RISK FACTORS QUESTIONNAIRE ESTAMPA

Participant Identification Barcode

RFF						
	Code of interviewer: _ _					
I want to take a few minutes to ask you some questions about yourself, your health and habits. This information could help us to better understand the relation between HPV infection and cervical lesions. I want to remind you that all information you provide is confidential and will be used only for the study. Finally, I want to remind you that you can refuse to respond any question without affecting your participation in the study.						
2. I would like to ask you about your cigarette consumption.	In your lifetime, have you ever smoked 100 cigarettes					
(5 boxes) or more?						
Yes, currently smokingYes, but do not smoke anymore	No, never [Go to question 7]NR/NK [Go to question 7]	Ш				
3. How old were you when you started smoking?	(99 if NR/NK) _					
4. On average, how many cigarettes did you or do you smoke? _ _ per						
1 Day2 Week3 Month	4 Year 9 NR/NK (If currently smoking, go to Question 7)					
5. How old were you when you stopped smoking?	(99 if NR/NK) _					
6. For how many years did you smoke cigarettes? (Do not include time spans when she quit)	(99 if NR/NK) Years Months					
The next questions are about your sexual history. I realize that this is a sensitive subject, but it is very important for the study. Please take the time to recall this information as accurately as possible. I would like to remind you that the information you give will be confidential.						
7. How old were you when you had your first menstruation?	(99 if NR/NK) _					
8. How old were you when you first had sexual intercourse with a man?	(0 if never have had sexual intercourses [END])					
9. Throughout your life, with how many different men have you had sexual intercourse?						
If one man, go to question 13						

11. During the past 12 months, with how many different men have you had sexual intercourse? If an exact number of men, go to question 16

If NR/NK, go to question 12

More than one, go to question 11 NR/NK, go to question 10

10. Would you say they were:

2

3

2 or 3

4 or 5

6 or 7

September 2014 RFFe_v2.1

4

5

between 8 and 10

more than 10

NR/NK

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1 2 or 3	12. Would you say they were:								
3 4 or 5 3 6 or 7 So to question 16			4	between 8 an	d 10				
3 6 or 7 Go to question 16 13. As far as you know, what is the total number of women with whom your partner has had sexual intercourse, excluding you? If exact number of women, go to question 15 If Other, go to question 14 14. Would you say they were: 1 2 or 3 2 4 or 5 3 6 or 7 15. During the last 12 months, have you had sexual intercourse? 1 Yes 2 No 9 NR/NK									
13. As far as you know, what is the total number of women, go to question 15 14. Would you say they were: 1	3 6 or 7		9	NK/NK					
If exact number of women, go to question 15 If Other, go to question 14 14. Would you say they were: 1		Go	to q	uestion 16					
14. Would you say they were: 1 2 or 3 2 4 or 5 3 6 or 7 15. During the last 12 months, have you had sexual intercourse 1 1 Yes 2 No 9 NR/NK If No or NR/NK, go to question 18 17. How many times? 18. Have you and your partner ever used a condom? 19. During the periods when you and your partner used a condom, did you use it 1 Everytime you had sexual intercourse 1 Everytime you had sexual intercourse 1 Everytime you had sexual intercourse 1 Rarely 9 NR/NK 1 Rarely 9 NR/NK	13. As far as you know, what is the total number of women with whom your partner has had sexual intercourse, excluding you?								
14. Would you say they were: 1 2 or 3 2 4 or 5 3 6 or 7 15. During the last 12 months, have you had sexual intercourse? 1 Yes 2 No 9 NR/NK 16. Have you ever been pregnant? 1 Yes 2 No 9 NR/NK 17. How many times? 1 Yes 2 No 9 NR/NK 18. Have you and your partner ever used a condom? 1 Yes 2 No 9 NR/NK	If exact number of women, go to question 15								
1 2 or 3 2 4 or 5 3 6 or 7 15. During the last 12 months, have you had sexual intercourse? 1 Yes 2 No 9 NR/NK 1 Yes 2 No 9 NR/NK 1 Have you ever been pregnant? 1 Yes 2 No 9 NR/NK 1 NR/NK, go to question 18 1 Yes 2 No 9 NR/NK 1 Yes 3 No 9 NR/NK 1 Yes 4 Namely out partner ever used a condom? 1 Yes 2 No 9 NR/NK 1 Yes 3 No 9 NR/NK 1 Yes 4 Namely 9 NR/NK 1 Rarely 9 NR/NK 1 Rarely 9 NR/NK Condition of the time when you had sexual intercourse 2 Most of the time when you had sexual intercourse 3 NR/NK	If Other, go to question 14				<u> </u>	_ _			
15. During the last 12 months, have you had sexual intercourse? 15. During the last 12 months, have you had sexual intercourse? 16. Have you ever been pregnant? 1 Yes 2 No 9 NR/NK 17. How many times? 1 Yes 2 No 9 NR/NK If No or NR/NK, go to question 18 17. How many times? 1 Yes 2 No 9 NR/NK If No or NR/NK, go to question 20 19. During the periods when you and your partner used a condom, did you use it 1 Everytime you had sexual intercourse 2 Most of the time when you had sexual intercourse 3 NS/NR 1 Yes 2 No 9 NR/NK If No or NR/NK, go to question 20	14. Would you say they were:								
2 4 or 5 3 6 or 7 15. During the last 12 months, have you had sexual intercourse? 1 Yes 2 No 9 NR/NK 1 No or NR/NK, go to question 18	1 2 or 3	=							
15. During the last 12 months, have you had sexual intercourse? 1 Yes 2 No 9 NR/NK 1 Yes 2 No 9 NR/NK 16. Have you ever been pregnant? 1 Yes 2 No 9 NR/NK 17. How many times? 1 Yes 2 No 9 NR/NK 18 No or NR/NK, go to question 18 19 NR/NK 10 NR/NK, go to question 20 19. During the periods when you and your partner used a condom, did you use it 1 Everytime you had sexual intercourse 1 Rarely 1 NR/NK 1 Rarely 1 Rarely 1 NR/NK		_	_						
Finally, I want to ask you some questions about your pregnancies and the use of contraceptive methods, please try to remember this information with the major accuracy. 1 Yes 2 No 9 NR/NK If No or NR/NK, go to question 18 17. How many times? 1 Yes 2 No 9 NR/NK If No or NR/NK, go to question 20 1 Yes 2 No 9 NR/NK If No or NR/NK, go to question 20 19. During the periods when you and your partner used a condom, did you use it 1 Everytime you had sexual intercourse 2 Most of the time when you had sexual intercourse	3 6 or 7	,	143/	IVIX					
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1 Yes 2 No 9 NR/NK If No or NR/NK, go to question 18 1. Yes 2 No 9 NR/NK If No or NR/NK, go to question 18 1. Yes 2 No 9 NR/NK If No or NR/NK, go to question 18 1. Yes 2 No 9 NR/NK If No or NR/NK, go to question 20 1. Yes 2 No 9 NR/NK If No or NR/NK, go to question 20 1. Yes 2 No 9 NR/NK If No or NR/NK, go to question 20 1. Everytime you had sexual intercourse 2. Most of the time when you had sexual intercourse 3. NR/NK	intercourse?								
17. How many times? 18. Have you and your partner ever used a condom? 1 Yes If No or NR/NK, go to question 18 1 Yes If No or NR/NK, go to question 20 19. During the periods when you and your partner used a condom, did you use it 1 Everytime you had sexual intercourse 2 Most of the time when you had sexual intercourse									
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If No or NR/NK, go to question 20 19. During the periods when you and your partner used a condom, did you use it 1 Everytime you had sexual intercourse 2 Most of the time when you had sexual intercourse	17. How many times?				_				
19. During the periods when you and your partner used a condom, did you use it 1 Everytime you had sexual intercourse 2 Most of the time when you had sexual intercourse 9 NR/NK	18. Have you and your partner ever used a condom?	1 Yes		2 No	9 NR/NK				
1 Everytime you had sexual intercourse 2 Most of the time when you had sexual intercourse 4 Rarely 9 NR/NK		If No or	NR/N	IK, go to questic	on 20				
1 Everytime you had sexual intercourse 2 Most of the time when you had sexual intercourse 9 NR/NK	19. During the periods when you and your partner used a condom, did you use it								
2 Most of the time when you had sexual intercourse	1 Everytime you had sexual intercourse								
3 Sometimes	2 Most of the time when you had sexual intercour	se		9	NK/NK				
	3 Sometimes								

September 2014 RFFe_v2.1

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20. For each of the contraceptive methods listed below, please indicate to me if you have used it or not and if yes, please tell me how old you were when you started and stopped using it and for how long did you use it.								
	No Yes	Age at start	Age at stop	Time of use Months/Years	NR/NK			
a. Pills		_ _	_ _	_ _ / _ _				
b. Injections		_ _	_ _	_ _ / _ _				
c. Implant s		_ _	_ _	_ _ / _ _				
d. IUD		_ _	_ _	_ _ / _ _				
e. Other, specify			_ _	_ _ / _ _				
21. Observations:								

September 2014 RFFe_v2.1