

BEHAVIOR IN PREGNANCY STUDY BIPS

INTERVIEW PACKET - PL

(Revised June 7, 1993)

Subject # _____
Hospital ID# _____
Date _____
Interviewer _____

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PREFACE**FIND RESPONDENT AND INTRODUCE SELF:**

Hi/ Hello, my name is (YOUR FIRST AND LAST NAME), and I will be interviewing you today. If you will come with me, we can move to a room where I can interview you in private.

MOVE TO INTERVIEW ROOM.**IF PARTNER PRESENT:**

It is important that we talk to each woman in our study privately. I will bring her back here in about 30 minutes. Thank you.

IF NECESSARY:

I'm sorry but my instructions are that I cannot conduct the interview with anyone else present, not even a husband or partner. Thank you for your cooperation.

IF CHILDREN PRESENT, SEE IF ANOTHER RESEARCH ASSOCIATE OR STAFF MEMBER CAN ASSIST. IF NOT, MAKE THE BEST OF IT. INFANTS OKAY.

ONCE SEATED:

The interview today should take about 15-20 minutes, including a questionnaire packet that I would like you to fill out. I'd like to remind you that your answers today are completely voluntary, anonymous and confidential.

The interview today concerns mainly the events that occurred during pregnancy and since you lost the baby. Please keep in mind that there are no right or wrong answers; we are interested in your thoughts and feelings. Let's get started.

TIME STARTED: _____:_____

PART 1 - LIFE EVENTS

This set of questions concerns events that may have occurred during your pregnancy and since you lost the baby; and if they occurred, whether they upset you or not.

I will read you a list of things that sometimes happen to people. Please tell me if any of these things have happened during your pregnancy and since you lost the baby. You should answer simply Yes or No.

FIRST, ASK WHETHER EACH EVENT OCCURRED.

SECOND, GO BACK AFTERWARDS AND ASK WHEN, TO WHOM AND HOW UNDESIRABLE FOR ANY EVENT THAT THE RESPONDENT ANSWERED YES.

1. First, let's talk about (EVENT). Please describe in a few words what exactly happened.
2. (ASK IF NOT OBVIOUS) To whom did this event occur (you or someone else)?
3. In what month did this occur?
4. How negative or undesirable was this event or experience for you personally? Would you say....

not at all,	1
slightly undesirable,	2
somewhat, or	3
very much?	4

COMPLETE COMPLETE
1ST 2ND

During your pregnancy...

	N	Y	In what month did this occur? MM/YY	How negative or undesirable was this event or experience for <u>you</u> personally?
1. have you had a change in where you live or who you live with? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
2. has anyone important to you moved away? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
3. have you lived apart from your partner or spouse for practical reasons (such as he works somewhere far away or he has to live somewhere else)? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
4. have you had extra-heavy home or family responsibilities (such as housework or caring for an older relative or a child)? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much

	1ST		2ND	
	N	Y	In what month did this occur? MM/YY	How negative or undesirable was this event or experience for <u>you</u> personally?
During your pregnancy... 5. have you had pressures or problems at work? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
6. have you lost your apartment, home, car or something else you value? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
7. did you or someone close to you lose a job or experience a lay-off from work? SPECIFY WHO: _____ BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
8. did you have serious problems with money (such as a major loss of income or a debt that cannot be repaid)? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
9. have you had serious arguments several times with any one person? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much

	1ST		2ND	
	N	Y	In what month did this occur? MM/YY	How negative or undesirable was this event or experience for <u>you</u> personally?
During your pregnancy... 10. have you and your partner (or spouse) had any problems in your relationship? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
11. have you had serious problems in your sexual relationship? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
12. have you or has someone close to you separated or divorced from a partner or spouse? SPECIFY WHO: _____ BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
13. have you or has someone close to you had problems with use of alcohol or drugs? SPECIFY WHO: _____ BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
14. have you or has someone close to you had nervous or emotional problems (other than any associated with drinking or drug use)? SPECIFY WHO: _____ BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much

	1ST		2ND	
	N	Y	In what month did this occur? MM/YY	How negative or undesirable was this event or experience for you personally?
During your pregnancy... 15. have you or has someone close to you had a serious injury, illness, or hospitalization? SPECIFY WHO: _____ BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
16. have you or has someone close to you been mugged or personally attacked? SPECIFY WHO: _____ BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
17. has anyone close to you died (BESIDES THE BABY SHE WAS CARRYING)? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
18. have you been in a serious motor vehicle accident? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
19. have you or has someone close to you been arrested by the police, had problems with the law or immigration, or been in jail? SPECIFY WHO: _____ BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much

	1ST		2ND	
	N	Y	In what month did this occur? MM/YY	How negative or undesirable was this event or experience for <u>you</u> personally?
During your pregnancy... 20. have you been threatened with physical harm by anyone? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
21. have you been robbed or burglarized? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
22. have you experienced sexual harassment or discrimination? (IF YES, SPECIFY WHICH BY CIRCLING) BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
23. have you experienced racial discrimination or prejudice? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
24. have you been in a hurricane, earthquake, fire, or other major disaster? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much

	1ST		2ND	
	N	Y	In what month did this occur? MM/YY	How negative or undesirable was this event or experience for <u>you</u> personally?
25. did you have any medical problems or complications in this pregnancy? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much
26. have any other events or problems come up during your pregnancy that we have not mentioned? BRIEF DESCRIPTION:	0	1		1 - not at all 2 - slightly 3 - somewhat 4 - very much

PART 2- QUESTIONNAIRE

At this point, we would like you to complete this questionnaire packet, and I will finish the interview afterwards. (OPEN THE QUESTIONNAIRE TO THE GENERAL INSTRUCTIONS.) Before you begin, I'd like to go over the general instructions with you. (READ INSTRUCTIONS IN QUESTIONNAIRE PACKET TO HER). I will be here in case you need to ask me something.

<p>This packet includes a number of different questionnaires. Please be sure to read the instructions for each separate section. Answer each question as quickly and carefully as possible; do not go back over your answers. Please remember that there are no right or wrong answers, and that your responses are completely confidential. If at any time you have any questions, feel free to ask the Interviewer.</p>

AFTERWARDS, CHECK FOR COMPLETENESS, THANK HER, AND RESUME INTERVIEW:

Now I have some more questions, but on a topic different from the ones I asked before.

PART 3 - RELATIONSHIP WITH BABY'S FATHER

This next set of questions is about your relationship with the baby's father.

1. Could you please tell me which of the following statements best describes your situation:

- you are married to the baby's father,1
 you are living with the baby's father, or.....2
 you are neither married to nor living with the baby's father3

2. How often do you see the baby's father? Would you say...

- every day,1 (SKIP TO PART 4)
 several times a week,2 (SKIP TO PART 4)
 once or twice a month,.....3 (SKIP TO PART 4)
 less than once a month, but once in a while, or,4 (SKIP TO PART 4)
 never?.....5

3. Is there someone whom you think of as the baby's father, or who does the things he would usually do?

- NO.....0 (SKIP TO PART 6, PAGE #15
 AND READ SPECIAL INSTR)
 YES.....1

4. Is this person your partner, a relative, or a friend?

- PARTNER1
 PARENT2
 SIBLING3
 FRIEND4
 OTHER5

FOR THE NEXT SECTION, SUBSTITUTE THIS PERSON IN PLACE OF "BABY'S FATHER"
 WHEREVER APPLICABLE

PART 4 - RECEIVED SUPPORT/BF

Some women receive a little help or support from the baby's father (OR SUBSTITUTE) after a loss like this, some receive a lot, and others receive none at all. The next set of questions is about whether or not you have received help or support from the baby's father (OR SUBSTITUTE) since you lost the baby. I'll be asking you about three different kinds of help or support and, for each one, I'll ask you how often you've received that type of support and then how satisfied you are with it. When rating your satisfaction, please consider whether you received each type of support and if you did, the way in which it was given. (HAND CARDS A AND E.)

CARD A

NEVER	1
RARELY	2
SOMETIMES	3
OFTEN	4
ALMOST ALWAYS	5

CARD E

NOT AT ALL SATISFIED	1
A LITTLE SATISFIED	2
MODERATELY SATISFIED	3
VERY SATISFIED	4
COMPLETELY SATISFIED	5

- 1a. Since you lost the baby, how often has the baby's father (OR SUBSTITUTE) assisted you with things you had to do such as errands, household chores, or transportation?

NEVER	1
RARELY	2
SOMETIMES	3
OFTEN	4
ALMOST ALWAYS	5

IF NEVER, TELL THEM THAT THEY SHOULD RATE HOW SATISFIED THEY ARE WITH NOT RECEIVING THAT SUPPORT.

- 1b. Overall, how satisfied are you with that?

NOT AT ALL SATISFIED	1
A LITTLE SATISFIED	2
MODERATELY SATISFIED	3
VERY SATISFIED	4
COMPLETELY SATISFIED	5

- 2a. Since you lost the baby, how often has the baby's father (OR SUBSTITUTE) listened to you and understood your feelings?

NEVER	1
RARELY.....	2
SOMETIMES	3
OFTEN.....	4
ALMOST ALWAYS	5

2b. Overall, how satisfied are you with that?

NOT AT ALL SATISFIED.....	1
A LITTLE SATISFIED	2
MODERATELY SATISFIED	3
VERY SATISFIED.....	4
COMPLETELY SATISFIED	5

3a. Since you lost the baby, how often has the baby's father (OR SUBSTITUTE) shown interest and concern for your well-being?

NEVER	1
RARELY.....	2
SOMETIMES	3
OFTEN.....	4
ALMOST ALWAYS	5

3b. Overall, how satisfied are you with that?

NOT AT ALL SATISFIED.....	1
A LITTLE SATISFIED	2
MODERATELY SATISFIED	3
VERY SATISFIED.....	4
COMPLETELY SATISFIED	5

PART 5 - NEG. SOCIAL INTERACTIONS/BABY'S FATHER

Our close relationships can be stressful as well as supportive. The next few questions are about various types of stress you may have felt in your relationship with **your baby's father** (OR BF SUBSTITUTE) since you lost the baby. Please answer these questions using this card (HAND CARD A).

CARD A

NEVER	1
RARELY	2
SOMETIMES	3
OFTEN	4
ALMOST ALWAYS	5

Since you lost the baby...	NEVER	RARELY	SOME-TIMES	OFTEN	ALMOST ALWAYS
1. Has he criticized you or been displeased with you?	1	2	3	4	5
2. Has he been angry or short-tempered with you?	1	2	3	4	5
3. Has he disappointed you or let you down?	1	2	3	4	5
4. Has he bugged you or got on your nerves?	1	2	3	4	5
5. Has he burdened you or put unreasonable demands on you?	1	2	3	4	5
6. Has he threatened to harm you physically?	1	2	3	4	5
7. Has he harmed you physically in any way?	1	2	3	4	5
8. Has he done anything else during this pregnancy that was upsetting, unpleasant, or harmful to you?	1	2	3	4	5

PART 6 - RECEIVED SUPPORT/FAM/FR

Now I'd like to ask you some more questions about the help or support that you might have received from others since you lost the baby. But this time, I'd like you to think about people other than the baby's father (OR SUBSTITUTE). This might include your parents, brothers or sisters, friends, or anyone else you spend time with. Again, please use these two cards (HAND CARD A AND E).

IF SKIPPED PART 9 (Baby's Father Support), READ THIS LEAD-IN:

Some women receive a little help or support after a loss like this, some receive a lot, and others receive none at all. The next set of questions is about whether or not you have received help or support from other people since you lost the baby. This might include parents, brothers or sisters, friends, or anyone else you spend time with. I'll be asking you about six different kinds of help or support and, for each one, I'll ask you how often you've received that type of support and then how satisfied you are with it. When rating your satisfaction, please consider whether you received each type of support and if you did, the way in which it was given. (HAND CARDS A AND E.)

CARD A

NEVER	1
RARELY	2
SOMETIMES	3
OFTEN	4
ALMOST ALWAYS	5

CARD E

NOT AT ALL SATISFIED	1
A LITTLE SATISFIED	2
MODERATELY SATISFIED	3
VERY SATISFIED	4
COMPLETELY SATISFIED	5

- 1a. Since you lost the baby, how often has anyone (other than baby's father/BF SUBSTITUTE) assisted you with things you had to do such as errands, household chores, or transportation?

NEVER	1 (SKIP TO 1C)
RARELY	2
SOMETIMES	3
OFTEN	4
ALMOST ALWAYS	5

- 1b. Who in particular did this? (IF MENTIONED, CIRCLE 1; OTHERWISE CIRCLE 0)

MOTHER/FATHER	0.....1
BROTHER/SISTER	0.....1
OTHER RELATIVE	0.....1
FRIEND	0.....1
OTHER (.....)	0.....1

1c. Overall, how satisfied are you with that?

NOT AT ALL SATISFIED.....1
 A LITTLE SATISFIED2
 MODERATELY SATISFIED3
 VERY SATISFIED.....4
 COMPLETELY SATISFIED5

2a. Since you lost the baby, how often has anyone (other than baby's father/BF SUBSTITUTE) shown interest and concern for your well-being?

NEVER1 (SKIP TO 2C)
 RARELY.....2
 SOMETIMES3
 OFTEN.....4
 ALMOST ALWAYS5

2b. Who in particular did this? (IF MENTIONED, CIRCLE 1; OTHERWISE CIRCLE 0)

MOTHER/FATHER0.....1
 BROTHER/SISTER0.....1
 OTHER RELATIVE.....0.....1
 FRIEND0.....1
 OTHER (.....).....0.....1

2c. Overall, how satisfied are you with that?

NOT AT ALL SATISFIED.....1
 A LITTLE SATISFIED2
 MODERATELY SATISFIED3
 VERY SATISFIED.....4
 COMPLETELY SATISFIED5

3a. Since you lost the baby, how often has anyone (other than baby's father/BF SUBSTITUTE) understood your feelings?

NEVER1 (SKIP TO 3C)
 RARELY.....2
 SOMETIMES3
 OFTEN.....4
 ALMOST ALWAYS5

3b. Who in particular did this? (IF MENTIONED, CIRCLE 1; OTHERWISE CIRCLE 0)

MOTHER/FATHER0.....1
 BROTHER/SISTER0.....1
 OTHER RELATIVE.....0.....1
 FRIEND0.....1
 OTHER (_____).....0.....1

3c. Overall, how satisfied are you with that?

NOT AT ALL SATISFIED.....1
 A LITTLE SATISFIED2
 MODERATELY SATISFIED3
 VERY SATISFIED.....4
 COMPLETELY SATISFIED5

PART 7 - BELIEFS ABOUT PREGNANCY

1. Do you feel that there was anything you could have done that would have prevented medical problems from occurring during your pregnancy?

1
Not at All

2
Somewhat

3
Moderately

4
Very Much

Please explain:

2. Do you feel that there was anything you could have done during pregnancy that would have made your baby healthy?

1
Not at All

2
Somewhat

3
Moderately

4
Very Much

Please explain:

GENERAL INTERVIEW CLOSING

That's all for today.

Is there anything else that you wanted to tell me?

May we contact you again by phone or mail in a few months?

YES NO

Address _____

Phone _____

Closest contact phone or address _____

Thank you for your time. Take care.

TIME ENDED: ____:____

REMINDER: REVIEW INTERVIEW AND BE SURE IT'S COMPLETE.