SECTION F
Family Planning and Medical Services

VARIABLES IMPORTED FROM EARLIER SECTIONS

CMBIRTH	CENTURY MONTH OF BIRTH DATE (SECTION A)
AGESCRN	AGE FROM THE SCREENER
CMLSTYR	CENTURY MONTH OF INTERVIEW MINUS 1 YEAR (SECTION A)
CMINTVW	CENTURY MONTH OF INTERVIEW DATE (SECTION A)
CMLSTYR_FILL	FILL (M/Y) TO USE AS REFERENCE POINT FOR THE PAST 12 MONTHS
MENARCHE	AGE AT FIRST MENSTRUAL PERIOD (SECTION B)
CURRPREG	WHETHER R IS CURRENTLY PREGNANT (FROM B)
CMLSTPRG	CENTURY MONTH DATE OF LAST COMPLETED PREGNANCY (SECTION B)
CMLASTLB	CENTURY MONTH DATE OF LAST LIVE BIRTH (SECTION B)
CMFSTSEX	CENTURY MONTH DATE OF FIRST SEX (SECTION C)
CMFSTSEX_FILL	FILL (MONTH AND YEAR) FOR DATE OF FIRST SEX (SECTION C)
RHADSEX	WHETHER R HAS EVER HAD SEX (SECTION C)
PLCFEMOP[X]	PLACE WHERE STERILIZATION WAS PERFORMED[X=1,2,3,4] (SECTION D)
HYST	WHETHER R IS SURGICALLY STERILE BECAUSE OF A HYSTERECTOMY (SECTION D)
ANYFSTER	EVER HAD A STERILIZING OPERATION (SECTION D)
CMOPER1	CM FOR R'S 1ST (OR ONLY) STERILIZING OPERATION (SECTION D)
PILL	EVER USED BIRTH CONTROL PILLS (EA-1)
DEPOPROV	EVER USED DEPO-PROVERA OR INJECTABLES (OR SHOTS) (EA-4)
LUNELLE	EVER USED LUNELLE INJECTION (EA-5)
PATCH	EVER USED CONTRACEPTIVE PATCH (EA-9)
RING	EVER USED VAGINAL CONTRACEPTIVE RING (EA-10)
MORNPILL	EVER USED "MORNING AFTER" PILLS OR EMERGENCY CONTRACEPTION (EA-11)
OTHRMETH	EVER USED ANOTHER METHOD OF CONTRACEPTION (EA-14)
PILL_12	USED BIRTH CONTROL PILLS IN LAST 12 MONTHS (METHOD CALENDAR SEC. E)
DIAPH_12	USED DIAPHRAGM (METHOD CALENDAR SEC. E)
IUD_12	USED AN IUD, COIL, OR LOOP (METHOD CALENDAR SEC. E)
IMPLANT_12	USED HORMONAL IMPLANT (METHOD CALENDAR SEC. E)
DEPO_12	USED DEPO-PROVERA OR INJECTABLES (OR SHOTS) (METHOD CALENDAR SEC. E)
CERVC_12	USED A CERVICAL CAP (METHOD CALENDAR SEC. E)
MPILL_12	USED "MORNING AFTER" PILLS OR EMERGENCY CONTRACEPTION
LUNEL_12	WHETHER USED LUNELLE INJECTABLE IN THE 12 MONS BEFORE INTERVIEW (FC E55)
PATCH_12	WHETHER USED CONTRACEPTIVE PATCH -- 12 MONTHS BEFORE INTERVIEW (FC E-55)
RING_12	WHETHER USED CONTRACEPTIVE RING IN THE 12 MONS BEFORE INTERVIEW (FC E55)

VARIABLES CREATED IN THIS SECTION & OUTPUT TO DATA FILE

NUMMTH12	NUMBER OF BIRTH CONTROL METHODS USED (DRUG OR DEVICES) IN THE LAST 12 MONTHS (FLOW CHECK F-2)
NUMSVC12	NUMBER OF SERVICES RECEIVED IN LAST 12 MONTHS (FLOW CHECK F-6)
IDCLINIC	COUNTER FOR NUMBER OF TIMES IDENTIFIED A CLINIC (FLOW CHECK F-8AA)
CMFSTSVC	CENTURY MONTH RECEIVED FIRST BIRTH CONTROL SERVICE (FC FA-17C)

VARIABLES CREATED IN THIS SECTION & ARE NOT OUTPUT TO DATA FILE:

FMPILL12	FILL FOR "MORNING AFTER PILL" OR EMERGENCY CONTRACEPTION (FC F-0)
FPILL12	FILL FOR BIRTH CONTROL PILLS (FLOW CHECK F-0)
FDIAPH12	FILL FOR DIAPHRAGM (FLOW CHECK F-0)
FIUD12	FILL FOR IUD (FLOW CHECK F-0)
FIMPLANT12	FILL FOR HORMONAL IMPLANT (FLOW CHECK F-0)
FDEPO12	FILL FOR DEPO-PROVERA (FLOW CHECK F-0)
FCERVC12	FILL FOR CERVICAL CAP (FLOW CHECK F-0)
FFSTOP12	FILL FOR STERILIZING OPERATION (FLOW CHECK F-6A)
FBTHCN12	FILL FOR A METHOD OF BIRTH CONTROL OR A RX FOR A METHOD (FC F-6A)
FMEDTS12	FILL FOR A CHECK UP OR MEDICAL TEST RELATED TO USING A BIRTH CONTROL METHOD (FLOW CHECK F-6A)
FBCCNS12	FILL FOR COUNSELING OR INFORMATION ABOUT BIRTH CONTROL (FC F-6A)
FSTCNS12	FILL FOR COUNSELING OR INFORMATION ABOUT GETTING STERILIZED (FC F6A)
FEMCON12	FILL FOR EMERGENCY CONTRACEPTION OR THE MORNING AFTER PILL (FC F6A)
FECCNS12	FILL FOR COUNSELING OR INFORMATION ABOUT EMERGENCY CONTRACEPTION OR THE MORNING AFTER PILL (FLOW CHECK F-6A)
FPRGTS12	FILL FOR PREGNANCY TEST (FLOW CHECK F-6A)
FABORT12	FILL FOR ABORTION (FLOW CHECK F-6A)
FPAP12	FILL FOR PAP SMEAR (FLOW CHECK F-6A)

FPELVC12   FILL FOR PELVIC EXAM (FLOW CHECK F-6A)
FPRENT12   FILL FOR PRENATAL CARE (FLOW CHECK F-6A)
FPARTM12   FILL FOR POST-PREGNANCY CARE (FLOW CHECK F-6A)
FSTDSV12   FILL FOR A SEXUALLY TRANSMITTED DISEASE (FLOW CHECK F-6A)

FLOW CHECK F-0:   CONSTRUCTING FILLS FOR METHODS OF CONTRACEPTION BROUGHT IN
                  FROM SECTION E (all initialized to BLANK)

            COMPUTE FPILL12
                  IF PILL_12 = 1 THEN FPILL12 = BIRTH CONTROL PILLS

            COMPUTE FDIAPH12
                  IF DIAPH_12 = 1 THEN FDIAPH12 = DIAPHRAGM

            COMPUTE FIUD12
                  IF IUD_12 = 1 THEN FIUD12 = IUD, COIL OR LOOP

            COMPUTE FIMPLANT12
                  IF IMPLANT_12 = 1 THEN FIMPLANT12 = IMPLANT

            COMPUTE FDEPO12
                  IF DEPO_12 = 1 THEN FDEPO12= DEPO-PROVERA OR INJECTABLES (OR
                  SHOTS)

            COMPUTE FCERVC12
                  IF CERVC_12 = 1 THEN FCERVC12 = CERVICAL CAP

            COMPUTE FMPILL12
                  IF MPILL_12 = 1 THEN FMPILL12 = "MORNING AFTER" PILLS OR
                  EMERGENCY CONTRACEPTION

{ Asked for all Rs
INTRSVC
FA-0. We have already asked you a few questions about sterilizing operations.
      The questions in this section are about your medical visits for these and
      other types of birth control, pregnancy, and health care services for
      women.

            ⬥ *ENTER [1] to continue*

Birth control and medical services in past 12 months series (FA)

{ Asked for all Rs
INTRO_FA
FA-1. You may have already told me this, but in the past 12 months, that is,
      since [CMLSTYR_FILL] have you received any of the following birth control
      services shown on card 49 <u>from a doctor or other medical care provider</u>?

[SHOW CARD 49]

            ⬥ *ENTER [1] to continue*

BTHCON12
FA-1b.   (In the past 12 months, have you received)
            A method of birth control or a prescription for a method?

[SHOW CARD 49]

```
                        Yes........1
                        No.........5
```

MEDTST12

FA-1c.   (In the past 12 months, have you received) A check-up or medical
            test related to using a birth control method?

[SHOW CARD 49]

```
                        Yes........1
                        No.........5
```

BCCNS12

FA-1d.   (In the past 12 months, have you received) Counseling or information
            about birth control?

[SHOW CARD 49]

```
                        Yes........1
                        No.........5
```

STEROP12

FA-1e.   (In the past 12 months, have you received) a sterilizing operation?

[SHOW CARD 49]

```
                        Yes........1
                        No.........5
```

STCNS12

FA-1f.   (In the past 12 months, have you received) Counseling or information
            about getting sterilized?

[SHOW CARD 49]

```
                        Yes........1
                        No.........5
```

{asked for all Rs
EMCON12

FA-1g.   (In the past 12 months, have you received) Emergency contraception,
            also known as ""Plan B"" or the "Morning-after pill," or a
            prescription for it?

[SHOW CARD 49]

```
                        Yes........1
                        No.........5
```

ECCNS12

FA-1h.   (In the past 12 months, have you received) Counseling or information
            about Emergency contraception, also known as ""Plan B"" or the
            "Morning-after pill?"

[SHOW CARD 49]

```
                        Yes........1
                        No.........5
```

FLOW CHECK F-2:   **CREATE COUNTER AND INITIALIZE TO 0:**
COUNTER FOR NUMBER OF THESE METHODS USED IN LAST 12 MONTHS
**NUMMTH12 = ADD 1 FOR EACH OF THESE METHOD USED
VARIABLES** (FROM SECTION D OR E) **THAT IS EQUAL TO 1 (YES):
MPILL_ 12 DIAPH_12   IUD_12   IMPLANT_12 DEPO_12
CERVC_12 LUNEL_12 PATCH_12 RING_12**

FLOW CHECK F-3:   **IF ((FA-1b BTHCON12 = 5, OR DK, OR RF) AND
(FA-1c MEDTST12 = 5, OR DK, OR RF) AND
(FA-1d BCCNS12 = 5, OR DK, OR RF)),
AND NUMMTH12 GE 1, ASK FA-2 FOLLOW12.**
IF R HAS REPORTED NONE OF THESE METHODS IN
FA SERIES, BUT DID REPORT USE OF 1 OR MORE
METHODS IN SECTION E'S METHOD HISTORY, WE
ASK FOLLOW12
                ELSE GO TO INTR_MED.

FOLLOW12
FA-2. IF NUMMTH12 = 1, ASK:
In the last 12 months, that is, since [CMLSTYR_FILL] have you visited a
doctor or medical care provider about the following method which you used
in that period:
[LIST FILLS THAT ARE NOT BLANK, THAT IS,
SERVICE WITH RESPONSE = 1 (YES):
   **FMPILL12
   FPILL12
   FDIAPH12
   FIUD12
   FIMPLANT12
   FDEPO12
   FCERVC12**]

ELSE IF NUMMTH12 GE 2, ASK:
Earlier you mentioned you have used
[LIST FILLS THAT ARE NOT BLANK, THAT IS,
SERVICE WITH RESPONSE = 1 (YES):
   **FMPILL12
   FPILL12
   FDIAPH12
   FIUD12
   FIMPLANT12
   FDEPO12
   FCERVC12**]

in the past 12 months. Did you receive any of these at a visit to a
doctor or medical care provider within the past 12 months?

```
            Yes.......................................1 (SET FA-1b BTHCON12=1)
            No........................................5
            Didn't use the medical method(s) in
            12 months after all ......................6
```

{ Asked for all Rs
INTR_MED
FA-3. We're also interested in where women go to get other kinds of reproductive
health care. Please look at Card 50.

In the past 12 months, that is, since [CMLSTYR_FILL], have you received any of the following <u>medical services</u> from a doctor or other medical care provider...

[SHOW CARD 50]

◆ *ENTER [1] to continue*

**FLOW CHECK F-3a: IF RHADSEX=5 (no) THEN GO TO FA-3c PAP12.
ELSE GO TO FA-3a PRGTST12**

PRGTST12
FA-3a.   IF CURRPREG = 1 (YES) OR (CMLSTPRG GT CMLSTYR), SAY: You may have already told me, but in the past 12 months have you received a pregnancy test?

ELSE SAY: (In the past 12 months have you received) A pregnancy test?

[SHOW CARD 50]

Yes...........1
No...........5

ABORT12
FA-3b.   (In the past 12 months have you received)
An abortion?

[SHOW CARD 50]

Yes...........1
No...........5

PAP12
FA-3c.   (In the past 12 months have you received)
A Pap test - where a doctor or nurse put an instrument in the vagina and took a sample to check for abnormal cells that could turn into cervical cancer?

[SHOW CARD 50]

Yes...........1
No...........5

PELVIC12
FA-3d.   (In the past 12 months have you received)
A pelvic exam -where a doctor or nurse puts one hand in the vagina and the other on the abdomen?

[SHOW CARD 50]

Yes...........1
No...........5

FLOW CHECK F-4:   IF CMLSTPRG GE CMLSTYR (R had a pregnancy ending within last 12 months), ASK FA-3E PRENAT12.

ELSE GO TO FLOW CHECK F-5.

PRENAT12

FA-3e.　　　You may have told me this already, but in the past 12 months, have you received prenatal care?

[SHOW CARD 50]

>   Yes...........1
>   No...........5

FLOW CHECK F-5:　　**IF CMLASTLB GE CMLSTYR (R's most recent live birth occurred within last 12 months), ASK FA-3F PARTUM12.**

ELSE GO TO FA-3g STDSVC12.

PARTUM12

FA-3f.　　　(In the past 12 months have you received) Post-pregnancy care?

[SHOW CARD 50]

>   Yes...........1
>   No...........5

STDSVC12

FA-3g.　　　In the past 12 months, have you been tested for a sexually transmitted disease?

[SHOW CARD 50]

>   Yes...........1
>   No...........5

FLOW CHECK F-6:　　**CREATE COUNTER AND INITIALIZE TO 0:**
NUMSVC12 = ADD 1 FOR EACH OF THESE METHODS THAT IS EQUAL TO 1 (YES): NUMBER OF SERVICES RECEIVED IN LAST 12 MONTHS

FA-1b BTHCON12	**FA-1c MEDTST12**	**FA-1d BCCNS12**
FA-1e STEROP12	**FA-1f STCNS1**	**FA-1g EMCON12**
EF-1h ECCNS12	**FA-3a PRGTST12**	**FA-3b ABORT12**
FA-3c PAP12	**FA-3d PELVIC12**	**FA-3e PRENAT12**
FA-3f PARTUM12	**FA-3g STDSVC12**	

FLOW CHECK F-6a: **CREATING FILLS FOR METHODS REPORTED IN FA SERIES**
　　　　　　(all initialized to BLANK)

> **COMPUTE FBTHCN12:**
> **IF FA-1b BTHCON12 = 1 THEN FBTHCN12="BIRTH CONTROL OR A PRESCRIPTION FOR A METHOD";**
>
> **COMPUTE FMEDTS12:**
> **IF FA-1c MEDTST12 = 1 THEN FMEDTS12="CHECK UP OR MEDICAL TEST RELATED   TO USING A BIRTH CONTROL";**
>
> **COMPUTE FBCCNS12:**
> **IF FA-1d BCCNS12 = 1 THEN FBCCNS12="COUNSELING OR INFORMATION ABOUT BIRTH CONTROL";**
>
> **COMPUTE FFSTOP12:**
> **IF FA-1e STEROP12= 1 THEN FFSTOP12="STERILIZING OPERATION";**

```
COMPUTE FSTCNS12:
IF FA-1f STCNS12 = 1 THEN FSTCNS12="COUNSELING OR INFORMATION ABOUT
GETTING STERILIZED";

COMPUTE FEMCON12:
IF FA-1g EMCON12 = 1 THEN FEMCON12="EMERGENCY CONTRACEPTION OR THE
'MORNING-AFTER PILL' OR A PRESCRIPTION FOR IT";

COMPUTE FECCNS12:
IF FA-1h ECCNS12 = 1 THEN FECCNS12="COUNSELING OR INFORMATION ABOUT
EMERGENCY CONTRACEPTION OR THE 'MORNING-AFTER PILL'";

COMPUTE FPRGTS12:
IF FA-3a PRGTST12 = 1 THEN FPRGTS12="A PREGNANCY TEST";

COMPUTE FABORT12:
IF FA-3b ABORT12 = 1 THEN FABORT12="AN ABORTION";

COMPUTE FPAP12:
IF FA-3c PAP12 = 1 THEN FPAP12="A PAP SMEAR";

COMPUTE FPELVC12:
IF FA-3d PELVIC12 = 1 THEN FPELVC12="A PELVIC EXAM";

COMPUTE FPRENT12:
IF FA-3e PRENAT12 = 1 THEN FPRENT12="PRENATAL CARE";

COMPUTE FPARTM12:
IF FA-3f PARTUM12 = 1 THEN FPARTM12="POST-PREGNANCY CARE";

COMPUTE FSTDSV12:
IF FA-3g STDSVC12 = 1 THEN FSTDSV12="TESTED FOR A SEXUALLY
TRANSMITTED DISEASE";
```

FLOW CHECK F-7:   IF FA-1b BTHCON12 = 5 AND FA-1c MEDTST12 = 5
AND FA-1d BCCNS12 = 5 AND FA-1e STEROP12= 5
AND FA-1f STCNS12 = 5 AND FA-1h ECCNS12 = 5
AND (FA-1g EMCON12 = 5 OR BLANK)
AND FA-3a PRGTST12 = 5 AND FA-3b ABORT12 = 5
AND FA-3c PAP12 = 5   AND FA-3d PELVIC12 = 5
AND FA-3e PRENAT12 = 5 AND FA-3f PARTUM12 = 5
AND FA-3g STDSVC12 = 5
   SET NUMSVC12=0 AND GO TO FA-3h BARRIER
   IF NO SERVICE IN THE LAST 12 MONTHS GO TO FA-3h BARRIER

   ELSE IF NUMSVC12 GT 1, ASK FA-4 NUMBCVIS.
      MORE THAN ONE SERVICES REPORTED IN FA-1b BTHCON12
      THROUGH FA-1h ECCNS12 AND FA-3a PRGTST12 THROUGH
      FA-3g STDSVC12, ASK NUMBER OF VISITS

   ELSE IF NUMSVC12 = 1, GO TO FLOW CHECK F-8
   (TREAT THOSE WITH NUMSVC12 = 1 AS SINGLE VISIT IN FC F-8)

BARRIER

FA-3h.   You reported that you did not receive any of these services in the past 12 months. Please look at card 69c. Which of the reasons shown on this card explain why you did not receive any of these services?

⬩ *ENTER all that apply.*
⬩ *ENTER space or [-] to separate responses.*

[SHOW CARD 69c]

```
I did not need to see a doctor in the last year.......1
I did not know where to go for care...................2
I could not afford to pay for a visit.................3
I was afraid to hear bad news.........................4
I had privacy/confidentiality concerns. ..............5
I could not take time off from work...................6
Something else (please specify) ......................20
```

{ Asked if R said "something else" on FA-3h BARRIER
BARRIER_SP
FA-3hsp. What other reason(s) made it difficult for you to see a doctor in past
12 months?

TYPE: STRING [100]

FLOW CHECK F-7a: IF FA-3h BARRIER NE missing (that is, was asked BARRIER) then
go FA-5e1 WHYNOSTD

NUMBCVIS
FA-4. You said that in the past 12 months you received the following services:

[LIST FILLS THAT ARE NOT BLANK, THAT IS, SERVICE WHICH THEY RECEIVED:
FFSTOP12
FBTHCN12
FMEDTS12
FBCCNS12
FSTCNS12
FEMCON12
FECCNS12
FPRGTS12
FABORT12
FPAP12
FPELVC12
FPRENT12
FPARTM12
FSTDSV12

Did you receive those services during a single visit, or in more than one
visit?

```
Single visit..........1
More than one visit....5
```

FLOW CHECK F-8: IF FA-4 NUMBCVIS = 1 (SINGLE VISIT),
ASK FA-5 BC12PLCX THROUGH FA-9 REGCAR12 ONE TIME.
ELSE IF NUMBCVIS = 5 (MORE THAN ONE VISIT),
ASK FA-5 BC12PLCX FOR EACH SERVICE,
THEN FA-6 BC12PAYX FOR EACH SERVICE.
{treat those with NUMSVC12 = 1 as SINGLE VISIT}

BC12PLCX
FA-5. Please look at Card 25. During the past 12 months, that is since
[CMLSTYR_FILL], where did you receive

[DISPLAY FILL FOR Nth SERVICE REPORTED
(THE FILL WILL NOT BE EQUAL TO BLANK)
FBTHCN12
FMEDTS12
FBCCNS12
FSTCNS12
FEMCON12
FECCNS12
FPRGTS12
FABORT12
FPAP12
FPELVC12
FPRENT12
FPARTM12
FSTDSV12
FFSTOP12]?

⬧ *If R reports having received a service multiple times during the last twelve months and at multiple places, say:* Please think of the provider you visited <u>most recently</u> for this service(s).

[Show Card 25]

Private doctor's office...1
HMO facility...2
Community health clinic, Community clinic, Public health clinic....3
Family planning or Planned Parenthood Clinic.....................4
Employer or company clinic.......................................5
School or school-based clinic....................................6
Hospital outpatient clinic.......................................7
Hospital emergency room..8
Hospital regular room..9
Urgent care center, urgi-care or walk-in facility................10
In-store health clinic (like CVS, Target, or Walmart)............11
Some other place...20

FLOW CHECK F-8aa: CREATE COUNTER IDCLINIC AND INITIALIZE TO 0.
                IF FA-5 BC12PLCX = 3 or 4 OR 6 OR 7, THEN ADD 1 TO THE
                IDCLINIC COUNTER
                (This is a counter of how many times identified a clinic)

FLOW-CHECK F-8b: IF NUMSVC12 GE 1, ASK FA-5a TALKPROV
                ELSE GO TO FLOW CHECK F-8e.

{ IF R RECEIVED a service in IN LAST 12 MONTHS (**NUMSVC12 GE 1**)
TALKPROV
FA-5a.   During your visit in the past 12 months when you received one of
            these services, did a doctor or medical provider talk to you about
            any of the following?
                ⬧ *ENTER all that apply.*
                ⬧ *ENTER space or [-] to separate responses.*

Birth control methods (including IUD and implants)..........1
Condoms for STD prevention.................................2
HPV vaccine 3
None of the above..4

EDIT CHECK FA-5A_1:   IF FA-5a TALKPROV=4 AND ANY OTHER CODE DISPLAY TEXT:
                        'None of the above' (4) may not be used in combination
                        with any other answer for this question. Verify the

answer with R and re-enter.
HARD, NONSUPPRESSIBLE EDIT CHECK.

**FLOW-CHECK F-8e: IF FA-3g STDSVC12 = 1, ASK FA-5e WHYPSTD.
ELSE IF FA-3g STDSVC12 = 5, ASK FA-5E1 WHYNOSTD
Else if FA-3g STDSVC12=DK or RF, go to FA-5f BCCLARC.**

{ IF R RECEIVED AN STD TEST IN LAST 12 MONTHS (FA-3g STDSVC12=1)
WHYPSTD
FA-5e.   Please look at Card 25b. In the past 12 months you received a test
             for a sexually transmitted disease from a [Display response to where
             received STD test]. What is the <u>main</u> reason that you chose this
             place for care?

[Show Card 25b]

             Could walk in or get same-day appointment.........1
             Cost.............. 2
             Privacy concern...................................3
             Expert care here..................................4
             Embarrassed to go to usual provider..............5
             Other...6

{ IF R DID NOT RECEIVE AN STD TEST IN LAST 12 MONTHS (FA-3g STDSVC12 = 5)
WHYNOSTD
FA-5e1.   In the past 12 months you <u>did not</u> receive a test for a sexually
             transmitted disease. Please look at show card 25c. Which one of
             these reasons would you say is the <u>MAIN</u> reason why you have not been
             tested for a sexually transmitted disease?
[SHOW CARD 25C]
             Didn't want parents to find out....... 1
             Concerned about confidentiality.............. 2
             Doctor or health care provider never suggested it........3
             Embarrassed or difficult to ask to be tested 4
             Cost or lack of insurance............. 5
             Other..6

{ IF R RECEIVED BIRTH CONTROL COUNSELING IN LAST 12 MONTHS (FA-1d BCCNS12 = 1)
BCCLARC
FA-5f.   (During your visit in the past 12 months) when you received
             counseling or information about birth control, did a doctor or
             medical provider talk with you about a contraceptive implant or an
             IUD

             ♦ Implants such as NexplanonTM/ImplanonTM
             ♦ IUDs such as Copper-TTM, ParaGardTM, MirenaTM, SkylaTM

             ♦*If R reports having received a service multiple times during the
             last twelve months and at multiple places, say:* Please think of the
             provider you visited <u>most recently</u> for this service(s).

                   Yes........1
                   No.........5

{asked if R rec'd a service in the past 12 months (NUMSVC12 GE 1)
BC12PAYX
FA-6. Looking at Card 16a, please tell me all of the ways in which the bill for

[DISPLAY FILL FOR Nth SERVICE REPORTED
(THE FILL WILL NOT BE EQUAL TO BLANK)
FBTHCN12
FMEDTS12
FBCCNS12
FSTCNS12
FEMCON12
FECCNS12
FPRGTS12
FABORT12
FPAP12
FPELVC12
FPRENT12
FPARTM12
FSTDSV12
FFSTOP12]

was paid?

⬧ *PROBE:* Any other ways?

⬧ *Ask if R volunteers bill <u>still unpaid</u>,* DISPLAY: how do you think that bill will be paid?

⬧ PRESS [Space] or [-] to separate responses

⬧ *Enter all that apply.*

[Show Card 16a]
[HELP AVAILABLE]

Insurance................................1
Co-payment..............................2
out-of-pocket payment...................3
Medicaid................................4
No payment required.....................5
Some other way..........................6

FLOW CHECK F-9: **RETURN TO FA-6 BC12PAYX FOR NEXT SERVICE, IF APPLICABLE. ELSE, GO TO FLOW CHECK F-10.**

FLOW CHECK F-10: **IF BC12PLCX NE 3 or 4 OR 6 OR 7, GO TO FLOW CHECK F-13. ELSE GO TO FA-8 STATE_NAME**
IF SVC REC'D IN PAST 12 MONTHS WAS NOT AT CLINIC, GO TO FLOW CHECK F-13.
ELSE CONTINUE WITH THE CLINIC DATABASE

STATE_NAME
FA-8.   What is the name and address of the place where you received

[DISPLAY NTH SERVICE REPORTED WHERE BC12PLCX=3,4,6,or 7]

(THE FILL WILL NOT BE EQUAL TO BLANK)
FBTHCN12
FMEDTS12
FBCCNS12
FSTCNS12
FEMCON12
FECCNS12
FPRGTS12

> **FABORT12**
> **FPAP12**
> **FPELVC12**
> **FPRENT12**
> **FPARTM12**
> **FSTDSV12**
> **FFSTOP12**]?

What state is the place in?

> ♦ *Either PRESS [backspace] to see the lookup table or start typing the name of the state*

 [LINK TO STATE DATABASE]

CLINIC12
FA-8a.(What is the name and address of the place where you received

   [DISPLAY NTH SERVICE REPORTED WHERE BC12PLCX=3,4,6,or 7]?)

[LINK TO CLINIC DATABASE]
[HELP AVAILABLE]

> ♦ *Either PRESS [backspace] to see the lookup table or start typing the name of the city where the clinic is located*
> *(1) Type or select a city name;*
> *(2) Select a clinic by scrolling up or down;*
> *(3) Press [Enter]*

CityName
FA-8b

ClinicName
FA-8c
ClinicCode
FA-8d
ClinicFund   {Created variable for 'Title X Funding' (same as "tx9798_#" from
FA-8e   C6 data) code not shown but output to dataset}

ClinicType   {Created variable for 'Agency type' (same as "TYPE9798_#" from
FA-8f   C6 data) code not shown but output to dataset}

CONFIRM FA-8g
   I have found a clinic (by that name/in that city) at:

   [Clinic.Name1]
   [Clinic.Name2]
   [Clinic.Address1]
   [Clinic.Address2]
   [Clinic.City], [Clinic.State] ···[Clinic.Zipcode]

   County: [Clinic.CntyName]

   Is this correct?

> Yes.......................1
> No........................5
> Clinic not in database ...6

EDIT CHECK FA8_1: IF FA-8g CONFIRM = 5, DISPLAY:

Go back to CLINIC12 and try again.
HARD, NONSUPPRESSIBLE EDIT CHECK.
INVOLVING: FA-8a CLINIC12 and FA-8g CONFIRM

FLOW CHECK F-10c: IF CONFIRM = 1 (CLINIC IDENTIFIED IN DATABASE)**,**
GO TO FLOW CHECK F-11.
ELSE, ASK FA-8a ADCLIN12.

ADCLIN12
FA-8f.   ☑ *Interviewer checkpoint:*

⬧ *ENTER name and address of clinic you were unable to find in database*

⬧ *If necessary: refer R to personal records or area phone books to obtain clinic name and address. If R is unable to provide the full address, record as much information as she can provide including cross streets, etc.)*

FLOW CHECK F-11:   IF CLINIC CODE IN CLINIC12 IS THE SAME CLINIC CODE AS REPORTED
IN EARLIER CLINIC12 FOR ANOTHER SERVICE,
SET FA-9 REGCAR12 TO EARLIER REGCAR12
AND GO TO FLOW CHECK F-12.
ELSE, ASK FA-9 REGCAR12.

REGCAR12
FA-9. Is this clinic your <u>regular</u> place for medical care, or do you <u>usually</u> go somewhere else for medical care?

Regular place..1
Regular place, but go to more than 1 place regularly....2
Usually go somewhere else..............................3
No usual place..4

FLOW CHECK F-12:   RETURN TO FLOW CHECK F-10 FOR NEXT CLINIC, IF APPLICABLE.
ELSE, GO TO FLOW CHECK F-18.

Clinic Series (FC)

FLOW CHECK F-18:   IF (IDCLINIC LT 1) AND (DB-2 PLCFEMOP NE 3 OR 4 OR 6 OR 7) AND
(BA-1 MENARCHE NE 96), ASK FC-1 EVERFPC.
ELSE GO TO FD-1 INTRPAP.

{ Asked if R is younger than 25 years and has not reported visiting a clinic
EVERFPC
FC-1.   IF MENARCHE NE DK OR RF, ASK:
Since your first menstrual period when you were [MENARCHE], have you ever visited a <u>clinic</u> for any kind of medical or birth control service?

ELSE IF MENARCHE = DK OR RF, ASK:
Since your first menstrual period, have you ever visited a <u>clinic</u> for any kind of medical or birth control service?

[HELP AVAILABLE]

Yes.............1
No..............5 (FD-1 INTRPAP)

KNDMDHLP
FC-2. What kind of medical help did you receive at the clinic?

- *Enter all that apply*
- *PRESS [Space] or [-] to separate responses*

[SHOW CARD 51]

A method of birth control (or prescription).........................1
Birth control counseling...2
Emergency contraception..3
Counseling about Emergency Contraception...........................4
A check-up or test for birth control...............................5
A pregnancy test...6
An abortion 7
A Pap smear or pelvic exam...8
Post-pregnancy care 9
STD or HIV testing..10
Other 20

Pap Test Series (FD)

{ Asked for all Rs
INTRPAP
FD-1. Now we have some additional questions about medical tests you may have
      received.

- *ENTER [1] to continue*

**FLOW CHECK F-19:   IF FA-3C PAP12=1 (YES) THEN GO TO FD-3 MREASPAP.
                    ELSE IF FA-3C PAP12=5, DK, RF (NO, DK, RF) THEN GO TO FD-2
                    LASTPAP.**

{ Asked only if R did not have a Pap in the past 12 mos
LASTPAP
FD-2. Do you think your last Pap test was...?

A year ago or less 1
More than 1 year ago but not more than 2 years 2
More than 2 years ago but not more than 3 years 3
More than 3 years ago but not more than 5 years 4
Over 5 years ago 5
Never had Pap test 6

**FLOW CHECK F-20a: IF FD-2 LASTPAP =6 (NEVER HAD A PAP TEST) THEN GO TO FLOW
                   CHECK F-21a.
                   OTHERWISE GO TO FD-3 MREASPAP.**

{ Asked if R ever had Pap test
MREASPAP
FD-3. What was the <u>main</u> reason you had your most recent Pap test? Was it part
      of a routine exam, because of a medical problem you were having, or some
      other reason?

Part of a routine exam..............1
Because of a medical problem........2
Other reason........................3

{ Asked if R ever had Pap test
AGEFPAP
FD-4. At what age did you have your first Pap test?

> ◆ *If necessary say, "It is okay to estimate your age if you are not sure"*
>
> ◆ *ENTER age in years*
>
> ◆ *ENTER [96] if R only had 1 Pap test.*
>
> UNDERLYING RANGE: 5 to 50, 96

FLOW CHECK F-21: IF FD-4 AGEFPAP = DK THEN ASK FD-4a AGEFPAP2.
ELSE ASK FD-5 ABNPAP3

{ Asked if R did not know her age at first Pap test (FD-4 AGEFPAP=DK)
AGEFPAP2
FD-4a. Were you younger than 18, 18-21, 22-29, or 30 or older at your first Pap test?

```
Younger than 18...................1
18-21.............................2
22-29.............................3
30 or older.......................4
```

EDIT CHECK FD-4a_1:   PROBE IF FD-4 AGEFPAP > AGE_R.
DISPLAY: R has reported an age of first Pap test (AGEFPAP) that is older than her current age (AGE_R). *Has something been entered incorrectly?*
INVOLVING(FD-4 AGEFPAP)

{ Asked if R ever had a Pap (FA-3c PAP12=1 or FD-2 LASTPAP NE 6)
ABNPAP3
FD-5. Have you had a Pap test in the <u>*last 3 years*</u> where the results were <u>not</u> normal?

```
Yes..............................1
No...............................5
No Pap test in past 3 years......6
```

FLOW CHECK F-21a: IF R REPORTED A HYSTERECTOMY IN SECTION D (HYST=1) THEN GO TO FLOW CHECK F-22.
ELSE GO TO FD-6 INTPAP.

{ Asked if R has not had a hysterectomy
INTPAP
FD-6. Please look at show card 51a. How often do you think you will need to have a Pap test for regular cancer screening?

[SHOW CARD 51a]

```
Every year.......................1
Every 2 years....................2
Every 3 years....................3
Every 4 years....................4
```

```
Every 5 years.....................7
Less often than every 5 years ....8

IF R VOLUNTEERS:
More than once a year............95
She would never need to be tested…96
```

Pelvic Exam Series (FE)

FLOW CHECK F-22:   **IF FA-3D PELVIC12=1 (YES) AND FA-3C PAP12=1 (PAP IN THE PAST 12 MONTHS) THEN GO TO FE-1 PELWPAP.**
                    ELSE GO TO FE-2 LASTPEL.

{ Asked if R had a pelvic exam and a Pap test in the past 12 months
PELWPAP
FE-1. You reported you had a pelvic exam in the past 12 months. Was the pelvic exam done at the same visit as your Pap test?

```
Yes..............1
No..............5
```

FLOW CHECK F-23: IF FE-1 PELWPAP=1 (PELVIC AT THE SAME TIME AS PAP TEST) THEN GO TO FE-3 MREASPEL.
                    OTHERWISE GO TO FE-2 LASTPEL.

{Asked of all R who did not have a Pelvic exam at the same time as Pap testing in the past 12 months (FE-1 PELWPAP=5)
LASTPEL
FE-2. Do you think your last pelvic exam was...?

```
A year ago or less ......................................1
More than 1 year ago but not more than 2 years ..........2
More than 2 years ago but not more than 3 years .........3
More than 3 years ago but not more than 5 years .........4
Over 5 years ago ........................................5
Never had pelvic exam....................................6
```

FLOW CHECK F-24:   IF LASTPEL =6 (NEVER HAD A PELVIC EXAM) THEN GO TO FE-5 INTPEL.
                   OTHERWISE GO TO FE-3 MREASPEL.

{ Asked if R ever had a pelvic exam
MREASPEL
FE-3. What was the <u>main</u> reason you had your most recent pelvic exam -was it part of a routine exam, because of a medical problem, or some other reason?

```
Part of a routine exam..............1
Because of a medical problem.......2
Other reason.......................3
```

{ Asked if R ever had a pelvic exam
AGEFPEL
FE-4. At what age did you have your first pelvic exam?

          ◆ *If necessary say, "It is okay to estimate your age if you are not sure"*

          ◆ *ENTER age in years*

◆ *ENTER [96] if R only had 1 pelvic exam.*

UNDERLYING RANGE: 5-50, 96

FLOW CHECK F-25: IF FE-4 AGEFPEL = DK OR RF THEN ASK FE-4A AGEPEL2.
ELSE ASK FE-5 INTPEL.

{ Asked if R did not know her age at first pelvic exam (FE-4 AGEFPEL=DK)
AGEPEL2
FE-4a.   Were you younger than 18, 18-21, 22-29, or 30 or older at your first
pelvic exam?

Younger than 18....................1
18-21..............................2
22-29..............................3
30 or older........................4

EDIT CHECK FE-4A_1:   PROBE IF FE-4 AGEFPEL > AGE_R.
DISPLAY: R has reported an age of first pelvic exam
(AGEFPEL) that is older than her current age (AGE_R).
Has something been entered incorrectly?
INVOLVING(AGEFPEL)

INTPEL
FE-5. Please look at show card 51a. How often do you think you will need to
have a pelvic exam?

[SHOW CARD 51a]

Every year........................1
Every 2 years.....................2
Every 3 years.....................3
Every 4 years.....................4
Every 5 years.....................7
Less often than every 5 years 8

IF R VOLUNTEERS:
More than once a year.............95
She would never need to be tested…96

Human Papilloma Virus (HPV) Testing Series (FF)

{ Asked for all Rs
INTRHPV
FF-1. The next questions are about Human Papilloma Virus (HPV) tests.

◆ *ENTER [1] to continue*

EVHPVTST
FF-2. Have you ever had an HPV test -where a doctor or nurse put an instrument
in the vagina and took a sample to test for the HPV virus?

Yes..............1
No..............5 (FF-6 INTHPV)

FLOW CHECK F-24a: IF FF-2 EVHPVTST = 1 AND FA-3C PAP12 = 1 (PAP IN THE PAST 12
MONTHS) THEN GO TO FF-3 HPVWPAP.

ELSE GO TO FF-3 LASTHPV.

{ Asked if R ever had an HPV test (FF-2 EVHPVTST=1) and a pap test in past 12
     months (FA-3C PAP12=1)
HPVWPAP
FF-3. You reported you had a Pap test in the past 12 months. Was the HPV test
     done at the same time as your Pap test?

                  Yes.............1 (FF-4 MREASHPV)
                  No..............5

{Asked if R ever had an HPV test or if DK/RF whether HPV test (FF-2
     EVHPVTST=1,DK,RF)
LASTHPV
FF-3c.   When was your last HPV test?

        A year ago or less 1
        More than 1 year ago but not more than 2 years 2
        More than 2 years ago but not more than 3 years 3
        More than 3 years ago but not more than 5 years 4
        Over 5 years ago 5

{ Asked if R ever had an HPV test (FF-2 EVHPVTST=1)
MREASHPV
FF-4. What was the <u>main</u> reason you had your most recent HPV test -was it part of
     a routine exam, because of a medical problem, or some other reason?

     Part of a routine exam..............1
     Because of a problem................2
     Other reason.......................3

{ Asked if R ever had an HPV test
AGEFHPV
FF-5.   At what age did you have your first HPV test?

         ◆ *ENTER age in years*

         ◆ *ENTER [96] if R only had 1 HPV exam.*

         UNDERLYING RANGE: 5-50, 96

FLOW CHECK F-25A: IF FF-5 AGEFHPV = DK THEN ASK FF-5A AGEHPV2.
                       ELSE ASK FF-6 INTHPV.

{ Asked if R did not know her age at first HPV test (FF-5 AGEFHPV=DK)
AGEHPV2
FF-5a.   Were you younger than 18, 18-21, 22-29, or 30 or older at your first
         HPV test?

        Younger than 18....................1
        18-21..............................2
        22-29..............................3
        30 or older........................4

EDIT CHECK FF-5A_1:   **PROBE IF FE-4 AGEFHPV > AGE_R.**
                      DISPLAY: R has reported an age of first HPV test
                      (**AGEFHPV**) that is older than her current age (AGE_R).

Has something been entered incorrectly?
INVOLVING(AGEFHPV)

**FLOW CHECK F-26: IF R REPORTED A HYSTERECTOMY (HYST=1) THEN GO TO FG-1 INTRFG.
ELSE ASK FF-6 INTHPV.**

{ Asked if R has not had a hysterectomy
INTHPV
FF-6. Please look at show card 51a. How often do you think you will need to have
an HPV test?

[SHOW CARD 51a]

```
Every year........................1
Every 2 years.....................2
Every 3 years.....................3
Every 4 years.....................4
Every 5 years.....................7
Less often than every 5 years ....8

IF R VOLUNTEERS:
More than once a year.............95
She would never need to be tested…96
```


Additional questions regarding reproductive health (FG)

{ Asked for all Rs
INTRFG
FG-1. The next questions are about things your doctor or other medical care
provider may have asked you about in the past 12 months either in person,
or via a computerized or paper form.

  ⬥ *ENTER [1] to continue*

ASKSMOKE
FG-2. In the past 12 months, has a doctor or other medical care provider asked
you whether you smoke cigarettes or use other kinds of tobacco?

```
Yes..............1
No..............5
```

ASKPREG
FG-3. In the past 12 months, has a doctor or other medical care provider asked
you whether you wanted to get pregnant or have a baby?

```
Yes..............1
No..............5
```

ASKFOLIC
FG-4. In the past 12 months, has a doctor or other medical care provider advised
you to take a vitamin with folic acid?

```
Yes..............1
No..............5
```

TALKDM
FG-5. In the past 12 months, has a doctor or other medical care provider talked

with you about using a condom at the same time as a female method of
contraception?

                        Yes..............1
                        No...............5

Most recent experience with provider (FH)

FLOW CHECK F-27:   ASK FH SERIES (starting with INTROFH) IF:

>   **FA-1b BTHCON12=1(yes) [method of birth control or prescription] or**
>   **FA-1d BCCNS12=1 (yes) [counseling about birth control] or**
>   **FA-1c MEDTST12=1(yes) [checkup for birth control] or**
>   **FA-1e STEROP12=1(yes) [sterilization operation] or**
>   **FA-1f STCNS12=1 (yes) [counseling re sterilization operation] or**
>   **FA-1g EMCON12=1 (yes) [emergency contraception or prescription] or**
>   **FA-1h ECCNS12=1 (yes) [counseling regarding emergency contraception]**

>   **ELSE GO TO GA-0 GAINTRO1.**

{Asked if received a method of birth control or counseling about a method
INTROFH
FH-0. Earlier you mentioned that in the past 12 months you received a method of
      birth control or prescription for a method from a health care provider. I
      am now going to ask about your <u>most recent</u> experience with this provider.
      Please look at Card 51b and rate your experience with this provider on a
      scale of 1 to 5 (with 1 meaning "poor" and 5 meaning "excellent") with
      respect to the following qualities:

{Asked if received a method of birth control or counseling about a method
PROVRESP
FH-1. How did this provider rate on <u>respecting you as a person</u>?

[SHOW CARD 51b]

                Poor.............1
                Fair.............2
                Good.............3
                Very good........4
                Excellent........5

{Asked if received a method of birth control or counseling about a method
PROVSAYBC
FH-2. Looking at Card 51b, how did this provider rate with respect to <u>letting
      you say what mattered most to you about your birth control method</u>?

[SHOW CARD 51b]

                Poor.............1
                Fair.............2
                Good.............3
                Very good........4
                Excellent........5

{Asked if received a method of birth control or counseling about a method
PROVPREBC
FH-3. How did this provider rate on <u>taking your preferences about birth control
      seriously</u>?

[SHOW CARD 51b]

       Poor............1
       Fair............2
       Good............3
       Very good.......4
       Excellent.......5

{Asked if received a method of birth control or counseling about a method
PROVINFOBC
FH-4. How did this provider rate on <u>giving you enough information to make the best decision about your birth control method</u>?

[SHOW CARD 51b]

       Poor............1
       Fair............2
       Good............3
       Very good.......4
       Excellent.......5