No. 19

WFS Modules: Abortion . Factors other than Contraception Affecting Fertility . Family Planning · General Mortality

AUGUST 1977

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The World Fertility Survey is an international research programme whose purpose is to assess the current state of human fertility throughout the world. This is being done principally through promoting and supporting nationally representative, internationally comparable, and scientifically designed and conducted sample surveys of fertility behaviour in as many countries as possible.

The WFS is being undertaken, with the collaboration of the United Nations, by the International Statistical Institute in cooperation with the International Union for the Scientific Study of Population. Financial support is provided principally by the United Nations Fund for Population Activities and the United States Agency for International Development.

This publication is part of the WFS Publications Programme which includes the WFS Basic Documentation, Occasional Papers and auxiliary publications. For further information on the WFS, write to the Information Office, International Statistical Institute, 428 Prinses Beatrixlaan, Voorburg, The Hague, Netherlands.

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WFS Modules: Abortion • Factors other than Contraception Affecting Fertility • Family Planning • General Mortality

Prepared by: WFS CENTRAL STAFF International Statistical Institute 35-37 Grosvenor Gardens London SW1W OBS, U.K. The WFS Core Questionnaire for individual women which has been developed for the World Fertility Survey is just that: a core. It represents the minimum amount of information that a country might be expected to seek from its population of ever-married women of childbearing age. Most countries will wish to study certain topics in greater depth. To assist them in so doing, the WFS has prepared supplementary material, known as *modules*, which can be incorporated into the questionnaire. The modules deal with two kinds of variables: those which affect fertility directly, and those explanatory of fertility.

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Abortion Module

1. INTRODUCTION

The Abortion Module, which consists of questions to be appended to Section 2 (Maternity History) and Section 3 (Contraceptive Knowledge and Use) of the WFS Core Questionnaire, recommends ways to obtain factual and attitudinal data on induced abortion.

There is no doubt about the important role which induced abortion can play in the determination of the level of fertility, not only theoretically, but also in practice, e.g. Japan, South Korea, Hungary, and several Latin American countries. Nonetheless, its satisfactory measurement is very difficult to achieve. Even in countries where abortions can be performed legally, official statistics give very unreliable estimates: Japan, for instance. It is still more difficult in those countries where induced abortion is illegal and, at least in theory, subject to penalty. In most countries strong social sanctions exist against induced abortion, and deter women from openly admitting their resort to it.

The validity of survey results on induced abortion can seldom be established because rarely do reliable records exist with which to compare them. In the rare cases where some kind of comparison was possible, survey results invariably proved to be deficient.

In the Hungarian National Fertility Survey of 1960–65, it was found that only 50–60 per cent of known abortions (compared with official registration data) were reported by the women surveyed. It was also found that older women were more reluctant to report their abortion experience than younger women, and rural women more reluctant than urban women.

In Taiwan one half of a sample of 2,200 women was asked directly whether they had ever had an induced abortion; the Randomized Response Technique (RRT) was administered to the other half. Among the group directly questioned 12.7 per cent admitted experience with abortion, whereas for those interviewed by RRT the corresponding estimate was 28.2 per cent: or more than twice as high. However, when RRT was administered to a small group of women known to have had abortions, the estimated proportion with abortion experience was only 40 per cent, implying a considerable amount of under-reporting even with RRT.³ Thus, even with a technique which had recently given rise to hopes for obtaining reliable data on induced abortion, satisfactory results cannot be guaranteed.⁴

It may be asked why questions on induced abortion should be recommended for inclusion in

- 1 Emily Campbell Moore-Cavar, *International Inventory of Information on Induced Abortion*, Division of Social and Administrative Sciences, International Institute for the Study of Human Reproduction, Colombia University.
- 2 For a brief description of RRT see Christopher Tietze and Deborah A. Dawson: 'Induced Abortion: A Factbook', *Reports on Population/Family Planning No. 14*, p. 4, December 1973.
- 3 Christopher Tietze and Deborah A. Dawson, op. cit., p. 4.
- 4 For further information on the randomized response technique see Karol J. Krotki and Bonnie Fox, 'The Randomized Response Technique, the Interview, and the Self-administered Questionnaire: An Empirical Comparison of Fertility Reports', University of Alberta, August 1974.

Bernard G. Greenberg, Roy R. Kuebler J1., James R. Abernathy, and Daniel G. Horvitz, 'Application of the Randomized Response Technique in Obtaining Quantitative Data', *Journal of the American Statistical Association*, 66 (334), June 1971, pp. 243–350.

the WFS surveys if the results of earlier surveys have not been satisfactory. Several reasons are offered:

- 1) It is safe to assume that abortion, though likely to be under-reported in varying degrees, will never be over-reported. Thus, whatever te figure on abortion obtained, it can be taken as the minimum.
- 2) Induced abortion, by its nature has a direct effect on fertility. Thus, to ignore it, even if the figure obtained be an underestimate, is to ignore an important determinant of fertility. The consequence of ignoring such a factor is more serious the more prevalent abortion is in a given country.

Suppose, for example, a survey indicates 20 induced abortions per 100 pregnancies, while the real figure is 35. Ignoring induced abortion would have resulted in omitting one of the factors which explain why the level of fertility is not, say, 20 per cent higher. Even if this figure on abortion (20) is not the right one, we see thus that it is nonetheless a very important figure without which fertility could not satisfactorily be analyzed.

Given the results from surveys in various places, it is clear that to have omitted questions on abortion in Greece, Greater Urban Santiago and South Korea would have been a serious mistake, even if we concede that these figures probably underestimate the true figures.⁵

Area	Survey year	Per cent women who have had 1 or more induced abortions in their lifetime	Study population
Greece : rural areas, Athens and Salonika	1962–63	8.5	3,838 women of 20–50 years
Greece	1966–67	34.9	6,502 married women of 20–49 years.
Brazil: Rio de Janeiro	1963	9.2	1,734 married women of 20–50 years.
Chile: Greater Urban Santiago	1962	26.2	1,890 women of 20–40 years
Mexico: Federal District		4.5	1,343 ever- pregnant women of 15-49 years
South Korea	1971	26.0	5,660 women of 15-49 years

5 Emily Campbell Moore-Cavar: op. cit.; and *Report on 1971 Fertility-Abortion Survey*, Korean Institute for Family Planning, 1973.

3) Even if the true incidence of induced abortion is underestimated, the observed patterns of differential resort to abortion by key demographic and social and economic characteristics of the women involved are remarkably consistent with theoretical expectations and, if interpreted cautiously (taking into account especially the probability of differential under-reporting), can yield insights into its role in accounting for their fertility differences.⁶ The accumulation of insights from a variety of social and cultural settings would go a long way towards improving our theoretical formulations about abortion behaviour, even as it would presumably improve a given country's understanding of the abortion phenomenon among her own people.

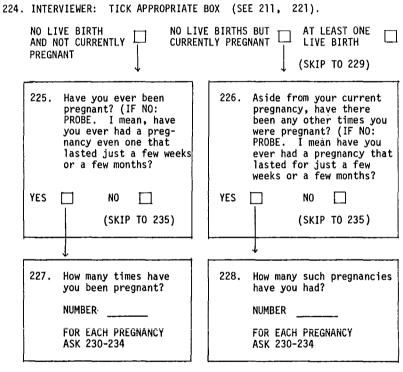
Apart from the problem of deliberate under-reporting, induced abortions – and more generally foetal losses of all types – are subject to under-reporting due to such other problems as recall lapses. When dealing with the **number** of induced abortions, it is thus advisable to focus on events of recent years and to be cautious about figures obtained from older women in particular.

2. QUESTIONS TO BE APPENDED TO SECTION 2

The basic scheme of the module is to expand Section 2 (Maternity History) of the WFS Core Questionnaire (for countries of high fertility and low contraceptive usage) to include a series of probes that assist the respondent in recalling pregnancies that did not yield live births, followed by a question that asks about the manner in which each such pregnancy was terminated. Questions 224–234 presented below on pages 8 and 9 would replace Questions 224–233 of the WFS Core Questionnaire.

See a sophisticated treatment of this topic in Helen P. C. Koo, 'Use of Induced Abortion and Contraception in Taiwan: A Multivariate Analysis', a Dissertation for the Ph.D. Degree Department of Population Planning, School of Public Health, University of Michigan, 1973.

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IF ANY YESES TO 232, ADJUST 211.

ASK 229 FOR EACH INTER VAL (BEFORE FIRST LIVE BIRTH, BETWEEN SUCCES- SIVE LIVE BIRTHS, AND BETWEEN LAST LIVE BIRTH AND DATE OF IN- TERVIEN OR CURRENT				OTHER	PREGNANCIES		
ANSWERS	CY) AND NOTE FOR EACH IN- IN CORRES- LINE	1F AN			NUMBER OF THE INTER Each pregnancy star		
229. Before your first (between your first & second, etc.) child were there any times you were pregnant, even if only for a few weeks or months? How many such pregnancies were there in that		NUMBER OF INTER- VAL TO WHICH PREG- NANCY BELONGS	230. In what month and year did your (first, second such) pregnancy end?		232. IF 7 MOWTHS OR MORE IN 231: Did that baby show any sign of life after it was born?	233. IF YES TO 232: Was the baby a boy or a girl?	234: IF LESS THAN 7 TO 231: Did you, or a doctor or some- one else do anything to end that pregnancy early?
INTER-	terval?	(1)	(2)	(3)	(4)	(5)	(6)
VAL NO.	Before 1st Child No		NONTH	HONTHS	YES []	80Y	YES
2	Between 1st and		D.K. 🗆	IF 7 OR HORE	YES	GIRL	4
	No		HONTH	MONTHS			XCC 🗖
3	Between 2nd and No		YEAR	IF LESS THAN 7	YES	BOY GIRL	YES
4	Between 3rd and No		HONTH	MONTHS			YES
5	Between 4th		D.K. 🗋	IF 7 OR HORE	NO	GIRL	
	and No Between 5th		HONTH	MONTHS IF less than 7 🗍	YES		YES []]
6	and No		D.K.	IF 7 OR HORE	1		NO []
7	Between 6th and No		MONTH	MONTHS	YES	воу []	YES []
8	Between 7th and		D.K.	IF 7 OR MORE		GIRL	KO []
Ļ	Ho		MONTH	MONTHS]	YES
	Between 8th and No		YEAR		YES	80Y GIRL	NO []
10	Between 9th and No		HONTH	HONTHS	YES	80Y	YES []]
. .	Between 10th		D.K.	1F 7 OR MORE	HO □ ↓J	GIRL	NO []
11	and No		MONTH	MONTHS			YES []
12	Between 11th and No		YEAR	IF LESS THAN 7	YES	BOY GIRL	YES

3. QUESTIONS TO BE APPENDED TO SECTION 3

The following questions, A through E, are recommended (1) to probe once more in another context whether the respondent ever resorted to induced abortion, how often, and when; and (2) to measure the 'attitude climate' with regard to induced abortion. Both sets of questions, A–D and E, are best asked at the end of Section 3 (Contraceptive Knowledge and Use) of the Core Questionnaire, after Question 317. Placed there, they should facilitate discussion about induced abortion as a natural extension of earlier discussion about contraception. The attitude items in E would probably form a scale. The variations in attitude climate both within and between countries, measured by these items, could be analyzed in relation to the incidence of induced abortion.

A. Some women do something or have something done, either by a midwife or a doctor or some other way, to end a pregnancy that they do not want. They have an abortion. Has this ever been the case with you?

YES \Box NO $\Box \leftarrow$ SKIP TO Q.E

VERIFY ANSWERS WITH INFORMATION OBTAINED IN THE LIST OF OTHER PREGNANCIES.

- B. (IF YES TO Q.A): How many times? —
- C. In what month and year did the first (second, etc.) such pregnancy end?

IF DATE NOT KNOWN, ASK FOR INTERVAL IN WHICH THE ABORTION OCCURRED.

	Month	Year	Interval	
1st pregnancy				
2nd pregnancy		Second de Million annue de La de		
Etc.				

D. Has there been any other pregnancy which was brought to an end because you did not want it?

Yes		NO	
	↓		Ļ
(COR	RECT B AND ASK C)	(Skip	TO Q.E)

E. Assuming it were legal, would you approve or disapprove of women having an abortion by a doctor:

		Approve	Disapprove
1.	If the pregnancy is dangerous to her life?	1	2
2.	If the pregnancy is dangerous to her health?	1	2
3.	If the women has been raped?	1	2
4.	If there is good reason to believe that the child might	1	2
	be deformed or mentally defective?		
5.	If the women is not married?	1	2
6.	If the couple cannot afford another child?	1	2
7.	If the women wants the abortion for any reason?	1	2

4. NOTE ON INSTRUCTIONS TO INTERVIEWERS

Some details about the way to record the pregnancies in the list of other pregnancies should go into the interviewer's manual. Women will have a very different number of live births, and therefore the last interval will start with births of different order and can either be determined by the current pregnancy of the woman or by the date of interview.

The determination of the interval is up to the interviewer. Only the first interval can be specified directly (it necessarily is before the first live birth, because all women who are asked Question 229 have had at least one live birth) and for subsequent intervals the specification has to be done by the interviewers. For whatever interval after the first the possible specifications are as follows:

Between x and x + 1Between x and date of interview Between x and current pregnancy

Thus the interviwer should specify the number of the higher order live birth which determines the interval or write either 'Interv.' (for date of interview), or 'Preg.' (for current pregnancy).

Example:

Between 2nd and 3rd

Between 2nd and interv.

Between 2nd and preg.

The number of pregnancies in each interval should be specified in the line reserved for that. No. x

As an additional check on the interval to which the pregnancies belong, the number of the interval specified under Question 229 should be written in the box in Column 1 for each pregnancy pertaining to that interval.

For the women with no live births (see 224) all other pregnancies should be classified as having occurred in the first interval, in Column 1 of the list of other pregnancies.

Module on Factors other than Contraception Affecting Fertility

1 INTRODUCTION

It is generally recognized that certain biosocial variables such as breast-feeding duration, post-partum amenorrhoea, post-partum abstinence from sexual relations, etc., can lengthen the interval between successive pregnancies. It is also known that customs regarding these variables may still be operating in many societies where modern contraceptive practices are not generally utilized. The problem is to obtain reliable data on these processes of sub-fecundity. The purpose of this module is to measure the effects of some of these biosocial variables in order to assess their impact on fertility.

The introduction to the module is divided into five sections. In the first section a description is provided of the variables which are included in the module, along with some indication of those variables which can be considered optional in contradistinction to those which are of primary importance. A discussion is included of the relative importance of the variables so that countries wishing to adopt the module will have a guide as to which portions or questions within the module are optional.

The second section contains a short description of the format of the module along with suggestions for integration of the module into the Core Questionnaire; the third and fourth sections contain interviewers' instructions for the module; and the last one contains notes for interviewers' training and a protocol for taking heights and weights.

1.1 VARIABLES INCLUDED IN THE MODULE

The process of fertility can be visualized in terms of three events¹: 1) sexual intercourse, 2) conception, and 3) parturition. Variables included in this module mitigate the occurrence of these three events and can be grouped accordingly as follows.

1.1.1 Factors which mitigate exposure to sexual intercourse

A. Separation of the partners

It is desirable to adjust pregnancy intervals for periods of temporary separation of the partners, especially in countries where prolonged male emigration related to employment is common. The questions will provide information on the duration(s) of temporary separation(s) for the last (open) and penultimate (closed) pregnancy intervals. The minimum period for any absence is three months. It is recognized that information on temporary absences may

 See K. Davis and J. B. Davis, 'Social Structure and Fertility: An Analysis Framework', *Economic Development and Cultural Change* Vol. 4, 1956, pp. 211–235; and R. Freedman, 'Applications of the Behavioural Sciences to Family Planning Programs', *Studies in Family Planning*, No. 23, The Population Council, October 1967, pp. 5–9.
 be unreliable due to recall lapse and to infidelity when the partner is absent; however, the information obtained can be a measure of a variable which can have a significant effect on a woman's fertility.

B. Coital frequency

Specific questions on coital frequency have been included for currently married women. The time reference for the question is the usual frequency per week. The question on coital frequency is optional because it is sensitive and can cause the respondent embarrassment or arouse her antagonism. However, the question has been included since differences in coital frequency among couples can have a significant effect upon fertility.

C. Voluntary terminal abstinence

In some countries the prevalence of terminal abstinence, that is, voluntary cessation of sexual intercourse even though a woman is still fertile, can have a significant effect on fertility. We obtain information on the expectation of the resumption of sexual activity as well as the reason for abstaining in order to classify women who are abstaining permanently.

D. Post-partum abstinence from intercourse

All women are asked when they resumed sexual relations after a pregnancy termination, irrespective of pregnancy outcome. Months have been specified as the unit; in some countries where there is a customary period specified in days, the unit of the answer should be changed. The name for the period of customary abstinence should be used whenever possible. Use of the name for this period and rephrasing of the question by asking the respondent how long the period was for her can reduce her embarrassment. (Note: the interviewers' instructions will have to be appropriately modified when the name for post-partum abstinence is used in the question).

1.1.2 Factors which mitigate exposure to conception

A. Breast-feeding duration

Breast-feeding duration is measured for the last and penultimate pregnancies. These questions on the total duration of breast-feeding are considered by WFS to be required variables. A question is included on the duration of full breast-feeding, i.e., the duration of the period when breast-milk is the only food given, but this question is optional. Its inclusion is recommended because full breast-feeding duration is a measure of adequate nutrition for a child as well as of suppression of ovulation in the mother. The initiation of partial breast-feeding i.e., the end of full breast-feeding, is defined as the date when the mother begins to give the child other foods along with breast-feeding.

B. Duration of post-partum amenorrhoea

This question follows the questions relating to breast-feeding. Theoretically it should be

acknowledged that a woman's first cycle(s) after confinement may be anovulatory. Anovulatory first cycles are dependent on many factors such as the intensity of breast-feeding, as well as the time since birth of the infant. However, laboratory analyses are required for the determination of ovulation, and therefore anovulatory cycles cannot be considered in this type of survey; only date of first menstruation after parturition can be measured, and we assume that a woman is fertile from the onset of menstruation.

C. Contraceptive use

The module replaces Section 5 of the Core Questionnaire so that contraceptive use in the closed and open pregnancy intervals is measured.

D. Maternal nutritional status

It is not within the scope of the WFS to assess directly the health or nutritional status of respondents. However, since nutritional status has a direct relationship to fecundity we have incorporated the measurement of height and weight as minimal estimates of nutritional status since these measurements are relatively easy to obtain. In addition, height and weight measures have been utilized to derive an estimate of the amount of body fat a woman has². Minimum levels of body fat are necessary for menstrual functioning and pregnancy.

We consider the measurement of height and weight to be optional. Some changes in sample design may be necessary since these anthropometrics are more easily measured on a clustered sub-sample of the WFS sample population.

Other variables related to menstrual functioning should be measured when height and weight are measured. Some of these variables are necessary even when height and weight are omitted from the module; these are indicated in the description that follows:

- 1) Menarche: This variable should be ascertained to the nearest month, if possible.
- 2) Cycle length and duration of menstruation: The questions concern regularity and duration of menses, which is assumed to be correlated with nutritional status as well as fecundity. This series of questions is optional and need only be included if heights and weights are measured.
- 3) Menopause: Women who have not been sterilized and who think that it is physically impossible to have another child are asked if they think they are menopausal. We recommend that this question be included, even when height and weight are omitted, because of its relationship to fertility.

1.1.3 Factors which mitigate gestation and successful parturition

Perinatal mortality, although not a part of the module, is included in the pregnancy history and is highly relevant to this module. Interviewers should be trained to probe carefully in order to obtain data which are as accurate as possible on details concerning perinatal loss and infant mortality.

2 R. E. Frish and J. W. McArthur 'Menstrual Cycles: Fatness as a Determinant of Minimum Weight for Height necessary for their Maintenance or Onset', *Science*, 185: 949, 1974.

1.2 LENGTH AND FORMAT OF THE MODULE

An earlier version of this module was pre-tested by Dr. Pierre Cantrelle in Zaire on a sample of 50 women. A revised version was then pre-tested in Malaysia in cooperation with the Department of Statistics in January 1975. A purposive sample of 107 interviews was completed with 63 interviews done in a rural area and 44 done in Kuala Lumpur. The revised version based upon the Malaysian experience was pre-tested during the WFS pilot survey in Ghana in August 1975 in cooperation with the Regional Institute for Population Studies. A total of 643 interviews were obtained from one urban and three rural areas. This module reflects the experience derived from the three pre-tests.

The module is based on pregnancy intervals rather than the live birth intervals dealt with in the Core Questionnaire. Thus, the information on breast-feeding duration and contraceptive use for the penultimate and last pregnancies will not be strictly comparable to the same information derived from the Core Questionnaire for penultimate and last live births. However, the focus of the module is such that information on pregnancy intervals rather than live birth intervals is essential in order to compare the effects of factors such as breast-feeding duration, post-partum abstinence and amenorrhoea duration, on both live and non-live births.

The module is constructed so that it can be easily incorporated into the Core Questionnaire. Most of the questions in the module are contained in Section 5. Thus, the module version of Section 5 contains all the questions in this section of the Core Questionnaire plus the questions of the module itself. Several questions are then added to other sections: age of menarche is added to Section 2; two questions on sterilization are added to Section 3; questions on coital frequency and terminal abstinence are added to Section 4; and height and weight can be measured at the end of the interview (Section 7).

It is essential also that the marriage history section of the Core Questionnaire precede Section 3 (contraceptive knowledge and use) when the module is used.

An integrated pregnancy history was used when the module was pre-tested. In this form all live births plus other pregnancies in each birth interval are obtained in an ordered list. Use of an integrated pregnancy history facilitates use of the module and countries adopting the module may wish to use the integrated pregnancy history format. An alternative to a completely integrated format is that used in the WFS survey in Fiji: the pregnancy history contains probes for additional pregnancies between the last two live births and after the last birth. WFS suggests these alternatives because of the importance of obtaining accurate information on pregnancy loss in general and, in particular, on the last two pregnancies which are the focus of this module.

Countries wishing to adopt the module should take into consideration the fact that widows are asked questions on breast-feeding, post-partum amenorrhoea, and abstinence duration for the open interval. These questions may be very sensitive for them. The same questions are asked for the last closed interval so widows can be filtered out of the open interval, i.e., they would be asked these questions for the last closed interval only.

The questions on breast-feeding in Section 2 will have to be deleted since they have been incorporated into the module. In addition, a minor change has to be made in the allotment of coding boxes in the birth history in Section 2. At present, one box is alloted for the number of months or years a child survived. WFS recommends two digit coding (2 boxes) for this variable when this module is used so the lifespan of the child will be coded to the nearest month. (Details of the coding of this variable are available in the *Editing and Coding Manual*, Basic Documentation No. 7.

WFS estimates, based upon pre-tests of this module, that adding it to the Core increases the interview duration by 10 to 15 minutes.

1.3 INTERVIEWERS' INSTRUCTIONS FOR SECTION 3

Q.320: Refer to Q.314 and Q.318 for the first part of this filter. Note that it doesn't matter why a woman has been sterilized (for example 'NO' in 315); the fact that she has been sterilized is the important consideration, so you will circle 'Yes' if the answer to 314 is positive.

1.4 INTERVIEWERS' INSTRUCTIONS FOR SECTION 5

In this section we obtain information on the following related topics:

- 1) Breast-feeding duration
- 2) Post-partum amenorrhoea duration
- 3) Post-partum abstinence duration
- 4) Duration of temporary absences of spouses
- 5) Contraceptive usage
- 6) Menstruation characteristics
- 7) Desired number of children

Information on items 1 through 5 is confined to the last closed and the open pregnancy intervals. These intervals are defined as follows:

Last closed pregnancy interval: The interval between a woman's next-to-last (penultimate) pregnancy and her last pregnancy.

- 1) If a woman is currently pregnant her last closed pregnancy interval is the period from her last pregnancy to the date when her current pregnancy is expected to end.
- 2) If a woman has had only one pregnancy, or is currently pregnant for the first time, her last closed pregnancy interval is the time from her date of marriage to the birth date or the expected end of the current pregnancy.

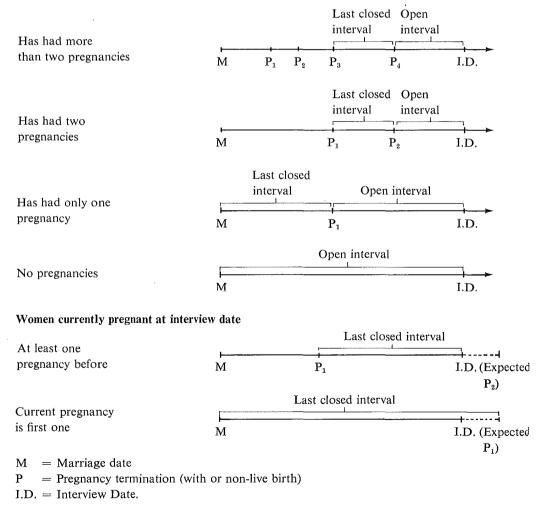
3) If a woman has never been pregnant she does not have a closed pregnancy interval.

Open pregnancy interval: The open pregnancy interval is the time since the woman's last birth (live or non-live).

- 1) Women who are currently pregnant do not have an open interval; they are currently in a *closed* interval.
- 2) Women who have never been pregnant are in an open interval which began at their date of marriage.

The following diagram should clarify these definitions:

Women not currently pregnant at interview date



As you can see from this diagram the last closed and open intervals change slightly depending upon whether a woman is currently pregnant or not.

The questions in Section 5 are grouped by pregnancy interval as is shown in the table below:

INTERVAL	QUESTIONS		RACTERISTICS OF WOMEN WHO WILL SKED THE QUESTIONS IN THE SECTION
Open	507–525	(A)*	Women not currently pregnant who have had one or more pregnancies
Last Closed	527–548	(A)*	Women not currently pregnant who have had two or more pregnancies
		(B)	Women currently pregnant who have had one or more previous pregnancies
Open and Close	ed 549–559	(A)	Women who have never been pregnant
-		(B)	Women currently pregnant for first time

* Note that women who are not currently pregnant and who have had two or more pregnancies will go through both the Open Interval questions AND the Last Closed Interval questions. Thus they will be asked the same questions twice about two different births (last and next-tolast).

Before beginning a discussion of the questions themselves, it will be necessary to define the terms and concepts you will be using in this section.

Post-partum:	the period of time after the birth, $post = after$; partum = a bringing forth.
Post-partum amenorrhoea:	a cessation of menstruation, usually temporary, occurring after a birth.
	If a woman breast-feeds she may not resume menstruation for a year or more after the birth. Menstruation IS NOT the normal bleeding which occurs for several weeks after birth. This is a part of the delivery and this time is a part of the post-partum ame- norrhoea duration.
Post-partum abstinence: Menopause:	refraining from sexual intercourse after the birth of a child. the permanent cessation of menstruation (in contrast to post- partum amenorrhoea). It can occur in women 35 years old, but usually occurs between ages 40–50.

Full breast-feeding:	the child is fed only breast milk.
Partial breast-feeding:	the child is given other foods, usually cereal to begin with, in
	addition to breast milk.
Temporary absences:	husband's absences which are NOT permanent (divorce or separation is considered permanent and is dealt with in the marriage history section).

Qs. 501-506

This is a table for you to complete before you begin asking the next set of questions. Refer to the live birth and pregnancy tables in Section 2 in order to complete this table correctly. You will need to refer to this table in order to obtain the correct information in Section 5.

First example:

Assume a woman is currently pregnant, had a live birth in 1970, and had a 6-month pregnancy which ended in a non-live birth in June 1972. These are her only pregnancies. You will check Q.221 (226, revised Core) and ascertain that she is currently pregnant. You will circle box 2, CURRENTLY PREGNANT in 501, then skip to 504. You will circle ALL OTHERS, box 3 in 504, circle NON-LIVE BIRTH, box 3 in 505, and record 'June 1972' in 506. You will ignore the live birth in 1970 because you will not be concerned with that birth in Section 5.

Second example:

Suppose the respondent has had three live births, no non-live births, and she is not currently pregnant. Her last (most recent) child died a few hours after he was born. Her next-to-last child is still alive. You don't need the information on her first live birth. Thus, you circle 'ALL OTHERS' in 501, circle 'LIVE BIRTH CHILD DEAD' in 502, and record the date of birth of the child who died (and name if given). Then you will circle 'ALL OTHERS' in 504, 'LIVE BIRTH CHILD ALIVE' in 505 and record the date of birth and name of the child in 506.

Note that in 503 and 506 there is a space for you to record 'YEARS AGO' if the respondent doesn't know the child's birth date.

TWINS: The birth of twins is actually one live birth so you will record both names in either 503 or 504. You will ask the total length of breast-feeding for both children in the same question. For example, if twins are her most recent birth (last) you will record the duration in Q.509. If both were breast-fed the same amount of time you will record, for example, '14 for both'.

Qs. 507-526: Open interval

Q.507: Refer to table in 501–506 in order to circle the appropriate boxes.

Qs.508-511: Breast-feeding

Q.508: In this and the other questions with a place to use the child's name, do so as often as possible so the woman will know whom you are talking about. You can easily refer to the tables in 501–506 for the name. For this question you will use the child's name you recorded in 503.

Q.509: What is wanted is the total time a woman breast-fed her child. If a woman breast-fed the child, say, only at night for the last six months of breast-feeding then those six months should be included in the total. Note that in this and many of the questions to follow, the answer is in MONTHS. If the respondent says one year you write 12, if she says one-and-a-half years you write 18; you must record the answer in months.

Q.510: This is a probe to be certain you have her total duration of breast-feeding.

Q.511: In this question you want to know when she began partial breast-feeding (see definition). This information may be difficult to obtain and you may have to probe.

Q.512: Post-partum abstinence

Often the woman will answer (by using a particular term) that she observed a customary period of abstinence. Probe by asking how long this time was, if she uses a term.

Q.513: Post-partum amenorrhoea

This question does not refer to post-partum bleeding (see definitions). You want her first normal menstrual period after the birth of the child.

Qs.514-515: Post-partum abstinence and amenorrhoea for non-live births. These questions are similar to Q.512 and Q.513 except you will NOT probe by asking how old the child was because the pregnancy ended in a non-live birth.

Qs.516–520: Contraceptive use

Q.516: You will have to refer to several places to fill in this filter. First refer to 401 and 405 to determine if she is currently married, then refer to the appropriate questions, 512 or 514, to see if the woman has resumed sexual relations and then refer to 320 to determine if she has ever used contraception or been sterilized.

Q.518-520: The method she has used **most recently** must be recorded in 520. Method means any method of contraception. It does not need to be a method such as the pill, loop, or condom which requires supplies or help from a doctor. It may be any other method such as rhythm or abstinence, etc., listed in Section 3. If the respondent is consistent she should mention in 518 or 520 only from among the methods she has mentioned as having 'EVER USED' in Section 3. Use the respondent's own words to describe the method she mentions. Q.519: Use the name of the child whenever possible.

Qs.521–526: Temporary absences

Q.521: We want to determine whether the husband has been away for three months or more. Be sure to stress the words THREE MONTHS. Even if the husband was only looking for work for three months, the fact that he was away is important and must be recorded in the table.

Q.522: Check to be sure that the date she gives you is a date after her last (most recent) pregnancy.

Qs.523-525: In this table you will record the length of each absence.

Q.523: If the respondent replies in years, for example one year, you will record '12'.

Q.524: If the respondent says 'NO', you will have to probe and correct 523. For example she may say, 'My husband was away for 6 months, he came home for two weeks, then was gone for six months again', you will circle 'NO' in 524, then draw a line through 12 (12) in 523 and write '6'; then you will circle 'Yes' in 525 and write 6 on the next space below (523). Ask 524 by referring to the second six-month period and continue.

Sometimes you will get cases where she will say her husband was away 3 or 4 months and, after asking 524 and probing, you will learn that he came home every other weekend. Draw a line through the answer in 523, and leave it since he was never away for a whole month. Then proceed to 525.

Qs.527-548: Last closed interval

These questions are duplicates of Qs. 507-526 except for a few minor differences detailed below.

Qs.527-528: Use Q.504-505 to circle the correct boxes in this filter.

Q.547: This is a further check on absences. If the woman responds 'YES' skip to 560,

Qs.549-559: Open and closed intervals

Since these women are either pregnant for the first time or have never been pregnant you are obtaining information only on contraceptive use and on temporary absences. The questions are the same as those for the open interval.

Qs.560-565: Menstrual characteristics

Q.560: You are asking if her periods are USUALLY regular.

Q.562: You want the total duration of her period generally. Some women may misunderstand and think that you mean the time BETWEEN menstrual periods. If you get an answer of more than 9 days explain your meaning by saying that you want the duration of bleeding. Q.563: Check questions 320, 501, and 401, 405, in order to circle the correct boxes.

Q.564: This question is about the physical capability of having a child, and not whether she wants to have a child. You must stress the phrase 'supposing you wanted one'. The category 'D.K.' has been omitted because you are to circle 'YES' if she doesn't know. Thus, you will circle 'NO' only if the answer is definitely 'NO', that is, if the respondent is certain that she

and her husband are not capable of having a child, even if they wanted one. Q.565: We are asking for whether she thinks she is at the menopause.

Qs.566-574: Ideas about family size

Q.566: Be sure to circle this filter correctly. Note that we have underlined LIVE BIRTHS. If a woman has had only non-live births and no LIVE BIRTHS then you will circle 'NO LIVE BIRTHS'.

Q.567: This is asked of currently pregnant women. The purpose of this question is to find out if the respondent would like to have another child **at any time** in the future. She need not at present have definite plans for another one, nor is it necessary that she wants it soon after the expected child.

Q.568: You are asking for how many MORE children AFTER the one she is currently expecting. Thus the respondent should not include any she has already and should not include the one she is currently expecting.

Q.569: This is for women who haven't had any live births. See notes on 567.

Q.570: 'Either' means that she does not care whether her next child is a boy or a girl. If she gives some other answer such as 'it depends upon God' or 'it is up to my husband', then you must write it clearly, using the respondent's own words as far as possible.

Q.571: See notes on 567.

Q.572: See notes on 570.

Q.573: See notes on 568.

Qs.574-576: Intended contraceptive use

Be sure to check 320 for the filter 574. Question 575 is to be asked of all women who have NEVER used a contraceptive method.

Q.576: This question is asked of **all** respondents. You should give a short pause asking 576. You may preface the question by saying 'Finally one more question on this topic...'. This question is **not** the same as 568, although you may get the same answer. Here you are asking for the total number of children she would really like to have 'if she could choose exactly', irrespective of whether she can accomplish it, and irrespective of the number of children she already has. If she asks you what you mean by 'choose exactly the number of children', you simply say that the phrase means just what she thinks it means. For example, if she thinks it refers to a time when she was younger and just married, or to a time when her husband did not have any trouble with his job which he may be having now, or to a time when her or her husband's health was better, etc., she can take it to mean whatever she likes, **but you yourself must not suggest anything**.

Try to get as precise an answer as possible. If she cannot give a precise answer, write down the range, or other answer in her words. If she says 'It is up to God' or 'Whatever my husband wishes' record the answer in her own words.

1.5 PROTOCOL FOR WEIGHT AND HEIGHT MEASURES

1.5.1 Equipment

The best scales to use are (hospital or clinic) beam balance scales. However, these scales are expensive and are often too heavy to be truly portable in a field situation. The second choice is good quality (bathroom) spring scales. The WFS has used spring scales made of steel, with large dials approximately 10 cm. in diameter. The dial face is turned around prior to use so that the numbers are upright for the interviewers rather than the respondent. The dial should be such as to be easily read by the interviewer in order to keep interviewer variability to a minimum. Two lines which indicate placement of the heels of the respondent should be painted about 2 cm. from the edge of the base. The unit of the scale is kilograms, divided into tenths. A horizontal aperture is drilled into the base of the scale 0.5 cm. below the standing surface for attachment of the height measure. The scale weighs about 1 kg. and is portable for normal walking distances.

Spring scales must be calibrated daily. An easy method for maintaining calibration under field conditions is to carry a water container which, when filled with water, has a known weight. This can be filled and set on the scales for calibration.

Height measures can also be adapted for the field situation. A long lightweight wooden stick can be marked in centimeter units and a movable horizontal bar can be attached to the measure. This method facilitates accurate measurement of height since the respondent can place her heels against the wall and thus will be more likely to stand erect.

An alternative the WFS has used is metric steel tape measures. It is essential that these measures should have certain features. The reel should lock into place after the tape is pulled out to the length desired, and the tape measure should have an automatic rewind mechanism. A 20 cm. long horizontal bar is mounted onto the case of the steel tape measure. In order to ensure accurate placement of the horizontal bar across the top of the respondent's head, a spirit level should be attached to the horizontal bar. When these steel tape measures are used, a horizontal aperture is drilled into the base of each weighing scale, 0.5 cm. below the standing surface for attachment of the height measure. Then the steel tape measure is hooked into the aperture and drawn up to measure the respondent's height while she is standing on the scale. (A steel tape measure with these specifications is now commercially available.)

1.5.2 Training

Training is relatively straightforward. Instructions for the interviewers should include the following items and a copy should be passed out to each interviewer. In addition, a chart should be made so that interviewers can record heights and weights for practice.

Interviewers' notes

The following instructions assume use of spring scales and metric steel tape measures.

A. Weight measurement

- 1) Find as level a floor as possible and put the scale down on it.
- 2) Check the weight indicator on the scale. Set it to zero if it is off zero. (After calibration of scales, you may be instructed always to set your scale to some unit other than zero.)
- 3) Ask the respondent to stand, with her shoes off, with her heels on the indicated places on the scale. Tell her to stand as straight as possible, with her arms hanging at her sides. Tell her to look straight ahead so she will be standing straight. You will tell her her weight later so she doesn't have to look.
- 4) Stand directly over the dial face to read the weight. Do not stand to one side of the dial when reading weight.
- 5) Record the weight to the nearest tenth of a kilogram, for example: 55.2 kg., should not be rounded to 55.0 kg.

B. Height measurement

- 1) Ask the respondent to remain standing on the scale. Have her stand comfortably, arms at her sides, looking straight ahead. (If a commercial steel tape height measure or wooden rod is used, she should stand with heels against a wall.)
- 2) Attach the tip of the tape measure to the base of the scale in the opening provided.
- 3) Draw the tape out until the horizontal bar is straight across the top of the respondent's head. Be certain that the horizontal bar is touching the respondent's head and that it is not simply on her hair.
- 4) Check the spirit level to be certain that the horizontal bar is really resting horizontally across the top of the respondent's head.
- 5) Lock the tape measure in place.
- 6) Bring the locked tape measure to your eye level and record the height to the nearest tenth of a centimetre, for example: 140.3 cm. Do not round to 140.0 cm.

During training, each interviewer should measure every other interviewer. Space should be provided on a lined piece of paper so that successive measurements on one individual can be compared. Interviewers should practice until the inter-observer range of variability is no greater than a range between 0.3 kg. for weight and 0.3 cm. for height.

1.5.3 Quality control during field work

A. Equipment

The scales have to be calibrated at the beginning of the field work with a unit of known weight. Calibration to the same unit should be done once a day as indicated above. If the scales are dropped they should not be used until calibrated again. Normal handling will not drastically affect calibration. However, corrosion will cause problems if the scales are left in the rain; thus, care should be exercised to keep them dry. The same warning regarding water damage applies to the height measures.

B. Interviewers

It is recommended that members of each interviewing team weigh and measure each other approximately once a week to once a fortnight so the supervisor can check on inter-observer variability.

2. MODULE ON FACTORS OTHER THAN CONTRACEPTION AFFECTING FERTILITY

2.1 QUESTIONS TO BE ADDED TO SECTION 2

This question can follow ascertainment of pregnancy status, Q.221-223 (core, WFS/TECH.120), Q.226-228 (revised core, WFS/TECH.475):

Q.224(229) How old were you when you had your first menstrual period?

(YEARS	OLD)

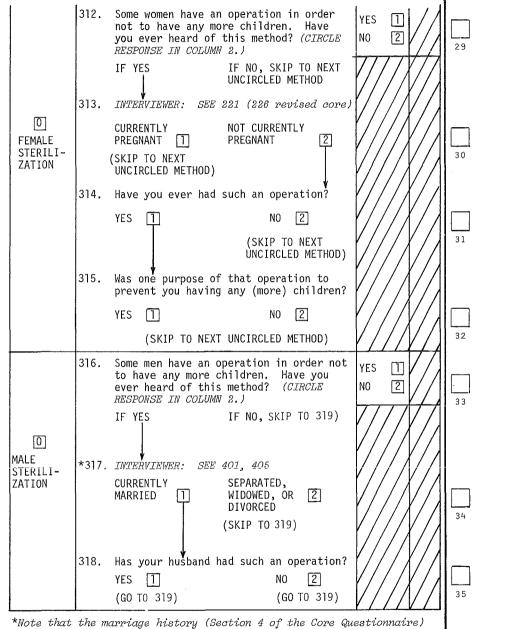
HAS NOT YET BEGUN

86

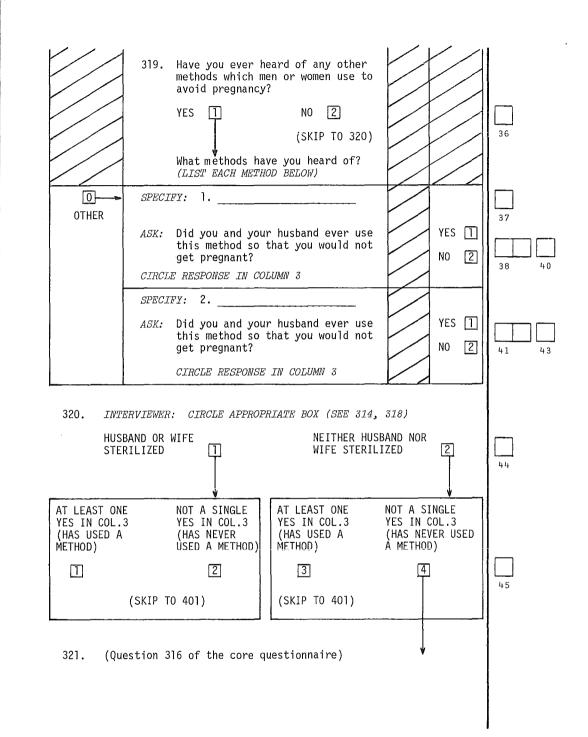
D.K. 87

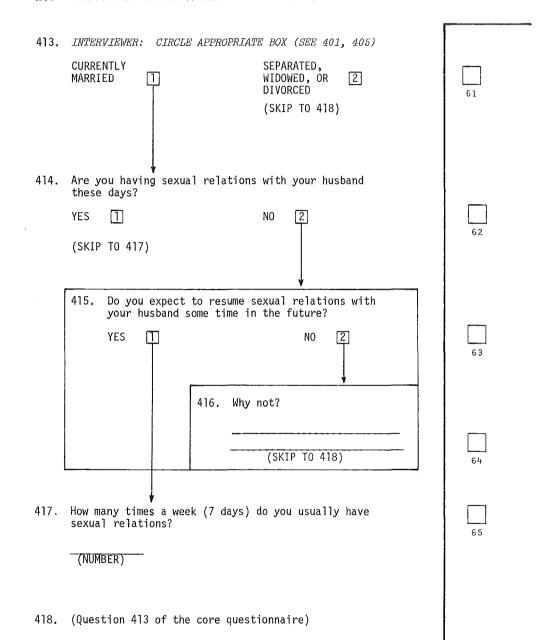
2.2 QUESTIONS TO BE ADDED TO SECTION 3

Beginning with questions 312 and 313, make the following changes:

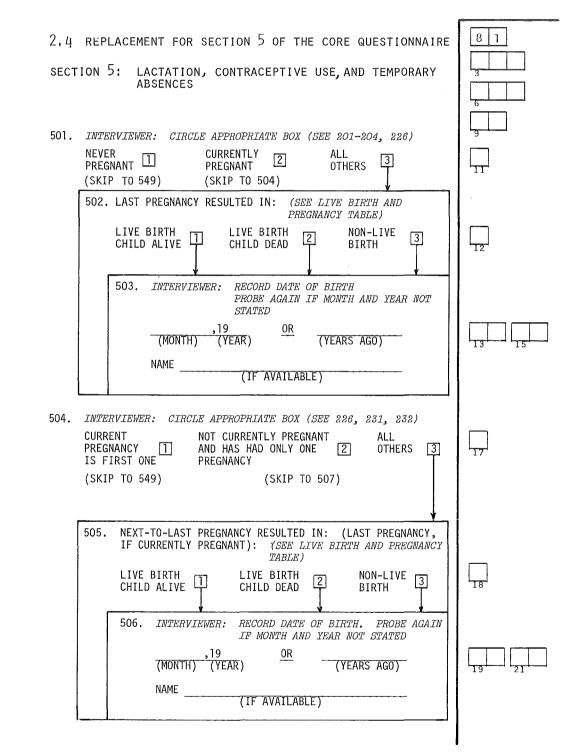


must <u>precede</u> this section (contraceptive knowledge and use) when the module on Factors Other Than Contraception Affecting Fertility is incorporated into the questionnaire.





2.3 QUESTIONS TO BE ADDED TO SECTION 4



	INTERVAL FOR EVER-MARRIED WOMEN WITH AT LEAST ONE PREGNANCY WHO URRENTLY PREGNANT	ARE
507.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 501) CURRENTLY PREGNANT 1 NOT CURRENTLY 2 (SKIP TO 528)	23
	LAST PREGNANCY RESULTED IN: (SEE 502) LIVE BIRTH T NON-LIVE BIRTH 2 (SKIP TO 514)	24
508.	Now I would like to ask you about the period since the birth of(NAME OF LAST CHILD, OR "your most recent child who later died"). Did you breast-feed (NAME OF LAST CHILD, OR "Your most recent child")?	
509.	YES NO [2] (SKIP TO 512) For how many months altogether did you breast-feed him/her? PROBE: How many months old was he/she when you completely stopped breast-feeding him/her?	25
	(MONTHS)STILL BREAST- FEEDINGUNTIL HE/SHE DIED(SKIP TO 511)(SKIP TO 511)	26
510.	After months had you completely stopped breast- feeding your child even once a day? YES NO [2] (CORRECT 509 AS NECESSARY, THEN PROCEED TO 511)	28
511.	How many months old was the child when you began giving him/ her additional food along with breast-feeding?	
	NO ADDITIONAL FOOD GIVEN YET [8]6CHILD DIED BEFORE GIVEN [8]7 OTHER FOODS	29
512.	For how many months after the birth of this child did you go without sexual relations? <i>PROBE:</i> How many months old was the child when you resumed sexual relations?	
	(MONTHS)	31

OPEN INTERVAL

513.	How many months after the birth of this child did your period come back?	
	PERIOD NOT BACK YET 86	
	(MONTHS)	33
	(SKIP TO 516) (SKIP TO 516)	
514.	Now I would like to ask you about the period since the last time you were pregnant. For how many months after the end of this pregnancy did you go without sexual relations? 	
	(MONTHS)	35
515.	How many months after the end of this pregnancy did your period come back?	
	PERIOD NOT BACK YET 86	
	(MONTHS)	37
516.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 401, 405)	
	CURRENTLY SEPARATED, MARRIED 1 WIDOWED, OR 2 DIVORCED	39
	(SKIP TO 527)	
	(SEE 512, 514) SEX RELATIONS RESUMED 1 SEX RELATIONS NOT RESUMED 2	
	(SKIP TO 527)	40
	(SEE 320)	
	HUSBAND OR WIFE TT NEITHER HUSBAND NOR	
	WILL STERILIZED T	41
	(SKIP TO 527)	
	(SEE 320)	
	HAS USED A CONTRA- CEPTIVE METHOD HAS NEVER USED A CONTRACEPTIVE METHOD 2	
	(SKIP TO 521)	42
l		ļ
517.	Are you or your husband currently using a method to keep you from getting pregnant?	
	YES] NO 2	
	(SKIP TO 519)	43
518.	What method are you using?(METHOD)	
	(SKIP TO 521)	44
		1

OPEN INTERVAL

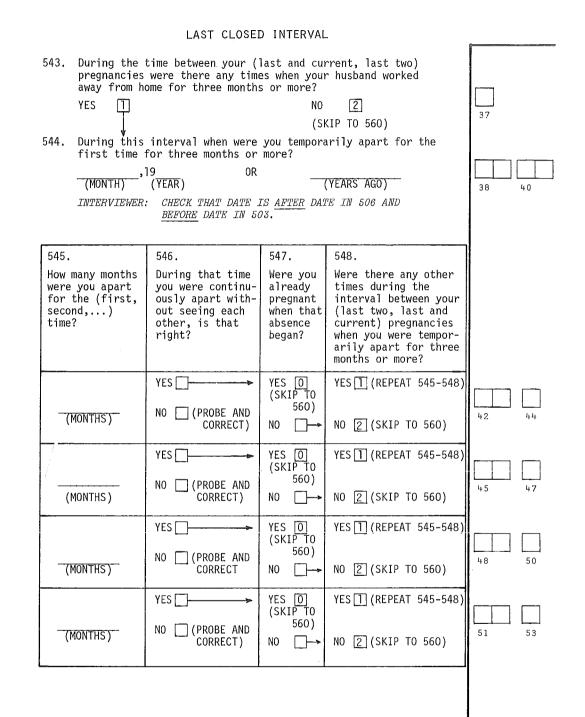
519.	Have you or your husband used a contraceptive method since the birth of (NAME OF LAST CHILD, or "your last pregnancy")?	
	YES I NO Z	
	(SKIP TO 521)	46
520.	↓ What was the last method you used?	
	(METHOD)	
	(121102)	47

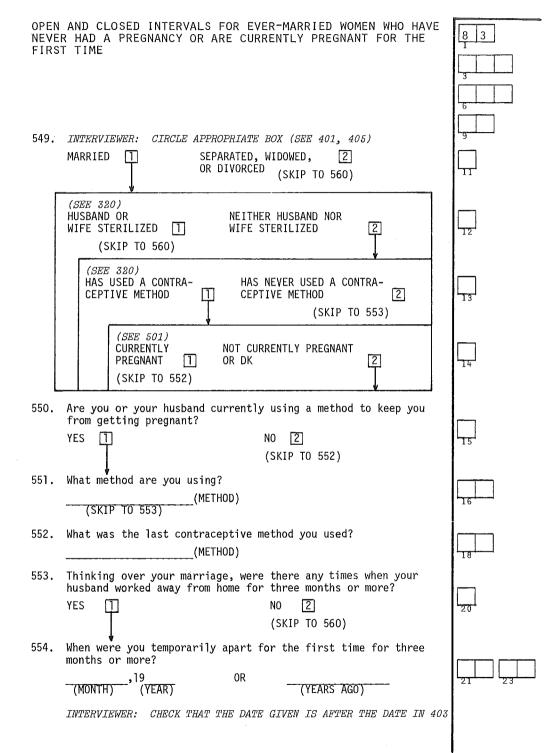
OPEN INTERVAL

YES 1	ked away from home for t	hree months or more? NO [2] (SKIP TO 527) the first time for three	49
months or n (MONTH)	iore?	(YEARS AGO)	50 52
523. How many months were you apart for the (first, second,) time?	524. During that time you were continuously apart without seeing each other, is that right?	525. Since your last pregnancy were there any other times when you were temporarily apart for three months or more?	
(MONTHS)	YES (PROBE AND CORRECT)	YES 1 (REPEAT 523-525) NO 2 (GO TO 526)	54 56
(MONTHS)	YES NO (PROBE AND CORRECT)	YES 1 (REPEAT 523-525) NO 2 (GO TO 526)	57 59
(MONTHS)	YES (PROBE AND CORRECT)	YES [] (REPEAT 523-525) NO [2] (GO TO 526)	60 62
(MONTHS)	YES (PROBE AND NO (PROBE AND CORRECT)	YES [] (REPEAT 523-525) NO [2] (GO TO 526)	63 65
526. Has your hu YES 📋	sband returned home from	that absence? NO 2	66

LY P	CLOSED INTERVAL FOR EVER-MARRIED WOMEN NOT CURRENT- REGNANT, WITH TWO OR MORE PREGNANCIES AND CURRENTLY NANT WOMEN WITH ONE OR MORE PREVIOUS PREGNANCIES	
527.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 504, 505)	9
	ONLY ONE TWO OR MORE PREGNANCY (SKIP TO 560)	11
	NEXT-TO-LAST PREGNANCY RESULTED IN:	
	LIVE BIRTH 1 NON-LIVE BIRTH 2 (SKIP TO 530) (SKIP TO 537)	12
528.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 505)	
	THE PREGNANCY BEFORE THE CURRENT ONE RESULTED IN:	
	LIVE BIRTH 1 NON-LIVE BIRTH 2 (SKIP TO 536)	13
529.	Now I would like to ask you about the period after the birth of(NAME OF LAST CHILD, or "your last birth"). Did you breast-feed(NAME, or "your child born before your last child")?	F -1
	YES T NO 2	14
	(SKIP TO 531) (SKIP TO 534)	
530.	Now I would like to ask you about the period after the birth of(NAME OF NEXT-TO-LAST BIRTH, or "your next-to-last birth"). Did you breast-feed(NAME, or "your child born before your last child")? YES(SKIP TO 534)	15
531.	For how many months altogether did you breast-feed him/her? <i>PROBE:</i> How many months old was he/she when you completely stopped breast-feeding him/her?	
	(MONTHS) UNTIL HE/SHE DIED (87)	16
	(3/11/10/333)	
532.	After months had you completely stopped breast-feeding your child even once a day?	
	YES 1 NO 2 (CORRECT 531 AS NECESSARY, THEN PROCEED TO 533)	18
533.	How many months old was the child when you began giving him/ her additional food along with breast-feeding?	
	(MONTHS) CHILD DIED BEFORE GIVEN OTHER FOODS [8]7	19 35

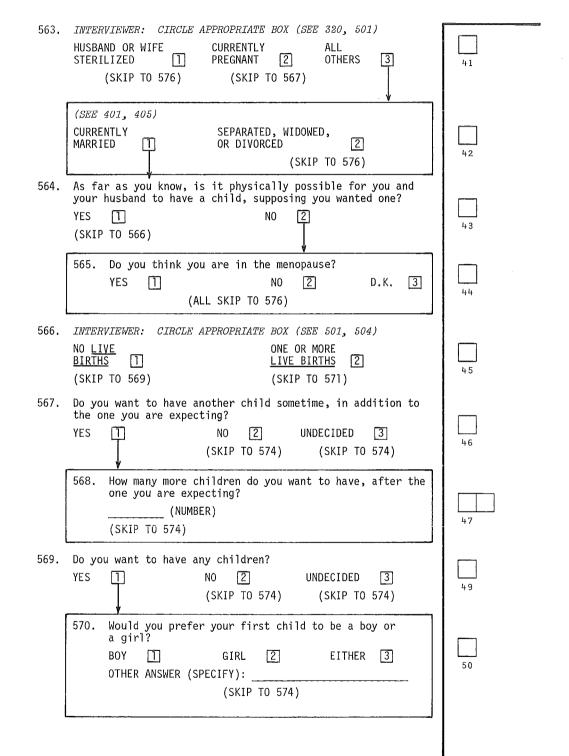
	LAST CLOSED INTERVAL	
534.	For how many months after the birth of this child did you go without sexual relations?	
	<i>PROBE:</i> How many months old was the child when you resumed sexual relations?	
	(MONTHS)	21
535.	How many months after the birth of this child did your period come back?	
	(MONTHS) PERIOD NEVER CAME BACK, BECAME PREGNANT AGAIN [8]7]	
	(SKIP TO 539) (SKIP TO 539)	23
536.	Now I would like to ask you about the time since your last pregnancy. For how many months after the end of that pregnancy did you go without sexual relations?	[]
	(MONTHS) (SKIP TO 538)	25
537.	Now I would like to ask you about the time between your last two pregnancies. For how many months after the end of your	
	next-to-last pregnancy did you go without sexual relations? (MONTHS)	27
538.	How many months after the end of (that, your next-to-last) pregnancy did your period come back?	
	(MONTHS) PERIOD NEVER CAME BACK, BECAME PREGNANT AGAIN [8]7]	29
539.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 320, 501)	
	HAS USED A CONTRA- CEPTIVE METHOD HAS NEVER USED A CONTRA- CEPTIVE METHOD (SKIP TO 543)	31
-	CURRENTLY NOT CURRENTLY PREGNANT	,
	PREGNANT [] OR DK [2] (SKIP TO 541)	32
540.	Have you or your husband used a method to keep you from getting pregnant at any time since your last pregnancy?	
	YES [] NO [2] (SKIP TO 542) (SKIP TO 543)	33
541.	Was there any time in the interval between your two preg- nancies when you or your husband were using a method to keep you from getting pregnant?	
	YES T NO Z	34
	(SKIP TO 543)	
542.	What was the method you used?(METHOD)	35





OPEN AND CLOSED INTERVALS

555.	556.	557,	558.	
How many months were you apart for the (first, second,) time?	During that time you were continu- ously apart with- out seeing each other, is that right?	IF CURRENTLY PREGNANT, ASK: Were you already pregnant when that absence began?	Were there any other times when you were temporarily apart for three months or more?	
(MONTHS)	YES NO (PROBE AND CORRECT)	YES 0 (SKIP TO 560) NO □	YES] (REPEAT 555-558) NO 2 (GO TO 559)	25 27
(MONTHS)	YES (PROBE AND NO (PROBE AND CORRECT)	YES 0 (SKIP TO 560) NO	YES] (REPEAT 555-558) NO 2 (GO TO 559)	28 30
(MONTHS)	YES	YES () (SKIP TO 560' NO ()	YES] (REPEAT 555-558) NO ② (GO TO 559)	31 33
(MONTHS)	YES	560)	YES [] (REPEAT 555-558) NO [2](GO TO 559)	34 36
559. Has YES	your husband return []	ed home from that NO	absence?	37
	I want to ask about your periods usually No	come at regular i		38
mor	the time between your e than a month? UT ONE MONTH []]	r periods usually MORE THAN ONE		39
	how many days do you	ur periods usually	/ last?	40
(DAYS)			



571.	Do you want to have anothe	er child sometir	ne?	
	YES 1 NO		UNDECIDED 3	
	T (SI	<ip 574)<="" td="" to=""><th>(SKIP TO 574)</th><td>51</td></ip>	(SKIP TO 574)	51
	572. Would you prefer you girl?	ur next child to	o be a boy or a	
	BOY 🗍 OTHER ANSWER (SPECIF	GIRL [2] FY):	······ 1	52
	573. How many more child (NUMBER) (SKIP TO 574)	ren do you want	to have?	53
574.	INTERVIEWER: CIRCLE APPRO	PRIATE BOX (SEE	320)	
	HAS USED A CONTRA-	HAS NEVER USE		
	CEPTIVE METHOD T (SKIP TO 576)	CONTRACEPTIVE	EMETHOD [2]	55
75.	Do you think you and your time in the future so that	husband may use ; you will not b	e any method at any pecome pregnant?	
	YES 1	NO [2]	UNDECIDED 3	56
76.	If you could choose exactl in your whole life how man	y the number of y children woul	children to have d that be?	
		HER ISWER (SPE	CIFY)	57 59

2.5 WEIGHT AND HEIGHT

WEIGHT AND HEIGHT OF THE RESPONDENT ARE TO BE RECO END OF THE INTERVIEW. THUS, THE FOLLOWING INSTRUC BE ADDED TO THE END OF SECTION 7 OF THE CORE QUEST	CTIONS SHOULD	
714. INTERVIEWER: RECORD WEIGHT AND HEIGHT OF RE WEIGHT:kg.	ESPONDENT	
HEIGHT: cm.		
RESPONDENT'S CLOTHING: LIGHT I MEDIUM WEIGHT I WEIGHT 2	HEAVY WEIGHT 3	

Family Planning Module

1 INTRODUCTION*

The term *family planning* covers activities designed to limit fertility and activities to increase fertility, especially the treatment of subfecundity. Family planning as a fertility stimulating activity will not be considered separately in this module.

Within the framework of WFS, family planning variables are recommended to be considered only insofar as they may help to explain fertility levels and differentials in a reasonably direct way. Therefore, variables explaining the knowledge and use of contraceptives in the population will not be considered in any detail, and the chain of events which leads to contraceptive knowledge and use is cut short. The module concentrates mainly on four aspects of family planning:

- 1) Knowledge of contraceptive methods,
- 2) Use of contraceptive methods,
- 3) Accessibility of family planning places and cost of certain methods, and
- 4) Knowledge and use of the places where family planning advice and supplies can be obtained.

The selection of these four aspects is based on the fact that, in order for a woman to use a contraceptive, she first has to know about the contraceptive; second (in the case of supply methods like the pill, IUD, condom, diaphragm, etc.), she must know where to obtain it; and third, be able to obtain it.

Any country actively interested in family planning, and particularly one with a large family planning programme, may have a need for more extensive information on factors relating to contraceptive knowledge and the effectiveness of programme activities. It may seem tempting to seek such information through the WFS Family Planning Module. However, it is important to look very carefully at this proposal and more especially at the question of the sample size. Do programme activities reach a high proportion of the population? Is the extent of use of certain methods sufficient to justify the calculation of efficacy rates? In many cases, the sample size will simply not be big enough to justify the collection of very detailed information for sub-groups of the population such as those covered by the family planning programme or those having used a certain method of contraception. In any case, in many countries most of the wanted information may already be available from other sources, such as service statistics, follow-up surveys of acceptors and non-acceptors, use-effectiveness studies of certain methods, and so on.

As it stands, the module does not take account of the fact that different countries have widely varying types of family planning activities. Some countries have family planning programmes,

* Whenever in this module reference is made to the 'Core Questionnaire', this implies both the Questionnaire as such and the Modifications to Core Questionnaire for countries of high fertility and low contraceptive usage, WFS/TECH. 475 Basic Documentation No. 1.

other do not; some countries use mobile clinics, others do not; some countries use field workers, others do not; etc. All questions and codes relating to institutions or persons involved in family planning services should therefore be adapted to take into account the specific situation in each country. This adaptation should consider both programme and non-programme activities.

2 CONTENTS OF THE MODULE

The module consists of extensions of Section 2 and Section 3 of the Core Questionnaire and the Fertility Regulation Module. It can readily be inserted into the Core Questionnaire by replacing Sections 3 and 5 with the two corresponding parts of the module, and by adding three questions to Section 2.

Apart from those parts of the module corresponding to Section 3 of the Core Questionnaire and the Fertility Regulation Module, the following information is obtained.

2.1	SECTION 2		
		Question	Usefulness of the information
Α.	Duration of absence of sexual relations after the birth of the last child	239	Data derived from this question can be used as an indication of the importance of post-birth abstinence, although they only refer to the interval after the last child. Together with the duration of contraceptive use in the same interval, it will be possible to estimate more accurately the length of the period in which the woman has been at risk of becom- ing pregnant.
2.2	SECTION 3		
		Questions	Usefulness of the information
A.	Whether contraceptives are currently available in the home	304a, 306a, 308a	This will provide an indication of accessibility of contraceptive methods and may serve as a check on current use.
B.	At what stage in her reproductive life cycle the woman started using contraception, and with which method	318, 320	No attempt can be made to study accurately the influence of contra- ceptive use on the woman's achieved fertility. The onset of first

2.1 SECTION 2

			measure about the importance of contraceptive behaviour in a popu- lation or sub-population and, together with last use, provides a useful measure of periods of use of contraception.
C.	Place where specific methods can be obtained	322	These questions will provide valuable information about the accessibility
D.	Time it will take to get to that place	323	of supply methods in the population under study and, at the same time,
E,	Cost of the contraceptive method	324	information about the knowledge of places where specific contra- ceptive methods can be obtained.
F.	If the woman has ever sought family planning advice or supplies	326	This will provide an indication of the proportion of women who have ever gone for family planning help and advice.
G.	If the woman has ever sought family planning advice or supplies in the last twelve months	327, 328	This will provide a measure of the importance of each of the places and persons during the last year.
H.	Satisfaction with the attention given at last place visited	329	A crude evaluation of the services will be obtained for those women
J.	Future visits to last place visited	330	who have visited a place in the last twelve months.
К.	Whether the woman ever thought seriously about getting family planning advice or supplies in the last twelve months	332	An indication will be obtained about the reasons why women who know of places or persons which provide family planning services
L.	Reasons for deciding not to visit a family planning service	333	have not visited them in the last year.

use provides a rough but valuable

2.3 SECTION 5

The additional questions to be included in the Fertility Regulation Module are incorporated in each section of that module except for questions 5601–5611 which are inserted at the end of the module.

The contents of additional questions contained in different sections of the Fertility Regulation Module can be distinguished according to whether the woman has ever used any method of contraception.

- A. In the case of never-users (except for those who cannot have more children and those not living with their husbands), the questions cover the following:
- 1) Whether the woman approves of the use of contraceptive methods.
- 2) Whether the husband approves of the use of contraceptive methods.
- B. In the case of women who have used a contraceptive, the questions cover the following:
- 1) Duration of contraceptive use in open and closed intervals.
- 2) Last method used in those intervals.
- Reasons for stopping use in those intervals.
- C. 5601-5611. Detail about last method used.

These questions provide the following information:

- 1) **Programme and non-programme** users can be distinguished.
- 2) Bottlenecks in the contraceptive supply system, or other use-limiting factors can be pinpointed.
- Duration of use for the current or last method is obtained.
- 4) Information is obtained about the change of methods and the reasons for changing.*

Usefulness of the information

These questions shed more light on the intentions of never-users, as it will make it possible to pinpoint whether the woman, the husband, or both, are against the use of contraceptives.

Usefulness of the information

Apart from its use in the study of intervals, this information will provide insight into the adequacy of certain contraceptive methods in the population, and can pinpoint crucial time periods for the continuation of use of these methods.

* A tabulation programme is currently being established for the variables covered in the Family Planning Module. It will be available separately. In Section 5, specific instructions to the interviewers must be included in the *Interviewers' Instructions* with respect to the use of abstinence as a method of contraception – both with respect to determining what abstinence is, and with respect to the treatment of certain questions which do not make sense in the case of abstinence. If abstinence as a contraceptive method is thought to be widespread, specific instructions should be included in the questions themselves.

THE I	FOLLOWING QUESTIO	NS ARE TO BE AI	DDED TO SECTION 2:
238.	INTERVIEWER: CIRCI NO LIVE BIRTHS I (SKIP TO 240)	LE APPROPRIATE BOX	(<i>SEE 215)</i> ONE OR MORE LIVE BIRTHS [2]
239.		your (last) chi started having sex	ld, how many months ual relations again?
	(MONTHS)		STILL ABSTAINING 🛛
240.	RELIABILITY OF ANS	VERS IN SECTION 2:	
	GOOD 🗓	FAIR 🛛	POOR 3
241.	PRESENCE OF OTHERS	AT THIS POINT (CI	RCLE ALL THAT APPLY)
	NO OTHERS CHILDREN UNDER 10 HUSBAND OTHER MALES OTHER FEMALES	© 1 2 4 8	

		SECTION 3:	CONTRACEPT	VE KNOWLEDG	E AND USE		
	301.	you may kno avoid a pre planning.	to talk about a w, there are m gnancy if they Do you know of or methods to a	methods that co want to. Thi f, or have you	ouples can u is is called 1 heard of a	ise to I family	6 8 9
		YES 1	(5	NO 🛛 SKIP TO INSTRUC	CTION ABOVE	304)	
	302.	Which metho	ds do you know	of?			
							12
		PROBE: Do	you know of any	others?			
		INTERVIEWER	METHOD(S) ME	COL. 1 CORRESPO	NDING TO TH ? EACH METHO	E	
	303.	Have you ev	er used		(METH	OD)?	
			THOD IN SAME WC COL. 3 CORRESE				
		IN COL. 1.	-314, IN TURN, PREFACE THE QU	ESTIONING WITH	l:		
		There are so and I would them.	ome other metho like to find o	ds which you h ut if you migh	ave not men t have hear	tioned, d of	
COL. 1	FOR THO	DSE WHO SAID	"NO" TO 301, PR	PEFACE Q.304 WI	<i>TH:</i> COL.2	COL.3	
FROM 302	Just to see if) make sure, you have heam	let me describ rd of them.	e some methods	to EVER HEARD OF	EVER USED	
0	0 e (<i>C</i>	r avoid gett very day. Hav <i>TIRCLE RESPONS</i>	an can delay th ing pregnant, i ve you ever hea SE IN COL. 2).	s to take a pi rd of this met <i>IF "NO", SKIP</i>	11 hod? NO 2 <i>TO</i>		13 1 ¹ 4
PILL	N e	EXT UNCIRCLE	D METHOD. IF "Y s method? (CIRC	'ES": Have you			
		re there any ES []	such pills in NO [2]	your home now? D.K. 3	1		

COL. 1			COL.2	COL.3	
FROM 302			EVER HEARD OF	EVER USED	
D IUD	305.	Some women have a loop or coil of plastic or metal (IUD) placed in their womb by a doctor (or nurse) and left there. Have you ever heard of this method? (AS ABOVE) IF "YES": Have you ever used this method? (AS ABOVE).	YES [] NO [2]	YES 🗓 NO 💈	16 17
O OTHER FEMALE	306.	Some women place a diaphragm or tampon, or sponge, or foam tablets, or jelly or cream in themselves before sex, to avoid getting pregnant. Have you ever heard of any of these methods? <i>IF "YES"</i> : Have you ever used any of these methods?	YES [] NO [2]	YES [] NO [2]	18 19
SCIEN- TIFIC	306a.	Are there any of these in your home now?YES INO [2]D.K. [3]			20
D DOUCHE	307.	Some women wash themselves immediately after sex, with water or perhaps some other liquid. Have you ever heard of this method to avoid getting pregnant? <i>IF "YES"</i> : Have you ever used this method?	yes [] no [2]	YES 1 NO 2	
ם	308.	Some men wear a condom during sex so that their wives will not get pregnant. Have you ever heard of this method? <i>IF "YES":</i> Have you ever used this method?	YES [] NO [2]	YES [] NO [2]	23 24
CONDOM	308a.	Are there any condoms in your home now? YES 1. NO 2. D.K. 3			25
D RHYTHM	309.	Some couples avoid having sex on particular days of the month when the woman is most able to become pregnant. This is called the safe period or rhythm method. Have you ever heard of this method? <i>IF "YES":</i> Have you ever used this method?	YES [] NO [2]	YES [] NO [2]	26 27
[0] WITH- DRAWAL	310.	Some men practise withdrawal; that is, they are careful and pull out before climax. Have you ever heard of this method? <i>IF "YES":</i> Have you ever used this method?	YES [] NO [2]	YES 1	28 29
D AB- STAIN	311.	Another way is to go without sex for several months or longer to avoid getting pregnant. Have you ever heard of this method being used? <i>IF "YES":</i> Have you ever done this to avoid getting pregnant?	YES [] NO [2]	YES [] NO [2]	30 31
			l	L	

A	•				1	
COL. 1			COL.2	COL.3		
FROM 302			EVER HEARD OF	EVER USED		
[] FEMALE STERIL.	312.	Some women have an operation in order not to have any more children. Have you ever heard of this method? (CIRCLE RESPONSE IN COL. 2)	YES [] NO [2]		32	
D MALE STERIL.	313.	Some men have an operation in order not to have any more children. Have you ever heard of this method? (CIRCLE RESPONSE IN COL. 2)	YES 1 NO 2		33	
	314.	Have you ever heard of any other methods which women or men use to avoid pregnancy? YES II NO [2] (SKIP TO 315)			34	35
1]→ OTHER	SPECI	FY: 1		YES ₁] NO ₁ 2	36	38
	metho	CACH METHOD ASK: Have you ever used this d so that you would not get pregnant? (CIRCLE INSE IN COL. 3)		YES ₂ 1 NO22	39	41
	315.	INTERVIEWER: CIRCLE APPROPRIATE BOX: AT LEAST ONE NOT A SINGLE YES IN COL. 3 I YES IN COL. 3 (SKIP TO 318)	2			
	316.	I want to make sure I have got the correct inf you ever done anything or tried in any way to getting pregnant? YES II NO [2] (SKIP TO INSTRUCTI	delay or	avoid	<u> </u>	
		317. What did you do?	,,		14 ¹ 4	
	318.	Which was the first method you used to delay o pregnancy?	r avoid		4 6	
5	0					

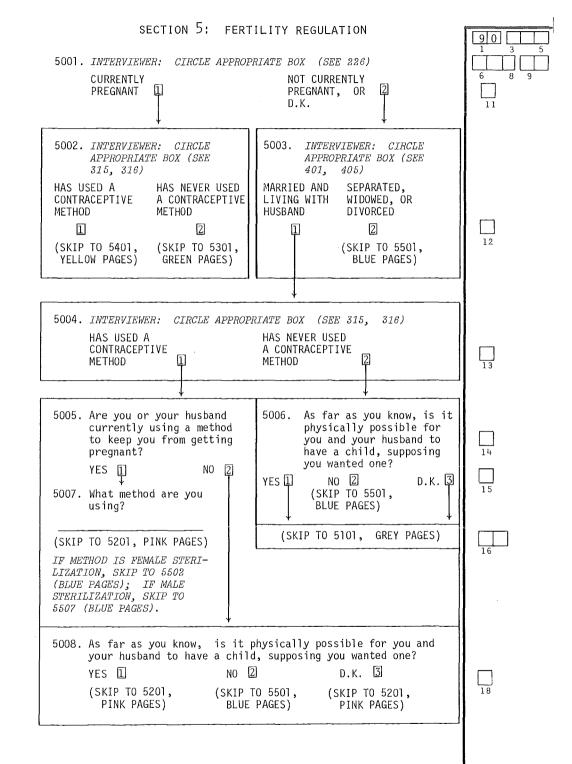
				Contraction of the second s
319. INTERN				
	ILDREN AVE DIED [] 	ONE OR MORE CHIL WHO HAVE DIED	dren [2] T	 48
have w	any children did you hen you first used method?	How many of your alive when you f method?	↓ children were irst used that	49
(NUMBE	ER)	(NUMBER)		
INTERVIEWER:	(SEE COLS. 1 AND	IF RESPONDENT DOES N	CIRCLED IN	
321. CIRCLE FROM COL. 1 AND COL. 2	322. Where would you go to get (NAME OF METHOD)? (IF OUT- LET ALREADY MEN- TIONED, SKIP TO 324)	323. How long would it take you to get there? (IF NOT ALREADY MENTIONED ASK: By what means of transport?)	324. How much do you think (NAME OF METHOD) may cost there?	
D PILL	(NAME)	(MINUTES)	(COST PER CYCLE)	51 52 54
	(LOCATION) D.K. []	(HOURS) (MEANS OF TRANSPORT)		55 57
_	(NAME)	(MINUTES)		58 59 61
□ IUD	(LOCATION) D.K. [] J	(HOURS) (MEANS OF TRANSPORT)	(COST OF INSERTION)	62 64
	(NAME)	(MINUTES)		
CONDOM	(LOCATION) D.K. □ ↓	(HOURS) (MEANS OF TRANSPORT)	(COST) PER (UNIT)	69 71
	(NAME)	(MINUTES)		72 73 75
FEMALE STERIL.	(LOCATION) D.K. []	(HOURS)	(COST OF OPERATION)	76 78
	Ļ	(MEANS OF TRANSPORT) THAN THOSE INDICATED	MAY DE TNATINET)	51

(SKIP TC 326)

325.	Do you know where you can go or supplies?	to get family planning advice	
	YES 🗍	NO [2]	
		(SKIP TO 401)	11
326.	Have you yourself ever gone to or supplies?	o get family planning advice	
	YES 📮	NO 2	
		(SKIP TO 332)	12.
327.	Have you gone there in the la	st twelve months?	
	YES 🗍	NO [2]	
		(SKIP TO 332)	13
328.	Where did you go the last time	e?	
	FAMILY PLANNING CLINIC	1	
	HOSPITAL	2	
	FAMILY PLANNING FIELD WORKER		
	PHARMACY	(SKIP TO 330)	14
	FAMILY DOCTOR OR MIDWIFE OTHER (SPECIFY):	5 (SKIP TO 330)	
		IP TO 330)	
329.	Were you satisfied with the a	ttention you got on your last	
	visit?		
	YES []	NO [2]	15
220	Uill you be going to	↓ (LAST PLACE OR PERSON	10
330.	Will you be going to VISITED) in the future when yo or supplies?	ou need family planning advice	
	YES 1 NO 2	WILL NOT 3	
	(SKIP TO 401)	NEED AGAIN (SKIP TO 401)	1.6
	Ļ	(3011-10-101)	

Э

			17
	(SKIP TC	0 401)	
332.	In the last twelve months did think about getting family pla	you yourself ever seriously anning advice or supplies?	
	YES []	NO [2] (SKIP TO 401)	18
333.	↓ Why is it that you decided not	to?	
	(PROBE: ANY OTHER REASONS?)		19
		(CONTINUE WITH 401)	



	GREY	
<u>NOTE</u> :	5101-5111 ARE ONLY FOR THOSE NOT CURRENTLY PREGNANT, LIVING WITH HUSBAND, FECUND, WHO HAVE NEVER USED A CONTRACEPTIVE METHOD.	$ \begin{array}{c c} 9 \\ 1 \\ 1 \\ 6 \\ 8 \\ 9 \end{array} $
5101.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 215)	
	NO LIVE ONE OR MORE BIRTHS II LIVE BIRTHS II	
	(SKIP TO 5106)	
5102.	Do you want to have another child sometime?	
	YES] NO 2 UNDECIDED 3 (SKIP TO 5105) (SKIP TO 5105)	12
	5103. Would you prefer your next child to be a boy or a girl?	
	BOY [] GIRL [] EITHER []	13
	OTHER ANSWER:	
	(SPECIFY)	
	5104. How many more children do you want to have?	
	(NUMBER)	14
	(SKIP TO 5108)	- ·
5105.	IF ONE LIVE BIRTH, ASK IF TWO OR MORE LIVE BIRTHS, ASK:	
	Thinking back go the time before you became pregnant with your child, had you wanted to have any children?	
	YES] NO 2 UNDECIDED 3	
	(SKIP TO 5108) (SKIP TO 5108) (SKIP TO 5108)	16

5106.	Do you want to have any childre		
	YES NO 2 (SKIP TO 5108)	D.K. 🕄 (SKIP TO 5108)	17
	5107. Would you prefer your fir or a girl?	st child to be a boy	
	BOY 1 GIRL 2	—	
	OTHER ANSWER	SPECIFY)	
	(.	Srecht ()	
5108.	Do you approve or disapprove of delay or avoid pregnancy?	couples using a method to	
	APPROVE 1 DISAPPROVE 2		
		(SPECIFY)	19
5109.	Does your husband approve or dis method to delay or avoid pregna	sapprove of couples using a ncy?	
	APPROVE DISAPPROVE OTHER		
	OTHER (SPECIA	FY)	20
5110.	INTERVIEWER: CIRCLE APPROPRIATI	E BOX (SEE 5108, 5109)	
	ONE OR BOTH DISAPPROVE (AT LEAST ONE CODE	NEITHER	
	(AT LEAST ONE CODE 2 IN 5108 OR 5109) II (SKIP TO 5199)	DISAPPROVES [2]	21
5111.	Do you think you and your husbar any time in the future so that y pregnant?	nd may use any method at you will not become	
	YES I NO 2	D.K. 3	22
	OTHER(SPECIFY)		
5199.	If you could choose exactly the	number of children to have	
,	in your whole life, how many ch		
	(NUMBER)		23

	PINK	
<u>NOTE</u> :	5201–5238 ARE ONLY FOR THOSE NOT CURRENTLY PREGNANT, LIVING WITH HUSBAND, FECUND, WHO HAVE USED A CONTRACEPTIVE METHOD	$ \begin{array}{c c} 9 \\ 1 \\ 6 \\ 8 \\ 9 \end{array} $
5201.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 215)	
	NO LIVE ONE OR MORE BIRTHS 1 LIVE BIRTHS 2 (SKIP TO 5229)	
5202.	Do you want to have another child sometime? YES I NO Z UNDECIDED 3 (SKIP TO 5216) (SKIP TO 5216)	12
	Would you prefer your next child to be a boy or a girl? BOY I GIRL I OTHER ANSWER	 13
	(SPECIFY)	
5204.	How many more children do you want to have?	
	(NUMBER)	14
5205.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 5005)	
	CURRENTLY NOT CURRENTLY CONTRACEPTING CONTRACEPTING CONTRA	
	CONTRACEPTING 1 CONTRACEPTING 2 (SKIP TO 5210)	16
	5206. Have you or your husband used a method to keep you from getting pregnant since the time of your (last) child's birth?	
	YES [] NO [2]	
	(SKIP TO 5211)	17
	5207. For how many months altogether have you used any method since your (last) child's birth?	
	(INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE)	
	(MONTHS)	
ł		57

		PINK	1
5208.	What was the last method you	used?	
			20
5209.	Why did you stop using that	method?	
	(SKIP TO	5211)	22
5210.	For how many months altogeth since your (last) child's (INTERVIEWER: SUM UP SEPARA	birth?	
	(MONTHS)		23
5211.	IF ONE LIVE BIRTH, ASK:	IF TWO OR MORE LIVE BIRTHS, ASK.	
	Think back to the time before you became pregnant with your child. Was there any time when you or your husband were using a method to keep you from getting pregnant?	Think back to the interval between your (last) two births. Was there any time during that interval when you or your husband were using a method to keep you from getting pregnant?	
	YES [] NO [2] (SKIP TO 5299)	YES [] NO [] (SKIP TO 5299)	2.5
5212.	For how many months altogether did you use any method before you became pregnant?	For how many months altogether did you use any method in the interval between your (last) two births?	
	(MONTHS)	(MONTHS)	26
5213.	What was the last method you	used during that period?	
			28
	stopped using before becomin		
	WHILE USING [] HAD STOP (SKIP TO 5299)	PED 2 D.K. 3 (SKIP TO 5299)	لــــا 30
5215.	Why did you stop using that	method?	
	(SKIP TO 5299)		31

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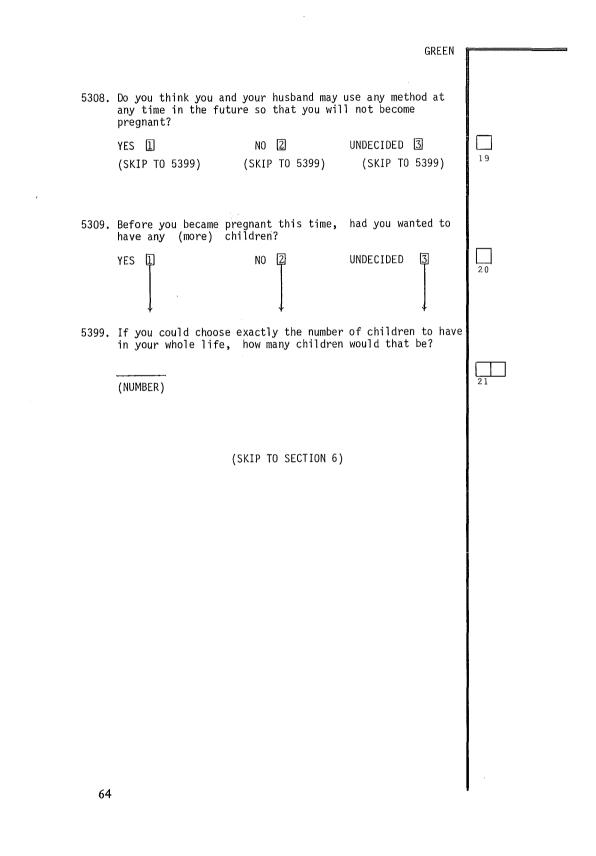
5216.	INTERVIEWER: CIRCLE APPROL	PRIATE BOX (SEE 5005)	
	CURRENTLY CONTRACEPTING 🔟	NOT CURRENTLY CONTRACEPTING [2]	
	(SKIP TO 5221)		32
	5217. Have you or your hust from getting pregnant child's birth?	band used a method to keep you t since the time of your (last)	
	YES I	NO [2] (SKIP TO 5222)	33
	5218. For how many months a method since your (la	altogether have you used any ast) child's birth?	
	• • • • • • • • • • • • • • • • • • • •	? SEPARATE PERIODS IF PRIATE)	34
	5219. What was the last met	hod you used?	
	5220. Why did you stop usin	ng that method?	36
	(SKIP TO 522	22)	38
5221.	For how many months altoget your (last) child's birth?	cher have you used any method since	
	(MONTHS)		39
5222.	IF ONE LIVE BIRTH, ASK:	IF TWO OR MORE LIVE BIRTHS, ASK:	
	Thinking back to the time before you became pregnant with your child, had you wanted to have any children?	Thinking back to the time before you became pregnant with your last child, had you wanted to have any more children?	
	YES II NO Z	YES 1 NO 2	41
	UNDECIDED 3	UNDECIDED 3	
5223.	Was there any time before the birth of your child when you or your husband were using a method to keep you from getting pregnant?	Was there any time in the interval between your (last) two births when you or your husband were using a method to keep you from getting pregnant?	
	YES INO 2	YES I NO 2	42
	(SKIP TO 5299)	(SKIP TO 5299)	50

	PINK	
5224.	For how many months altogether did you use any method before you became pregnant with your baby? (MONTHS) (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE)	4 3
5225.	What was the last method you used during that period? 	4 5
5226.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 5222) "YES" TO 5222 II "NO" OR "UNDECIDED" TO 5222 I2 [2] (SKIP TO 5299)	47
	5227. Did you become pregnant while using that method, or had you stopped using before becoming pregnant? WHILE HAD D.K. USING I STOPPED 2 (SKIP TO 5299) (SKIP TO 5299)	48
	5228. Why did you stop using that method? (SKIP TO 5299)	

	PINK	1
5229.	Do you want to have any children? YES 11 NO 22 UNDECIDED 3 (SKIP TO 5235) (SKIP TO 5235)	50
5230.	Would you prefer your first child to be a boy or a girl?	
	BOY 1 GIRL 2 EITHER 3	51
	OTHER ANSWER (SPECIFY)	
	(SPECIFT)	
5231.	For how many months altogether have you used any method to delay your getting pregnant?	
	(MONTHS) (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE)	32
5232.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 5005)	
	CURRENTLY NOT CURRENTLY CONTRACEPTING [] CONTRACEPTING [2]	
	(SKIP TO 5299)	54
	5233. What was the last method you or your husband used to keep you from getting pregnant?	
1		
	·····	55
	5234. Why did you stop using that method?	55

	PINK	
5235.	For how many months altogether have you used any method to delay your getting pregnant? (MONTHS) (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE)	58
5236.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 5005)	
	CURRENTLY NOT CURRENTLY CONTRACEPTING I CONTRACEPTING 2 (SKIP TO 5299)	60 60
	5237. What was the last method you or your husband used to keep you from getting pregnant?	61
	5238. Why did you stop using that method?	63
5299.	If you could choose exactly the number of children to have in your whole life, how many children would that be? (NUMBER)	64
	(SKIP TO 5601)	

			GREEN	
				$ \begin{array}{c c} 9 \\ 3 \\ 1 \\ 3 \\ 5 \end{array} $
	<u>NOTE</u> :	5301-5309 ARE ONLY FOR TH NEVER USED A CONTRACEPTIN	HOSE CURRENTLY PREGNANT WHO HAVE VE METHOD	
	5301.	INTERVIEWER: CIRCLE APPI	ROPRIATE BOX (SEE 401, 405)	
		MARRIED AND LIVING WITH HUSBAND	SEPARATED, WIDOWED, OR DIVORCED [2] (SKIP TO 5309)	11
	5302.	Do you want to have anoth to the one you are expect	her child sometime, in addition ting?	
F		YES II ↓	NO 2 UNDECIDED 3	12
	5303.	How many more children do you want to have, after the one you are expecting? (NUMBER)	 5304. Before you became pregnant this time, had you wanted to have any (more) children? YES 1 NO 2 UNDECIDED 3 	13 15
	5305.	Do you approve or disappr to delay or avoid pregnar	rove of couples using a method ncy?	
		APPROVE I DISAF	PPROVE 2 OTHER(SPECIFY)	 16
	5306.	Does your husband approve using a method to delay o	e or disapprove of couples or avoid pregnancy?	
		APPROVE DISAF	PPROVE 2 D.K. 3	
		OTHER		17
		(\$	SPECIFY)	1
	5307.	INTERVIEWER: CIRCLE APPR ONE OR BOTH DISAPPROVE (AT LEAST ONE CODE 2 1 IN 5305 OR 5306) (SKIP TO 539		18



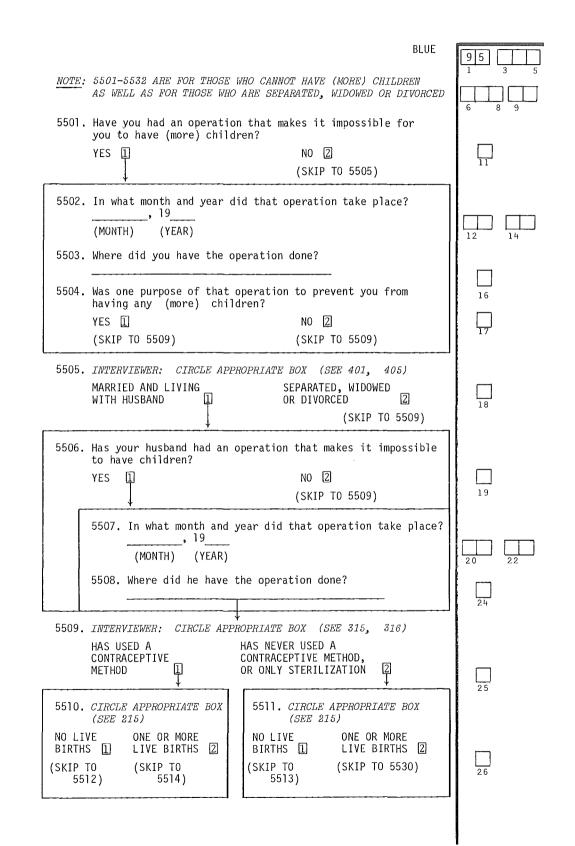
	YELLOW	
NOTE:	5401–5419 ARE ONLY FOR THOSE CURRENTLY PREGNANT WHO HAVE USED A CONTRACEPTIVE METHOD	
5401.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 401, 405)	6 8 9
	MARRIED AND LIVING WITH HUSBAND 1 DIVORCED 2 (SKIP TO 5411)	
5402.	Do you want to have another child sometime, in addition to the one you are expecting?	
	YES [] NO [2] UNDECIDED [3]	
	(SKIP TO 5411) (SKIP TO 5411)	12
5403.	How many more children do you want to have, after the one you are expecting?	
	(NUMBER)	13
5404.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 215)	
	NO LIVE ONE OR MORE BIRTHS ☐ LIVE BIRTHS [2]	15
5405.	For how many months did you use any method to delay your getting pregnant?	
	(MONTHS) (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) (SKIP TO 5408)	16
5406.	Think back to the interval between your (last) birth and your current pregnancy. Was there any time during that interval when you or your husband were using a method so that you would not become pregnant?	
	YES I NO 2	
	(SKIP TO 5499)	18
*5407.	For how many months altogether did you use any method in the interval between your (last) child and your current pregnancy?	
	(INTERVIEWER: SUM UP SEPARATE PERIODS (MONTHS) IF APPROPRIATE)	
5408.	What was the last method you used (in that period)?	

(METHOD)

21

5409. Did you become pregnant while using that method, or had you stopped using before becoming pregnant? WHILE II HAD USING STOPPED (SKIP TO 5499) D.K. IS 5410. Why did you stop using that method?		YELLOW	
(SKIP T0 5499) 5411. Before you became pregnant this time, had you wanted to have any (more) children? YES I NO I WB I UNDECIDED I 5412. INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 215) NO LIVE ONE OR MORE BIRTHS I 4 LIVE BIRTHS 5413. For how many months altogether did you use any method to delay your getting pregnant? (INTERVIEWER: SUM UP SEPARATE PERIODS (MONTHS) 5414. Think back to the interval between your (last) birth and your current pregnancy. Was there any time during that interval when you or your husband were using a method so that you would not become pregnant? YES NO I YES NO I YES NO I (SKIP TO 5416) I 27 (SKIP TO 5499) 5415. For how many months altogether did you use any method in the interval between your last birth and your current pregnancy? IIII INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) 29 (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) 30	5409.	Did you become pregnant while using that method, or had you stopped using before becoming pregnant? WHILE I HAD I D.K. I USING STOPPED	23
have any (more) children? YES INO INCLIVE YES INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 215) NO LIVE BIRTHS INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 215) NO LIVE BIRTHS INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 215) NO LIVE BIRTHS INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 215) NO LIVE BIRTHS INTERVIEWER: SUM UP SEPARATE PERIODS (INTERVIEWER: SUM UP SEPARATE PERIODS (MONTHS) IF APPROPRIATE) (SKIP TO 5416) 5414. Think back to the interval between your (last) birth and your current pregnancy. Was there any time during that interval when you or your husband were using a method so that you would not become pregnant? YES INTERVIEWER: SUM UP SEPARATE PERIODS 5415. For how many months altogether did you use any method in the interval between your last birth and your current pregnancy? (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) 30	5410.		24
NO LIVE BIRTHS ONE OR MORE LIVE BIRTHS 2 5413. For how many months altogether did you use any method to delay your getting pregnant? 26 5413. For how many months altogether did you use any method to delay your getting pregnant? 26 (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) 27 5414. Think back to the interval between your (last) birth and your current pregnancy. Was there any time during that interval when you or your husband were using a method so that you would not become pregnant? 27 5415. For how many months altogether did you use any method in the interval between your last birth and your current pregnancy? 0 (MONTHS) (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) 29 30 30	5411.	have any (more) children?	25
method to delay your getting pregnant? (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) (SKIP TO 5416) 5414. Think back to the interval between your (last) birth and your current pregnancy. Was there any time during that interval when you or your husband were using a method so that you would not become pregnant? YES YES YES (SKIP TO 5499) 5415. For how many months altogether did you use any method in the interval between your last birth and your current pregnancy? (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) 30	5412.	NO LIVE ONE OR MORE	2.6
your current pregnancy. Was there any time during that interval when you or your husband were using a method so that you would not become pregnant? YES II NO II (SKIP TO 5499) 5415. For how many months altogether did you use any method in the interval between your last birth and your current pregnancy? (INTERVIEWER: SUM UP SEPARATE PERIODS IF APPROPRIATE) 30	5413.	method to delay your getting pregnant? (INTERVIEWER: SUM UP SEPARATE PERIODS (MONTHS) IF APPROPRIATE)	27
(INTERVIEWER: SUM UP SEPARATE PERIODS (MONTHS) + 30		your current pregnancy. Was there any time during that interval when you or your husband were using a method so that you would not become pregnant? YES I NO 2 (SK1P TO 5499) For how many months altogether did you use any method in the interval between your last birth and your current	29
5416. What was the last method you used (in that period)?		(INTERVIEWER: SUM UP SEPARATE PERIODS	30
(METHOD) 32	5416.		32
66	66		

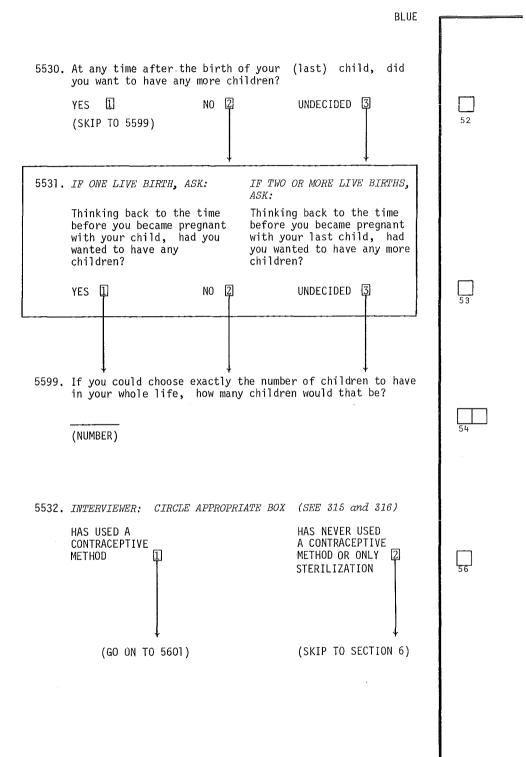
	YELLOW	1
5417.	INTERVIEWER: CIRCLE APPROPRIATE BOX (SEE 5411)	
	"YES" TO 5411 [] "NO" OR "UNDECIDED" TO 5411 [] []	34
	(SKIP TO 5499)	
EA10	Did you became programmer while using that method on had	
5418.	Did you become pregnant while using that method, or had you stopped using before becoming pregnant?	
	WHILE HAD D.K. USING STOPPED (SKID TO 5400)	35
	(SKIP TO 5499) (SKIP TO 5499)	35
_		
	5419. Why did you stop using that method?	
		36
5499.	↓ If you could choose exactly the number of children to have	
	in your whole life, how many children would that be?	
	(NUMBER)	37
	(SKIP TO 5601)	



	(METHOD)	27
	(121100)	
5513.	Since you were first married, have you ever wanted to h any children?	ave
	YES 1 NO 2 UNDECIDED 3	29
	(SKIP TO 5599) (SKIP TO 5599) (SKIP TO 5599)	29
5514.	Did you or your husband use any method at any time after birth of your (last) child (and before the sterilizat so that you would not become pregnant?	the ion)
	YES 1 NO 2	
	(SKIP TO 5517)	30
	5515. For how many months altogether did you use any method after your (last) child's birth?	
	(INTERVIEWER: SUM UP SEPARATE (MONTHS) SUM UP SEPARATE PERIODS IF APPROPRI	<i>ATE</i>)
	5516. What was the last method you used?	
	(METHOD)	33
5517.	At any time after the birth of your (last) child, did	you
	want to have any more children?	
	YES [] NO [2] UNDECIDED [3] (SKIP TO 5523) (SKIP TO 5523)	35

		BLUE	
		DEGE	
	IF ONE LIVE BIRTH, ASK: Think back to the time before you became pregnant with your baby. Was there any time when you or your husband were using a method so that you would not become pregnant? YES II NO [2] (SKIP TO 5599) Fan how ments	Was there any time during that interval when you or your husband were using a method so that you would not become pregnant? YES II NO II (SKIP TO 5599)	 36
5519.	For how many months altogether did you use any method before you became pregnant with your child? (MONTHS) (INTERVIEWER: SUM UP SEPARA!	For how many months altogether did you use any method in the interval between your (last) two births? (MONTHS) TE PERIODS, IF APPROPRIATE)	 37
5520.	What was the last method you us	sed during that period?	
	(METHOD)		39
5521.	Did you become pregnant while of stopped using before becoming p WHILE [] HAD USING STOPPED (SKIP TO 5599)	using that method, or had you pregnant? [2] D.K. [3] (SKIP TO 5599)	 41
	5522. Why did you stop using th	hat method?	

		BLUE	
5523.	IF ONE LIVE BIRTH, ASK:	IF TWO OR MORE LIVE BIRTHS, ASK:	
	Thinking back to the time before you became pregnant with your child, had you wanted to have any children?	Thinking back to the time before you became pregnant with your last child, had you wanted to have any more children?	
	YES 1 NO 2	YES 1 NO 2	
	UNDECIDED 3	UNDECIDED 3	43
5524.	Was there any time before the birth of your child when you or your husband were using a method to keep you from getting pregnant?	Was there any time in the interval between your (last) two births when you or your husband were using a method to keep you from getting pregnant?	
	YES [] NO [2]	YES] NO 2	44
	(SKIP TO 5599)	(SKIP TO 5599)	
5525.	For how many months altogether did you use any method before you became pregnant with your baby?	For how many months altogether did you use any method in the interval between your (last) two births?	
	(MONTHS) (INTERVIEWER: SUM UP SEPARA	(MONTHS)	45
	(METHOD)		47
5527.	INTERVIEWER: CIRCLE APPROPRIA	TE BOX (SEE 5523)	
	"YES" TO 5523 🗍	"NO" OR "UNDECIDED" 🛛	
	Ļ	(SKIP TO 5599)	49
5528.	Did you become pregnant while stopped using before becoming	using that method, or had you pregnant?	
	WHILE II HAD USING STOPPED	2 D.K. 3	
	(SKIP TO 5599)	(SKIP TO 5599)	50
Γ			
	5529. Why did you stop using t	nat method?	
	(SKIP TO 5599)		51
	· · · · · · · · · · · · · · · · · · ·		
			71



			WHITE	
	<u>NOTE</u> :		Y FOR WOMEN WHO HAVE EVER USED " IN COLUMN 3 OF SECTION 3 OR	
	5601.	INTERVIEWER: CIRCLE APPROF	PRIATE BOXES	
		CURRENTLY USING A METHOD □ ↓	NOT CURRENTLY USING A METHOD [2]	
	5602.	METHOD:	5603. LAST METHOD EVER USED:	12
		SKIP TO 5609)	(IF NOT KNOWN , ASK RESPONDENT)	14 14
	5604.	SUPPLY METHOD []	NON SUPPLY METHOD [2] (SKIP TO 5608)	 16
	5605.	From where (do, did) you (CURRENT OR LAST METHOD)(SE	normally get E 5602, 5603)	
		FAMILY PLANNING CLINIC	1	
		HOSPITAL		
		FAMILY PLANNING FIELD WORKE PHARMACY	R 3	17
		FAMILY DOCTOR	5	
		OTHER		
		(SPECIFY)	
	5606.	Have you always been able t them?	o get supplies when you needed	
		YES] (SKIP TO 5608)	NO [2]	
	5607.	. ,	↓ able to get the supplies when hat?	
				19
Ĺ	5608.		u been using, did you use) ithout interruption?	
		(CURRENT OR LAST METHOD)		
				20
		(MONTHS)		
				. 73

	IT OR LAST METHOD)	
YES 🗍	NO 2	22
	(SKIP TO SECT	10N 6)
↓ 5610. What was t	he method you used before ?	
(CU	RRENT OR LAST METHOD)	2 <u>3</u>
	(METHOD)	
5611. Why did yo to	(PENULTIMATE METHOD)	·
	(CURRENT OR LAST METHOD)	-
		-

General Mortality Module

INTRODUCTION

The standard form of the WFS Household Schedule, designed to be used for listing household members prior to selection of women for individual interview, is closely similar to the type of schedule used for censuses and simple demographic surveys throughout the developing world. It is thought that certain countries lacking adequate death registration may wish to take the opportunity offered by this household interview to collect simple data on mortality. To meet this potential demand, and also because of the possible relevance of mortality levels to fertility, the WFS has prepared a *module* consisting of a variant of the WFS Core Household Schedule, for the purpose of measuring mortality in participating countries where there are no adequate alternative sources of information on mortality.

Mortality questions are in the block in the top right hand corner of the expanded Household Schedule, and Columns (11) to (16) of the schedule itself. The block asks for deaths of household members during the preceding 24 months, by sex and age. When tabulated by months of occurrence, it is possible to extract the deaths occurring during the preceding 12 months. The advantage of asking for deaths in the last 24 months is that it facilitates the study of

- 1) incidence of deaths by time periods, reflecting progressive recall lapse; and
- 2) dating errors, which may be reflected in heaping of deaths in certain months such as the 13th. This could arise from the respondent replying 'About a year ago' in answer to the question on date of death.

The question on date of death also provides a safeguard against complete misunderstanding of the mortality question. Such misunderstanding has sometimes been evident in the fact that all dead children reported in Columns (21) and (22) are included in the 'current' deaths. Even if, as is more than likely, there is a general under-reporting of deaths in the last 12 or 24 months, the data can still be used to obtain an indirect estimate of the death rate by the Brass method which utilizes the proportionate distribution of deaths by age in conjunction with the age distribution.¹

Columns (11) and (12) on survival of first spouse should enable derivation of indirect estimate of adult mortality. Techniques are available for converting the data into life table survivorship probabilities.

Alternative estimates of adult mortality may also be obtained from the questions on survival of parents in Columns (13) and (15). These questions have yielded plausible and consistent estimates of mortality in several developing countries². However, possible bias due to correlation between the mortality of the parent and the number of offspring reporting on the same parent cannot be ignored. To combat this, a separate analysis of parent survival for eldest

¹ 'Note on a method of estimating mortality from distribution of deaths and population by age without knowledge of the relation of absolute numbers' presented to the 1973 IUSSP Conference, Liège.

² J. G. C. Blacker "The estimation of vital rates from census data in Kenya and Uganda' African Population Conference, Accra, 1971.

living children only may be made using the data obtained in Columns (14) and (16). The requisite analytical techniques have been drawn up at the London School of Hygiene and Tropical Medicine.³

Estimates of infant and child mortality may be derived from proportions dying among children ever born, tabulated by age of mother, using the techniques devised by Brass and Sullivan.⁴ Alternative estimates may also be obtained from the question on the survival of the most recent live birth in Column (27), though this question has been included more as a check to ensure that the right birth is reported in answer to the question on the date of the last birth in Columns (24) and (25).

The questions on the number of children who have died and on survival of the most recent live birth have been asked in many countries where death registration is inadequate or non-existent. Although these questions have often provided better information on mortality than any previously available, the limitations and errors of the data are well known. The questions on orphanhood and survivorship of first spouse were developed in an effort to obtain more reliable data. These questions have been asked largely in African countries (e.g., Kenya, Uganda, Cameroon, Chad, Mauritania), but also in Latin America (e.g., Honduras) and the Pacific.

To obtain further information on mortality, a new approach based on the survival of siblings has been developed at the London School of Hygiene and Tropical Medicine, together with appropriate analytical techniques. This has not yet been tested in the field but the following questions are suggested to countries wishing to use it: -

How many sons has your mother had, in all (including yourself)?	How many daughters has your mother had, in all (including yourself)?	How many of your mother's sons are still alive (including yourself)?	How many of your mother's daughter's are still alive (including yourself)?
			· · · · · · · · · · · · · · · · · · ·
Sons	Daughters	Sons	Daughters

The four columns needed for this information may be inserted at the end of the Mortality section of the attached module after Column (16). The two questions above may, if desired, be modified specifically to exclude the respondent from the mother's offspring. Whether the respondent is included or not is unimportant provided, of course, it is known which method has been used. Furthermore, without seriously reducing their usefulness, these questions could, if desired, be asked only of adults and of children above a certain age, or even of adults alone.

R. Clairin 'Estimation de la mortalité des adultes à partir des données sur la survie des ascendants: Exemple du Cameroon Occidental' African Population Conference, Accra, 1971. W. Brass and K. H. Hill 'Estimating adult mortality from orphanhood' IUSSP Conference, Liège, 1973.

- 3 W. Brass 'Mortality estimation by indirect means' *Population Bulletin*, the United Nations Economic and Social Office in Beirut, No. 4, January 1973.
- 4 J. M. Sullivan 'Models for the estimation of the probability of dying between birth and exact ages of early childhood' *Population Studies*, Vol. 26, No. 1, March 1972.

MEMBERS OF THE HOUSEHOLD WHO HAVE DIED IN THE LAST 24 MONTHS											
NAME	RELATIONSHIP	arry	AGE AT	DATE OF DEAT							
	RELATIONSHIP	SEX	DEATH	YEAR	MONTH						
-											
		-									
		L									

Now we would like some information about the people who ordinarily live in your household, or are staying with you now.

	AMES OF USUAL	RELATIONSHIP	RESID	ENCE	SEX	AGE	FDUC	ATION		MARITA	L STATUS:			MORT	TALITY			FERTILITY: FOR ALL WOMEN AGED										ELIGIBILITY	
ĺ	VISITORS								FO	R THOSE AGE	D AND	OVER					NUMBER OF LIVE BIRT				IVE BIRTHS		E BIRTHS SUM		TICULA	RS OF I	HER BIRTH	FERTILITY RESPONDENT	
	who usually live in your household	What is the relationship of this person to the head of the household?	this person usually live	Did this person sleep here last night?	Is this person male or female?	How old is (he/ she)?		was the highest		IF YES: Is (hc/she) now marified (M), widowed (W), divorced (D) or separated (S)?	married more than once?	IF MARRIED MORE THAN ONCE: Is (his first wife/her first hus- band) alive?	Is (his/ her) father still alive?	Is (hc/ she) the eldest living child of (his/her) father?		she) the eldest living child of (his/her)	any ch of her living her? IF YE:	iildren own with S: How sons w many	any ch of her who do live with IF YES	ildren own o not th hor? S: How sons w many ters?	Has she given b to a ch who lat died? IF YES many s and ho daught have di	S: How ons w many ers ed?	Just to make sure I have this right she has had (SUM) births. Is this correct IF NO CORRECT RESPONSES		month t did her a occur?	Was that a boy or a girt?		GIVE LINE NUMBER OF PERSON ANSWERING COLUMNS 21-31	TICK ALL WOMEN ELIGIBLE FOR INDIVIDUAL INTERVIEW
	(1)	(2)	Y/N (3)	Y/N (4)	M/F (5)	(6)	Y/N (7)	(8)	Y/N (9)	(10)	Y/N (11)	Y/N (12)	Y/N (13)	Y/N (14)	Y/N (15)	Y/N (16)	S (17)	D (18)	S (19)	D (20)	\$ (21)	D (22)	(23)	MONTH (24)	YEAR (25)	B/G (26)	Y/N (27)	(28)	(29)
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Just to make sure I have a complete listing:

> IF CONTINUATION SHEET USED, TICK HERE

1. Are there any other persons, such as small children or infants, that we have not listed?

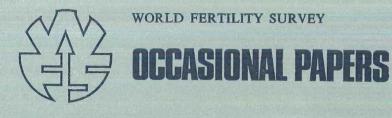
In addition, are there any other people who may not be members of your family, such as domestic servants, friends or lodgers who usually live here?

YES D (ENTER EACH IN TABLE) NO D

3. Do you have any guests or visitors temporarily staying with you?

YES D (ENTER EACH IN TABLE) NO D YES D (ENTER EACH IN TABLE) NO D

[REDUCED FROM 17%"x 11%"]



- 1. Fertility and Related Surveys
- 2. The World Fertility Survey: **Problems and Possibilities**

William G. Duncan

J. C. Caldwell

World Fertility Survey Inventory: Major Fertility and Related Surveys 1960-73

- 3. Asia
- 4. Africa
- 5. Latin America
- 6. Europe, North America and Australia
- 7. The Study of Fertility and Fertility Change in Tropical Africa
- 8. Community-Level Data in Fertility Surveys
- 9. Examples of Community-Level Ouestionnaires Ronald Freedman
- 10. A Selected Bibliography of Works on Fertility György T. Acsádi
- 11. Economic Data for Fertility Analysis
- 12. Economic Modules for use in Fertility Surveys DeborahS. Freedman and Eva Mueller in Less Developed Countries
- 13. Ideal Family Size
- 14. Modernism
- 15. The Fiji Fertility Survey: A Critical Commentary
- 16. The Fiji Fertility Survey: A Critical Commentary-Appendices
- 17. Sampling Errors for Fertility Surveys
- 18. The Dominican Republic Fertility Survey: An Assessment
- 19. WFS Modules: Abortion · Factors other than WFS Central Staff Contraception Affecting Fertility · Family Planning · General Mortality

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