

Questions documentation

Deltakerskjema Participation questionnaire

The Norwegian Mother and Child Cohort Study (MoBa)

Recipients:

2. generation MoBa women who participate in a clinical examination performed in the MoBa collection “Unge kvinners fruktbarhet”

Version	Date	Performed by	Description
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General informaion

Questionnaire distributed at the physical premises of a fertility clinic. Participants are asked to fill out the questionnaire on a tablet while they are attending a clinical examination at a fertility clinic.

There are three versions of the questionnaire, A, B and C. However, there is no difference in content between versions B to C. The only difference lies is the way the participants access the questionnaire after logging in. When this documentation refers to version B, it also refers to version C.

Text from text boxes will not be delivered as is. None of the texts in this questionnaire is coded as of 20.11.2024.

Some participants have been able to answer follow-up questions without answering the main questions due to a technical issue. When using data from follow-up questions, make sure that the main question has been answered as expected

Municipality

Q		Response options	Variable name
	Version A and B		
1	Which municipality do you currently live in (meaning the municipality in which you spend the most of your year)?	Drop-down list with all municipalities in Norway (anno 2021)	WD10

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

Revision during the data collection period:

No revisions have been made

Employment

Q	Version A and B	Response options	Variable name
2	What do you occupy your time with these days? Select one or more options <i>[Multiple choice]</i>	Attending high school	WD11
		Attending higher education	WD12
		Apprenticeship	WD13
		Mandatory military service	WD14
		Attending folk high school	WD15
		Having a “gap year”	WD16
		Unemployed /temporarily laid off	WD17
		On sick leave / disabled / temporarily disabled (recovery)	WD18
		Employed in private sector	WD19
		Employed in public sector	WD20
		Self-employed	WD21
		Freelancer	WD22
		Other	WD23
2.1	What else do you usually do? <i>This item is only shown if option “Other” is selected in question “2. What do you occupy your time with these days?”</i>	<i>[Text box]</i>	WD24

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

This is a measure of education or work situations of the young women

Revision during the data collection period:

No revisions have been made

Living situation

Q	Version A and B	Response options	Variable name
3	Living situation Select one or more options <i>[Multiple choice]</i>	I live alone	WD25
		I live with spouse	WD26
		I live with boyfriend / girlfriend	WD27
		I live with parent(s) or stepparent(s)	WD28
		I live with sibling(s) / half sibling(s) / stepsibling(s)	WD29
		I live with friends / in a shared housing / barracks (Version B)	WD206
		I live with friends (Version A)	WD30
		I live with my own / other's children	WD31
		I live with other than the options listed above	WD32

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

This is a measure of the living situations for the young women

Revision during the data collection period:

Added in version B “in a shared housing / barracks” to the response option “I live with friends” in version A.

Education

Q		Response options	Variable name
4	Current completed level of education <i>[Radio button]</i>	1. Elementary school 2. Vocational high school 3. 3-year high school general studies / junior college 4. Regional technical college / 4-year university degree (bachelor's degree, nurse, teacher, engineer) 5. University / technical college, more than 4 years (master's degree, medical doctor, PhD) 6. Other	WD33
4.1	Specify which other education <i>This item is only shown if option "Other" is selected in question "4. Current completed level of education?"</i>	<i>[Text box]</i>	WD34
5	Planned level of education? <i>[Radio button]</i>	1. Vocational high school 2. 3-year high school general studies / junior college 3. Regional technical college / 4-year university degree (bachelor's degree, nurse, teacher, engineer) 4. University / technical college, more than 4 years (master's degree, medical doctor, PhD) 5. Other	WD35
5.1	Specify which other education you are planning <i>This item is only shown if option "Other" is selected in question "5. What education level are you planning for?"</i>	Other, specify <i>[Text box]</i>	WD36

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

These are standard measures of education levels.

Revision during the data collection period:

No revisions have been made.

Income

Q		Response options	Variable name
6	What was your gross income last year <i>[Drop-down list]</i>	1. No income 2. Less than 300 000 NOK 3. 300-399 999 NOK 4. 400-499 999 NOK 5. 500-599 999 NOK 6. 600-699 999 NOK 7. 700-799 999 NOK 8. 800-899 999 NOK 9. 900-999 999 NOK 10. More than 1 000 000 NOK 11. Don't know	WD37
7	What was your mother's gross income last year <i>[Drop-down list]</i>	1. No income 2. Less than 300 000 NOK 3. 300-399 999 NOK 4. 400-499 999 NOK 5. 500-599 999 NOK 6. 600-699 999 NOK 7. 700-799 999 NOK 8. 800-899 999 NOK 9. 900-999 999 NOK 10. More than 1 000 0 00 NOK 11. Don't know 12. Not relevant	WD38
8	What was your father's gross income last year <i>[Drop-down list]</i>	1. No income 2. Less than 300 000 NOK 3. 300-399 999 NOK 4. 400-499 999 NOK 5. 500-599 999 NOK 6. 600-699 999 NOK 7. 700-799 999 NOK 8. 800-899 999 NOK 9. 900-999 999 NOK 10. More than 1 000 000 NOK 11. Don't know 12. Not relevant	WD39

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

Question was developed for MoBa to survey family income

Revision during the data collection period:

No revisions have been made

Life experiences

Q		Response options	Variable name
9	Did you experience any of the following before the age of 16		
9.1	Economic problems in your childhood home	[Radio buttons] 1. No 2. Yes	WD40
9.2	A conflicted relationship between your parents		WD41
9.3	Parent's divorcing		WD42
9.4	Being bullied over time		WD43
9.5	Having troubles paying attention at school		WD44

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

Early life experiences can be important for future life family planning and decisions affecting fertility

Revision during the data collection period:

No revisions have been made

Gender identity

Q		Response options	Variable name
10	What gender are you? <i>[Radio buttons]</i>	1. Male 2. Female 3. Changed legal gender to male 4. Changed legal gender to female 5. Wish for more options	WD45
10.1	We can only use a limited number of categories when we are analyzing data. Considering this, we want to ask which of the following alternatives best describe your current gender identity? Please cross off the box that best suits you. "I prefer to be in the group with":		
	Version B <i>[Radio buttons]</i>	1. Male 2. Trans-male 3. Female 4. Trans-female 5. Cross dresser /transvestite/agender 6. Non-binary / agender 7. I don't know / I don't prefer anything in particular 8. Other	WD207
	Version A <i>[Radio buttons]</i>	1. Male/trans-male 2. Female/trans-female 3. Cross dresser /transvestite/agender 4. Non-binary / agender 5. I don't know / I don't prefer anything in particular 6. Other	WD46

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

Gender identity is an important potential predictor for later health outcomes.

Revision during the data collection period:

Response options for 10.1 re-formulated between version A and B, therefore data are stored in different variables.

Menstruation

Q		Response options	Variable name
11	How old were you when you had your first menstrual period?		
	[Drop-down list]	1. 7 years 2. 8 years 3. 9 years ... 16. 22 years 17. Don't remember 18. Have not yet had my first menstrual bleeding	WD47
11.1	And [Drop-down list] <i>This item is only shown if «7 years», «8 years», «9 years», «10 years», «11 years», «12 years», «13 years», «14 years», «15 years», «16 years», «17 years», «18 years», «19 years», «20 years», «21 years» or «22 years» has been selected for previous question</i>	1. 0 months 2. 1 month 3. 2 months ... 11. 10 months 12. 11 months 13. Don't remember	WD48
12	Do you use painkillers in relation to your menstrual period?		
	Version B [Radio buttons] <i>This item is only shown if «7 years», «8 years», «9 years», «10 years», «11 years», «12 years», «13 years», «14 years», «15 years», «16 years», «17 years», «18 years», «19 years», «20 years», «21 years» or «22 years» has been selected for «11. How old were you when you had your first menstrual period?»</i>	1. Never / rarely 2. Sometimes 3. Often 4. Every time	WD208
	Version A [Radio buttons] <i>(Question 13, no dependency to previous question)</i>	1. Never / rarely 2. Sometimes 3. Often 4. Every time	WD50
	Do you have pain during menstrual period?		
	Version A [Radio buttons] <i>(Question 12, no dependency to previous question)</i>	1. I have so much pain that I am usually bedridden 2. The pain makes it necessary to scale down my everyday activities (but I am not bedridden) 3. I have pain, but manage to do my usual everyday activities 4. I don't have pain	WD49
13	Do you experience pain around the time of your menstrual period, if you are not using painkillers?		
	Version B [Radio buttons] <i>This item is only shown if «7 years», «8 years», «9 years», «10 years», «11 years», «12 years», «13 years», «14 years», «15 years», «16 years», «17 years», «18 years», «19 years», «20 years», «21 years» «22 years» or «Don't remember» has been selected for «11. How old were you when you had your first menstrual period?»</i>	1. I have so much pain that I am usually bedridden 2. The pain makes it necessary to scale down my everyday activities (but I am not bedridden) 3. I have pain, but manage to do my usual everyday activities 4. I don't have pain	WD209
13.1	Do you experience pain around the time of your menstrual period if you are using painkillers?		

	Version B [Radio buttons] <i>This item is only shown if «7 years», «8 years», «9 years», «10 years», «11 years», «12 years», «13 years», «14 years», «15 years», «16 years», «17 years», «18 years», «19 years», «20 years», «21 years», «22 years» or «Don't remember» has been selected for «11. How old were you when you had your first menstrual period?»</i>	- I have so much pain that I am usually bedridden - The pain makes it necessary to scale down my everyday activities (but I am not bedridden) - I have pains, but manage to do my usual everyday activities - I don't have pains	WD210
14	Do your menstrual periods come at regular intervals?		
	Version B [Radio buttons] <i>This item is only shown if «7 years», «8 years», «9 years», «10 years», «11 years», «12 years», «13 years», «14 years», «15 years», «16 years», «17 years», «18 years», «19 years», «20 years», «21 years», «22 years» or «Don't remember» has been selected for «11. How old were you when you had your first menstrual period?»</i>	- No - Yes	WD211
	Version A [Radio buttons] <i>(No dependency to previous question)</i>	- No - Yes	WD51
14.1	How many days are there usually between the first day in your menstrual period and the first day in your next menstrual period?		
	Version B [Drop-down list] <i>This item is only shown if «7 years», «8 years», «9 years», «10 years», «11 years», «12 years», «13 years», «14 years», «15 years», «16 years», «17 years», «18 years», «19 years», «20 years», «21 years», «22 years» or «Don't remember» has been selected for «11. How old were you when you had your first menstrual period?»</i>	0 1 2 3 ... 44 45 - More than 45 days	WD212
	Version A [Drop-down list] <i>(No dependency to previous question)</i>	0 1 2 3 ... 39 40 - More than 40	WD52
14.2	Date of first day of bleeding in your last menstrual period		
	Version B <i>This item is only shown if «7 years», «8 years», «9 years», «10 years», «11 years», «12 years», «13 years», «14 years», «15 years», «16 years», «17 years», «18 years», «19 years», «20 years», «21 years» or «22 years» has been selected for «11. How old were you when you had your first menstrual period?»</i>	[Date, Can chose from calender]	WD213
	Version A <i>(No dependency to previous question)</i>	[Date, Can chose from calender]	WD53
	Generated variable: Number of days between WD213/WD53 and date of filling in questionnaires		WD_DAYS_SINCE_LMP

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

Menstrual function and menstrual cycle patterns are useful markers of ovarian function and reproductive health.

Revision during the data collection period:

Revisions in the phrasing of questions, some answer categories and sequence/numbering of the questions from version A to B. Also, a difference in dependency of previous questions as explained in the table above.

Sexual health and birth control

Q		Response options	Variable name
15	Do you currently have a regular sexual partner?		
	[Radio buttons]	1. No 2. Yes	WD54
16	How many sexual partners have you had so far in life?		
	Version B [Radio buttons]	1. None 2. 1 3. 2 – 4 4. 5 – 7 5. 8 – 10 6. 11-13 7. 14-16 8. 17-20 9. 21-25 10. More than 25 11. Do not wish to answer	WD214
	Version A [Radio buttons]	1. None 2. 1 3. 2 – 4 4. 5 – 7 5. 8 – 10 6. More than 10 7. Do not wish to answer	WD55
16.1	How old were you at the time of your first sexual debut?		
	Version B [Drop-down list] <i>This item is only shown if option «1», «2-4», «5-7», «8-10», «11-13», «14-16», «17-20», «21-25 or «More than 25» is selected in question “16. How many sexual partners have you had so far in life?”</i>	1. Less than 11 years 2. 11 years 3. 12 years 4. 13 years 14. 23 years 15. 24 years 16. Do not wish to answer	WD215
	Version A [Drop-down list] <i>This item is only shown if option «1», «2-4», «5-7», «8-10» or «More than 10» is selected in question “16. How many sexual partners have you had so far in life?”</i>	1. Less than 11 years 2. 11 years 3. 12 years 4. 13 years 14. 23 years 15. 24 years 16. Do not wish to answer	WD56
16.2	Do you usually experience pain during intercourse? Version B		
	[Radio buttons] <i>This item is only shown if option «1», «2-4», «5-7», «8-10», «11-13», «14-16», «17-20», «21-25 or «More than 25» is selected in question “16. How many sexual partners have you had so far in life?”</i>	1. No 2. Yes	WD216
16.3	What kind of pain do you usually experience? Version B <i>These items are only shown if “Yes” is selected in question 16.2 “Do you usually experience pain during intercourse”</i>		
	<i>These items are only shown if “Yes” is selected in question 16.2 “Do you usually experience pain during intercourse”</i>	Pain at the entrance of the vaginal opening	WD217
		Burning pain throughout the vagina	WD218
		Deep, blunt pain at the end of the vagina and/or lower abdomen	WD219
		Other kind of pain	WD220
17	What kind(s) of contraception have used before entering this examination? Select one or more options		
	Version A and B [Multiple choice]	Birth control pill	WD57
		Hormone spiral	WD58
		Copper spiral	WD59
		Contraceptive implant	WD60
		Birth control injection	WD61
		Pessary	WD62
		Condom	WD63

		Safe periods	WD64
		Interrupted intercourse	WD65
		None	WD66
		Other	WD67
17.1	Version A Specify which other contraception: <i>This item is only shown if option “Other” is selected in question “17. What kind(s) of contraception have you used before entering this examination?”</i>	[Text box]	WD68

Description of original question: MoBa specific single questions

Rationale for choosing the questions:

Information on sexual activity and contraceptive practice is informative of reproductive health.

Revision during the data collection period:

New response options for question 16 from version A to B. Question 16.1 equal in both versions but new variable created because of different dependency. Question 16.2 and 16.3 added to version B. Text box for “Specify which other contraception” (17.1) only exist in version A.

Recreational drug use

Q		Response options	Variable name
18	Please cross off on how often you use the following substances		
B	Tobacco (cigarettes)	[Radio buttons]	WD251
	Snuff	1. Never tried	WD252
	Alcohol	2. Tried	WD253
	Cannabis (marihuana, hash, oil)	3. Once a month or less	WD254
	Anabolic steroids	4. 2-4 times a month	WD255
A	Tobacco (cigarettes)	5. Once a week	WD69
	Snuff	6. 2-3 times a week	WD70
	Alcohol	7. 4 times a week or more	WD71
	Cannabis (marihuana, hash, oil)	8. Do not wish to answer	WD72
	Anabolic steroids		WD73

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

This is a measure of young women's intake of tobacco, alcohol, and drugs during reproductive years

Revision during the data collection period:

Response option "Once a week" was added in version B, therefore new variables were created.

Medication use

Q		Response options	Variable name
19	How often during the past 4 weeks have you used the following medications (Dietary supplements and vitamins not included. Select one option for each line.)		
	Non-prescription based pain killers	[Radio buttons] 1. Never 2. Daily 3. Every week, but not daily 4. Less than weekly 5. Have not used the last month	WD74
	Prescription-based pain killers		WD75
	Non-prescription based allergy medication		WD76
	Prescription based allergy medication		WD77
	Asthma medication		WD78
	Medication for sleeping problems		WD79
	Sedative medication		WD80
	Antidepressant medication		WD81
	Other prescription-based medication		WD82
19.2	Please write in the names of the medications you have crossed off in the section above	[Text box]	WD83

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

The use of medications is considered an important proxy for possible disease, and it is relevant to consider prevalence of use. Certain medications can also affect fertility.

Revision during the data collection period:

A very minor difference in wording of question 19.2 was made from version A to version B; “navnet på medisiner” and “navn på medisiner”, which translate to “the name of the medications” and “names of medications” respectively. Both options can be used interchangeably without significantly affecting the meaning.

Life priorities

Q		Response options	Variable name
20	How important would you say the following conditions are in your life these days?		
	Friends	[Radio buttons] 1. Very important 2. Pretty important 3. A bit important 4. Not important	WD84
	Family		WD85
	Material living standard		WD86
	Work		WD87
	Leisure time		WD88
	Politics		WD89
	Your housing		WD90
	Art and culture		WD91
	Your appearance		WD92
	Your sexual life		WD93

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

Questions on life priorities in young women could be important for future fertility related choices

Revision during the data collection period:

A small change in wording of question 20 was made from version A to version B/C. Version A: How important would you say that each of the following conditions are in your life these days. Version B/C: How important would you say that the following conditions are in your life these days.

Family planning and pregnancies

Q		Response options	Variable name
21	Do you wish to have children, now or in the future? Version B		
	[Radio buttons]	1. No 2. Yes 3. I already have children 4. Don't know / uncertain	WD221
21.1	If no, could you please describe in your own words why this is? This item is only shown if option "No" is selected in question "21. Do you wish to have children, now or in the future?"	[Text box]	WD222
21.2	Could you explain a bit about why you have crossed off "Don't know / uncertain" This item is only shown if option "Don't know / uncertain" is selected in question "21. Do you wish to have children, now or in the future?"		WD223
21	Do you want to have children? Version A		
	[Radio buttons]	1. No 2. Yes 3. I already have children 4. Don't know / uncertain	WD94
21.1	If no, could you please describe in your own words why this is? This item is only shown if option "No" is selected in question "21. Do you want to have children?"	[Text box]	WD95
21.2	Do you have any thoughts on how many children you wish to have? This item is only shown if option "I already have children" is selected in question "21. Do you want to have children?"		WD96
21.3	Could you explain a bit about why you have crossed off "Don't know / uncertain" This item is only shown if option "Don't know / uncertain" is selected in question "21. Do you want to have children?"		WD97
22	What do you think needs to be in place before you have children? Version B These items are only shown if options «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»		
22.1	Steady job	[Radio buttons]	WD224
22.2	Live close to family		WD225
22.3	A relationship I think will last		WD226
22.4	Completed education		WD227
22.5	Own my own home		WD228
22.6	That several people in my circle of friends have had children		WD229
22.7	That I have achieved a carrier goal		WD230
22	What do you think needs to be in place before you have children? Version A These items are only shown if option "Yes" is selected in question "21. Do you want to have children?"		
22.1	Steady job	[Radio buttons]	WD98
22.2	Live close to family		WD99
22.3	A relationship I think will last		WD100
22.4	Completed education		WD101
22.5	Own my own home		WD102
22.6	That several people in my circle of friends have had children		WD103
22.7	That I have achieved something that I deem meaningful in my professional life		WD104
23	Please consider the following statements regarding having children, cohabitation, and life factors Version B		

23.1	I want to have a partner before I have children <i>This item is only shown if options «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»</i>	[Radio buttons] 1. Disagree 2. Slightly disagree 3. Neither or 4. Somewhat agree 5. Agree	WD231
23.2	I could imagine having children as a single parent <i>This item is only shown if options «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»</i>		WD232
23.3	Children is something I'll consider after I am done travelling, partying etc. <i>This item is only shown if options «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»</i>		WD233
23.4	I would consider freezing down my eggs <i>This item is only shown if options «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»</i>		WD234
23.5	The best for a child is to grow up with both a biological mother and a biological father <i>This item is only shown if options «No», «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»</i>		WD235
23.6	Marriage is an unmodern form of cohabitation <i>This item is only shown if options «No», «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»</i>		WD236
23	Please consider the following statements regarding having children, cohabitation, and life factors Version A <i>These items are only shown if option “Yes” is selected in question “21. Do you want to have children?”</i>		
	I want to have a partner before I have children	[Radio buttons] 1. Disagree 2. Slightly disagree 3. Neither or 4. Somewhat agree 5. Agree	WD105
	I could imagine having children as a single parent		WD106
	Children is something I'll consider after I am done travelling, partying etc.		WD107
	I would consider freezing down my eggs		WD108
	The best for a child is to grow up with both a biological mother and a biological father		WD109
	Marriage is an unmodern form of cohabitation		WD110
24	What do you consider an appropriate age for having your first child?		
	Version B <i>This item is only shown if options «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»</i>	[Drop-down list] 1. 18 years 2. 19 years 3. 20 years 32. 49 years 33. 50 years 34. More than years	WD237
	Version A <i>These items are only shown if option “Yes” is selected in question “21. Do you want to have children?”</i>		WD111
25	You may already have some ideas or thoughts about how many children you want to have?		
	Version B <i>This item is only shown if options «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»</i>	[Radio buttons] 1. No 2. Yes 3. Uncertain	WD238
	Version A <i>These items are only shown if option “Yes” is selected in question “21. Do you want to have children?”</i>		WD112
25.1	List how many children you would prefer to have		

25.1	Version B This item is only shown if options «Yes» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?» Note, not shown for those that have selected «I already have children»	[Drop-down list] 1. 0 2. 1 3. 2	WD239
25.1	Version A This item is only shown if options «Yes» or «Don't know / uncertain» has been selected for «25. You may already have some ideas or thoughts about how many children you want to have?»	... 7. 6 8. 7 or more	WD113
26	When do you think a woman is too old to have children?		
	Version B This item is only shown if options «No», «Yes», «I already have children» or «Don't know / uncertain» has been selected for «21. Do you wish to have children, now or in the future?»	[Text box]	WD240
	Version A	[Text box]	WD114
27	When do you think a man is too old to have children?		
	Version A and B	[Text box]	WD115
28	Many people feel younger or older than they are		
28.1	How old do you feel? (Version B)	[Text box]	WD264
28.1	How old do you usually feel? (Version A)		WD116
28.2	How old to you think other perceive you as? (Version B)		WD265
28.2	How old to you think other usually perceive you as? (Version A)		WD117
29.0.1	Have you previously been pregnant? (Please include pregnancies that ended in a miscarriage)		
	Version A and B	[Radio buttons] 1. No 2. Yes	WD118
29.0.2	Version A and B How many pregnancies have you had? This item is only shown if options «Yes» has been selected for «29. Have you previously been pregnant? »	[Drop-down list] 1. 1 2. 2 3. 3 ... 6. 6 7. 7 or more	WD119
29.1.1 29.2.1 29.3.1 29.4.1 29.5.1 29.6.1 29.7.1	Version A and B What year did your <first / second / third / fourth / fifth / sixth / last> pregnancy begin? Items are only shown if they align with the number of pregnancies indicated to the response to question 29.0.2 "How many pregnancies have you had"	[Text box]	WD120 (first) WD123 (second) WD126 (third) WD129 (fourth) WD132 (fifth) WD135 (sixth) WD138 (last)
29.1.2 29.2.2 29.3.2 29.4.2 29.5.2 29.6.2 29.7.2	Version A and B How did your <first / second / third / fourth / fifth / sixth / last> pregnancy end? Items are only shown if they align with the number of pregnancies indicated to the response to question 29.0.2 "How many pregnancies have you had?"	[Radio buttons] 1. Live birth 2. Spontaneous abortion 3. Elective abortion 4. Still birth	WD121 (first) WD124 (second) WD127 (third) WD130 (fourth) WD133 (fifth) WD136 (sixth) WD139 (last)
29.1.3 29.2.3 29.3.3 29.4.3 29.5.3 29.6.3 29.7.3	Version B Please state the week of pregnancy for when the abortion / still birth occurred for your <first / second / third / fourth / fifth / sixth / last> pregnancy Items are only shown if "Spontaneous abortion", "Elective abortion" or "Still birth" is selected as response to question related to the corresponding pregnancy 29.x.2 " How did your <first / second / third / fourth / fifth / sixth / last> pregnancy end?"	[Drop-down list] 1. 4 2. 5 3. 6 ... 37. 40 38. 41 39. 42	WD256 (first) WD257 (second) WD258 (third) WD259 (fourth) WD260 (fifth) WD261 (sixth) WD262 (last)

29.1.3 29.2.3 29.3.3 29.4.3 29.5.3 29.6.3 29.7.3	Please state the week of pregnancy for when the abortion / still birth occurred for your <first / second / third / fourth / fifth / sixth / last> pregnancy	<i>[Drop-down list]</i>	
		1. 4	
		2. 5	WD122 (first)
		3. 6	WD125 (second)
		4. 7	WD128 (third)
		5. 8	WD131 (fourth)
		6. 10	WD134 (fifth)
		...	WD137 (sixth)
	<i>Items are only shown if "Spontaneous abortion", "Elective abortion" or "Still birth" is selected as response to question related to the corresponding pregnancy 29.x.2 " How did your <first / second / third / fourth / fifth / sixth / last> pregnancy end?"</i>	36. 40	WD140 (last)
		37. 41	
	<i>Note that option for week 9 was not available in version A.</i>	38. 42	

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

Young adults' thoughts and plans on parenthood and family life are important to understand fertility changes in society

Revision during the data collection period:

Revisions made to wording of some of the of questions. For some of the questions, there is also a difference in which questions appear in the questionnaire depending on the response to prior questions. Response category "9 weeks" was not included in the question "Please state the week of pregnancy when the abortion / still birth occurred" in version A. New variables are created where there are differences between the versions

Leisure time

Q		Response options	Variable name
30	On a typical weekday, approximately how many hours are you sedentary during a day? Version A and B		
	[Radio buttons]	1. Less than an hour 2. 1 – 2 hours 3. 3 – 4 hours 4. 5 – 7 hours 5. 8 – 10 hours 6. 11 hours or more	WD141
31	How much time do you usually spend on the screen (mobile phone, tablet, computer, TV etc.) during a typical weekday? Version A and B		
	[Radio buttons]	1. No time / rarely 2. Less than an hour 3. 1 – 2 hours 4. 3 – 4 hours 5. 5 – 6 hours 6. 7 – 8 hours 7. 9 hours or more	WD142
32	How much do you use your mobile phone during a typical weekday? Version A and B		
	[Radio buttons]	1. No time / rarely 2. Less than an hour 3. 1 – 2 hours 4. 3 – 4 hours 5. 5 – 6 hours 6. 7 hours or more	WD143

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

These questions were developed to obtain information about young adults' activities in leisure time

Revision during the data collection period:

No revisions have been made

Life satisfaction and self-perception

Q		Response options	Variable name
33	Herein we ask you to consider the following statements regarding life-satisfaction and self-perception Version A and B		
33.1	I am satisfied with my life	[Radio buttons] 1. Disagree 2. Slightly disagree 3. Somewhat agree 4. Agree 5. Strongly agree	WD144
33.2	I am experiencing a sense of purpose in my life		WD145
33.3	If I could live my life over, I would wish to have it the same way		WD146
33.4	I have a positive opinion of my self		WD147
33.5	I have too much to do		WD148
33.6	Sometimes I feel that I am not good at anything		WD149

Description of original question:

- The questions are based on the Satisfaction with Life Scale (SWLS), although with modifications
- The SWLS (Diener et al., 1985) is a 5-item instrument designed to measure global cognitive judgments of satisfaction with one's life. In the original scale, all answers are scored on a 7-point scale from 'disagree completely' (1) to 'agree completely' (7).

- Psychometric Information (sample, reliability, validity):*
- Internal consistency (Cronbach's alpha) for the SWLS is between .79 and .89. Test-retest coefficients are between .84 and .54, with the decline of stability of the scale over longer periods. The SWLS demonstrates adequate convergence with related measures ($r=.28\sim.82$), and it has been shown to have potential as a cross-cultural index of life satisfaction (Diener et al., 1985; Pavot & Diener, 1993; Pavot, et al., 1993; Shigehiro, 2006; Vittersø, Røysamb & Diener, 2002).

Base References/Primary Citations:

- Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction With Life Scale. *Journal of Personality Assessment*, 49, 71-75.
- Pavot, W., & Diener, E. (1993). Review of the Satisfaction With Life Scale. *Psychological Assessment*, 5, 164-172.
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- Shigehiro, O. (2006). The concept of life satisfaction across culture: An IRT analysis. *Journal of Research in Personality* 40(4): 411-423.
- Vittersø, J., Røysamb, E., & Diener, E. (2002). The concept of life satisfaction across cultures: Exploring its diverse meaning and relation to economic wealth. In E. Gullone & R. Cummins (Eds.), *The universality of subjective wellbeing indicators. A multidisciplinary and multi-national perspective* (pp. 81–103). Dordrecht, the Netherlands: Kluwer Academic Publishers.

Rationale for choosing the questions:

These questions were developed to get information about young adults' life satisfaction which is an important measure for future health outcomes

Revision during the data collection period:

No revisions have been made

Sleep

Q		Response options	Variable name
	Herein are some questions about your sleep quality the past month Version A and B		
34	How often do you have troubles sleeping at night? (Lies more than 30 minutes before you fall asleep)	[Radio buttons] 1. Never 2. Less than once a week 3. Once per week 4. Twice per week 5. Three times per week 6. 4 times or more per week	WD150
34.1	For how long have you had troubles sleeping at night? <i>This item is only shown if options « Less than once a week», « Once per week», «Twice per week», «Three times per week» or «4 times or more per week» has been selected for «34. How often do you have troubles sleeping at night?»</i>	[Radio buttons] 1. Less than one month 2. 1 - 2 months 3. 3 – 6 months 4. 7 – 11 months 5. 1 – 3 years 6. More than 3 years	WD151
35	How often do you use electronic devices (e.g., mobile phone, tablet, pc/mac, tv, etc.) in the bedroom during the last hour before you go to sleep? Version A and B		
		[Drop-down list] 1. 0 days a week 2. 1 day a week 3. 2 days a week 4. 3 days a week 5. 4 days a week 6. 5 days a week 7. 6 days a week 8. 7 days a week	WD152

Description of original question:

Questions adapted from the Karolinska Sleep Questionnaire (KSQ; Kecklund and Åkerstedt, 1992), Bergen Insomnia scale (BIS; Pallesen et al., 2008), and standard clinical sleep diary.

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

The first question is the first of 3 questions / items that are core symptoms of insomnia, the most common sleep disorder in adolescents and adults. Virtually all insomnia instruments in literature on sleep uses these one or all three of these components, with slight variations in wording. Using the question about duration, one gets a well validate operationalization regarding ‘Insomnia Disorder’ in both DSM-IV and DSM-V.

Revision during the data collection period:

No revisions have been made

Diseases and health complaints

Q		Response options	Variable name
36	All in all, how would you describe your current health?		
	[Radio buttons]	1. Bad 2. Very bad 3. Neither good nor bad 4. Good 5. Very good	WD153
37	Indicate if you have or have had any of the following diseases or health complaints Version A and B unless otherwise specified		
37.1	Asthma, allergy, skin complaints Select one or more options [Multiple choice]	Asthma	WD154
		Psoriasis	WD155
		Hay fever, pollen allergy	WD156
		Atopic dermatitis	WD157
		Acne (severe)	WD158
37.2	Diabetes Select one or more options [Multiple choice]	Diabetes type I (insulin dependent)	WD159
		Diabetes type II (not treated with insulin)	WD160
37.3	Gastro-intestinal Select one or more options [Multiple choice]	Crohn's disease	WD161
		Ulcerative colitis	WD162
		Coeliac disease	WD163
		IBD (inflammatory bowel disease)	WD164
		Gall stones	WD165
37.4	Genital / urinary tract Select one or more options [Multiple choice]	Polycystic ovary disease (PCOS)	WD166
		Endometriosis	WD167
		Myomas	WD168
		Adenomyosis (Only Version B)	WD241
		Ovarian cysts	WD169
		Kidney stones	WD170
		Pyelonephritis	WD171
		Cystic fibrosis	WD172
37.5	Other diseases and health complaints Select one or more options [Multiple choice]	Multiple sclerosis	WD173
		Migraine	WD174
		Chronic fatigue syndrome ("ME")	WD175
		Anorexia / bulimia / eating disorders	WD176
		Cerebral palsy	WD177
		Anxiety	WD178
		Depression	WD179
		Epilepsy	WD180
		Other	WD181
		Chlamydia	WD182
37.6	Sexually transmitted diseases Select one or more options [Multiple choice]	Herpes (genital)	WD183
		Gonorrhea	WD184
		Syphilis	WD185
		Condylomas	WD186
37.7	How many times have you been diagnosed with chlamydia? This item is only shown if option «Chlamydia» has been selected for «37.6 Sexually transmitted diseases» [Drop-down list]	Version B 1. 1 2. 2 3. 3 ... 9. 9 10. 10 11. More than 10 times	WD242
		Version A 1. 1 2. 2 3. 3 ... 9. 9 10. More than 10 times	WD187

Description of original question: MoBa specific single questions

Psychometric Information:

Not relevant.

Base References/Primary Citations:

Not relevant.

Rationale for choosing the questions:

Questions were developed for MoBa to survey the presence of illness and health complaints. The list covers both common public health issues as well as rare illnesses which can be important for future fertility.

Revision during the data collection period:

Added a new item, Adenomyosis, to the list of diseases and health complaints (37.4). The response options for chlamydia (37.7) have been modified and a new variable created.

Diet

Q		Response options	Variable name
38	Please cross off the aspects that describes your diet most of the time		
Version B [Multiple choice]		No particular diet	WD243
		A vegetarian diet including egg and dairy products	WD244
		Vegan, a solely plant-based diet	WD245
		A vegetarian diet including fish	WD246
		I follow the national diet recommendations	WD247
		Follow low-carb diet	WD248
		Other type of diet	WD249
	Please cross off the aspects that describes your diet most of the time		
	Version A [Radio buttons]	1. No particular diet 2. A vegetarian diet including egg and dairy products 3. Vegan, a solely plant-based diet 4. A vegetarian diet including fish 5. I follow the national diet recommendations	WD188
39	How many times per week do you eat the following: Version A and B		
	1. Salmon	[Radio buttons] 1. 0 2. 1 3. 2 – 3 4. 4 – 5 5. 6 – 7	WD189
	2. Trout		WD190
	3. Herring		WD191
	4. Halibut		WD192
	5. Mackerel		WD193
	6. Crab		WD194
	7. Seagull's egg		WD195
	8. Svolvær patè		WD196
	9. Mackerel in tomato sauce		WD197

Description of original question: MoBa specific single questions

Psychometric Information:
Not relevant.

Base References/Primary Citations:
Not relevant.

Rationale for choosing the questions:

This is a measurement of dietary preferences and intake of fish that are known to have higher levels of heavy metals. These choices could potentially impact future fertility.

Revision during the data collection period:

Added two response options to question 38 and changed to multiple choice.

Attitudes, religion, sexual orientation, and political opinions

Q		Response options	Variable name
40	How religious are you?		
	Version B <i>[Radio buttons]</i>	1. Not at all religious 2. A little religious 3. Rather religious 4. Very religious 5. Don't know	WD250
	How religious do you consider yourself to be?		
	Version A <i>[Radio buttons]</i>	1. Not at all religious 2. Rather religious 3. Very religious 4. Don't know	WD198
41	If you were to get married, would you consider....		
	Version A and B <i>[Radio buttons]</i>	1. To take your partner's surname 2. Keep your own surname and take your partner's surname in addition 3. To make no changes 4. Don't know	WD199
42	Please state if you are sexually attracted to		
	Version A and B <i>[Radio buttons]</i>	1. The opposite sex 2. Same sex 3. Both sexes 4. Uncertain / don't know	WD200
43	On a scale from 1 – 10, would you say that most people can be trusted, or that one can't be too careful when you interact with other people.		
	Version A and B <i>0 meaning that you can't be too careful and 10 meaning that most people can be trusted.</i>	<i>[Radio buttons]</i> 1. 0 – Can't be too careful 2. 1 3. 2 ... 9. 8 10. 9 11. 10 – Most people can be trusted	WD201
44	In the political landscape one talks about left and right, socialistic, and conservative. On a scale from 1 – 10, where would you place yourself in this landscape?		
	Version A and B <i>1 indicating the outmost left side, 10 indicating the outmost right side</i>	<i>[Radio buttons]</i> 1. 1 – Outmost left side 2. 2 3. 3 ... 8. 8 9. 9 10. 10 – Outmost right side	WD202
45	Some people think that they have total freedom of choice and that they themselves can decide how life will turn out. Others think that what they have little impact themselves on what eventually will happen to them. Please indicate your position on the scale from 1 – 10.		
	Version A and B <i>1 indicating you feel you have no influence and 10 indicating you think you have a lot of influence</i>	<i>[Radio buttons]</i> 1. 1 – No influence at all 2. 2 3. 3 ... 8. 8 9. 9 10. 10 – Quite a lot of influence	WD203

Description of original question: Question 43 is a widely applied question regarding trust measures.

Psychometric Information:
Not relevant.

Base References/Primary Citations:
Not relevant.

Rationale for choosing the questions:

Young adults' attitudes and opinions are important to understand fertility changes in society

Revision during the data collection period:

Added the response option "a little religious" to question 40 in version B. New variable created for Q 40.