . . 2 (D-12) 34  
 Maybe . . . . . 3 (D-12)
- 
- D-12. Will your husband have an operation to be sure you don't become pregnant (again)?
- Yes . . . . . 1 (D-14)  
 No . . . . . 2 (D-13) 35  
 Maybe . . . . . 3 (D-13)
- 
- D-13. If (after this baby is born) you find that you are pregnant (again), will you have the pregnancy ended by a doctor for health or medical reasons?
- Yes . . . . . 1 (D-14)  
 No . . . . . 2 (Box 28) 36  
 Maybe . . . . . 3 (Box 28)
- 
- D-14. Even though it is unlikely or impossible for you to have a(nother) baby, would you like to have a(nother) baby (after this one)?
- Yes . . . . . 1 37  
 No . . . . . 2
- 
- D-15. Would your husband like a(nother) baby?
- Yes . . . . . 1  
 No . . . . . 2 38  
 Don't Know. . . . . 8
- 
- D-16. (Since/If) you and your husband are unable to have a(nother) baby, do you intend to adopt any children?
- Yes . . . . . 1  
 No . . . . . 2 } (D-76) 39  
 Maybe . . . . . 3

Box 28. IF R IS CURRENTLY PREGNANT, SKIP TO D-41; OTHERWISE, CONTINUE.

NOT CURRENTLY PREGNANT (Q. D-17 - D-40)

40

D-17, Do you and your husband intend to have a(nother) baby?

- Yes . . . . . 1 (D-18)
- No. . . . . 2 (D-19)
- Husband/R disagrees . . . . 3 (D-26)
- DK, up to God, etc. . . . . 8 (D-26)

D-18, How many (more) do you intend to have? (ENTER ON LINE BELOW AND IN BOX 32, PAGE 25.)

NUMBER OR RANGE \_\_\_\_\_ (D-19)

Don't Know . . . . . 98 (D-26)

42	43

D-19, Let me summarize quickly what I have listed (SUMMARIZE AS INDICATED, ENTERING NUMBERS ON THE LINES.)

You have had \_\_\_\_\_ bab(y/ies) to date.  
(no. of live births)

You intend to have \_\_\_\_\_ (additional) bab(y/ies).  
(From D-17 or D-18)

So you intend to have \_\_\_\_\_ bab(y/ies)  
(total of above entries)  
altogether, is that right?

- Yes . . . . . 1 (Box 29)
- No. . . . . 2 (D-20)

D-20, What is the total number of babies you intend to have altogether? (PROBE TO FIND SOURCE OF ERROR IN TOTAL IN D-19. IF RESPONSES TO EARLIER QUESTIONS ARE AFFECTED, GO BACK AND CORRECT.)

NUMBER OR RANGE \_\_\_\_\_

Don't Know . . . . . 98

Box 29. IF NO MORE BABIES INTENDED, GO TO D-24. OTHERWISE, CONTINUE.

D-21, Of course, sometimes things do not work out exactly as we intend them to, or something makes us change our minds. In your case, how sure are you that you will have (NUMBER/RANGE IN D-18) (more) babies? Would you say you are very sure or not very sure?

- Very sure. . . . . 1 (Box 30, p. 24)
- Not very sure. . . . . 2 (D-22)

D-22, No one can be certain about the future, but you probably have some idea of how close you will come to the number you intend to have. What is the largest number of (additional) babies you expect to have?

NUMBER \_\_\_\_\_

Don't Know . . . . . 98

46	47

D-23, What is the smallest number of (additional) babies you expect to have?

NUMBER \_\_\_\_\_ (Box 30, p. 24)

Don't Know. . . . . 98 (Box 30, p. 24)

48	49

D-24. Of course, sometimes things do not work out exactly as we intend them to, or something makes us change our minds. In your case, how sure are you that you will have no (more) babies? Would you say you are very sure or not very sure?

Very sure . . . . . 1 (Box 30)  
 Not very sure . . . . . 2 (D-25)

50

D-25. No one can be certain about the future, but you probably have some idea of how close you will come to your intention to have no more babies. What is the largest number of (additional) babies you expect to have?

None . . . . . 00 (Box 30)

NUMBER \_\_\_\_\_ (Box 30)  
 Don't Know . . . . . 98 (Box 30)

51	52

D-26. Many people aren't sure, but still have some idea about the future. As things are working out for you, what is the largest number of (additional) babies you expect to have? (ENTER HERE AND IN BOX 32, PAGE 25.)

None . . . . . 00 (D-28)

NUMBER \_\_\_\_\_ (D-27)  
 Don't Know . . . . . 98 (Box 30)

53	54

D-27. What is the smallest number of (additional) babies you expect to have?

NUMBER \_\_\_\_\_

Don't Know . . . . . 98

55	56

D-28. Let me summarize quickly what I have listed. (SUMMARIZE AS INDICATED, ENTERING NUMBERS ON THE LINES.)

You have had \_\_\_\_\_ bab(y/ies) to date.  
(no. of live births)

You expect to have at most \_\_\_\_\_ (additional) bab(y/ies).  
(no. from D-26)

So you expect to have no more than \_\_\_\_\_  
(total of above entries)  
 bab(y/ies) altogether, is that right?

Yes . . . . . 1 (Box 30)  
 No . . . . . 2 (D-29)

57

D-29. What is the largest number of babies you expect to have altogether? (PROBE TO FIND SOURCE OF ERROR IN TOTAL IN D-28. IF RESPONSES TO EARLIER QUESTIONS ARE AFFECTED, GO BACK AND CORRECT.)

NUMBER \_\_\_\_\_  
 Don't Know . . . . . 98

Box 30. CHECK CIRCLES THAT APPLY. THEN SKIP AS INSTRUCTED.		
MORE BABIES INTENDED? (SEE D-17)	CURRENTLY USING METHOD? (SEE METHOD CALENDAR)	GO TO:
YES . . . . <input type="radio"/>	YES . . . . <input type="radio"/>	D-34
	NO . . . . <input type="radio"/>	D-31
NO . . . . <input type="radio"/>	YES . . . . <input type="radio"/>	D-74
	NO . . . . <input type="radio"/>	D-30
D.K. OR DIS- AGREES WITH HUSBAND . . . . <input type="radio"/>	YES . . . . <input type="radio"/>	D-74
	NO . . . . <input type="radio"/>	D-31

CONTINUE DECK 15

D-30. What is the reason you are not using a method to delay or prevent pregnancy?  
(RECORD VERBATIM ON LINES AT LEFT, THEN CODE ALL THAT APPLY.)

_____	R or H doesn't believe in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	it or against religion . . . .	.01	(D-76)		
_____	Waiting to get operation. . . .	.02	(D-76)		
_____	Waiting to get method				
_____	other than operation				
_____	(e.g., pill, IUD). . . . .	.03			
_____	Experienced or fears				
_____	bad side effects . . . . .	.04			
_____	Doesn't care if				
_____	becomes pregnant . . . . .	.05			
_____	Little chance of				
_____	pregnancy; subfecund . . . . .	.06			} (D-74)
_____	Infrequent or no				
_____	intercourse. . . . .	.07			
_____	Post partum; breastfeeding. . . .	.08			
_____	Don't know; doesn't have				
_____	reason; just decided				
_____	not to . . . . .	.98			
_____	Other . . . . .	.10			

D-31. Is the reason you are not using a method to delay or prevent pregnancy because you, yourself, want to become pregnant as soon as possible?

Yes . . . . . 1 62  
No . . . . . 2

D-32. Does your husband want you to have a(nother) baby as soon as possible?

Yes . . . . . 1 (D-35)  
No . . . . . 2 (Box 31) 63  
Don't Know. . . . . 8 (D-35)

Box 31. IF R SAID "No" TO BOTH D-31 AND D-32, CONTINUE. OTHERWISE, GO TO D-35.

D-33. Since neither of you wants to have a baby as soon as possible, what is the reason you are not using a method to delay or prevent pregnancy? (RECORD VERBATIM ON LINES AT LEFT, THEN CODE ALL THAT APPLY.)

_____	R or H doesn't believe in	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	it or against religion . . . .	.01			
_____	Waiting to get operation. . . .	.02			
_____	Waiting to get method				
_____	other than operation				
_____	(e.g., pill, IUD). . . . .	.03			
_____	Experienced or fears				
_____	bad side effects . . . . .	.04			
_____	Doesn't care if				
_____	becomes pregnant . . . . .	.05			} (D-35)
_____	Little chance of				
_____	pregnancy; subfecund . . . . .	.06			
_____	Infrequent or no				
_____	intercourse. . . . .	.07			
_____	Post partum; breastfeeding. . . .	.08			
_____	Don't know; doesn't have				
_____	reason; just decided				
_____	not to . . . . .	.98			
_____	Other . . . . .	.10			

D-34. How long from now do you think it will be until you stop using a method so you can become pregnant?

\_\_\_\_\_ MONTHS or \_\_\_\_\_ YEARS from now  
 Don't Know. . . . . 98 68 69

D-35. When do you expect your (first/next) baby to be born?

\_\_\_\_\_ MONTHS or \_\_\_\_\_ YEARS from now (D-37)  
 Don't Know. . . . . 98 (D-38) 70 71

D-36. No one can be sure, but do you think it will probably be within two years from now, between two and five years from now, or five or more years from now?

Within 2 years from now . . . . 1  
 Between 2 and 5 years . . . . 2  
 Five or more years. . . . . 3 72  
 Don't Know. . . . . 8

D-37. Would you like your (first/next) baby to be a boy or girl?

Boy . . . . . 1  
 Girl. . . . . 2 73  
 No preference . . . . . 3

Box 32. ENTER NUMBER OF ADDITIONAL BIRTHS EXPECTED: \_\_\_\_\_. IF 2 OR MORE ADDITIONAL BIRTHS EXPECTED, CONTINUE. OTHERWISE, GO TO D-40.

D-38. When do you expect your last baby to be born -- that is, about how many years from now?

Less than 5 years . . . . . 1 (D-40)  
 5 or more years . . . . . 2 (Box 33) 74  
 Don't Know. . . . . 8 (D-40)

Box 33. IF 3 OR MORE ADDITIONAL BIRTHS EXPECTED (SEE BOX 32) CONTINUE, OTHERWISE GO TO D-40.

D-39. If you do have (NUMBER FROM BOX 32) (more) babies, how many of these do you expect to have in the next five years?

NUMBER \_\_\_\_\_ 75  
 Don't Know. . . . . 98 76

D-40. If it should turn out that you and your husband are not able to have the number of children you expect, would you adopt a child?

Yes . . . . . 1  
 No. . . . . 2  
 Maybe, Don't Know . . . . . 3 (D-74) 76

BEGIN DECK 16; COLUMNS 13-46: BLANK FILL

CURRENTLY PREGNANT (Q. D-41 - D-69)

D-41. Do you and your husband intend to have another baby after this one is born?

- Yes . . . . . 1 (D-42)
- No . . . . . 2 (D-43) <sup>41</sup>
- Husband/R disagree . . . . . 3 (D-50)
- D.K., up to God, etc. . . . . 8 (D-50)

D-42. How many more do you intend to have, not counting this one? (ENTER ON LINE BELOW AND IN BOX 37, PAGE 30.)

- NUMBER OR RANGE \_\_\_\_\_ (D-43)
- Don't Know . . . . . 98 (D-50)

42	43
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D-43. Let me summarize quickly what I have listed. (SUMMARIZE AS INDICATED, ENTERING NUMBERS ON THE LINES.)

You have had \_\_\_\_\_ bab(y/ies) to date.  
(no. of live births)

You are pregnant now  1 , and you intend to  
have \_\_\_\_\_ additional bab(y/ies) after  
(from D-41 or D-42)  
this one is born,

So you intend to have \_\_\_\_\_ bab(y/ies)  
(total of above entries)  
altogether, is that right?

- Yes . . . . . 1 (Box 34) <sup>44</sup>
- No . . . . . 2 (D-44)

D-44. What is the total number of babies you intend to have? (PROBE TO FIND SOURCE OF ERROR IN TOTAL IN D-43. IF RESPONSES TO EARLIER QUESTIONS ARE AFFECTED, GO BACK AND CORRECT.)

- NUMBER OR RANGE \_\_\_\_\_
- Don't Know . . . . . 98

Box 34. IF NO MORE BABIES INTENDED, GO TO D-48. OTHERWISE, CONTINUE.

D-45. Of course, sometimes things do not work out exactly as we intend them to, or something makes us change our minds. In your case, how sure are you that you will have (NUMBER/RANGE IN D-42) more babies after this one? Would you say you are very sure or not very sure?

- Very sure . . . . . 1 (Box 35) <sup>45</sup>
- Not very sure . . . . . 2 (D-46)

D-46. No one can be certain about the future, but you probably have some idea of how close you will come to the number you intend to have. What is the largest number of additional babies you expect after this one is born?

- NUMBER \_\_\_\_\_
- Don't Know . . . . . 98

46	47
----	----

D-47. What is the smallest number of additional babies you expect to have after this one?

NUMBER \_\_\_\_\_ (Box 35) 

58	49
----	----

  
Don't Know. . . . . 98 (Box 35) 

--	--

D-48. Of course, sometimes things do not work out exactly as we intend them to, or something makes us change our minds. In your case, how sure are you that you will have no more babies after this one? Would you say you are very sure or not very sure?

Very sure . . . . . 1 (Box 35) <sup>50</sup>  
Not very sure . . . . . 2 (D-49)

D-49. No one can be certain about the future, but you probably have some idea of how close you will come to your intention to have no more babies. What is the largest number of additional babies you expect to have after this one is born?

NUMBER \_\_\_\_\_ (Box 35) 

51	52
----	----

  
Don't Know. . . . . 98 (Box 35) 

--	--

D-50. Many people aren't sure, but still have some idea about the future. As things are working out for you, what is the largest number of additional babies you expect to have after this one? (ENTER HERE AND IN BOX 37, PAGE 30.)

None. . . . . 00 (D-52)  
NUMBER \_\_\_\_\_ (D-51) 

53	54
----	----

  
Don't Know. . . . . 98 (Box 35) 

--	--

D-51. What is the smallest number of additional babies you expect to have after this one?

None. . . . . 00  
NUMBER \_\_\_\_\_  
Don't Know. . . . . 98 

55	56
----	----

D-52. Let me summarize quickly what I have listed. (SUMMARIZE AS INDICATED, ENTERING NUMBERS ON LINES.)

You have had \_\_\_\_\_ bab(y/ies) to date.  
(no. of live births)

You are pregnant now  1  and you expect to have at most \_\_\_\_\_ additional bab(y/ies) after this one,  
(no. from D-50)

So you expect to have no more than \_\_\_\_\_ bab(y/ies) altogether, is that right?  
(total of above entries)

Yes . . . . . 1 (Box 35) <sup>57</sup>  
No. . . . . 2 (D-53)

D-53. What is the largest number of babies you expect to have altogether? (PROBE TO FIND SOURCE OF ERROR IN TOTAL IN D-52. IF RESPONSES TO EARLIER QUESTIONS ARE AFFECTED, GO BACK AND CORRECT.)

NUMBER \_\_\_\_\_  
Don't Know. . . . . 98

COLUMNS 58-80: BLANK FILL

Box 35, IF R INTENDS MORE BABIES (SEE Q. D-41), GO TO D-58, OTHERWISE, CONTINUE.

BEGIN DECK 16

D-54, Are you and your husband going to use a method to delay or prevent pregnancy after this baby is born?

Yes . . . . . 1 (D-55) 13  
 No . . . . . 2 (D-57)

D-55, What method do you intend to use?

\_\_\_\_\_ 14 15  
 METHOD 

--	--

D-56, After this baby is born, how long do you think it will be until you start using (METHOD[S] IN D-55)?

\_\_\_\_\_ or \_\_\_\_\_ (D-74)  
 WEEKS MONTHS 16 17  
 Don't Know . . . . . 98 (D-74)

D-57, What is the reason you will not use a method? (RECORD VERBATIM ON LINES AT LEFT, THEN CODE ALL THAT APPLY.)

	18	19	20	21
_____ R or H doesn't believe in it or against religion . . .01 (D-76)				
_____ Waiting to get operation . . .02 (D-76)				
_____ Waiting to get method other than operation (e.g., pill, IUD). . . . .03				
_____ Experienced or fears bad side effects . . . . .04				} (D-74)
_____ Doesn't care if becomes pregnant . . . . .05				
_____ Little chance or pregnancy; subfecund . . . . .06				
_____ Infrequent or no intercourse . . . . .07				
_____ Post partum; breastfeeding. .08				
_____ Don't know; doesn't have reason; just decided not to . . . . .98				
_____ Other . . . . .10				
_____				
_____				
_____				

D-58, Are you and your husband going to use a method to delay or prevent pregnancy after this baby is born?

Yes . . . . . 1 (D-59) 22  
 No . . . . . 2 (D-62)

D-59, What method do you intend to use?

\_\_\_\_\_ 23 24  
 METHOD 

--	--

D-60, After this baby is born, how long do you think it will be until you start using (METHOD[S] IN D-59)?

\_\_\_\_\_ or \_\_\_\_\_ 25 26  
 WEEKS MONTHS  
 Don't Know . . . . . 98

D-61. From the time you start using a method, how long do you think it will be until you stop using a method so you can start your next pregnancy?

MONTHS or YEARS (D-65) 27 28  
 Don't Know. . . . . 98 (D-65) [ ] [ ]

D-62. Is the reason you will not use a method because you, yourself, want to become pregnant as soon as possible?

Yes . . . . . 1 29  
 No. . . . . 2

D-63. Does your husband want you to have another baby as soon as possible after this one?

Yes . . . . . 1 (D-65)  
 No. . . . . 2 (Box 36) 30  
 Don't Know. . . . . 8 (D-65)

Box 36. IF "No" TO BOTH D-62 AND D-63, CONTINUE. OTHERWISE, GO TO D-65.

D-64. Since neither of you wants to have a baby as soon as possible after this one, what is the reason you will not use a method to delay or prevent pregnancy? (RECORD VERBATIM ON LINES AT LEFT, THEN CODE ALL THAT APPLY.)

31 32 33 34  
[ ] [ ] [ ] [ ]

_____	R or H doesn't believe in it or against religion . . .01	} (D-65)
_____	Waiting to get operation. . .02	
_____	Waiting to get method other than operation (e.g., pill, IUD). . . . .03	
_____	Experienced or fears bad side effects . . . . .04	
_____	Doesn't care if becomes pregnant . . . . .05	
_____	Little chance of pregnancy; subfecund . . . . .06	
_____	Infrequent or no intercourse. . . . .07	
_____	Post partum; breastfeeding. .08	
_____	Don't know; doesn't have reason; just decided not to . . . . .98	
_____	Other . . . . .10	

D-65. When do you expect your next baby after this one to be born?

MONTHS or YEARS from now (Box 37) 35 36  
 Don't Know. . . . . 98 (D-66) [ ] [ ]

D-66. No one can be sure, but do you think it will probably be within two years from now, between two and five years from now, or five or more years from now?

Within 2 years from now . . . 1  
 Between 2 and 5 years . . . . 2 37  
 Five or more years. . . . . 3  
 Don't Know. . . . . 8

**Box 37.** ENTER NUMBER OF ADDITIONAL BIRTHS EXPECTED: \_\_\_\_\_, IF 2 OR MORE ADDITIONAL BIRTHS EXPECTED, CONTINUE, OTHERWISE, GO TO D-69.

D-67, When do you expect your last baby to be born -- that is, about how many years from now?

Less than 5 years . . . . . 1 (D-69)  
 5 or more years . . . . . 2 (Box 38) 38  
 Don't Know. . . . . 8 (D-69)

**Box 38.** IF 3 OR MORE ADDITIONAL BIRTHS EXPECTED (SEE BOX 37), CONTINUE, OTHERWISE, GO TO D-69.

D-68, If you do have (NUMBER FROM BOX 37) more babies after this one, how many of these do you expect to have in the next five years?

NUMBER \_\_\_\_\_ 39  
 Don't Know. . . . . 98

D-69, If it should turn out that you and your husband are not able to have all the children you expect, would you adopt a child?

Yes . . . . . 1  
 No. . . . . 2 40  
 Maybe, Don't Know . . . . . 3

D-70, TO D-73, OMITTED.

COLUMNS 41-46: BLANK FILL

D-74, Once they have all the children they expect, some people use different or additional methods to be sure they have no more; others do not feel it's so important. In your case, (now that/once) you have all the children you expect, will you and your husband take extra steps to be sure you will have no more babies?

Yes . . . . . 1 (D-75)  
 No. . . . . 2 (D-76) 47  
 Maybe, Don't Know . . . . . 8 (D-75)

D-75, Looking once more at the list, what different or additional methods will you most likely use? (DO NOT READ CATEGORIES; CODE ALL THAT APPLY.)

48 49 50 51

HAND CARD 1

- Pill. . . . . A
- Foam. . . . . B
- Diaphragm . . . . . C
- Jelly, Cream, Suppository . . . . . D
- Diaphragm and Jelly . . . . . E
- Douche. . . . . F
- IUD, Coil, Loop . . . . . G
- Abortion. . . . . H
- Operation: Female Sterilization. . . . . J
- Operation: Male Sterilization. . . . . K
- Condom, Rubber. . . . . L
- Rhythm or safe period by temperature. . . . . M
- Rhythm or safe period by calendar . . . . . N
- Withdrawal or coitus interruptus. . . . . P
- Abstinence (non-intercourse to avoid pregnancy). . . . . R
- Other (SPECIFY) \_\_\_\_\_ S
- Don't Know. . . . . T

D-76. The number of children people expect is not always the same as the number they would most like to have. Knowing how other things are for you and your husband, if you could choose exactly the number of children to have in your whole life, how many would you choose now?

None. . . . .00 (Section E)

NUMBER \_\_\_\_\_ (D-79)

RANGE \_\_\_\_\_ (D-78)

Don't Know. . . . .98 (D-77)

52	53
----	----

D-77. A lot of people feel that way, but if you could choose, how many would you have?

None. . . . .00 (Section E)

NUMBER \_\_\_\_\_ (D-79)

RANGE \_\_\_\_\_ (D-78)

Don't Know. . . . .98 (Section E)

54	55
----	----

D-78. If you had to choose a single number between (NUMBERS IN RANGE), which would you choose?

None. . . . .00 (Section E)

NUMBER \_\_\_\_\_ (D-79)

Don't Know. . . . .98 (Section E)

56	57
----	----

D-79. If you were to have exactly (NUMBER) child(ren), (would that be a boy or a girl/how many girls and how many boys would that be)?

GIRL(s) \_\_\_\_\_

BOY(s) \_\_\_\_\_

Doesn't matter, D.K.. . . 98

58	59	60	61
----	----	----	----

D-80. If you couldn't have exactly (SAME NUMBER AS D-79) child(ren), what would be your next choice, one more or one less?

One more. . . . . 1

One less. . . . . 2

62

SECTION E

In this survey we are also talking with women about medical and family planning services which they may have used.

Box 39. IF NEVER PREGNANT, GO TO E-5. OTHERWISE, CONTINUE.

E-1. During ( your last/this ) pregnancy, ( did you get/are you getting ) pre-natal care?

Yes . . . . . 1 (E-2) 13  
No . . . . . 2 (Box 40)

E-2. In what month of pregnancy did you first get pre-natal care?

14 15

MONTH (2ND, 3RD, ETC.)

E-3. During ( your last/this ) pregnancy, where ( did/do ) you go for pre-natal care? (IF MORE THAN ONE PLACE, RECORD ONLY WHERE R WENT MOST OFTEN.)

Own medical doctor or group of doctors . . . . . 1  
Hospital out-patient clinic where doctor is assigned . . . . . 2 16  
Separate clinic not in a hospital. . . . . 3  
Other (SPECIFY) \_\_\_\_\_ 4

Box 40. IF NO LIVE BIRTHS, GO TO E-5. OTHERWISE, CONTINUE.

E-4. This card lists some of the ways in which hospital bills can be paid. When your (last) baby was born, in which of these ways was the hospital bill paid, or was the bill paid in some other way?

HAND CARD 3	You or your husband's own income only. . . . . 01	
	Insurance only (which you carry or is carried for you) . . . . . 02	
	Own income and insurance . . . . . 03	
	Medicaid (welfare) . . . . . 04	17-18
	Other government (such as military, state, local). . . . . 05	
	Parents or other relatives . . . . . 06	
	Some other way (SPECIFY) _____ 07	

E-5. Have you had a pelvic or internal exam during the past three years?

Yes . . . . . 1 19  
No . . . . . 2

E-6. Have you had a Pap smear to test for cancer within the past three years?

Yes . . . . . 1 20  
No . . . . . 2

E-7. Some doctors advise women to douche after intercourse and some do not. Do you regularly douche after intercourse?

Yes . . . . . 1 (E-8) 21  
No . . . . . 2 (Box 41)

E-8. How soon after intercourse do you usually douche? Would you say less than a half hour or more than a half hour?

Less than a half hour. . . . . 1 22  
More than a half hour. . . . . 2

**Box 41. IF R OR HUSBAND STERILE BEFORE JANUARY, 1973 (SEE D-4), GO TO E-24. OTHERWISE, CONTINUE.**

E-9. During the past three years, has a doctor or other trained person prescribed, or talked with you about a method for delaying or preventing a pregnancy?

Yes. . . . . 1 (E-12) 23  
 No . . . . . 2 (E-10)

E-10. Have you ever had a discussion with a doctor or other trained person about methods to delay or prevent a pregnancy?

Yes. . . . . 1 (E-11) 24  
 No . . . . . 2 (E-18)

E-11. When was the very first time you had a discussion with a doctor or other trained person about methods to delay or prevent a pregnancy? 25 26 27 28

MONTH/YEAR . . . . . (E-18)

D.K. or Don't remember . . . . . 9898 (Probe)

PROBE: Well, how old were you at that time? 29 30

AGE . . . . . (E-18)

D.K. or Don't remember . . . . . 98 (E-18)

E-12. The last time you talked with a doctor or trained person about a method, did he or she recommend that you change methods or that you start using a method?

No recommendation. . . . . 1 (E-15)  
 Recommendation to start a method. . . . . 2 (E-15) 31  
 Recommendation to change method . . . . . 3 (E-12A)

E-12A. What method were you using at the time the recommendation to change methods was made?

(USE METHOD CODES FROM E-13) . . . . . (E-13) 32 33 34 35

METHOD CODE

E-13. What method was recommended? (CODE AS MANY AS MENTIONED).

Fill . . . . . A  
 Foam . . . . . B  
 Diaphragm. . . . . C  
 Jelly, Cream, Suppository. . . . . D  
 Diaphragm and Jelly. . . . . E  
 Douche . . . . . F  
 IUD, Coil, Loop. . . . . G  
 Abortion . . . . . H  
 Operation: Female Sterilization . . . . . J  
 Operation: Male Sterilization . . . . . K  
 Condom, Rubber . . . . . L  
 Rhythm or safe period by temperature . . . . . M 36 37  
 Rhythm or safe period by calendar. . . . . N

Withdrawal or coitus interruptus . . . . . P  
 Abstinence (non-intercourse to avoid pregnancy) . . . . . R  
 Other (SPECIFY) \_\_\_\_\_ S

E-14. Did he or she discuss possible side effects or problems with you or your husband?

Yes. . . . . 1 38  
 No . . . . . 2

E-15. Where was it that you talked with a doctor or other trained person about a method for delaying or preventing a pregnancy?  
 (PROBE TO FIND OUT IF A "CLINIC" OR "OFFICE" WAS EXCLUSIVELY FOR FAMILY PLANNING. IF SO, CODE "3." OTHERWISE, CODE "1" OR "2.")

- Own doctor's office/group of doctors . . . . . 1 (E-17)
- General medical clinic, hospital out-patient clinic or public health clinic . . . . . 2 (E-17)
- Family planning clinic or counseling office. . . . . 3 (E-17)
- While hospital in-patient. . . . . 4 (E-16)
- Somewhere else (SPECIFY) \_\_\_\_\_ 5 (E-17)

39

E-16. Was this with your regular doctor, a doctor assigned to you, or someone else?

- Regular doctor . . . . . 1
- Assigned doctor. . . . . 2
- Someone else (SPECIFY) \_\_\_\_\_ 3

40

E-17. When was the very first time you had a discussion with a doctor or other trained person about methods to delay or prevent a pregnancy?

MONTH/YEAR 

41	42	43	44
----	----	----	----

  
 D.K. or Don't remember . . . 9898 (Probe)

PROBE: Well, how old were you at that time?

AGE 

45	46
----	----

  
 D.K. or Don't remember . . . . 98

E-18. In the past three years, have you talked with a medical doctor or to any other trained person about increasing your chances of having a baby?

- Yes. . . . . 1 (E-19)
- No . . . . . 2 (E-20)

47

E-19. When did you last go for help to increase your chances of having a baby?

MONTH/YEAR 

48	49	50	51
----	----	----	----

E-20. In the past three years, have you used a calendar or temperature method of rhythm to increase your chances of becoming pregnant? That is, in order to know the days when you are most likely to become pregnant.

- Yes. . . . . 1 (E-21)
- No . . . . . 2 (E-22)

52

E-21. In which months were you trying to become pregnant this way? (ENTER DATES ON APPROPRIATE LINES.) PROBE: What other months?

	STARTED	(IF) STOPPED									
FIRST TIME	MONTH/YEAR	MONTH/YEAR	<table border="1" style="display: inline-table;"><tr><td>53</td><td>54</td><td>55</td><td>56</td><td>57</td><td>58</td><td>59</td><td>60</td></tr></table>	53	54	55	56	57	58	59	60
53	54	55	56	57	58	59	60				
SECOND TIME	MONTH/YEAR	MONTH/YEAR	<table border="1" style="display: inline-table;"><tr><td>61</td><td>62</td><td>63</td><td>64</td><td>65</td><td>66</td><td>67</td><td>68</td></tr></table>	61	62	63	64	65	66	67	68
61	62	63	64	65	66	67	68				
CHECK IF 3 OR MORE TIMES	<input type="radio"/>		<table border="1" style="display: inline-table;"><tr><td>69</td></tr></table>	69							
69											

E-22. In the past three years, have you used the Pill for medical reasons only -- not for delaying or preventing pregnancy?

Yes . . . . . 1 (E-23)  
 No . . . . . 2 (Section F)<sup>13</sup>

E-23. Can you tell me when you started using the Pill this way and when you stopped? (ENTER DATES ON APPROPRIATE LINES.) PROBE: What other times?

	STARTED	(IF) STOPPED																	
FIRST TIME	____/____ MONTH/YEAR	____/____ MONTH/YEAR	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">14</td> <td style="width: 20px; text-align: center;">15</td> <td style="width: 20px; text-align: center;">16</td> <td style="width: 20px; text-align: center;">17</td> <td style="width: 20px; text-align: center;">18</td> <td style="width: 20px; text-align: center;">19</td> <td style="width: 20px; text-align: center;">20</td> <td style="width: 20px; text-align: center;">21</td> </tr> <tr> <td style="height: 15px;"></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	14	15	16	17	18	19	20	21								
14	15	16	17	18	19	20	21												
SECOND TIME	____/____ MONTH/YEAR	____/____ MONTH/YEAR	(Section F) <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">22</td> <td style="width: 20px; text-align: center;">23</td> <td style="width: 20px; text-align: center;">24</td> <td style="width: 20px; text-align: center;">25</td> <td style="width: 20px; text-align: center;">26</td> <td style="width: 20px; text-align: center;">27</td> <td style="width: 20px; text-align: center;">28</td> <td style="width: 20px; text-align: center;">29</td> </tr> <tr> <td style="height: 15px;"></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	22	23	24	25	26	27	28	29								
22	23	24	25	26	27	28	29												
CHECK IF 3 OR MORE TIMES	<input type="radio"/>		<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">30</td> </tr> <tr> <td style="height: 15px;"></td> </tr> </table>	30															
30																			

E-24. Have you ever had a discussion with a doctor or other trained person about methods to delay or prevent a pregnancy?

Yes . . . . . 1 (E-25)  
 No . . . . . 2 (Section F)<sup>31</sup>

E-25. When was the very first time you had a discussion with a doctor or other trained person about methods to delay or prevent a pregnancy?

\_\_\_\_/\_\_\_\_ . . . . . (Section F) 

32	33	34	35

D.K. or Don't remember . . . 9898 (Probe)

PROBE: Well, how old were you at that time?

\_\_\_\_  
AGE

36	37

D.K. or Don't remember . . . . 98

SECTION F

These questions are about when you were growing up and about your work experience.

F-1, CODE RACE OF RESPONDENT BY OBSERVATION.

Black. . . . .	1	
White. . . . .	2	13
Other. . . . .	3	

F-2, When you were growing up, that is, between the ages of 6 and 16, in what state or foreign country did you live the longest?

Alabama. . . . .	63	Nebraska. . . . .	46	
Alaska . . . . .	94	Nevada. . . . .	84	
Arizona. . . . .	87	New Hampshire . . . . .	13	
Arkansas . . . . .	71	New Jersey. . . . .	22	
California . . . . .	93	New Mexico. . . . .	88	
Colorado . . . . .	86	New York. . . . .	21	
Connecticut. . . . .	15	North Carolina. . . . .	56	
Delaware . . . . .	51	North Dakota. . . . .	44	
District of Columbia . . . . .	55	Ohio. . . . .	35	
Florida. . . . .	59	Oklahoma. . . . .	72	
Georgia. . . . .	58	Oregon. . . . .	92	
Hawaii . . . . .	95	Pennsylvania. . . . .	23	
Idaho. . . . .	82	Rhode Island. . . . .	16	
Illinois . . . . .	32	South Carolina. . . . .	57	14-15
Indiana. . . . .	33	South Dakota. . . . .	45	
Iowa . . . . .	42	Tennessee . . . . .	62	
Kansas . . . . .	47	Texas . . . . .	74	
Kentucky . . . . .	61	Utah. . . . .	85	
Louisiana. . . . .	73	Vermont . . . . .	12	
Maine. . . . .	11	Virginia. . . . .	54	
Maryland . . . . .	52	Washington (state). . . . .	91	
Massachusetts. . . . .	14	West Virginia . . . . .	53	
Michigan . . . . .	34	Wisconsin . . . . .	31	
Minnesota. . . . .	41	Wyoming . . . . .	83	
Mississippi. . . . .	64	Foreign country (SPECIFY)		
Missouri . . . . .	43			
Montana. . . . .	81		01	

F-3, When you were growing up, that is, between the ages of 6 and 16, did you live on a farm most of the time (half of the time, or more)?

Yes. . . . .	1	
No . . . . .	2	16

F-4, When you were 14, were you living with both your own mother and your own father?

Yes. . . . .	1 (F-6)	
No . . . . .	2 (F-5)	17

F-5, Was that because one or both of them had died, they were divorced, or for some other reason?

One or both died . . . . .	1	
They were divorced . . . . .	2	18
Some other reason. . . . .	3	

F-6. Which of these groups best describes your national origin or ancestry? (CHECK ALL THAT APPLY.)

HAND  
CARD 4

- German . . . . .  Black, African, Negro . . .
- Italian . . . . .  Puerto Rican . . . . .
- Irish . . . . .  Cuban . . . . .
- French . . . . .  Mexicano, Chicano,  
Mexican American. . . . .
- Polish . . . . .  Other Spanish (Spain/Hispano/  
Other Latin American) . . .
- Russian . . . . .  American Indian . . . . .
- English, Scot, Welsh . . .  Other (SPECIFY) \_\_\_\_\_
- Asian or Pacific Islander,  
such as Chinese, Japanese,  
Korean, Phillipine or  
Samoan . . . . .  Don't Know. . . . .

19 20

F-7. What is the highest grade or year of regular school or college you have attended?

- No formal schooling. . . . 00 (Box 43)
- |                       |                                   |
|-----------------------|-----------------------------------|
| Elementary:           | High School:                      |
| 1st grade. . . . . 01 | 1st year . . . . . 09             |
| 2nd grade. . . . . 02 | 2nd year . . . . . 10             |
| 3rd grade. . . . . 03 | 3rd year . . . . . 11             |
| 4th grade. . . . . 04 | 4th year . . . . . 12             |
| 5th grade. . . . . 05 | College and Graduate/Professional |
| 6th grade. . . . . 06 | School:                           |
| 7th grade. . . . . 07 | 1 year . . . . . 13               |
| 8th grade. . . . . 08 | 2 years. . . . . 14               |
|                       | 3 years. . . . . 15               |
|                       | 4 years. . . . . 16               |
|                       | 5 years. . . . . 17               |
|                       | 6 years or more. . . . . 18       |

21-22

F-8. Did you complete that grade or year?

- Yes. . . . . 1
- No . . . . . 2

23

F-9. Have you had any other schooling, such as business school, nursing or technical school?

- Yes. . . . . 1 (F-10)
- No . . . . . 2 (F-11)

24

F-10. Did you include any of this schooling in answering the question on the highest grade of regular school you have attended?

- Yes. . . . . 1 (Box 42)
- No . . . . . 2 (F-11)

25

**Box 42. PROBE AND CORRECT F-7 AND F-8 IF NECESSARY. THEN GO TO F-11.**

F-11. Did you get any of your education in a church-related school (and/or college)?

Yes . . . . . 1 (F-12)  
 No . . . . . 2 (F-14)

26

F-12. During which grades did you attend a church-related school (and/or college)? (CIRCLE ALL THAT APPLY.)

Elementary:	High School:
1st grade . . . . . 01	1st year . . . . . 09
2nd grade . . . . . 02	2nd year . . . . . 10
3rd grade . . . . . 03	3rd year . . . . . 11
4th grade . . . . . 04	4th year . . . . . 12
5th grade . . . . . 05	College and Graduate/Professional School:
6th grade . . . . . 06	1st year . . . . . 13
7th grade . . . . . 07	2nd year . . . . . 14
8th grade . . . . . 08	3rd year . . . . . 15
	4th year . . . . . 16
	5th year . . . . . 17
	6th year or higher . . . . . 18

27	28	29

F-13. Which church or religious group was that?

Roman Catholic . . . . . 1  
 Protestant . . . . . 2 30  
 Other (SPECIFY) \_\_\_\_\_ 3

F-14. What was the highest grade or year of regular school (or college) you had completed at the time of your (first) marriage? (REFER TO GRADE CODES IN F-12 AND ENTER CODE BELOW.)

CODE

31	32

**Box 43. IF MARRIED MORE THAN ONCE (SEE A-10), CONTINUE. OTHERWISE, GO TO Box 44.**

F-15. What was the highest grade or year of regular school or college your first husband had completed, at the time of your marriage? (REFER TO GRADE CODES IN F-12 AND ENTER CODE BELOW.)

CODE

Don't Know . . . . . 98

33	34

F-16. When was your first husband born?

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ . . . . . (Box 44)  
 MONTH/DAY/YEAR  
 Don't Know . . . . . 98 (F-17)

35	36	37	38	39	40

F-17. How old was he when you were married?

AGE

Don't Know . . . . . 98

41	42

**Box 44. IF 1ST BIRTH BEFORE (FIRST) MARRIAGE (CHECK DATES ON B & P RECORD), CONTINUE. OTHERWISE, GO TO F-19,**

F-18. Before the birth of your (first) child, did you ever work for pay continuously for six months or more either part-time or full-time?

Yes . . . . . 1 43  
 No . . . . . 2

**Box 45. IF TWO OR MORE LIVE BIRTHS, GO TO F-19C. OTHERWISE, GO TO BOX 46.**

F-19. ASK ALL THAT APPLY, THEN GO TO BOX 46.

Did you ever work for pay continuously for six months or more either part-time or full-time:

	Yes	No	
A. . . . before you were (first) married? . . . . .	1	2	44
B. IF ANY LIVE BIRTHS: . . . between the time of your (first) marriage and the birth of your (first) child? . . . . .	1	2	45
C. IF 2 OR MORE LIVE BIRTHS: . . . between the birth of your first child and the birth of your second child? . . . . .	1	2	46
D. IF 3 OR MORE LIVE BIRTHS: . . . between the birth of your second child and the birth of your third child? . . . . .	1	2	47
E. IF 4 OR MORE LIVE BIRTHS: . . . between the birth of your third child and the birth of your last child? . . . . .	1	2	48

**Box 46. IF NO LIVE BIRTHS, GO TO F-24.**

IF ONE OR MORE LIVE BIRTHS AND "YES" TO LAST QUESTION ASKED, GO TO F-20.  
 "NO" TO LAST QUESTION ASKED, GO TO F-22.

F-20. How long before the delivery of your (last) child did you stop working?

Less than one month . . . . . 00 (F-21)  
 NUMBER OF MONTHS \_\_\_\_\_ (F-21) 54 55  
 One year or more . . . . . 12 (F-22) 56 57

F-21. Why did you stop when you did? (RECORD VERBATIM. IF "BECAUSE PREGNANT," PROBE.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

51 52

F-22. Have you worked for pay continuously for six months or more either part-time or full-time since your (last) child was born?

Yes . . . . . 1 (F-23) 53  
 No . . . . . 2 (F-25)

F-23. In what month and year did you begin to work after your (last) child was born?

\_\_\_\_\_/\_\_\_\_\_. . . . . (F-25) 54 55 56 57

MONTH/YEAR

F-24. Since you were (first) married, have you ever worked for pay continuously for six months or more either part-time or full-time?

Yes . . . . . 1 58  
 No . . . . . 2

F-25. How many weeks during the past 12 months did you work either full-time or part-time, including paid vacations and paid sick leave?

NUMBER OF WEEKS \_\_\_\_\_ (Box 47) 59 60  
 Did not work . . . . . 00 (F-32)

Box 47. IF R CURRENTLY PREGNANT AND WORKED IN LAST 12 MONTHS, CONTINUE. OTHERWISE, GO TO F-32.

F-26. Last week, were you working full-time, part-time, going to school, keeping house, or what? (CIRCLE ONE CODE ONLY. IF MORE THAN ONE RESPONSE, CODE RESPONSE WITH SMALLEST NUMBER.)

Working full-time (35 hours or more) . . . . . 01 (F-27)  
 Working part-time (1 to 34 hours) . . . . . 02 (F-27)  
 With a job but not at work because of temporary illness, vacation, strike. . . . . 03 (F-27)  
 With a job but on maternity leave. . . . . 04 (F-28) 61-62  
 Unemployed, laid off, looking for work . . . . . 05 (F-27)  
 In school. . . . . 06 (F-28)  
 Keeping house. . . . . 07 (F-28)  
 other (SPECIFY) \_\_\_\_\_ 08 (F-28)

F-27. How long before the end of your current pregnancy do you plan to stop ( working/looking for work )?

NUMBER OF WEEKS OR NUMBER OF MONTHS . . . . . (F-28)  
 Is not going to stop . . . . . 00 (F-30) 63 64

F-28. When did you stop working?

MONTH/YEAR 

65	66	67	68
----	----	----	----

BEGIN DECK 20

F-29. Why (did/will) you stop at that time? (RECORD VERBATIM. IF "BECAUSE PREGNANT," PROBE.)

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13 14

F-30. After this pregnancy, do you expect to (return to/look for) a job at some time in the future?

Yes . . . . . 1 (F-31)  
 No . . . . . 2 (Box 48) 15  
 Don't know . . . . . 8 (Box 48)

F-31. When do you expect to begin working (again)?

MONTH/YEAR 

16	17	18	19
----	----	----	----

Box 48. IF CURRENTLY WORKING, GO TO Box 49. IF NOT CURRENTLY WORKING, GO TO F-38.

F-32. Last week, were you working full-time, part-time, going to school, keeping house, or what? (CIRCLE ONE CODE ONLY. IF MORE THAN ONE RESPONSE, CODE RESPONSE WITH SMALLEST NUMBER.)

- Working full-time (35 hours or more) . . . . . 01 (Box 49)
- Working part-time (1 to 34 hours). . . . . 02 (Box 49)
- With a job but not at work because of temporary illness, vacation, strike. . . . . 03 (Box 49)
- Unemployed, laid off, looking for work . . . . . 05 (Box 49) 20-21
- In school. . . . . 06 (F-33)
- Keeping house. . . . . 07 (F-33)
- Other (SPECIFY) \_\_\_\_\_ 08 (F-33)

F-33. Do you expect to look for a job sometime in the future?

- Yes. . . . . 1 (F-34)
- No . . . . . 2 (Box 50) 22
- Don't know . . . . . 8 (Box 50)

F-34. When do you expect to begin working (again)?

- MONTH/YEAR . . . . . (Box 50)
  - Don't know . . . . . 98 (Box 50)
- |    |    |    |    |
|----|----|----|----|
| 23 | 24 | 25 | 26 |
|    |    |    |    |

Box 49. IF CHILD(REN) AGED 0-12 IN HOUSEHOLD, (SEE SCREENER), CONTINUE. OTHERWISE, GO TO BOX 50.

F-35. Do you have any regular arrangement for the care of your child(ren) while you are working, with a family member or outside the family?

- Yes. . . . . 1 (F-36)
- No . . . . . 2 (Box 50) 27

F-36. Who takes care of your child(ren) and where? (CODE ALL THAT APPLY.)

- By husband, in respondent's home . . . . . 01
- By other relative, in respondent's home. . . . . 02
- By non-relative, in respondent's home. . . . . 03
- In relative's home . . . . . 04 28-29
- In non-relative's home . . . . . 05
- In day care or other special organized facility. . 06
- Other (SPECIFY) \_\_\_\_\_ 07

F-37. During the average week of the school year, how many hours per week of child care do you use for ( your child/each of your children )? (RECORD HOURS FOR EACH CHILD AGED 0-12. RECORD "0" IF NO DAY CARE. CARE BY ANOTHER CHILD AGED 0-12 DOES NOT COUNT AS DAY CARE.)

CHILD NUMBER	1	2	3	4	5	6	7	8	9							
HOURS	_____	_____	_____	_____	_____	_____	_____	_____	_____	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr> <td style="width: 20px;">30</td> <td style="width: 20px;">31</td> <td style="width: 20px;">32</td> </tr> <tr> <td style="height: 20px;"></td> <td style="height: 20px;"></td> <td style="height: 20px;"></td> </tr> </table>	30	31	32			
30	31	32														

Box 50. IF R HAS EVER WORKED, CONTINUE. OTHERWISE, GO TO F-44.

F-38. What ( is/was ) your (last) occupation? That is, what ( is/was ) your job called?

\_\_\_\_\_

F-39. What ( are/were ) your most important activities or duties?

\_\_\_\_\_  
 \_\_\_\_\_

F-40. What kind of place ( do/did ) you work for? That is, what ( do/did ) they make or do?

33	34	35	36	37

F-41. How many hours a week ( do/did ) you usually work at this job?

38	39

HOURS PER WEEK

F-42. And how much ( do/did ) you earn on this job?

\$ \_\_\_\_\_ per 

hour
week
month
year

 (CIRCLE ONE) (F-44)

Refused . . . . . 97 (F-43)  
 Don't Know . . . . . 98 (F-43)

40	41	42	43	44	45	46

F-43. Here is a card showing amounts of weekly and yearly earnings. Next to each amount is a letter. Would you tell me which letter represents your salary on this job? (ENTER LETTER.)

HAND CARD 5
----------------

47	48

LETTER

F-44. Are you Protestant, Roman Catholic, Jewish or something else?

Roman Catholic . . . . . 1 (F-47)  
 Protestant . . . . . 2 (F-45)  
 Jewish . . . . . 3 (F-46)  
 Other (SPECIFY) \_\_\_\_\_ 4 (F-46)  
 None . . . . . 0 (F-48)

F-45. What denomination is that?

Baptist . . . . . 21  
 Lutheran . . . . . 22  
 Methodist . . . . . 23  
 Presbyterian . . . . . 24  
 Episcopalian . . . . . 25  
 No specific denomination . . . 28  
 Other Protestant (SPECIFY) \_\_\_\_\_  
 \_\_\_\_\_ 29

F-46, About how often do you usually attend religious services?

- Never . . . . . 01
  - More than once a week . . . . . 02
  - Once a week . . . . . 03
  - 2 or 3 times a month . . . . . 04
  - Once a month . . . . . 05
  - Several times a year . . . . . 06
  - Once a year or less . . . . . 07
- (F-48) 52-53

F-47, How often do you receive Communion?

- Never . . . . . 01
  - More than once a week . . . . . 02
  - Once a week . . . . . 03
  - 2 or 3 times a month . . . . . 04
  - Once a month . . . . . 05
  - Several times a year . . . . . 06
  - Once a year or less . . . . . 07
- 54-55

F-48, Now, about Mr. (NAME OF PRESENT HUSBAND). Which of these groups best describes his national origin or ancestry? (CHECK ALL THAT APPLY.)

- |                |  |                       |  |                       |
|----------------|--|-----------------------|--|-----------------------|
| HAND<br>CARD 4 | German . . . . .   | <input type="radio"/> | Black, African, Negro . . .                                  | <input type="radio"/> |
|                | Italian . . . . .  | <input type="radio"/> | Puerto Rican . . . . .                                       | <input type="radio"/> |
|                | Irish . . . . .  | <input type="radio"/> | Cuban . . . . .  | <input type="radio"/> |
|                | French . . . . .   | <input type="radio"/> | Mexicano, Chicano,<br>Mexican American . . . . .             | <input type="radio"/> |
|                | Polish . . . . .   | <input type="radio"/> | Other Spanish (Spain/Hispano/<br>Other Latin American) . . . | <input type="radio"/> |
|                | Russian . . . . .  | <input type="radio"/> | American Indian . . . . .                                    | <input type="radio"/> |
|                | English, Scot, Welsh . . .   | <input type="radio"/> | Other (SPECIFY) _____  | <input type="radio"/> |
|                | Asian or Pacific Islander,<br>such as Chinese, Japanese,<br>Korean, Phillippine or<br>Samoan . . . . . | <input type="radio"/> | Don't Know . . . . .   | <input type="radio"/> |

56 57  
□ □

F-49, When your husband was 14, was he living with both his own mother and his own father?

- Yes . . . . . 1 (F-51)
  - No . . . . . 2 (F-50)
  - Don't Know . . . . . 8 (F-51)
- 58

F-50, Was that because one or both of them had died, they were divorced, or for some other reason?

- One or both died . . . . . 1
  - They were divorced . . . . . 2
  - Some other reason . . . . . 3
  - Don't Know . . . . . 8
- 59

F-51. What is the highest grade or year of regular school or college your husband has attended?

No formal schooling . . . . .	00 (F-53)	Don't Know . . . . .	98 (F-53)
ELEMENTARY:		HIGH SCHOOL:	
1st grade . . . . .	01	1st year . . . . .	09
2nd grade . . . . .	02	2nd year . . . . .	10
3rd grade . . . . .	03	3rd year . . . . .	11
4th grade . . . . .	04	4th year . . . . .	12
5th grade . . . . .	05	COLLEGE AND GRADUATE/PROFESSIONAL	
6th grade . . . . .	06	SCHOOL:	
7th grade . . . . .	07	1 year . . . . .	13
8th grade . . . . .	08	2 years . . . . .	14
		3 years . . . . .	15
		4 years . . . . .	16
		5 years . . . . .	17
		6 years or more . . . . .	18

60-61

F-52. Did he complete that grade or year?

Yes . . . . .	1
No . . . . .	2 62
Don't know . . . . .	8

F-53. Is this your husband's only marriage, or has he been married before?

Only marriage . . . . .	1
Married before . . . . .	2 63
Don't Know . . . . .	8

F-54. Is he Protestant, Roman Catholic, Jewish or something else?

Roman Catholic . . . . .	1 (F-57)
Protestant . . . . .	2 (F-55)
Jewish . . . . .	3 (F-56)
Other (SPECIFY) _____	4 (F-56)
None . . . . .	5 (F-58)
Don't Know . . . . .	8 (F-56)

64

F-55. What denomination is that?

Baptist . . . . .	21
Lutheran . . . . .	22
Methodist . . . . .	23
Presbyterian . . . . .	24
Episcopalian . . . . .	25
No specific denomination . . . . .	28
Other Protestant (SPECIFY) _____	29
Don't Know . . . . .	98

65-66

F-56. About how often does he usually attend religious services?

Never . . . . .	01
More than once a week . . . . .	02
Once a week . . . . .	03
2 or 3 times a month . . . . .	04 (F-58)
Once a month . . . . .	05
Several times a year . . . . .	06
Once a year or less . . . . .	07
Don't Know . . . . .	98

67-68

F-57. How often does he receive Communion?

- Never. . . . . 01
- More than once a week. . . . . 02
- Once a week. . . . . 03
- 2 or 3 times a month . . . . . 04
- Once a month . . . . . 05
- Several times a year . . . . . 06
- Once a year or less. . . . . 07
- Don't know . . . . . 98

F-58. Last week, was your husband working full-time, part-time, going to school, keeping house, or what? (CIRCLE ONE CODE ONLY. IF MORE THAN ONE RESPONSE, CODE RESPONSE WITH SMALLEST NUMBER.)

- Working full-time (35 hours or more) . . . . . 01
- Working part-time (1 to 34 hours). . . . . 02
- With a job, but not at work because of temporary illness, strike, vacation. . . . . 03
- Retired. . . . . 04
- Unemployed: laid off, looking for work . . . . . 05
- In school. . . . . 06
- Keeping house. . . . . 07
- Other (SPECIFY) \_\_\_\_\_ 08

F-59. Did he ever have a job or business for pay?

- Yes. . . . . 1
- No . . . . . 2

F-60. What ( is/was ) your husband's (main) occupation? That is, what ( is/was ) his job called?

\_\_\_\_\_

F-61. What ( are/were ) his most important activities or duties?

\_\_\_\_\_  
\_\_\_\_\_

F-62. What kind of place ( does/did ) he work for? That is, what ( do/did ) they make or do?

13	14	15	16	17

F-63. In the past 12 months - that is, since ( MONTH/YEAR ) - what was your husband's income, considering all sources such as wages, profits, interest and so on?

- \$ \_\_\_\_\_ per year (Box 51)
- Refused. . . . . 97
- Don't know . . . . . 98

18	19	20	21	22

F-64. Here is a card showing amounts of weekly and yearly incomes. Next to each amount is a letter. Would you tell me which letter represents your husband's income, considering all sources?

HAND  
CARD 5

- LETTER
- Refused. . . . . 97
- Don't know . . . . . 98

23	24

Box 51. IF OTHER FAMILY MEMBERS, AGED 12 AND OLDER, LIVE IN HOUSEHOLD (SEE SCREENER), CONTINUE. OTHERWISE, GO TO F-67.

F-65. Did any other members of your family living here have earnings from wages, salary, or their own business or profession?

Yes . . . . . 1 (F-66)  
 No . . . . . 2 (F-67)

25

F-66. How many other family members had earnings in the past twelve months?

26	27
----	----

NUMBER OF OTHER EARNERS

F-67. Did you or any members of your family living here receive income in the past twelve months from any of the following sources? All may not apply to you, but it is easiest if I ask you about each one at a time.

SOURCE OF INCOME	YES	NO	DON'T KNOW	
1. Dividends, interest, property rental. . . .	1	2	8	28
2. Unemployment or Workmen's Compensation. . .	1	2	8	29
3. Social Security or retirement . . . . .	1	2	8	30
4. Welfare payments for aid to your dependent children. . . . .	1	2	8	31
5. Any (other) public assistance or welfare payments (include old age assistance, aid to the blind or totally disabled, general assistance) . . . . .	1	2	8	32
6. Child support from a former husband . . . .	1	2	8	33
7. Regular contributions from persons not in this household, or anything else. . . . .	1	2	8	34

F-68. In the past 12 months -- that is, since ( MONTH/YEAR ), what was your total combined family income, that is yours, your husband's and any other family member living here now? Include income from all sources such as wages, salaries, social security or retirement benefits, help from relatives, rent from property, and so forth.

\$ \_\_\_\_\_ (F-70)  
 TOTAL FAMILY INCOME  
 Refused. . . . . 97 (F-69)  
 Don't know . . . . . 98 (F-69)

35	36	37	38	39
----	----	----	----	----

F-69. Here is a card showing amounts of weekly and yearly income. Next to each amount is a letter. Would you tell me what letter represents the income of your family during the past 12 months? ENTER LETTER.

HAND CARD 5

LETTER  
 Refused. . . . . 97  
 Don't know . . . . . 98

40	41
----	----

F-70. **PINK CARDS ONLY:**

This time last year, did you live in a different county or state than this one?  
 IF RESPONDENT NOW LIVES IN LOUISIANA, SAY: "parish or state."  
 IF R NOW LIVES IN THE NEW ENGLAND STATES, SAY: "township or state."

Yes . . . . . 1  
 No . . . . . 2

46

42

F-71. The next question is different. On this card (SHOW CARD) are two different statements. Each may be answered with a simple "yes" or "no". You choose one of the statements by tossing a penny. If the penny turns up HEADS you just say "yes" or "no" to this statement (POINT TO THE STATEMENT FOLLOWING THE HEAD OF THE PENNY). If the penny comes up TAILS, Then just answer "yes" or "no" to this statement (POINT TO THE STATEMENT FOLLOWING THE TAIL OF THE PENNY).

HAND CARD 6

Please do not tell me which side of the penny comes up. No one but you - not even I - will know which statement was selected by the penny toss.

Here is a penny (RESPONDENT MAY USE HER OWN COIN). Just tell me the answer - "yes" or "no."

RESPONDENT'S ANSWER WAS: Yes . . . . . 1 No . . . . . 2

IF RESPONDENT WANTS YOU TO EXPLAIN THE QUESTION, SAY:

There are events which some people would rather not talk about. For instance, some people who have abortions would rather not talk about them, even though they are legal.

But it is very important for doctors and public health services to have a national count of the number of abortions each year. So scientists have developed this special way of asking questions. Half the people we talk to will answer one statement and half will answer the other, but we will not know which statement each individual got. In this way, we are able to estimate the number of abortions in the country, without knowing which individuals had them.

Of course, not everyone feels the same way about talking of abortions. However, to make a reliable estimate for the country, we need everyone to toss the penny and answer "yes" or "no" to the statement chosen by the coin.

CONTINUE WITH F-72.

COMPLETE AFTER F-78
Time Interview \_\_\_\_\_ am
Ended \_\_\_\_\_ pm

44 45 46
[ ] [ ] [ ]

F-72. As far as you know, where will you be living this time next year?

Same Address

(RECORD NAME, ADDRESS, TELEPHONE NUMBER BELOW). . . . . 1

Other

(RECORD NAME, TELEPHONE NUMBER: GET BEST POSSIBLE ADDRESS AND OBTAIN MAILING ADDRESS IF "R" IS IN RURAL AREA: RECORD BELOW). . . 2

_____ RESPONDENT'S NAME		( ) AREA CODE	_____ TELEPHONE NUMBER
_____ NUMBER	_____ STREET		
_____ CITY, TOWN		_____ STATE	_____ ZIP CODE

F-73. At some time in the future, we will need to talk again with some of the women we are interviewing now. We don't know who these women will be, as they will be chosen by chance. In case we need to get in touch with you again, would you please give me the names of two close relatives or friends who would be likely to know where you can be reached (in case you move).  
(ENTER NAMES BELOW, THEN ASK F-74 to F-78.)

	NAME	NAME
F-74. How is (PERSON) related to you?	RELATIONSHIP	RELATIONSHIP
	NUMBER STREET	NUMBER STREET
F-75. What is ( his/her ) address?	CITY STATE ZIP	CITY STATE ZIP
F-76. What is ( his/her ) telephone number?	( ) AREA CODE TELEPHONE #	( ) - AREA CODE TELEPHONE #
F-77. Is (PERSON) now married?	Yes . . . .1 No . . . .2	Yes . . . .1 No . . . .2
F-78. (IF YES:) What is ( her husband's/his wife's ) full name?		

Thank you very much.

REMEMBER TO FILL IN ENDING TIME ON PAGE 47 AND INFORMATION BELOW.

PSU      SEGMENT      DU

**REMINDER**  
IF ASSIGNMENT BOX ON SCREENER REQUIRES MISSED D.U. PROCEDURE, COMPLETE PROCEDURE AND FORM ON PAGE 4 OF SCREENER BEFORE LEAVING HOUSEHOLD. IF ASSIGNMENT BOX REQUIRES MISSED STRUCTURE PROCEDURE, COMPLETE PROCEDURE AS OUTLINED ON MISSED STRUCTURE FORM BEFORE LEAVING HOUSEHOLD.

INTERVIEWER REMARKS: FILL OUT AS SOON AS POSSIBLE AFTER LEAVING RESPONDENT.

<p>R-1. (Was/Were) other person(s) present during the interview, other than official observer?</p> <p style="text-align: right;">47</p> <p style="text-align: right;">Yes . . . . 1 (R-2)</p> <p style="text-align: right;">No . . . . . 2 (R-3)</p>	<p>R-5. The interview was conducted in:</p> <p style="text-align: right;">English . . . . 1 63</p> <p style="text-align: right;">Spanish . . . . 2</p>
<p>R-2. Who was that? (CODE ALL THAT APPLY.)</p> <p style="text-align: right;">48</p> <p>Children under six . . . . 1 <input type="checkbox"/></p> <p style="text-align: right;">49</p> <p>Older children . . . . . 2 <input type="checkbox"/></p> <p>Husband . . . . . 3 <input type="checkbox"/></p> <p style="text-align: right;">50</p> <p>Mother . . . . . 4 <input type="checkbox"/></p> <p style="text-align: right;">51</p> <p>Other relatives . . . . . 5 <input type="checkbox"/></p> <p>Other adults . . . . . 6 <input type="checkbox"/></p>	<p>R-6. Note anything else essential to the interpretation and understanding of this interview.</p>
<p>R-3. Number of interruptions during the interview. (CODE ONE.)</p> <p style="text-align: right;">52</p> <p>0 . . . . . (R-5) <input style="float: right;" type="checkbox"/> 64</p> <p>1 2 3 4 5 6 7 8+ (R-4)</p>	<p>R-7. Date interview completed:</p> <p style="text-align: center;">_____/_____/_____ MONTH / DAY / YEAR</p> <p style="text-align: center;">65 66 67 68 69 70 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>
<p>R-4. Reason(s) for interruptions: (CODE ALL THAT APPLY.)</p> <p>Telephone call(s) . . . . .01</p> <p>Visitor(s), salesmen, repairmen. . . . .02</p> <p>Household members passing through. . . . .03</p> <p>Attend to child's needs . . .04</p> <p>Attend to household responsibilities . . . . .05</p> <p>Attend to business responsibilities . . . . .06</p> <p>Persons present during interview. . . . .07</p> <p>Respondent or interviewer needs. . . . .08</p> <p>Environmental distractions. .09</p> <p>Obtain interview information. . . . .10</p> <p>Other (SPECIFY) _____</p> <p style="text-align: right;">11</p> <p style="text-align: center;">53 54 55 56 57 58 59 60 61 62 <input type="checkbox"/> <input type="checkbox"/></p>	<p>R-8. Interviewer's signature:</p> <p>_____</p> <p>R-9. Interviewer's ID Number:</p> <p style="text-align: center;">71 72 73 74 75 <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/></p>

REMEMBER TO FILL IN PSU INFORMATION, PAGE 49.





18. LINE NUMBER

19. What was ... doing most of LAST WEEK -

Working (Skip to 20A) ... WK  
 Keeping house ... J  
 Going to school or something else? ...  
 Working (Skip to 20A) ... WK  
 With a job but not at work ... J  
 Looking for work ... LK  
 Keeping house ... H  
 Going to school ... S  
 Unable to work (Skip to 24). U  
 Retired (Specify) ... R  
 Other (Specify) ... OT

20. Did ... do any work at all LAST WEEK, not counting work around the house? (Note: If farm or business operator in 24, ask about unpaid work)

Yes  No  (Go to 21)

20A. How many hours did ... work LAST WEEK at all jobs?

20B. INTERVIEWER CHECK ITEM

49+ (Skip to item 23)

1-34 (Go to 20C)

35-48 (Go to 20D)

20C. Does ... USUALLY work 35 hours or more a week at this job?

Yes  What is the reason ... worked less than 35 hours LAST WEEK?  
 No  What is the reason ... USUALLY works less than 35 hours a week?  
 (Mark the appropriate reason)

Slack work ...  
 Material shortage ...  
 Plant or machine repair ...  
 New job started during week ...  
 Job terminated during week ...  
 Could find only part-time work ...  
 Holiday (Legal or religious) ...  
 Labor dispute ...  
 Bad weather ...  
 Own illness ...  
 On vacation ...  
 Too busy with housework, school, personal bus., etc. ...  
 Did not want full-time work ...  
 Full-time work week under 35 hours ...  
 Other reason (Specify) ...

(Skip to 23 and enter job worked at last week)

20D. Did ... lose any time or take any time off LAST WEEK for any reason such as illness, holiday or slack work?

Yes  How many hours did ... take off?  
 (Correct 20A if lost time not already deducted; if 20A reduced below 35, correct 20B and fill 20C; otherwise, skip to 23.)

No  (Skip to 23)

20E. Did ... work any overtime or at more than one job LAST WEEK?

Yes  How many extra hours did ... work?  
 (Correct 20A and 20B as necessary if extra hours not already included and skip to 23.)

No  (Skip to 23)

OFFICE USE ONLY

INDUSTRY				OCCUPATION			
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Supplement to Questionnaire, June 1976 Current Population Survey

<p><b>34. INTERVIEWER CHECK ITEM</b> Female 14-59 and has ever been married <input type="radio"/> (Ask 35) Female 18-59 and never married <input checked="" type="radio"/> (Ask 36) All others <input type="radio"/> (End questions)</p>	<p><b>35. In what month and year did ... marry for the first time?</b> Jan. <input type="radio"/> <input type="radio"/> Feb. <input type="radio"/> <input type="radio"/> I Mar. <input type="radio"/> <input type="radio"/> 2 Apr. <input type="radio"/> <input type="radio"/> 3 May <input type="radio"/> <input type="radio"/> 4 June <input type="radio"/> <input type="radio"/> 5 July <input type="radio"/> <input type="radio"/> 6 Aug. <input type="radio"/> <input type="radio"/> 7 Sep. <input type="radio"/> <input type="radio"/> 8 Oct. <input type="radio"/> <input type="radio"/> 9 Nov. <input type="radio"/> <input type="radio"/> Dec. <input type="radio"/> <input type="radio"/></p>	<p><b>36. Has ... ever had any babies?</b> (Do not count stillbirths) Yes <input type="radio"/> No <input type="radio"/> (Skip to 39) How many? 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10+ <input type="radio"/> (Ask 37)</p>	<p><b>37. In what month and year was ...'s (most recent) child born?</b> Jan. <input type="radio"/> <input type="radio"/> Feb. <input type="radio"/> <input type="radio"/> I Mar. <input type="radio"/> <input type="radio"/> 2 Apr. <input type="radio"/> <input type="radio"/> 3 May <input type="radio"/> <input checked="" type="radio"/> 4 June <input type="radio"/> <input type="radio"/> 5 July <input type="radio"/> <input type="radio"/> 6 Aug. <input type="radio"/> <input type="radio"/> 7 Sep. <input type="radio"/> <input type="radio"/> 8 Oct. <input type="radio"/> <input type="radio"/> 9 Nov. <input type="radio"/> <input type="radio"/> Dec. <input type="radio"/> <input type="radio"/></p>	<p><b>38. How many of the babies ever born to ... are less than 5 years old?</b> (Include children who have died or who now live elsewhere.) 1 <input type="radio"/> 2 <input type="radio"/> 3 <input checked="" type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9+ <input type="radio"/></p>	
<p><b>39. INTERVIEWER CHECK ITEM</b> Currently married but not separated, 14-39 years old <input type="radio"/> (Ask 40) Widowed, divorced, separated, or never married, 18-34 years old <input checked="" type="radio"/> (Ask 40) All others <input type="radio"/> (End questions, fill 44 &amp; 45)</p>	<p>INTERVIEW WOMAN FOR HERSELF. IF NOT PRESENT, MAKE TELEPHONE CALL BACK.</p>		<p>TRANSCRIPTION ITEMS</p>		
	<p><b>40. Looking ahead, do you expect to have any (more) children?</b> Yes <input type="radio"/> (Ask 41) No <input type="radio"/> (End questions, fill 44 &amp; 45) Uncertain <input type="radio"/></p>	<p><b>42. INTERVIEWER CHECK ITEM</b> Currently married but not separated <input type="radio"/> (Ask 43) Widowed, divorced, separated, or never married <input checked="" type="radio"/> (End questions, fill 44 &amp; 45)</p>	<p><b>43. How many (more) do you expect to have in the next 5 years?</b> 1 <input type="radio"/> 2 <input type="radio"/> 3+ <input type="radio"/> None <input type="radio"/> (End questions, fill 44 &amp; 45)</p>	<p><b>44. Does this person have own children living in this household?</b> (Transcribe from C.C) Yes <input type="radio"/> No <input type="radio"/> How many? <input type="radio"/> <input type="radio"/> I I <input type="radio"/> <input type="radio"/> 3 4 5 6 7 8 9</p>	<p><b>45. Month of birth</b> (Transcribe from C.C) Jan. <input type="radio"/> Feb. <input type="radio"/> Mar. <input type="radio"/> Apr. <input type="radio"/> May <input type="radio"/> June <input type="radio"/> July <input type="radio"/> Aug. <input type="radio"/> Sep. <input type="radio"/> Oct. <input type="radio"/> Nov. <input type="radio"/> Dec. <input type="radio"/></p>

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