Client Survey for COPPI Grant

Pregnancy timing:
1. How long has it been since your last delivery?
   - 12 months or less
   - 13-18 months
   - 19-24 months
   - Greater than 24 months

2. What made you decide to get pregnant this time?

3. Who was involved in the decision to get pregnant at this time?
   - Partner
   - Family
   - Friends
   - Medical Provider (doctor or nurse)
   - Other

4. Did you feel any pressure to become pregnant at this time?
   - Yes  
   - No
   - If yes, where did the pressure come from?

5. Has anyone ever talked with you about the benefits of birth spacing and health?
   - Who?
   - What did they tell you?
   - What is a good spacing between pregnancies for your health?
   - What is a good spacing between pregnancies for the baby’s health?

Pregnancy prevention:
6. Did anyone talk to you about birth control during your pregnancy or immediately after delivery?
   - When?
   - Who?
   - What did they tell you?

7. How long did you (or will you) wait after giving birth to use birth control? Why?
8. Which birth control supplies were available to you when you came home from the hospital after delivering your last child?
   - Condoms
   - Birth Control Pills
   - Depo Provera
   - Other
   - Plan B
   - IUD
   - Nuva Ring

9. Did you have a plan in place for long term birth control after the delivery of your last child?

10. What birth control methods do you prefer? (What about your partner?)
   - Condoms
   - Birth Control Pills
   - Depo Provera
   - Natural Family Planning
   - Other
   - Plan B
   - IUD
   - Nuva Ring

**Environment**

11. What type of insurance do you have? MA/Private

12. Does your insurance cover birth control?