Wave III Section 22: Completed Pregnancies

Title

Wave III Section 22: Completed Pregnancies

Abstract

Variables: 39

Observations: 6,857

Variables

Wave III Section 22: Completed Pregnancies

- RRELNO ROMANTIC RELATIONSHIP NUMBER
- RPREGNO RELATIONSHIP PREGNANCY NUMBER
- H3PG1 S22Q1 MONTHS PREG WHEN TOLD PARTNER-W3
- H3PG2 S22Q2 WEEKS PREGNANT WHEN ENDED-W3
- H3PG3 S22Q3 SCHOOL LEVEL WHEN GOT PREGNANT-W3
- H3PG4 S22Q4 ANY CONTACT DURING PREGNANCY-W3
- H3PG5 S22Q5 BIRTH CONTROL BEFORE PREGNANCY-W3
- H3PG6A S22Q6A FIRST METHOD OF BIRTH CONTROL-W3
- H3PG6B S22Q6B SECOND METHOD OF BIRTH CONTROL-W3
- H3PG6C S22Q6C THIRD METHOD OF BIRTH CONTROL-W3
- H3PG7 S22Q7 BIRTH CONTR EVERY TIME PREV MO-W3
- H3PG8 S22Q8 WANT CHILD BEFORE PREGNANCY-W3
- H3PG9 S22Q9 WANT CHILD LATER-W3
- H3PG10 S22Q10 WANT TO BE YOUR CHILD'S PARENT-W3
- H3PG11 S22Q11 DR OR NURSE FOR PRENATAL CARE-W3
- H3PG12 S22Q12 PARTNER WENT WITH YOU CHECKUPS-W3
- H3PG13 S22Q13 MONTH FIRST SEE DR OR NURSE-W3
- H3PG14 S22Q14 # PRENATAL VISITS FIRST 6 MOS-W3
- H3PG15 S22Q15 # PRENATAL VISITS AFTER 6 MOS-W3
- H3PG16 S22Q16 PLACE OF PRENATAL CARE-W3
- H3PG17A S22Q17A YOU/PARTNER PAID PRENAT CARE-W3
- H3PG17B S22Q17B PARENTS PAID PRENAT CARE-W3
- H3PG17C S22Q17C PRIVATE INSUR PD PRENAT CARE-W3
- H3PG17D S22Q17D MEDICAID PAID PRENATAL CARE-W3
- H3PG17E S22Q17E GOVT ASSIST PD PRENATAL CARE-W3
- H3PG17F S22Q17F OTHER SOURCE PD PRENATAL CARE-W3
- H3PG18 S22Q18 PREG: HOW OFTEN DRANK ALCOHOL-W3
- H3PG19 S22Q19 PREG: HOW OFTEN USED DRUGS-W3

- H3PG20 S22Q20 PREG:HOW MANY CIGARETTES SMOKE-W3
- H3PG21A S22Q21A YOU/PARTNER PAID HOSP CARE-W3
- H3PG21B S22Q21B PARENTS PAID HOSP CARE-W3
- H3PG21C S22Q21C PRIVATE INSUR PAID HOSP CARE-W3
- H3PG21D S22Q21D MEDICAID PAID HOSPITAL CARE-W3
- H3PG21E S22Q21E GOVT ASSIST PD HOSPITAL CARE-W3
- H3PG21F S22Q21F OTHER SOURCE PD HOSPITAL CARE-W3
- H3PG22 S22Q22 MARRIED AT TIME OF BIRTH-W3
- H3PG23 S22Q23 LIVING TOGETHER TIME OF BIRTH-W3
- H3PG24 S22Q24 RELATIONSHIP AT TIME OF BIRTH-W3

SRELNO - ROMANTIC RELATIONSHIP NUMBER

Туре	Numeric (Double)
RRELNO	Romantic relationship number

SPREGNO - RELATIONSHIP PREGNANCY NUMBER

Туре	Numeric (Double)
RPREGNO	Relationship pregnancy number

✤ H3PG1 - S22Q1 MONTHS PREG WHEN TOLD PARTNER-W3

Туре		Code
Measurement U	nit	numeric
H3PG1	 3PG1 1. [If the respondent is male and num ber of pregnancies = 1:] How may months preg ant w as she when <partner> told you that she was pregnancies (If the respondent is male and num ber of pregnancies > 1:] With regares <pre>PARTNER>Is pregnancy that ended in <cpemtht> of <cpeyr>, how month s pregnant was she when she told you that she was pregnant?</cpeyr></cpemtht></pre> 1. [If the respondent is female and number of pregnancies = 1:] How months pregnant were you when you told <partner> that you were pregnant?</partner> [If the respondent is female and number of pregnancies > 1:] With regares your pregnancy that ended in <cpemtht> of <cpeyr>, how many months pregnant were you when you told <partner> that you were pregnant</partner></cpeyr></cpemtht> </partner>	
Logic		If the respondent is female, ask Q2
0	months	
1	month	
2	months	
3	months	
4	months	
5	months	

6	months
7	months
8	months
9	months

🍄 H3PG2 - S22Q2 WEEKS PREGNANT WHEN ENDED-W3	
Туре	Numeric (Double)
H3PG2	2. How many weeks had you been pregnant when {YOUR/ THIS} pregnancy ended?

🌃 H3PG3 - S2	2Q3 SCHOOL LI	EVEL WHEN GOT PREGNANT-V	V3
Туре		Code	
Measurement Unit numeric		numeric	
H3PG3		3. How far had <partner> gone in school when {SHE/YOU} got pregnar {YOU/ HIM}?</partner>	
0	had never gone t	co school	
1	8th grade or less		
2	more than 8th grade, but not a high school graduate		
3	had gone to buisness, trade or vocational school instead of high school		
4	high school graduate		
5	completed GED		
6	had gone to business, trade, or vocational school after high school		
7	attending college		
8	had gone to college, but not a college graduate		

H3PG4 - S22Q4 ANY CONTACT DURING PREGNANCY-W3

Туре		Code
Measurement U	nit	numeric
H3PG4		4. Did {YOU/ <partner>} have any contact with {<partner>/YOU} between the time {YOU/HE} learned {SHE WAS/YOU WERE} pregnant and the time {HER/YOUR} pregnancy ended?</partner></partner>
0	no	

1 yes

<u>A-</u>

🎋 H3PG5 - S22Q5 BIRTH CONTROL BEFORE PREGNANCY-W3			
Туре		Code	
Measurement Un	nit	numeric	
H3PG5		5. Before { <partner>/YOU} got pu using any kind of birth control whe</partner>	regnant, were you or {SHE/ <partner>} en you had sex with each other?</partner>
Logic		If no, skip to Q8	
0	no		
1	yes		

🌃 H3PG6A - S	22Q6A FIRST N	1ETHOD OF BIRTH CONTROL-V	√3
Туре		Code	
Measurement Unit numeric		numeric	
H3PG6A		6A. What kinds of birth control we as many as three methods. 1st res	re you or {SHE/HE} using? You may report ponse
1	condoms		
2	withdrawl		
3	rhythm (safe tim	ne) or safe period by the calendar	
4		anning or safe period by sal body temperature) or cervical	
5	birth control pills	s (the pill)	
6	vaginal sponge		
7	spermicidal foam, jelly, creme, suppositories		
8	diaphragm, with or without jelly or cream		
10	female condom		
11	IUD (intrauterine	e device), coil, loop	
12	the implant of No	orplant	
13	ring		
14	the injectable or Depo Provera		
16	female sterilization or tubal ligation		
17	hysterectomy		
18	vasectomy		

19 emergency contraception, such as a high-dose birth controll pills or the morning-after pill
20 some other method
21 no other method

ᄿ H3PG6B - S	22Q6B SECONE) METHOD OF BIRTH CONTRO	L-W3
Туре		Code	
Measurement U	urement Unit numeric		
H3PG6B		6B. What kinds of birth control we as many as three methods. 2nd res	re you or {SHE/HE} using? You may report sponse
1	condoms		
2	withdrawl		
3	rhythm (safe tim	ne) or safe period by the calendar	
4		anning or safe period by sal body temperature) or cervical	
5	birth control pills	s (the pill)	
6	vaginal sponge		
7	spermicidal foam	n, jelly, creme, suppositories	-
9	cervical cap		
10	female condom		
11	IUD (intrauterine device), coil, loop		
12	the implant of Norplant		
13	ring		
14	the injectable or	Depo Provera	
15	vaginal contrace	ptive film or insert	
16	female sterilizati	on or tubal ligation	
17	hysterectomy		
18	vasectomy		
19		raception, such as a high-dose s or the morning-after pill	
20	some other mether	nod	
21	no other method	l	

🍄 H3PG6C - S	22Q6C THIRD N	/IETHOD OF BIRTH CONTROL-	W3
Туре		Code	
Measurement Ur	nit	numeric	
H3PG6C		6C. What kinds of birth control we as many as three methods. 3rd res	re you or {SHE/HE} using? You may report sponse
1	condoms		
2	withdrawl		
3	rhythm (safe tim	ne) or safe period by the calendar	
4	natural family planning or safe period by temperature (basal body temperature) or cervical mucus test		
5	birth control pills	s (the pill)	
6	vaginal sponge		
7	spermicidal foam, jelly, creme, suppositories		
9	cervical cap		-
10	female condom		
11	IUD (intrauterine device), coil, loop		
12	the implant of Norplant		
13	ring		
14	the injectable or	Depo Provera	
15	vaginal contrace	ptive film or insert	
16	female sterilization or tubal ligation		
18	vasectomy		
19	emergency contraception, such as a high-dose birth controll pills or the morning-after pill		
20	some other method		
21	no other method	I	

M H3PG7 - S22Q7 BIRTH CONTR EVERY TIME PREV MO-W3

Туре	Code
Measurement Unit	numeric
H3PG7	7. In the month before {SHE/YOU} got pregnant, did you or <partner> use {THIS/AT LEAST ONE} kind of birth control every time you and {SHE/HE} had sexual intercourse?</partner>

0	no
1	yes

🏶 H3PG8 - S22Q8 WANT CHILD BEFORE PREGNANCY-W3		
Туре		Code
Measurement Ur	nit	numeric
H3PG8		8. Please think back to the time just before { <partner>/YOU} became pregnant. Did you want to have a child then?</partner>
Logic		If yes, skip to Q10
0	no	
1	yes	

🌃 H3PG9 - S22Q9 WANT CHILD LATER-W3		
Туре		Code
Measurement Ur	nit	numeric
H3PG9		9. Did you want to have a child sometime later?
Logic		If no, skip to Q11
0	no	
1	yes	

🌃 H3PG10 - S22Q10 WANT TO BE YOUR CHILD'S PARENT-W3			
Туре		Code	
Measurement U	nit	numeric	
H3PG10		10. Did you want <partner> to be your child 2s {MOTHER/FATHER}?</partner>	
Logic		If the respondent is male and Q4=1, or if the respondent is female, ask Q18	c Q11 to
0	no		
1	yes		

🍄 H3PG11 - S22Q11 DR OR NURSE FOR PRENATAL CARE-W3	
Туре	Code
Measurement Unit	numeric
H3PG11	11. While { <partner> WAS/YOU WERE} pregnant, did {SHE/YOU} visit a doctor or nurse-midwife for prenatal care or pregnancy check-ups?</partner>
Logic	If no, skip to Q18
0 no	

1 yes

✤ H3PG12 - S22Q12 PARTNER WENT WITH YOU CHECKUPS-W3		
Туре		Code
Measurement Ur	nit	numeric
H3PG12		12. Did {YOU/HE} go along with {HER/YOU} for any of these check-ups?
Logic		If the respondent is female, ask Q13 to Q15
0	no	
1	yes	

🌃 H3PG13 - S	22Q13 MONTH	FIRST SEE DR OR NURSE-W3	
Туре		Code	
Measurement U	nit	numeric	
H3PG13		13. In which month of the pregnar wife?	ncy did you first see a doctor or nurse-mid
0	before the first n	nonth*	
1	first month		-
2	second month		
3	third month		
4	fourth month		
5	fifth month		
6	sixth month		
7	seventh month		
8	eighth month		
9	ninth month		

🌃 H3PG14 - S22Q14 # PRENATAL VISITS FIRST 6 MOS-W3	
Туре	Numeric (Double)
H3PG14	14. [If Q2 < or equal to 24:] How many prenatal-care visits did you have with a doctor or nurse-mid wife?[If Q2 > 24:] During the first six months of this pregnancy, how many prenatal-care visits did you have with a doctor or nurse-mid wife?
Logic	If Q2 > 24, ask Q15

¹ H3PG15 - S22Q15 # PRENATAL VISITS AFTER 6 MOS-W3

Туре	Numeric (Double)
H3PG15	15. After the first six months, how many prenatal-car e visits did you have
	with a doctor or nurse-mid wife?

H3PG16 - S22Q16 PLACE OF PRENATAL CARE-W3

Туре		Code	
Measurement U	nit	numeric	
H3PG16		16. Where did {SHE/YOU} go for m	ost of {HER/YOUR} prenatal care?
1	private doctor's	office	
2	nurse-midwife's	office	
3	county or city health department		
4	community health center		
5	HMO (health maintenance organization)		
6	clinic at work or	at school	
7	clinic in a hospital		
8	emergency room in a hospital		
9	birthing center		
10	another sort of p	lace	

Section 222017A YOU/PARTNER PAID PRENAT CARE-W3

Туре		Code	
Measurement U	nit	numeric	
H3PG17A		MAX > 1:] For the pregnancy that e	IER>⊡s/YOUR} prenatal care paid for? [If ended in <cpemtht> of <cpeyr>, how was re paid for? Mark all the kinds of payments avings</cpeyr></cpemtht>
0	not marked		
1	marked		

✤ H3PG17B - S22Q17B PARENTS PAID PRENAT CARE-W3

Туре	Code
Measurement Unit	numeric

H3PG17B		17B. [If MAX=1:] How was <partner>Is/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>Is/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. your or <partner>Is parents or other relatives</partner></partner></cpeyr></cpemtht></partner>	
0	not marked		
1 marked			

😵 H3PG17C - S22Q17C PRIVATE INSUR PD PRENAT CARE-W3			
Туре		Code	
Measurement U	nit	numeric	
H3PG17C		MAX > 1:] For the pregnancy that e	ER>Is/YOUR} prenatal care paid for? [If ended in <cpemtht> of <cpeyr>, how was re paid for? Mark all the kinds of payments</cpeyr></cpemtht>
0 not marked 1 marked			

🍪 H3PG17D - S22Q17D MEDICAID PAID PRENATAL CARE-W3			
Туре		Code	
Measurement U	nit	numeric	
H3PG17D		MAX > 1:] For the pregnancy that e	ER>⊡s/YOUR} prenatal care paid for? [If nded in <cpemtht> of <cpeyr>, how was e paid for? Mark all the kinds of payments</cpeyr></cpemtht>
0 not marked 1 marked			

H3PG17E - S22Q17E	8 H3PG17E - S22Q17E GOVT ASSIST PD PRENATAL CARE-W3	
Туре	Code	
Measurement Unit	numeric	
H3PG17E	17E. [If MAX=1:] How was <partner>2s/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>2s/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. government assistance other than Medicaid (state or local)</partner></cpeyr></cpemtht></partner>	

0	not marked
1	marked

M3PG17F - S22Q17F OTHER SOURCE PD PRENATAL CARE-W3

Туре		Code	
Measurement Unit		numeric	
H3PG17F		MAX > 1:] For the pregnancy that e	ER>⊡s/YOUR} prenatal care paid for? [If ended in <cpemtht> of <cpeyr>, how was re paid for? Mark all the kinds of payments</cpeyr></cpemtht>
0 not marked			
1 marked			

M3PG18 - S22Q18 PREG: HOW OFTEN DRANK ALCOHOL-W3

Туре		Code	
Measurement Unit		numeric	
H3PG18		18. During th is pregnancy, how of beverages?	ten did {SHE/YOU} drink alcoholic
0	0 never		
1 less than once a		month	
2 several times a r		nonth	
3	several times a week		
4	almost every day		

🌃 H3PG19 - S22Q19 PREG: HOW OFTEN USED DRUGS-W3			
Туре		Code	
Measurement Unit		numeric	
H3PG19		19. How often did {SHE/YOU} use of heroin?	drugs such as marijuana, crack cocaine, or
0	never		
1 less than once a		month	
2	several times a n	nonth	
3	several times a week		
4	almost every day		

SHAPG20 - S22Q20 PREG:HOW MANY CIGARETTES SMOKE-W3

Туре		Code	
Measurement U	nit	numeric	
H3PG20		20. How many cigarettes did {SHE/	'YOU} smoke?
Logic		If CPOUTC = L or D (i.e., the pregna	ancy ended in a live birth), ask Q21 to Q24
0	none		
1 1 pack a day or l		ess	
2	more than 1 pack a day, but less than 2 packs a day		
3	2 or more packs a day		

M3PG21A - S22Q21A YOU/PARTNER PAID HOSP CARE-W3

Туре		Code
Measurement U	nit	numeric
H3PG21A		 21A. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for?</partner> [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for?</partner></cpeyr></cpemtht> Mark all the kinds of payments that apply. your or <partner>'s income or savings</partner>
0	not marked	
1	marked	

M3PG21B - S22Q21B PARENTS PAID HOSP CARE-W3

Туре		Code	
Measurement Unit		numeric	
H3PG21B 0 not marked		paid for?	at apply.
1	marked		-

S H3PG21C - S22Q21C PRIVATE INSUR PAID HOSP CARE-W3	
Туре	Code
Measurement Unit	numeric

H3PG21C		paid for?	
0	not marked		
1	marked		

🍄 H3PG21D - S22Q21D MEDICAID PAID HOSPITAL CARE-W3			
Туре		Code	
Measurement Unit		numeric	
H3PG21D		paid for?	
0	not marked	not marked	
1	marked		

🌃 H3PG21E	S22Q21E GOV	T ASSIST PD HOSPITAL CARE-W3	3
Туре		Code	
Measurement Unit		numeric	
H3PG21E		paid for?	t apply.
0	not marked		
1	marked		

SH3PG21F - S22Q21F OTHER SOURCE PD HOSPITAL CARE-W3	
Туре	Code
Measurement Unit	numeric

H3PG21F		 21F. [If MAX = 1:] How were <partner>2s/YOUR} delivery and hospital stay paid for?</partner> [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>2s/YOUR} delivery and hospital stay paid for? Mark all the kinds of payments that apply.</partner></cpeyr></cpemtht> some other source of money
0	not marked	
1	marked	

🎋 H3PG22 - S22Q22 MARRIED AT TIME OF BIRTH-W3			
Туре		Code	
Measurement Unit		numeric	
H3PG22		22. Were you and <partner> married to each other at the time of this birth?</partner>	
0	no		
1	yes		

🌃 H3PG23 - S22Q23 LIVING TOGETHER TIME OF BIRTH-W3		
Туре		Code
Measurement Unit		numeric
H3PG23		23. Were you and <partner> living together at th at time?</partner>
Logic		If Q22=0 and Q23=0, ask Q24
0	no	
1	yes	

🎋 H3PG24 - S	22Q24 RELATIC	ONSHIP AT TIME OF BIRTH-W3
Туре		Code
Measurement Unit		numeric
		24. Which of the following statements best describes your relationship with <partner> at the time of this birth?</partner>
1	We did not see o	or talk to each other
2	We hardly ever s	saw or talked to each other
3	We were just frie	ends
4	We were involve relationship	ed in an on-again, off-again
5	We were romant	tically involved on a steady basis

Logical Products

Data Layouts

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Wave III Section 22: Completed Pregnancies

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😵 RRELNO - ROMANTIC RELATIONSHIP NUMBER	
Туре	Numeric (Double)
RRELNO	Romantic relationship number

* RPREGNO - RELATIONSHIP PREGNANCY NUMBER

Туре	Numeric (Double)
RPREGNO	Relationship pregnancy number

Туре		Code	
Measurement Unit		numeric	
H3PG1		 I. [If the respondent is male and num ber of pregnancies = 1:] How many months preg ant w as she when <partner> told you that she was pregnant?</partner> [If the respondent is male and num ber of pregnancies > 1:] With regard to <partner>Is pregnancy that ended in <cpemtht> of <cpeyr>, how many month s pregnant was she when she told you that she was pregnant?</cpeyr></cpemtht></partner> I. [If the respondent is female and number of pregnancies = 1:] How many months pregnant were you when you told <partner> that you were pregnant?</partner> [If the respondent is female and number of pregnancies > 1:] With regard to your pregnancy that ended in <cpemtht> of <cpeyr>, how many months pregnant were you when you told <partner> that you were pregnant?</partner></cpeyr></cpemtht> 	
Logic		If the respondent is female, ask Q2	
0	months		
1	month		
2	months		
3	months		
4	months		
5	months		
6	months		
7	months		

8	months
9	months

😵 H3PG2 - S22Q2 WEEKS PREGNANT WHEN ENDED-W3		
Туре	Numeric (Double)	
H3PG2	2. How many weeks had you been pregnant when {YOUR/ THIS} pregnancy ended?	

🄏 H3PG3 - S22Q	3 SCHOOL LEVEL \	WHEN GOT PREGNANT-W3	
Туре		Code	
Measurement Ur	nit	numeric	
H3PG3		3. How far had <partner> gone ir {YOU/ HIM}?</partner>	n school when {SHE/YOU} got pregnant by
0	had never gone t	o school	
1	8th grade or less		
2	more than 8th grade, but not a high school graduate		
3	had gone to buisness, trade or vocational school instead of high school		
4	high school graduate		-
5	completed GED		-
6	had gone to business, trade, or vocational school after high school		
7	attending college		
8	had gone to college, but not a college graduate		

M3PG4 - S22Q4 ANY CONTACT DURING PREGNANCY-W3		
Type Code		Code
Measurement Ur	nit	numeric
H3PG4	H3PG4 4. Did {YOU/ <partner>} have any contact with {<partner>/YOU} bet the time {YOU/HE} learned {SHE WAS/YOU WERE} pregnant and the tim {HER/YOUR} pregnancy ended?</partner></partner>	
0	no	
1	yes	

🖗 H3PG5 - S22Q5 BIRTH CONTROL BEFORE PREGNANCY-W3

Туре		Code	
Measurement U	nit	numeric	
H3PG5		5. Before { <partner>/YOU} got pregnant, were you or {SHE/<partner>} using any kind of birth control when you had sex with each other?</partner></partner>	
Logic		If no, skip to Q8	
0	no		
1	yes		

🍄 H3PG6A - S22	Q6A FIRST METHO	DD OF BIRTH CONTROL-W3	
Туре		Code	
Measurement Unit		numeric	
H3PG6A		6A. What kinds of birth control we as many as three methods. 1st res	ere you or {SHE/HE} using? You may report sponse
1	condoms		
2	withdrawl		
3	rhythm (safe tin	ne) or safe period by the calendar	_
4		anning or safe period by sal body temperature) or cervical	
5	birth control pills	s (the pill)	
6	vaginal sponge		_
7	spermicidal foam, jelly, creme, suppositories		-
8	diaphragm, with or without jelly or cream		-
10	female condom		-
11	IUD (intrauterine device), coil, loop		-
12	the implant of Norplant		-
13	ring		_
14	the injectable or	Depo Provera	-
16	female sterilizati	on or tubal ligation	
17	hysterectomy		
18	vasectomy		
19	emergency contraception, such as a high-dose birth controll pills or the morning-after pill		
20	some other met	hod	

21	no other method		
🍪 H3PG6B - S22	Q6B SECOND MET	HOD OF BIRTH CONTROL-W3	
Туре		Code	
Measurement U	nit	numeric	
H3PG6B		6B. What kinds of birth control we as many as three methods. 2nd re	re you or {SHE/HE} using? You may report sponse
1	condoms		
2	withdrawl		
3	rhythm (safe tim	e) or safe period by the calendar	
4		anning or safe period by sal body temperature) or cervical	
5	birth control pills	(the pill)	-
6	vaginal sponge		
7	spermicidal foam, jelly, creme, suppositories		
9	cervical cap		
10	female condom		
11	IUD (intrauterine device), coil, loop		-
12	the implant of Norplant		
13	ring		
14	the injectable or Depo Provera		
15	vaginal contrace	otive film or insert	
16	female sterilizati	on or tubal ligation	
17	hysterectomy		
18	vasectomy		
19	emergency contraception, such as a high-dose birth controll pills or the morning-after pill		
20	some other method		
21	no other method		

M H3PG6C - S22Q6C THIRD METHOD OF BIRTH CONTROL-W3		
Туре	Code	
Measurement Unit	numeric	

H3PG6C		C. What kinds of birth control we many as three methods. 3rd res	re you or {SHE/HE} using? You may repor sponse
1	condoms	-	
2	withdrawl		
3	rhythm (safe time)	or safe period by the calendar	-
4	natural family planning or safe period by temperature (basal body temperature) or cervical mucus test		
5	birth control pills (th	ne pill)	
6	vaginal sponge		
7	spermicidal foam, je	elly, creme, suppositories	
9	cervical cap		-
10	female condom		
11	IUD (intrauterine device), coil, loop		
12	the implant of Norplant		-
13	ring		-
14	the injectable or De	po Provera	
15	vaginal contraceptiv	ve film or insert	
16	female sterilization	or tubal ligation	
18	vasectomy		
19	emergency contraception, such as a high-dose birth controll pills or the morning-after pill		
20	some other method		
21	no other method		

🌃 H3PG7 - S22Q7 BIRTH	CONTR EVERY T	IME PREV MO-W3
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Туре		Code	
Measurement Ur	nit	numeric	
H3PG7		7. In the month before {SHE/YOU} got pregnant, did you or <partner> use {THIS/AT LEAST ONE} kind of birth control every time you and {SHE/HE} had sexual intercourse?</partner>	
0	no		
1	yes		

🌃 H3PG8 - S22Q8 WANT CHILD BEFORE PREGNANCY-W3			
Type Code			
Measurement U	nit	numeric	
H3PG8		8. Please think back to the time just before { <partner>/YOU} became pregnant. Did you want to have a child then?</partner>	
Logic		If yes, skip to Q10	
0	no		
1	yes		

🚳 H3PG9 - S22Q9 WANT CHILD LATER-W3		
Type Code		Code
Measurement Ur	nit	numeric
H3PG9		9. Did you want to have a child sometime later?
Logic		If no, skip to Q11
0	no	
1	yes	

🐝 H3PG10 - S22Q10 WANT TO BE YOUR CHILD'S PARENT-W3			
Туре		Code	
Measurement Unit		numeric	
H3PG10		10. Did you want <partner> to be your child Ds {MOTHER/FATHER}?</partner>	
Logic		If the respondent is male and Q4=1, or if the respondent is female, ask Q11 to Q18	
0	no		
1	yes		

😵 H3PG11 - S22Q11 DR OR NURSE FOR PRENATAL CARE-W3				
Туре		Code		
Measurement Unit		numeric		
H3PG11		11. While { <partner> WAS/YOU WERE} pregnant, did {SHE/YOU} visit a doctor or nurse-midwife for prenatal care or pregnancy check-ups?</partner>		
Logic		If no, skip to Q18		
0	no			
1	yes			

H3PG12 - S22Q12 PARTNER WENT WITH YOU CHECKUPS-W3

Туре		Code	
Measurement Unit		numeric	
H3PG12		12. Did {YOU/HE} go along with {HER/YOU} for any of these check-ups?	
Logic		If the respondent is female, ask Q13 to Q15	
0	no		
1	yes		

🍄 H3PG13 - S22	Q13 MONTH FIRS	T SEE DR OR NURSE-W3	
Туре		Code	
Measurement Unit		numeric	
H3PG13		13. In which month of the pregnancy did you first see a doctor or nurse-mid wife?	
0	before the first n	nonth*	
1	first month	first month	
2	second month		
3	third month		
4	fourth month		
5	fifth month		
6	sixth month		
7	seventh month		
8	eighth month		
9	ninth month		

😵 H3PG14 - S22Q14 # PRENATAL VISITS FIRST 6 MOS-W3		
Туре	Numeric (Double)	
H3PG14	14. [If Q2 < or equal to 24:] How many prenatal-care visits did you have with a doctor or nurse-mid wife?[If Q2 > 24:] During the first six months of this pregnancy, how many prenatal-care visits did you have with a doctor or nurse-mid wife?	
Logic	If Q2 > 24, ask Q15	

😵 H3PG15 - S22Q15 # PRENATAL VISITS AFTER 6 MOS-W3	
Туре	Numeric (Double)
H3PG15	15. After the first six months, how many prenatal-car e visits did you have with a doctor or nurse-mid wife?

🚳 H3PG16 - S22Q16 PLACE OF PRENATAL CARE-W3				
Туре		Code		
Measurement U	nit	numeric		
H3PG16		16. Where did {SHE/YOU} go for m	ost of {HER/YOUR} prenatal care?	
1	private doctor's	office		
2	nurse-midwife's office			
3	county or city health department			
4	community health center			
5	HMO (health maintenance organization)			
6	clinic at work or at school			
7	clinic in a hospital			
8	emergency room in a hospital			
9	birthing center			
10	another sort of place			

😵 H3PG17A - S22Q17A YOU/PARTNER PAID PRENAT CARE-W3		
Туре		Code
Measurement Unit		numeric
H3PG17A		17A. [If MAX=1:] How was <partner>Is/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>Is/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. your or <partner>Is income or savings</partner></partner></cpeyr></cpemtht></partner>
0	not marked	
1	marked	

🚳 H3PG17B - S22Q17B PARENTS PAID PRENAT CARE-W3		
Туре	Code	
Measurement Unit	numeric	
H3PG17B	17B. [If MAX=1:] How was <partner>Is/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>Is/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. your or <partner>Is parents or other relatives</partner></partner></cpeyr></cpemtht></partner>	
0 not mar	ked	

1 marked				
ᄿ H3PG17C - S2	2Q17C PRIVATE IN	ISUR PD PRENAT CARE-W3		
Туре		Code		
Measurement U	nit	numeric		
H3PG17C		MAX > 1:] For the pregnancy that e	ER>Is/YOUR} prenatal care paid for? [If ended in <cpemtht> of <cpeyr>, how was re paid for? Mark all the kinds of payments</cpeyr></cpemtht>	
0	not marked			
1	marked			

🚳 H3PG17D - S22Q17D MEDICAID PAID PRENATAL CARE-W3			
Туре		Code	
Measurement Unit		numeric	
H3PG17D		17D. [If MAX=1:] How was <partner>Is/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>Is/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. Medicaid</partner></cpeyr></cpemtht></partner>	
0	not marked		
1	marked		

🏶 H3PG17E - S22Q17E GOVT ASSIST PD PRENATAL CARE-W3			
Туре		Code	
Measurement U	nit	numeric	
H3PG17E		17E. [If MAX=1:] How was <partner>2s/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>2s/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. government assistance other than Medicaid (state or local)</partner></cpeyr></cpemtht></partner>	
0	not marked		
1	marked		

See H3PG17F - S22Q17F OTHER SOURCE PD PRENATAL CARE-W3	
Type Code	
Measurement Unit	numeric

H3PG17F		MAX > 1:] For the pregnancy that e	ER>Is/YOUR} prenatal care paid for? [If ended in <cpemtht> of <cpeyr>, how was re paid for? Mark all the kinds of payments</cpeyr></cpemtht>
0	not marked		
1	marked		

🌃 H3PG18 - S22Q18 PREG: HOW OFTEN DRANK ALCOHOL-W3			
Туре		Code	
Measurement Unit		numeric	
H3PG18		18. During th is pregnancy, how of beverages?	ten did {SHE/YOU} drink alcoholic
0	never		
1	less than once a month		
2	several times a month		
3	several times a week		
4	almost every day		

🏀 H3PG19 - S22Q19 PREG: HOW OFTEN USED DRUGS-W3			
Туре		Code	
Measurement Unit		numeric	
H3PG19 19. How often did {SHE/YOU} use drugs su heroin?		drugs such as marijuana, crack cocaine, or	
0	never		
1	less than once a month		
2	several times a month		
3	several times a week		
4	almost every day		

😵 H3PG20 - S22Q20 PREG:HOW MANY CIGARETTES SMOKE-W3			
Туре		Code	
Measurement Unit numeric		numeric	
H3PG20		20. How many cigarettes did {SHE/YOU} smoke?	
Logic		If CPOUTC = L or D (i.e., the pregnancy ended in a live birth), ask Q21 to Q24	
0	none		

1	1 pack a day or less
2	more than 1 pack a day, but less than 2 packs a day
3	2 or more packs a day

😤 H3PG21A - S22Q21A YOU/PARTNER PAID HOSP CARE-W3			
Туре		Code	
Measurement U	nit	numeric	
H3PG21A		 21A. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for?</partner> [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for?</partner></cpeyr></cpemtht> Mark all the kinds of payments that apply. your or <partner>'s income or savings</partner> 	
0	not marked		
1	marked		

🎋 H3PG21B -				
™്≚ ЦЭр⊂Э1р	$C \rightarrow 2 \rightarrow $	DADENITC		
V HSPGZIB -	SZZUZIB	PARENIS	PAID HUSP	CARE-VV3

Туре		Code
Measurement Un	nit	numeric
H3PG21B		 21B. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for?</partner> [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for?</partner></cpeyr></cpemtht> Mark all the kinds of payments that apply. your or <partner>Is parents or other relatives</partner>
0	not marked	
1	marked	

🚳 H3PG21C - S22Q21C PRIVATE INSUR PAID HOSP CARE-W3			
Type Code		Code	
Measurement U	nit	numeric	
H3PG21C		 21C. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for?</partner> [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for?</partner></cpeyr></cpemtht> Mark all the kinds of payments that apply. private insurance 	
0	not marked		

1 marked				
🚳 H3PG21D - S22Q21D MEDICAID PAID HOSPITAL CARE-W3				
Туре		Code		
Measurement U	nit	numeric		
H3PG21D		 21D. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for?</partner> [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for?</partner></cpeyr></cpemtht> Mark all the kinds of payments that apply. Medicaid 		
0	not marked			
1	marked			

😵 H3PG21E - S22Q21E GOVT ASSIST PD HOSPITAL CARE-W3			
Туре		Code	
Measurement Ur	nit	numeric	
H3PG21E		21E. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for? [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for? Mark all the kinds of payments that apply. government assistance other than Medicaid (state or local)</partner></cpeyr></cpemtht></partner>	
0 not marked			
1	marked		

Туре		Code	
Measurement U	nit	numeric	
H3PG21F		paid for?	
0	not marked		
1	marked		

🚳 H3PG22 - S22Q22 MARRIED AT TIME OF BIRTH-W3

Туре		Code	
Measurement U	leasurement Unit numeric		
H3PG22	13PG22 22. Were you and <partner> mat</partner>		rried to each other at the time of this birth?
0	no		
1	yes		

🌃 H3PG23 - S22Q23 LIVING TOGETHER TIME OF BIRTH-W3					
Type Code					
Measurement Unit numeric					
H3PG23	H3PG23 23. Were you and <partner> living together at th at time?</partner>		g together at th at time?		
Logic		If Q22=0 and Q23=0, ask Q24			
0	no				
1	yes				

M3PG24 - S22Q24 RELATIONSHIP AT TIME OF BIRTH-W3				
Туре		Code		
Measurement U	nit	numeric		
H3PG24 24. Which of the following statements best describes your relationship <partner> at the time of this birth?</partner>		24. Which of the following statements best describes your relationship w ith <partner> at the time of this birth?</partner>		
1	We did not see o	or talk to each other		
2	We hardly ever s	aw or talked to each other		
3	We were just frie	ends		
4	We were involve relationship	d in an on-again, off-again		
5	We were romant	tically involved on a steady basis		

Physical Instances

Wave III Section 22: Completed Pregnancies				
Title	Wave III Section 22: Completed Pregnancies			
File Name	sect22.sas7bdat			
Case Quantity	6857			
Variable Count	38			
🎋 RRELNO - ROMANTIC RELATIONSHIP NUMBER				
Type Numeric (Double)				

RRELNO		Romantic rela	Romantic relationship number				
Valid	Invalid	Minimum	Maximum	Mean	StdDev		
6857	0	1	48	2.2792766	2.2872798		
🄏 RPREGNO	D - RELATIONS	SHIP PREGNANC	y number				
Туре		Numeric (Dou	ıble)				
RPREGNO		Relationship p	pregnancy numbe	r			
Valid	Invalid	Minimum	Maximum	Mean	StdDev		
6857	0	1	8	1.3338194	0.6692625		
Type Measurement Unit		Code					
Measurement Unit numeric							
	t Unit	numeric 1. [If the respondent If the respondent PARTNER>25 month s pregrave 1. [If the respondent pregnant?	ant w as she when dent is male and is pregnancy that e nant was she whe ondent is female a nant were you wh	n <partner> told y num ber of pregna ended in <cpemth en she told you that and number of pre en you told <parti< td=""><td>you that she was pre ncies > 1:] With rega T> of <cpeyr>, how t she was pregnant? gnancies = 1:] How r NER> that you were</cpeyr></td><td>egnant Ird to many many</td></parti<></cpemth </partner>	you that she was pre ncies > 1:] With rega T> of <cpeyr>, how t she was pregnant? gnancies = 1:] How r NER> that you were</cpeyr>	egnant Ird to many many	
Measurement	t Unit	numeric 1. [If the respon- months prega [If the respon- <partner>25 month s prega 1. [If the respon- pregnant? [If the respon- your pregnant]</partner>	ant w as she when dent is male and is pregnancy that e nant was she whe ondent is female a nant were you wh dent is female and cy that ended in <	n <partner> told y num ber of pregnar ended in <cpemth en she told you that and number of pre en you told <parti d number of pregn <cpemtht> of <cp< td=""><td>you that she was pre ncies > 1:] With rega T> of <cpeyr>, how t she was pregnant? gnancies = 1:] How r NER> that you were</cpeyr></td><td>egnant ind to many many gard to onths</td></cp<></cpemtht></parti </cpemth </partner>	you that she was pre ncies > 1:] With rega T> of <cpeyr>, how t she was pregnant? gnancies = 1:] How r NER> that you were</cpeyr>	egnant ind to many many gard to onths	

			Frequency	% of total	% of valid
Valid	0	months	357	5.21%	5.41%
	1	month	3330	48.56%	50.49%
	2	months	1563	22.79%	23.7%
	3	months	764	11.14%	11.58%
	4	months	249	3.63%	3.78%
	5	months	121	1.76%	1.83%
	6	months	63	0.92%	0.96%
	7	months	21	0.31%	0.32%
	8	months	19	0.28%	0.29%
	9	months	108	1.58%	1.64%
		Total	6,595	96.18%	100%

Missing	-	missing	45	0.66%	
	96	refused	94	1.37%	
	98	don't know	70	1.02%	
	99	not applicable	53	0.77%	
		Total	262	3.82%	

Valid	Invalid	Minimum	Maximum
6595	262	0	9

✤ H3PG2 - S22Q2 WEEKS PREGNANT WHEN ENDED-W3

Туре	Numeric (Double)
H3PG2	2. How many weeks had you been pregnant when {YOUR/ THIS} pregnancy
	ended?

			Frequency	% of total	% of valid
Missing		missing	39	0.57%	
	96	refused	67	0.98%	
97		legitimate skip	2240	32.67%	
	98	don't know	73	1.06%	
	99	not applicable	27	0.39%	
		Total	2,446	35.67%	

Valid	Invalid	Minimum	Maximum	Mean	StdDev
4411	2446	0	40	25.381092	15.240538

🌋 H3PG3 - S22Q3 SCHOOL LEVEL WHEN GOT PREGNANT-W3						
Type Code						
Measurement Unit	numeric					
H3PG3	3. How far had <partner> gone in school when {SHE/YOU} got pregnant by {YOU/ HIM}?</partner>					

Frea	equency % of tota	al % of valid	
------	-------------------	---------------	--

Valid	0	had never gone to school	197	2.87%	3.11%
	1	8th grade or less	169	2.46%	2.67%
	2	more than 8th grade, but not a high school graduate	1708	24.91%	26.94%
	3	had gone to buisness, trade or vocational school instead of high school	70	1.02%	1.1%
	4	high school graduate	2255	32.89%	35.57%
	5	completed GED	510	7.44%	8.05%
6		had gone to business, trade, or vocational school after high school	257	3.75%	4.05%
	7	attending college	381	5.56%	6.01%
	8	had gone to college, but not a college graduate	530	7.73%	8.36%
		Total	6,339	92.45%	100%
Missing		missing	43	0.63%	
	96	refused	124	1.81%	
	98	don't know	236	3.44%	
	99	not applicable	115	1.68%	
		Total	518	7.55%	

Valid	Invalid	Minimum	Maximum
6339	518	0	12

🌃 H3PG4 - S22Q4 ANY CONTACT DURING PREGNANCY-W3					
Type Code					
Measurement Unit	numeric				
H3PG4	4. Did {YOU/ <partner>} have any contact with {<partner>/YOU} between the time {YOU/HE} learned {SHE WAS/YOU WERE} pregnant and the time {HER/YOUR} pregnancy ended?</partner></partner>				

			Frequency	% of total	% of valid
Valid	0	no	492	7.18%	7.45%
	1	yes	6110	89.11%	92.55%
		Total	6,602	96.28%	100%
Missing		missing	42	0.61%	
	6	refused	98	1.43%	
	8	don't know	59	0.86%	
	9	not applicable	56	0.82%	
		Total	255	3.72%	

Valid	Invalid	Minimum	Maximum		
6602	255	0	1		
H3PG5	- S22Q5 BIRTH	CONTROL BEFO	RE PREGNANCY-W3		
Туре		Code			
Measurement Unit		numeric	numeric		
H3PG5		5. Before { <partner>/YOU} got pregnant, were you or {SHE/<partner any="" birth="" control="" each="" had="" kind="" of="" other?<="" sex="" td="" using="" when="" with="" you=""></partner></partner>			
		If no skin to	If no, skip to Q8		

			Fre	equency	% of total	% of valid
Valid	0	no		3868	56.41%	58.68%
	1	yes		2724	39.73%	41.32%
		Total		6,592	96.14%	100%
Missing		missing		41	0.6%	
	6	refused		112	1.63%	
	8	don't know		58	0.85%	
	9	not applicable		54	0.79%	
		Total		265	3.86%	

Valid	Invalid	Minimum	Maximum
6592	265	0	1

🌃 H3PG6A - S22Q6A FIRST METHOD OF BIRTH CONTROL-W3					
Type Code					
Measurement Unit numeric					
H3PG6A 6A. What kinds of birth control were you or {SHE/HE} using? You may report as many as three methods. 1st response					

Frequency % of total

% of valid

Valid	1	condoms	1746	25.46%	64.64%
	2	withdrawl	152	2.22%	5.63%
	3	rhythm (safe time) or safe period by the calendar	18	0.26%	0.67%
	4	natural family planning or safe period by temperature (basal body temperature) or cervical mucus test	6	0.09%	0.22%
	5	birth control pills (the pill)	516	7.53%	19.1%
	6	vaginal sponge	6	0.09%	0.22%
	7	spermicidal foam, jelly, creme, suppositories	11	0.16%	0.41%
	8	diaphragm, with or without jelly or cream	1	0.01%	0.04%
	10	female condom	38	0.55%	1.41%
	11	IUD (intrauterine device), coil, loop	8	0.12%	0.3%
	12	the implant of Norplant	7	0.1%	0.26%
	13	ring	2	0.03%	0.07%
	14	the injectable or Depo Provera	60	0.88%	2.22%
	16	female sterilization or tubal ligation	1	0.01%	0.04%
	17	hysterectomy	1	0.01%	0.04%
	18	vasectomy	3	0.04%	0.11%
	19	emergency contraception, such as a high-dose birth controll pills or the morning-after pill	1	0.01%	0.04%
	20	some other method	8	0.12%	0.3%
	21	no other method	116	1.69%	4.29%
		Total	2,701	39.39%	100%
Missing		missing	41	0.6%	
	96	refused	121	1.76%	
	97	legitimate skip	3868	56.41%	
	98	don't know	48	0.7%	
	99	not applicable	78	1.14%	
		Total	4,156	60.61%	

Valid 2701	Invalid 4156	Minimum 1	Maximum 21				
M3PG6B - S22Q6B SECOND METHOD OF BIRTH CONTROL-W3							
Туре Соdе							
Measurement Unit		numeric					

H3PG6B	6B. What kinds of birth control were you or {SHE/HE} using? You may report
	as many as three methods. 2nd response

			Frequency	% of total	% of valid
Valid	1	condoms	1164	16.98%	46.56%
	2	withdrawl	299	4.36%	11.96%
	3	rhythm (safe time) or safe	41	0.6%	1.64%
		period by the calendar			
	4	natural family planning or safe period by temperature (basal body temperature) or cervical mucus test	12	0.18%	0.48%
	5	birth control pills (the pill)	618	9.01%	24.72%
	6	vaginal sponge	4	0.06%	0.16%
	7	spermicidal foam, jelly, creme, suppositories	20	0.29%	0.8%
	9	cervical cap	1	0.01%	0.04%
	10	female condom	30	0.44%	1.2%
	11	IUD (intrauterine device), coil, loop	6	0.09%	0.24%
	12	the implant of Norplant	6	0.09%	0.24%
	13	ring	4	0.06%	0.16%
	14	the injectable or Depo Provera	49	0.71%	1.96%
	15	vaginal contraceptive film or insert	2	0.03%	0.08%
	16	female sterilization or tubal ligation	1	0.01%	0.04%
	18	vasectomy	4	0.06%	0.16%
	19	emergency contraception, such as a high-dose birth controll pills or the morning-after pill	3	0.04%	0.12%
	20	some other method	6	0.09%	0.24%
	21	no other method	230	3.35%	9.2%
		Total	2,500	36.46%	100%
Missing		missing	41	0.6%	
	96	refused	134	1.95%	
	97	legitimate skip	3984	58.1%	
	98	don't know	59	0.86%	
	99	not applicable	139	2.03%	
		Total	4,357	63.54%	

Valid	Invalid	Minimum	Maximum
2500	4357	1	21

⁶ H3PG6C - S22Q6C THIRD METHOD OF BIRTH CONTROL-W3

Туре	Code
Measurement Unit	numeric
H3PG6C	6C. What kinds of birth control were you or {SHE/HE} using? You may report
	as many as three methods. 3rd response

			Frequency	% of total	% of valid
Valid	1	condoms	1008	14.7%	46.62%
	2	withdrawl	195	2.84%	9.02%
	3	rhythm (safe time) or safe period by the calendar	38	0.55%	1.76%
	4	natural family planning or safe period by temperature (basal body temperature) or cervical mucus test	12	0.18%	0.56%
	5	birth control pills (the pill)	484	7.06%	22.39%
	6	vaginal sponge	3	0.04%	0.14%
	7	spermicidal foam, jelly, creme, suppositories	28	0.41%	1.3%
	9	cervical cap	1	0.01%	0.05%
	10	female condom	54	0.79%	2.5%
	11	IUD (intrauterine device), coil, loop	6	0.09%	0.28%
	12	the implant of Norplant	10	0.15%	0.46%
	13	ring	7	0.1%	0.32%
	14	the injectable or Depo Provera	41	0.6%	1.9%
	15	vaginal contraceptive film or insert	4	0.06%	0.19%
	16	female sterilization or tubal ligation	3	0.04%	0.14%
	18	vasectomy	1	0.01%	0.05%
	19	emergency contraception, such as a high-dose birth controll pills or the morning-after pill	2	0.03%	0.09%
	20	some other method	28	0.41%	1.3%
	21	no other method	232	3.38%	10.73%
		Total	2,162	31.53%	100%
Missing		missing	41	0.6%	
	96	refused	150	2.19%	
	97	legitimate skip	4214	61.46%	
	98	don't know	82	1.2%	
	99	not applicable	208	3.03%	

	Total			4,695	68.47
Valid	Invalid	Minimum	Maximum		
2162	4695	1	21		
[™] H3PG7 - Type	S22Q7 BIRTH	CONTR EVERY T	TIME PREV MO	D-W3	
Neasuremer	nt Unit	numeric			
H3PG7 7. In the month befor {THIS/AT LEAST ONE} sexual intercourse?			ST ONE} kind of		

			Frequency	% of total	% of valid
Valid	0	no	1109	16.17%	40.53%
	1	yes	1627	23.73%	59.47%
		Total	2,736	39.9%	100%
Missing		missing	41	0.6%	
	6	refused	110	1.6%	
	7	legitimate skip	3868	56.41%	
	8	don't know	48	0.7%	
	9	not applicable	54	0.79%	
		Total	4,121	60.1%	

Valid	Invalid	Minimum	Maximum
2736	4121	0	1

Mapped - S22Q8 WANT CHILD BEFORE PREGNANCY-W3

Туре	Code
Measurement Unit	numeric
H3PG8	8. Please think back to the time just before { <partner>/YOU} became pregnant. Did you want to have a child then?</partner>
Logic	If yes, skip to Q10

			Frequency	% of total	% of valid
Valid	0	no	4061	59.22%	62.13%
	1	yes	2475	36.09%	37.87%
		Total	6,536	95.32%	100%
Missing		missing	39	0.57%	
	6	refused	108	1.58%	
	8	don't know	120	1.75%	
	9	not applicable	54	0.79%	
		Total	321	4.68%	

Valid	Invalid	Minimum	Maximum
6536	321	0	1
НЗРСЭ	- S22Q9 WANT	CHILD LATER-W	/3
Туре		Code	
Measureme	nt Unit	numeric	
H3PG9		9. Did you wa	ant to have a child
Logic		If no, skip to	Q11

			Frequency	% of total	% of valid
Valid	0	no	1085	15.82%	26.2%
	1	yes	3056	44.57%	73.8%
		Total	4,141	60.39%	100%
Missing	-	missing	38	0.55%	
	6	refused	93	1.36%	
	7	legitimate skip	2475	36.09%	
	8	don't know	68	0.99%	
	9	not applicable	42	0.61%	
		Total	2,716	39.61%	

Valid	Invalid	Minimum	Maximum
4141	2716	0	1

M3PG10 - S22Q10 WANT TO BE YOUR CHILD'S PARENT-W3

Туре	Code
Measurement Unit	numeric
H3PG10	10. Did you want <partner> to be your child Is {MOTHER/FATHER}?</partner>
Logic	If the respondent is male and Q4=1, or if the respondent is female, ask Q11 to Q18

			Frequency	% of total	% of valid
	0	no	1031	15.04%	19.24%
	1	yes	4328	63.12%	80.76%
		Total	5,359	78.15%	100%
		missing	38	0.55%	
	6	refused	9	0.13%	
	7	legitimate skip	1286	18.75%	
	8	don't know	155	2.26%	
	9	not applicable	10	0.15%	
		Total	1,498	21.85%	

Valid

Invalid

Minimum

Maximum

5359	1498	0	1			
⁴ H3PG11 - S	22Q11 DR OR I	NURSE FOR PRE	ENATAL CARE-\	V3		
Туре		Code				
Measurement U	nit	numeric				
H3PG11		11. While { <partner> WAS/YOU WERE} pregnant, did {SHE/YOU} visit a doctor or nurse-midwife for prenatal care or pregnancy check-ups?</partner>				
Logic		If no, skip to Q1	8			

			Frequency	% of total	% of valid
Valid	0	no	1202	17.53%	18.7%
	1	yes	5225	76.2%	81.3%
		Total	6,427	93.73%	100%
Missing		missing	56	0.82%	
	6	refused	98	1.43%	
	7	legitimate skip	161	2.35%	
	8	don't know	61	0.89%	
	9	not applicable	54	0.79%	
		Total	430	6.27%	

Valid	Invalid	Minimum	Maximum
6427	430	0	1

✤ H3PG12 - S22Q12 PARTNER WENT WITH YOU CHECKUPS-W3

Туре	Code
Measurement Unit	numeric
H3PG12	12. Did {YOU/HE} go along with {HER/YOU} for any of these check-ups?
Logic	If the respondent is female, ask Q13 to Q15

			Frequency	% of total	% of valid
Valid	0	no	1318	19.22%	25.08%
	1	yes	3937	57.42%	74.92%
		Total	5,255	76.64%	100%
Missing		missing	57	0.83%	
	6	refused	96	1.4%	
	7	legitimate skip	1363	19.88%	
	8	don't know	36	0.53%	
	9	not applicable	50	0.73%	
		Total	1,602	23.36%	

Valid	Invalid	Minimum	Maximum
5255	1602	0	1

⁶ H3PG13 - S22Q13 MONTH FIRST SEE DR OR NURSE-W3

Туре	Code
Measurement Unit	numeric
H3PG13	13. In which month of the pregnancy did you first see a doctor or nurse-mid wife?

			Frequency	% of total	% of valid
Valid	0	before the first month*	36	0.53%	1.01%
	1	first month	1296	18.9%	36.35%
	2	second month	1008	14.7%	28.27%
	3	third month	622	9.07%	17.45%
	4	fourth month	237	3.46%	6.65%
	5	fifth month	138	2.01%	3.87%
	6	sixth month	96	1.4%	2.69%
	7	seventh month	50	0.73%	1.4%
	8	eighth month	28	0.41%	0.79%
	9	ninth month	54	0.79%	1.51%
		Total	3,565	51.99%	100%
Missing		missing	33	0.48%	
	96	refused	58	0.85%	
	97	legitimate skip	3118	45.47%	
	98	don't know	55	0.8%	
	99	not applicable	28	0.41%	
		Total	3,292	48.01%	

Valid	Invalid	Minimum	Maximum
3565	3292	0	9

🌃 H3PG14 - S22Q14 # PRENATAL VISITS FIRST 6 MOS-W3

Туре	Numeric (Double)
H3PG14	 14. [If Q2 < or equal to 24:] How many prenatal-care visits did you have with a doctor or nurse-mid wife? [If Q2 > 24:] During the first six months of this pregnancy, how many prenatal-care visits did you have with a doctor or nurse-mid wife?
Logic	If Q2 > 24, ask Q15

			Frequency	% of total	% of valid
Missing		missing	32	0.47%	
	96	refused	63	0.92%	
	97	legitimate skip	3118	45.47%	
	98	don't know	156	2.28%	
	99	not applicable	30	0.44%	

	Total			3,399	49.57%	
Valid	Invalid	Minimum	Maximum	Mea	n	StdDev
3458	3399	1	90	7.01	64835	6.2266529
🄏 H3PG15 -	S22Q15 # PR	ENATAL VISITS .	AFTER 6 MOS-	W3		
Туре		Numeric (Do	Numeric (Double)			
H3PG15		15. After the with a doctor			y prenatal-o	ar e visits did you

			Frequency	% of total	% of valid
Missing		missing	61	0.89%	
	96	refused	7	0.1%	
	97	legitimate skip	4306	62.8%	
	98	don't know	110	1.6%	
	99	not applicable	11	0.16%	
		Total	4,495	65.55%	

Valid	Invalid	Minimum	Maximum	Mean	StdDev
2362	4495	0	70	8.8518204	5.8858309

SH3PG16 - S22Q16 PLACE OF PRENATAL CARE-W3

Туре	Code
Measurement Unit	numeric
H3PG16	16. Where did {SHE/YOU} go for most of {HER/YOUR} prenatal care?

			Frequency	% of total	% of valid
Valid	1	private doctor's office	3074	44.83%	59.09%
	2	nurse-midwife's office	329	4.8%	6.32%
	3	county or city health department	172	2.51%	3.31%
	4	community health center	413	6.02%	7.94%
	5	HMO (health maintenance organization)	255	3.72%	4.9%
	6	clinic at work or at school	35	0.51%	0.67%
	7	clinic in a hospital	717	10.46%	13.78%
	8	emergency room in a hospital	22	0.32%	0.42%
	9	birthing center	104	1.52%	2%
	10	another sort of place	81	1.18%	1.56%
		Total	5,202	75.86%	100%

Missing		missing	52	0.76%	
	96	refused	92	1.34%	
	97	legitimate skip	1363	19.88%	
	98	don't know	84	1.23%	
	99	not applicable	64	0.93%	
		Total	1,655	24.14%	

Valid	Invalid	Minimum	Maximum
5202	1655	1	10

🌃 H3PG17A - S22Q17A YOU/PARTNER PAID PRENAT CARE-W3

Туре	Code
Measurement Unit	numeric
H3PG17A	17A. [If MAX=1:] How was <partner>2s/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>2s/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. your or <partner>2s income or savings</partner></partner></cpeyr></cpemtht></partner>

			Frequency	% of total	% of valid
Valid	0	not marked	4242	61.86%	80.14%
	1	marked	1051	15.33%	19.86%
		Total	5,293	77.19%	100%
Missing		missing	56	0.82%	
	6	refused	79	1.15%	
	7	legitimate skip	1363	19.88%	
	8	don't know	37	0.54%	
	9	not applicable	29	0.42%	
		Total	1,564	22.81%	

Valid	Invalid	Minimum	Maximum
5293	1564	0	1

M3PG17B - S22Q17B PARENTS PAID PRENAT CARE-W3

Туре	Code
Measurement Unit	numeric
H3PG17B	17B. [If MAX=1:] How was <partner>Is/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>Is/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. your or <partner>Is parents or other relatives</partner></partner></cpeyr></cpemtht></partner>

Frequency % of total % of valid

Valid	0	not marked	4799	69.99%	90.33%
	1	marked	514	7.5%	9.67%
		Total	5,313	77.48%	100%
Missing	-	missing	56	0.82%	
	6	refused	67	0.98%	
	7	legitimate skip	1363	19.88%	
	8	don't know	32	0.47%	
	9	not applicable	26	0.38%	
		Total	1,544	22.52%	

Valid	Invalid	Minimum	Maximum
5313	1544	0	1

M3PG17C - S22Q17C PRIVATE INSUR PD PRENAT CARE-W3

Туре	Code
Measurement Unit	numeric
H3PG17C	17C. [If MAX=1:] How was <partner>2s/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>2s/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. private insurance</partner></cpeyr></cpemtht></partner>

			Frequency	% of total	% of valid
Valid	0	not marked	3834	55.91%	72.15%
	1	marked	1480	21.58%	27.85%
		Total	5,314	77.5%	100%
Missing		missing	56	0.82%	
	6	refused	68	0.99%	
	7	legitimate skip	1363	19.88%	
	8	don't know	30	0.44%	
	9	not applicable	26	0.38%	
		Total	1,543	22.5%	

Valid	Invalid	Minimum	Maximum
5314	1543	0	1

餐 H3PG17D - S22Q17D MEDICAID PAID PRENATAL CARE-W3

Туре	Code
Measurement Unit	numeric

H3PG17D	17D. [If MAX=1:] How was <partner>@s/YOUR} prenatal care paid for? [If</partner>
	MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was</cpeyr></cpemtht>
	{ <partner>Is/YOUR} prenatal care paid for? Mark all the kinds of payments</partner>
	that apply.
	Medicaid

			Frequency	% of total	% of valid
Valid	0	not marked	2860	41.71%	53.81%
	1	marked	2455	35.8%	46.19%
		Total	5,315	77.51%	100%
Missing		missing	56	0.82%	
	6	refused	68	0.99%	
	7	legitimate skip	1363	19.88%	
	8	don't know	31	0.45%	
	9	not applicable	24	0.35%	
		Total	1,542	22.49%	

5315 1542 0	1

⅔ H3PG17E - S22Q17E GOVT ASSIST PD PRENATAL CARE-W3

Туре	Code
Measurement Unit	numeric
H3PG17E	17E. [If MAX=1:] How was <partner>Is/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>Is/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. government assistance other than Medicaid (state or local)</partner></cpeyr></cpemtht></partner>

			Frequency	% of total	% of valid
Valid	0	not marked	4742	69.16%	89.17%
	1	marked	576	8.4%	10.83%
		Total	5,318	77.56%	100%
Missing		missing	56	0.82%	
	6	refused	63	0.92%	
	7	legitimate skip	1363	19.88%	
	8	don't know	30	0.44%	
	9	not applicable	27	0.39%	
		Total	1,539	22.44%	

Valid	Invalid	Minimum	Maximum
5318	1539	0	1

Туре	Code
Measurement Unit	numeric
H3PG17F	17F. [If MAX=1:] How was <partner>Is/YOUR} prenatal care paid for? [If MAX > 1:] For the pregnancy that ended in <cpemtht> of <cpeyr>, how was {<partner>Is/YOUR} prenatal care paid for? Mark all the kinds of payments that apply. some other source of money</partner></cpeyr></cpemtht></partner>

H3PG17F - S22Q17F OTHER SOURCE PD PRENATAL CARE-W3

			Frequency	% of total	% of valid
Valid	0	not marked	5116	74.61%	96.2%
	1	marked	202	2.95%	3.8%
		Total	5,318	77.56%	100%
Missing	-	missing	56	0.82%	
	6	refused	63	0.92%	
	7	legitimate skip	1363	19.88%	
	8	don't know	31	0.45%	
	9	not applicable	26	0.38%	
		Total	1,539	22.44%	

Valid	Invalid	Minimum	Maximum
5318	1539	0	1

🋠 H3PG18 - S22Q18 PREG: HOW OFTEN DRANK ALCOHOL-W3				
Type Code				
Measurement Unit	numeric			
H3PG18	18. During th is pregnancy, how often did {SHE/YOU} drink alcoholic beverages?			

			Frequency	% of total	% of valid
Valid	0	never	5891	85.91%	90.95%
	1	less than once a month	370	5.4%	5.71%
	2	several times a month	145	2.11%	2.24%
	3	several times a week	56	0.82%	0.86%
	4	almost every day	15	0.22%	0.23%
		Total	6,477	94.46%	100%
Missing	-	missing	44	0.64%	
	6	refused	77	1.12%	
	7	legitimate skip	161	2.35%	
	8	don't know	50	0.73%	
	9	not applicable	48	0.7%	

	Total			380	5.54%
Valid	Invalid	Minimum	Maximum		
6477	380	0	4		
🎋 H3PG19	- S22Q19 PREC	G: HOW OFTEN	USED DRUGS	-W3	
Туре		Code			
Measurement Unit numeric					
H3PG19		19. How ofte heroin?	n did {SHE/YOU	} use drugs	such as ma

			Frequency	% of total	% of valid
Valid	0	never	6075	88.6%	93.82%
	1	less than once a month	203	2.96%	3.14%
	2	several times a month	110	1.6%	1.7%
	3	several times a week	36	0.53%	0.56%
	4	almost every day	51	0.74%	0.79%
		Total	6,475	94.43%	100%
Missing		missing	40	0.58%	
	6	refused	84	1.23%	
	7	legitimate skip	161	2.35%	
	8	don't know	48	0.7%	
	9	not applicable	49	0.71%	
		Total	382	5.57%	

Valid	Invalid	Minimum	Maximum
6475	382	0	4

STATES SMOKE-W3

Туре	Code
Measurement Unit	numeric
H3PG20	20. How many cigarettes did {SHE/YOU} smoke?
Logic	If CPOUTC = L or D (i.e., the pregnancy ended in a live birth), ask Q21 to Q24

			Frequency	% of total	% of valid
Valid	0	none	5099	74.36%	78.55%
	1	1 pack a day or less	1289	18.8%	19.86%
	2	more than 1 pack a day, but less than 2 packs a day	87	1.27%	1.34%
	3	2 or more packs a day	16	0.23%	0.25%
		Total	6,491	94.66%	100%

Missing		missing	30	0.44%	
	6	refused	87	1.27%	
	7	legitimate skip	161	2.35%	
	8	don't know	42	0.61%	
	9	not applicable	46	0.67%	
		Total	366	5.34%	

Valid	Invalid	Minimum	Maximum
6491	366	0	3

🌃 H3PG21A - S22Q21A YOU/PARTNER PAID HOSP CARE-W3

Туре	Code
Measurement Unit	numeric
H3PG21A	21A. [If MAX = 1:] How were <partner>2s/YOUR} delivery and hospital stay paid for? [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>2s/YOUR} delivery and hospital stay paid for? Mark all the kinds of payments that apply.</partner></cpeyr></cpemtht></partner>
	your or <partner>'s income or savings</partner>

			Frequency	% of total	% of valid
	0	not marked	3625	52.87%	86.06%
	1	marked	587	8.56%	13.94%
		Total	4,212	61.43%	100%
Missing		missing	29	0.42%	
	6	refused	57	0.83%	
	7	legitimate skip	2516	36.69%	
	8	don't know	20	0.29%	
	9	not applicable	23	0.34%	
		Total	2,645	38.57%	

Valid	Invalid	Minimum	Maximum
4212	2645	0	1

H3PG21B - S22Q21E	🆇 H3PG21B - S22Q21B PARENTS PAID HOSP CARE-W3				
Туре	Code				
Measurement Unit	numeric				
H3PG21B	21B. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for?</partner>				
	[If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for?</partner></cpeyr></cpemtht>				
	Mark all the kinds of payments that apply.				
	your or <partner>Is parents or other relatives</partner>				

			Frequency	% of total	% of valid
Valid	0	not marked	3922	57.2%	92.74%
	1	marked	307	4.48%	7.26%
		Total	4,229	61.67%	100%
Missing		missing	29	0.42%	
	6	refused	45	0.66%	
	7	legitimate skip	2516	36.69%	
	8	don't know	17	0.25%	
	9	not applicable	21	0.31%	
		Total	2,628	38.33%	

Valid	Invalid	Minimum	Maximum
4229	2628	0	1

⅔ H3PG21C - S22Q21C PRIVATE INSUR PAID HOSP CARE-W3

Туре	Code
Measurement Unit	numeric
H3PG21C	21C. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for? [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for? Mark all the kinds of payments that apply. private insurance</partner></cpeyr></cpemtht></partner>

			Frequency	% of total	% of valid
Valid	0	not marked	3027	44.14%	71.54%
	1	marked	1204	17.56%	28.46%
		Total	4,231	61.7%	100%
Missing .		missing	29	0.42%	
	6	refused	42	0.61%	
	7	legitimate skip	2516	36.69%	
	8	don't know	19	0.28%	
	9	not applicable	20	0.29%	
		Total	2,626	38.3%	

Valid	Invalid	Minimum	Maximum			
4231	2626	0	1			
% H3PG21D - S22Q21D MEDICAID PAID HOSPITAL CARE-W3						
Type Code						
Measurement Unit		numeric				

H3PG21D	21D. [If MAX = 1:] How were <partner>2s/YOUR} delivery and hospital stay paid for?</partner>
	[If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>^Ds/YOUR} delivery and hospital stay paid for?</partner></cpeyr></cpemtht>
	Mark all the kinds of payments that apply. Medicaid

			Frequency	% of total	% of valid
Valid	0	not marked	2074	30.25%	49.01%
	1	marked	2158	31.47%	50.99%
		Total	4,232	61.72%	100%
Missing	•	missing	29	0.42%	
	6	refused	46	0.67%	
	7	legitimate skip	2516	36.69%	
	8	don't know	16	0.23%	
	9	not applicable	18	0.26%	
		Total	2,625	38.28%	

Valid	Invalid	Minimum	Maximum
4232	2625	0	1

H3PG21E - S22Q21E GOVT ASSIST PD HOSPITAL CARE-W3

Туре	Code
Measurement Unit	numeric
H3PG21E	21E. [If MAX = 1:] How were <partner>Is/YOUR} delivery and hospital stay paid for? [If MAX > 1:] For the p regn ancy th at end ed in <cpemtht> of <cpeyr>, how were {<partner>Is/YOUR} delivery and hospital stay paid for? Mark all the kinds of payments that apply. government assistance other than Medicaid (state or local)</partner></cpeyr></cpemtht></partner>

				Frequency	% of total	% of valid
0	not ma	not marked			54.63%	88.62%
1	marked	1		481	7.01%	11.38%
Total				4,227	61.65%	100%
Missing . 6		missing		29	0.42%	
		refused		46	0.67%	
7	legitima	legitimate skip		2516	36.69%	
8	don't k	on't know		18	0.26%	
9	not app	olicable		21	0.31%	
	Total	Total			38.35%	
	Invalid	Minimum	Maximu	m		
	1 6 7 8	1marked1TotalTotalTotal.missing6refused7legitima8don't k9not app	1marked1Total.missing6refused7legitimate skip8don't know9not applicableTotal	1 marked Total Total . missing 6 refused 7 legitimate skip 8 don't know 9 not applicable Total	0not marked37461marked4811Total4,227.missing296refused467legitimate skip25168don't know189not applicable21Total2,630	0 not marked 3746 54.63% 1 marked 481 7.01% Total 4,227 61.65% . missing 29 0.42% 6 refused 46 0.67% 7 legitimate skip 2516 36.69% 8 don't know 18 0.26% 9 not applicable 21 0.31%

4227	2630	0	1						
🌯 H3PG21F	🎋 H3PG21F - S22Q21F OTHER SOURCE PD HOSPITAL CARE-W3								
Туре		Code							
Measurement	Unit	numeric							
H3PG21F		21F. [If MAX = 1 paid for?	1:] How were <paf< th=""><th>RTNER>Is/YOUR} delivery and hospital stay</th></paf<>	RTNER>Is/YOUR} delivery and hospital stay					
			1 0 1	th at end ed in <cpemtht> of <cpeyr>, how ery and hospital stay paid for?</cpeyr></cpemtht>					
		Mark all the kinds of payments that apply. some other source of money							

			Frequency	% of total	% of valid
Valid	0	not marked	4121	60.1%	97.47%
	1	marked	107	1.56%	2.53%
		Total	4,228	61.66%	100%
Missing	-	missing	29	0.42%	
	6	refused	46	0.67%	
	7	legitimate skip	2516	36.69%	
	8	don't know	19	0.28%	
	9	not applicable	19	0.28%	
		Total	2,629	38.34%	

Valid	Invalid	Minimum	Maximum
4228	2629	0	1

⁶ H3PG22 - S22Q22 MARRIED AT TIME OF BIRTH-W3

Туре	Code
Measurement Unit	numeric
H3PG22	22. Were you and <partner> married to each other at the time of this birth?</partner>

			Frequency	% of total	% of valid
Valid	0	no	2798	40.81%	66.27%
	1	yes	1424	20.77%	33.73%
		Total	4,222	61.57%	100%
Missing		missing	31	0.45%	
	6	refused	48	0.7%	
	7	legitimate skip	2516	36.69%	
	8	don't know	12	0.18%	
	9	not applicable	28	0.41%	
		Total	2,635	38.43%	

Valid

Minimum

Invalid

Maximum

4222	2635	0	1				
🍄 H3PG23 - S22Q23 LIVING TOGETHER TIME OF BIRTH-W3							
Type Code							
Measurement L	Init	numeric					
H3PG23		23. Were you and <partner> living together at th at time?</partner>					
Logic		If Q22=0 and Q2	23=0, ask Q24				

			Frequency	% of total	% of valid
Valid	0	no	1547	22.56%	36.63%
	1	yes	2676	39.03%	63.37%
		Total	4,223	61.59%	100%
Missing		missing	29	0.42%	
	6	refused	46	0.67%	
	7	legitimate skip	2516	36.69%	
	8	don't know	16	0.23%	
	9	not applicable	27	0.39%	
		Total	2,634	38.41%	

Valid	Invalid	Minimum	Maximum
4223	2634	0	1

🌃 H3PG24 - S22Q24 RELATIONSHIP AT TIME OF BIRTH-W3				
Type Code				
Measurement Unit	numeric			
H3PG24	24. Which of the following statements best describes your relationship with <partner> at the time of this birth?</partner>			

			Frequency	% of total	% of valid
Valid	1	We did not see or talk to each other	230	3.35%	15.91%
	2	We hardly ever saw or talked to each other	174	2.54%	12.03%
	3	We were just friends	132	1.93%	9.13%
	4	We were involved in an on- again, off-again relationship	284	4.14%	19.64%
	5	We were romantically involved on a steady basis	626	9.13%	43.29%
		Total	1,446	21.09%	100%

Missing		missing	29	0.42%	
	6	refused	14	0.2%	
	7	legitimate skip	5350	78.02%	
	8	don't know	10	0.15%	
	9	not applicable	8	0.12%	
		Total	5,411	78.91%	

Valid	Invalid	Minimum	Maximum
1446	5411	1	5