The Puberty Questionnaire (1)

aka ‘Growing and Changing’

To accompany version 3c of the 8yr puberty datafile

Last updated

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By

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The ALSPAC Study

This survey is an ongoing longitudinal study of a population of children born to mothers resident in a geographic area.

Study Eligibility Criteria

To be eligible for the study, mothers had to be resident in Avon while pregnant. In addition, their expected date of delivery had to lie between 1st April 1991 and 31st December 1992 inclusive. Mothers who were resident in the area but left shortly after enrolment were omitted from further follow-up. However, those who had completed the questionnaire scheduled for the third trimester of pregnancy before leaving the study area, have been kept in the study, even if they had not delivered at the time of moving.

The study area is well-defined, consisting of that part of the county of Avon that was also within the South West Regional Health Authority. It therefore excludes Bath and district.

Enrolment

Work prior to the start of enrolment in September 1990 had involved meetings with midwives and discussion with groups representing general practitioners as well as detailed discussion with obstetricians in the area.

Posters were printed for display in a variety of different places - including chemist shops, libraries, mother and toddler groups, and pre-school playgroups, general practitioner waiting-rooms, antenatal clinics and any other area where a mother in early pregnancy was likely to be. In addition, there was considerable local and national coverage in the press, radio and television.

The poster displayed the logo of the study 'Children of the Nineties' and asked interested pregnant mothers to get in touch with the study team. In addition, the local community midwives when interviewing the mother for the first time discussed the study with her, and gave her a card with which to send for further details.

The card that the mother completed and sent to the study office contained her full name and date of birth, her address, her last menstrual period, and expected date of delivery.

Once the card had been received at the study office, a brochure was sent to the mother. This outlined the reason for carrying out the study and explained that the mothers themselves would not benefit tangibly, but that the major benefits were likely to be for the next generation. It informed the mother that there was no compulsion for her to take part, and that even if she started within the study she was free to opt out at any point. Thirdly it emphasised the confidential nature of the information that would be collected, and promised that at no time would the names of the mother and/or child be linked to the confidential information collected. Fourthly, it explained that biological samples would be taken, but that these would not be analysed without the signed permission of the mother, and finally it stated that the information given would also be linked to information from the medical records unless the mother let us know that she did not want us to do this. The mother was told in this brochure that we would assume that she wanted to take part in the study unless she informed us otherwise.

A telephone number (the Children of the Nineties hotline) was given for parents to ring. This hotline is manned by volunteers who have been instructed in the confidential nature of the study. They are advised not to do any counselling or persuading, but rather to take messages which are then acted upon by appropriate members of the study team. In instances where parents ring to request help, they are given, if possible, the appropriate telephone number of an organisation set up to perform this type of service.

For a full description of the study design and the questionnaires used, see the ALSPAC web site (www.alspac.bris.ac.uk).

Aims of the puberty questionnaire

An important facet in the study of children as they go through late childhood into adolescence concerns the timing of the onset of puberty. This is likely to effect both their emotional state as well as various aspects of health and development. One of the measures used to assess the stage of puberty in the ALSPAC study is concerned with a self rating of puberty. Others include the use of sebutape to identify sebum secretion (carried out in Focus clinics), monitoring of the growth spurt, and measuring hormone levels in urine.

The questionnaire was developed in association with Dr Carol Rubin of the Centers for Disease Control (CDC), Atlanta, USA. CDC funded the printing and coding of these questionnaires.

The Questionnaire

The questions asked were obviously different for boys and girls. Each questionnaire included a set of pictures, based on those developed by Tanner adapted from those used in studies in the USA. However, the boys pictures used in the USA were shown with circumcised penises – which was inappropriate for a British population. These were therefore changed and are shown in this documentation.

Due to the content, the following addition was made to the accompanying letter:

> "Dear Mother,
> We have a bumper pack for you this time.....!
> Hope your child will enjoy Me and My School... etc
> One word of warning though - because some children of this age are beginning to show signs of puberty we are sending a small separate questionnaire on this topic called Growing and Changing. Please look at this carefully and decide whether or not to share it with your study child."

Timing of the questionnaire was to coincide with the questionnaire 'Mother and Family' which was administered at 97 months. This was also accompanied by the questionnaire 'Me and My School' which was aimed at the child and the questionnaire 'Father and Family' also administered at 97 months.

Response rate

In all, 11414 questionnaires were sent, and 6192 were returned. This compares with 8256 questionnaires returned for 'Mother and Home' and 7596 questionnaires for 'Me and My School'.

Coding

Most of the self-completion responses are self-coding - the ticked reply box contains a printed number then can be directly keyed. A few questions invite a textual reply, and some participants also amplify a tick response with comments.

Returned questionnaires are coded by our staff. They have to check that each question has no more than one ticked response, and that any comments do not materially affect the sense of the response. On a few occasions they also need to convert dates and similar variables to a standard format. There are rules for each variable, for how to interpret problems such as multiple ticking, or rounding of ages, where months are given and years were requested. All coding is cross-checked by a second person and then keyed and verified.

In general, where more than one box was ticked there was a rule that the 'worst' code would be used. This was indicated by a coding rule such that L indicated that the lower code be used, H the higher. Where no such rules could be made the coding supervisor made a decision.

Textual replies to questions are dealt with separately. The range of responses to a given question is enormous, the variety of questions asked is also large, and this gives problems of maintaining coding consistency across a range of specialist areas, e.g. drugs, accidents, occupations, and environmental exposures. The problem is resolved by keying all written responses into a word processor, splitting the responses by question type, so that finally all the replies to one question are available together in one file. This can then be coded semi-automatically by a specialist in that field. Accuracy and consistency are thus ensured without the expense of training the basic coders in all the different disciplines required.

Release file version history (introduced version 3c)

Release version 3c – May 2019
Four variables (pub130, pub135, pub150 and pub155) had data linked to a missing value of '6' (with the value label 'not sure'). For consistency with other ALSPAC data, these cases have been recoded as '-2' and the '6' missing value dropped from the dataset.

Format of the variable descriptors

In all that follows:

i) Each question will be quoted verbatim in italics (with differences between the questionnaire versions, where they exist);
ii) The coding rule(s) used by the ALSPAC coders will be indicated in square brackets;
iii) The editing assumptions made preparing this computer file in round brackets;
iv) The variable no. on file, with the rubic used;
v) A table of frequencies.

This documentation is for the single file created from the two questionnaires 'Mother/daughter' and 'Parent/Son'.

pub101 Sex

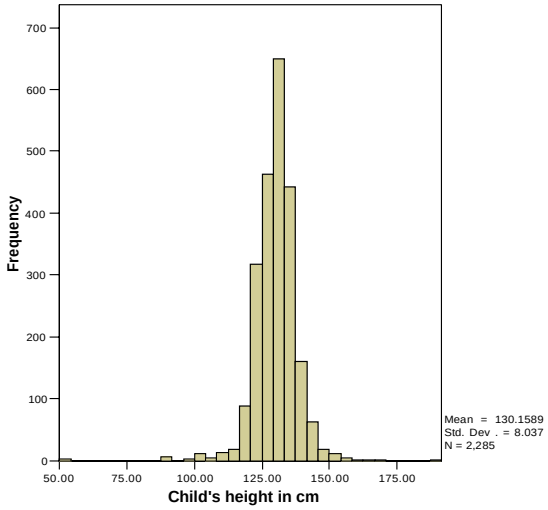
		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00 Male	2951	47.2	47.2	47.2
	2.00 Female	3304	52.8	52.8	100.0
	Total	6255	100.0	100.0	

A1. *What is your daughter's/son's height (without shoes)?*
*The best way to measure **height** is to ask your daughter/son to stand barefoot as straight as possible against a wall, to make a mark on the wall at the highest point on the child's head and to measure the distance from the mark on the floor.*

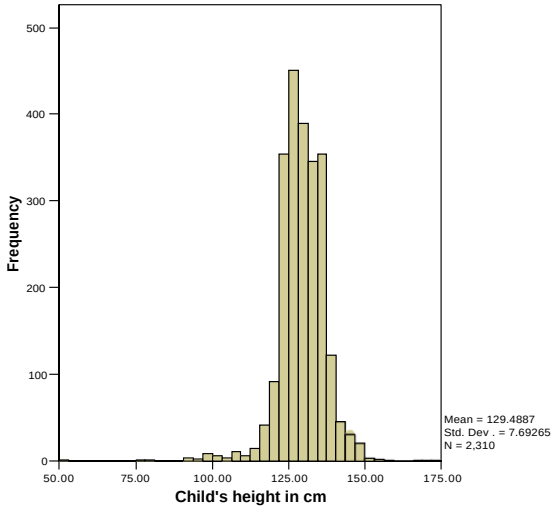
feet ☐ inches ☐☐ **OR** metres ☐ centimetres ☐☐

(From these answers, a height in cm was created. Some parents answered in both metric and imperial. In this case the metric was used unless the was a large disagreement (i.e. >3cm) whereby the height was set for error checking, and has been coded to missing)

PUB103 Child's height in cm



Boys



Girls

Some simple statistics

	Boys	Girls
Valid n	2285	2310
Missing n	666	994
Mean	130.2	129.5
Minimum	50.0	52.0
Maximum	191.0	175.0
25%	127.0	125.0
50%	130.0	130.0
75%	135.0	135.0

Heights outside the range [100cm, 150cm] were checked with the paper questionnaires. Those that remain on the file were not keying errors.

In some cases, both metric and imperial weights were given and these did not agree.

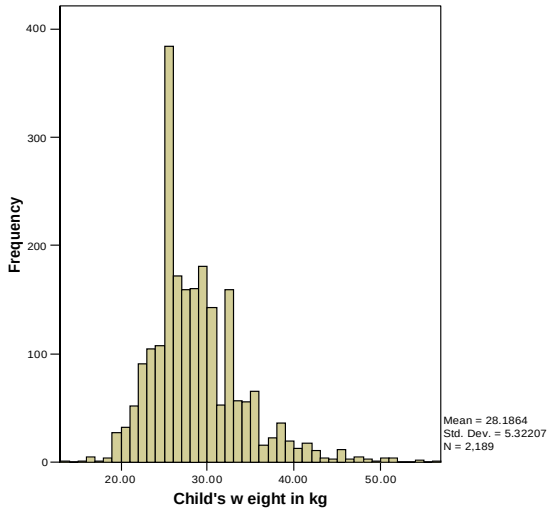
If this could not be resolved by checking data from other sources then the metric measurement was taken.

A2. *What is your daughter's/son's weight (without shoes)?*
Please fill in using kilos or stones.

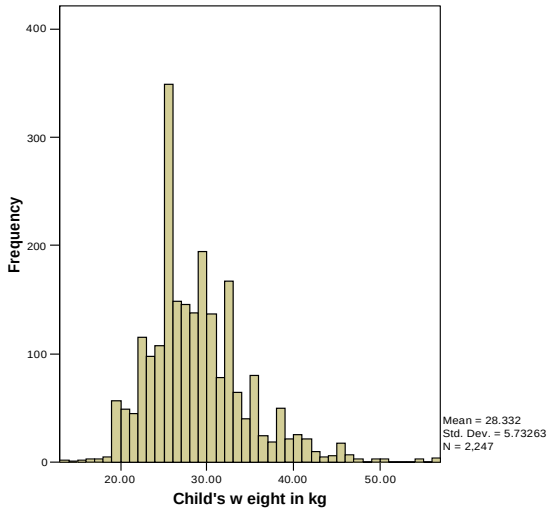
stones | pounds | **OR** | kilos

(This was treated similarly to height above.)

PUB104 Child's weight in kg



Boys



Girls

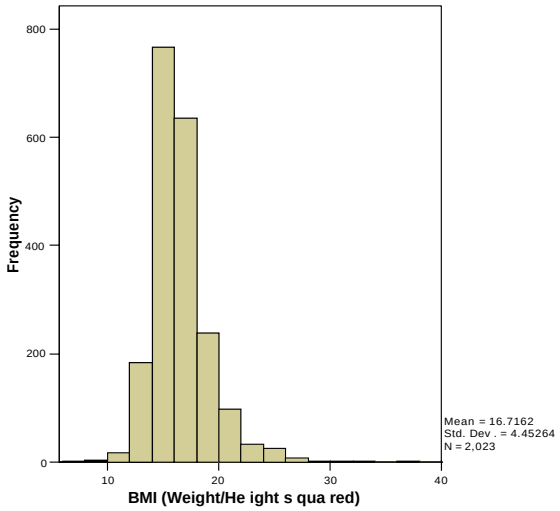
Some simple statistics

	Boys	Girls
Valid n	2189	2247
Missing n	762	1057
Mean	28.2	28.3
Minimum	13.0	13.0
Maximum	57.0	57.0
25%	25.0	25.0
50%	27.0	27.0
75%	31.0	32.0

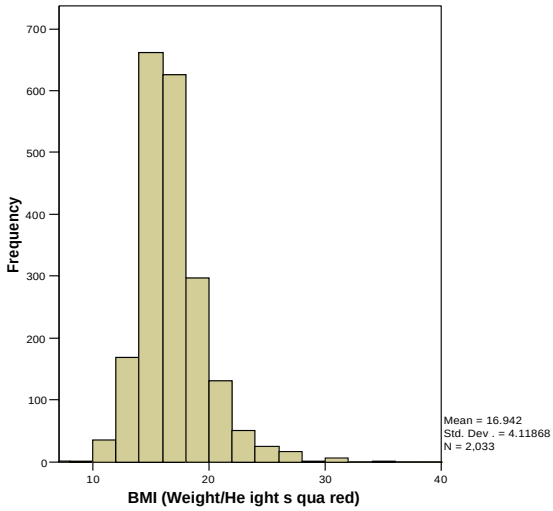
Weights outside the range [20kg, 50kg] were checked with the paper questionnaires. Those that remain on the file were not keying errors.

Height and weight were then used to create BMI (body mass index: i.e. weight ÷ ht^2

PUB105 Child's BMI



Boys



Girls

Some simple statistics

	Boys	Girls
Valid n	2023	2033
Missing n	910	1239
Mean	16.7	16.9
Minimum	7.3	7.3
Maximum	116.0	140.5
25%	14.9	14.9
50%	16.1	16.5
75%	17.6	18.1

Heights outside the range [10, 28] were checked with the paper questionnaires. Those that remain on the file were not derived from heights or weights that were keyed incorrectly.

A3. *In the past month, what was the average number of times that your daughter participated in **vigorous** physical activity (such as running, dance, gymnastics, netball, swimming, or aerobics)?*

- *none*
- *less than once a week*
- *1-3 times a week*
- *4-6 times a week*
- *daily*

PUB109 a3 - frequency of child's participation in vigorous physical activity during past month

		pub101 Sex		
		1.00 Male	2.00 Female	Total
pub109 a3 - frequency of childs participation in vigorous physical activity during past month	1 none	34	49	83
		1.2%	1.5%	1.4%
	2 less than once a week	85	135	220
		2.9%	4.2%	3.6%
	3 1-3 times a week	1396	1889	3285
		48.0%	58.3%	53.4%
	4 4-6 times a week	851	845	1696
		29.3%	26.1%	27.6%
	5 daily	541	323	864
		18.6%	10.0%	14.1%
Total		2907	3241	6148
		100.0%	100.0%	100.0%

(107 cases were missing).

Female questions

A4. *Has your daughter started her menstrual periods yet?*

Yes [1] No [2] → **If <u>no</u>, please go to A10**

[Although 3 girls were recorded as having menstruated, for two there were no further details. These have been flagged for error checking. A further case was also flagged due to a potential slippage in the data]

pub110 a4 - has child had menstrual periods yet

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	3	.1	.1	.1
	2 No	3276	99.2	99.9	100.0
	Total	3279	99.2	100.0	
Missing	-1 Missing	25	.8		
Total		3304	100.0		

If <u>yes</u>,

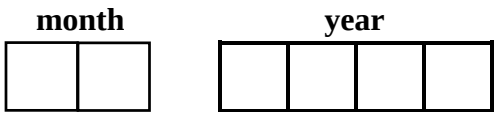
*a) How **old** was your daughter when she had her first period?*

[ ] *years old*

pub111 a4a - how old was child when she had her first period

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	8	1	.0	100.0	100.0
Missing	-2 Not started periods	3276	99.2		
	-1 Missing	27	.8		
	Total	3303	100.0		
Total		3304	100.0		

A5. *When was her first period ?*



This information was used to derive the following:-

pub112 Child's age in months at time of first period

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	96.00	1	.0	100.0	100.0
Missing	-2.00 Not started periods	3301	99.9		
	-1.00 Missing	2	.1		
	Total	3303	100.0		
Total		3304	100.0		

A6. a) *In the **past year**, how many **days of bleeding** has your daughter <u>usually</u> had during each of her periods?*

☐☐ *days* *don't know* ☐ 99

pub115 a6a - how many days of bleeding does child usually have during period

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2	1	.0	100.0	100.0
Missing	-2 Not started periods	3276	99.2		
	-1 Missing	27	.8		
	Total	3303	100.0		
Total		3304	100.0		

*b) If you **don't know**, is it probably:*

3 days or less ☐ 1

4-6 days ☐ 2

7 days or more ☐ 3

pub116 a6b - if dont know exactly, approximately how many days bleeding does child usually have during period

		Frequency	Percent
Missing	-2 Not started periods	3276	99.2
	-1 Missing	28	.8
	Total	3304	100.0

A7. *In the past year, what was the **usual length** of your daughter's menstrual cycle? In other words, how many days were there from the **first day of one period to the first day of the next period?***

☐☐ *days* *don't know* ☐ 99

pub117 a7 - usual length of childs menstrual cycle

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	99 DK	1	.0	100.0	100.0
Missing	-2 Not started periods	3276	99.2		
	-1 Missing	27	.8		
	Total	3303	100.0		
Total		3304	100.0		

A8. *Has your daughter **ever** had any of the following **symptoms** associated with **her period**?*

a) *Heavy or prolonged **bleeding***

Yes ☐ 1 *No* ☐ 2 → ***If no, go to A8b***

pub120 a8a - has child ever had heavy or prolonged bleeding with period

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2 No	1	.0	100.0	100.0
Missing	-2 Not started periods	3276	99.2		
	-1 Missing	27	.8		
	Total	3303	100.0		
Total		3304	100.0		

If yes,

(i) *Did you contact her doctor for this?*

Yes ☐ 1 *No* ☐ 2

pub121 a8a1 - was doctor contacted about childs heavy or prolonged bleeding

		Frequency	Percent
Missing	-3 No heavy/prolonged bleeding	1	.0
	-2 Not started periods	3276	99.2
	-1 Missing	27	.8
	Total	3304	100.0

A8. *b)* *Severe **cramps** with her period?*

Yes [1] *No* [2]

pub122 a8b - has child ever had severe cramps with period

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2 No	4	.1	100.0	100.0
Missing	-2 Not started periods	3276	99.2		
	-1 Missing	24	.7		
	Total	3300	99.9		
Total		3304	100.0		

If <u>yes</u>,

i) *Did you contact her doctor for this?*

Yes [1] *No* [2]

pub123 a8b1 - was doctor contacted about childs severe cramps during period

		Frequency	Percent
Missing	-3 No severe cramps	4	.1
	-2 Not started periods	3276	99.2
	-1 Missing	24	.7
	Total	3304	100.0

c) *Period-type pains or pain in her **pelvic** area (lower part of her tummy) for most days of the month even when she is not bleeding?*

Yes [1] *No* [2]

[This was answered for 5 girls, 1 of whom was stated not to have started her periods and 3 had not replied to question A4]

pub124 a8c - has child had period type pains in pelvic area for most of month even when not bleeding

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	1	.0	20.0	20.0
	2 No	4	.1	80.0	100.0
	Total	5	.2	100.0	
Missing	-2 Not started periods	3275	99.1		
	-1 Missing	24	.7		
	Total	3299	99.8		
Total		3304	100.0		

If <u>yes</u>,

i) Did you contact her doctor for this?

Yes [1] *No* [2]

(There is one case of both A8c and A8c(i) being answered 'YES' despite the child not having started her periods. Despite A4 instructing the parent to go straight to A10, this un-requested information will be kept on the file as it is potentially interesting).

pub125 a8c1 - was doctor contacted about childs pains in pelvic area when not bleeding

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	1	.0	100.0	100.0
Missing	-3 No period type pains	4	.1		
	-2 Not started periods	3275	99.1		
	-1 Missing	24	.7		
	Total	3303	100.0		
Total		3304	100.0		

Sometimes, if girls have problems with their periods e.g. heavy bleeding, irregular bleeding or cramps, their GP may prescribe the oral contraceptive pill (which can be called 'hormone' or 'oestrogen pills') to help.

A9. Has your daughter taken oral contraceptives or birth control pills, for any reason during the past 12 months?

Yes [1] No [2]

pub127 a9 - has child taken oral contraceptives for any reason in past 12 months

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2 No	4	.1	100.0	100.0
Missing	-2 Not started periods	3276	99.2		
	-1 Missing	24	.7		
	Total	3300	99.9		
Total		3304	100.0		

A10. a) Has a doctor ever told your daughter that she had a **thyroid problem** or asked her to take thyroid medicine or treatment?

Yes [1] No [2]

pub128 a10a - has doctor ever told child she had a thyroid problem or asked her to take thyroid treatment

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	1	.0	.0	.0
	2 No	3136	94.9	100.0	100.0
	Total	3137	94.9	100.0	
Missing	-1 Missing	167	5.1		
Total		3304	100.0		

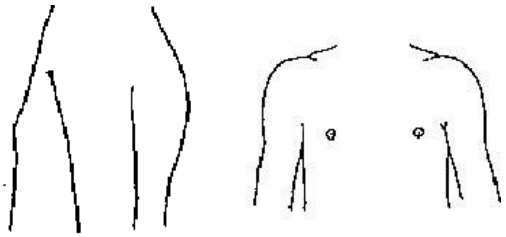
If <u>yes</u>,

b) What kind of thyroid problem did the doctor say she had? [Keyed as text]

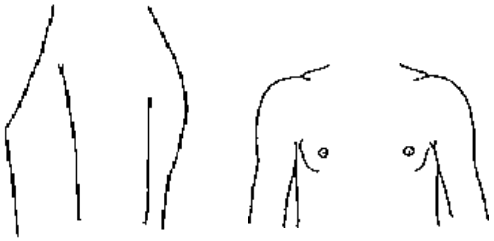
SECTION B (girls)

*The drawings below show stages of the way the **breasts** develop. A girl can go through each of the five stages shown, although some girls skip some stages. Please look at each of the drawings. It is also important to read the descriptions.*

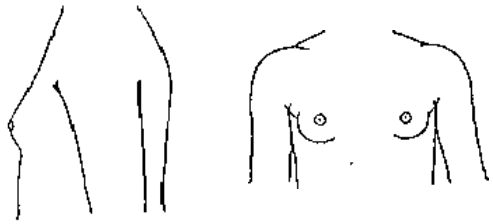
*Put a tick in the box to the right of the drawing that is **closest** to your daughter's current breast stage.*

(1) 

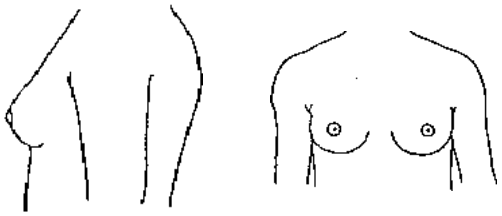
The nipple is raised a little in this stage.
The rest of the breast is still flat

(2) 

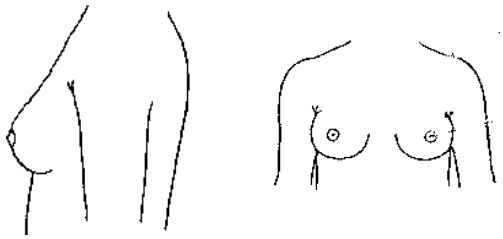
This is the breast bud stage.
In this stage the nipple is raised more than in stage 1. The breast is a small mound.
The dark area around the nipple (areola) is larger than in stage 1.

(3) 

The areola and the breast are both larger than in stage 2. The areola does not stick out away from the breast.

(4) 

The areola and the nipple make up a mound that sticks up above the shape of the breast. (Note: This stage may not happen at all for some girls. Some girls develop from stage 3 to stage 5 with no stage 4.)

(5) 

This is the mature adult stage. The breasts are fully developed. Only the nipple sticks out in this stage. The areola has moved back in the general shape of the breast.

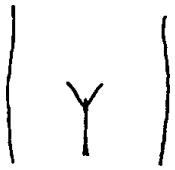
(6)

Not sure

SECTION C (girls)

*The drawings below show different amounts of **female pubic hair**. A girl can go through each of the five stages shown. Please look at each of the drawings. It is also important to read the descriptions.*

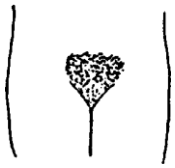
Put a tick in the box to the right of the drawing that is the closest to the amount of pubic hair your daughter has.

(1)  *There is no pubic hair*

(2)  *There is a little long, lightly coloured hair. This hair may be straight or a little curly.*

(3)  *The hair is darker in this stage. It is coarser and more curled. It has spread out and thinly covers a bigger area.*

(4)  *The hair is now as dark, curly, and coarse as that of an adult woman. However, the area that the hair covers is not as large as that of an adult woman. The hair has not spread out to the legs.*

(5)  *The hair now is like that of an adult woman. It also covers the same area as that of an adult woman. The hair usually forms a triangular pattern as it spreads out to the legs.*

(6) *Not sure*

NOTE: Your daughter's pubic hair stage may or may not be the same as her stage of breast development.

[If more than 1 box was ticked, the coders were instructed to take the higher value, unless this was 6]

pub130 b - development stage of childs breasts

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 nipple is raised a little, rest of breast still flat	2725	82.5	85.5	85.5
	2 breast bud stage - breast small mound - larger areola	426	12.9	13.4	98.9
	3 larger areola and breast. Areola not sticking out	33	1.0	1.0	99.9
	4 areola and nipple form mound above breast	2	.1	.1	100.0
	Total	3186	96.4	100.0	
Missing	-1 Missing	91	2.8		
	-2 not sure	27	.8		
	Total	118	3.6		
Total		3304	100.0		

pub135 c - development stage of childs pubic hair

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 no hair	3092	93.6	94.6	94.6
	2 little soft, long, light coloured hair	159	4.8	4.9	99.5
	3 darker, curlier hair covering bigger area	16	.5	.5	100.0
	4 dark and curly as womans but none on legs	1	.0	.0	100.0
	Total	3268	98.9	100.0	
Missing	-1 Missing	35	1.1		
	-2 not sure	1	.0		
	Total	36	1.1		
Total		3304	100.0		

SECTION B (boys)

Boys go through the various stages of physical development at different ages. Some start as early as 6, others not until they are 16. We need your help in letting us know what stage your son is at. Please look at each of the drawings. It is also important to read the descriptions.

*Put a tick in the box that is **closest** to your son's current stage.*

(1) 

The size and shape of the testes, scrotum (the sac holding the testes) and penis are about the same as when he was younger.

(2) 

The penis is a little bit bigger. The scrotum has dropped and the skin of the scrotum has changed. The testes are bigger.

(3) 

The penis has grown longer, the testes have grown and dropped lower.

(4) 

The penis is longer and wider. the head of the penis is bigger, the scrotum is a darker colour and bigger. The testes are bigger.

(5) 

The penis, scrotum and testes are the size and shape of a man's.

(6) *Not sure*

Frequencies shown after section C question.

SECTION C (boys)

As part of development, at some stage hair will start to grow just above the penis. Please look at each of the drawings. It is also important to read the descriptions. Put a tick in the box that is ***closest*** *to the amount of pubic hair that your son has.*

(1) 

There is no hair at all.

(2) 

There is a little soft, long, lightly coloured hair at the base of the penis. It may be straight or a little curly

(3) 

The hair is darker and more curled. It has spread out and thinly covers a bigger area

(4) 

The hair is as dark and curly as that of a man, but it hasn't spread out to the legs.

(5) 

The hair is like that of a man. It has spread out to the legs.

(6) *Not sure*

[If more than 1 box was ticked, the coders were instructed to take the higher value unless this was 6]

pub150 b - development stage of childs testes scrotum and penis

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 about the same as when younger	814	27.6	29.2	29.2
	2 penis + testes bit bigger, scrotum dropped + skin changed	1094	37.1	39.2	68.4
	3 penis longer, testes grown + dropped lower	724	24.5	25.9	94.3
	4 penis longer + wider + bigger head, scrotum darker + bigger	148	5.0	5.3	99.6
	5 size and shape of mans	11	.4	.4	100.0
	Total	2791	94.6	100.0	
Missing	-1 Missing	72	2.4		
	-2 not sure	88	3.0		
	Total	160	5.4		
Total		2951	100.0		

pub155 c - development stage of childs pubic hair

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 no hair	2483	84.1	92.3	92.3
	2 little soft, long, light coloured hair at base of penis	200	6.8	7.4	99.8
	3 darker, curlier hair covering bigger area	6	.2	.2	100.0
	Total	2689	91.1	100.0	
Missing	-1 Missing	245	8.3		
	-2 not sure	17	.6		
	Total	262	8.9		
Total		2951	100.0		

SECTION D (boys)

D1. Sometimes boys are born with something not quite right with their penis or scrotum.

Please read the descriptions below and tick all that apply

- *There was nothing wrong*
- *The testes were not in the scrotum (known as undescended testes)*
- *The hole in the penis was in the wrong place (known as hypospadias)*
- *Something else (please tick and describe)*

pub160 d1av1 - child born with no penis or scrotum problems

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 No problems	2659	90.1	92.0	92.0
	2 Problem reported	231	7.8	8.0	100.0
	Total	2890	97.9	100.0	
Missing	-7 Missing due to printing error	1	.0		
	-6 Missed whole question	60	2.0		
	Total	61	2.1		
Total		2951	100.0		

pub161 d1bv1 - was child born with undescended testes

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 yes	75	2.5	2.6	2.6
	2 No	2815	95.4	97.4	100.0
	Total	2890	97.9	100.0	
Missing	-7 Missing due to printing error	1	.0		
	-6 Missed whole question	60	2.0		
	Total	61	2.1		
Total		2951	100.0		

pub162 d1cv1 - was child born with hypospadias

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 yes	16	.5	.6	.6
	2 No	2874	97.4	99.4	100.0
	Total	2890	97.9	100.0	
Missing	-7 Missing due to printing error	1	.0		
	-6 Missed whole question	60	2.0		
	Total	61	2.1		
Total		2951	100.0		

pub163 d1dv1 - was child born with other penis or scrotum problem

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 yes	141	4.8	4.9	4.9
	2 No	2749	93.2	95.1	100.0
	Total	2890	97.9	100.0	
Missing	-7 Missing due to printing error	1	.0		
	-6 Missed whole question	60	2.0		
	Total	61	2.1		
Total		2951	100.0		

[The text has been keyed but not yet coded]

D2. *More questions about the testes:*

How many does your son now have in his scrotum?

pub164 d2v1 - number of testes in childs scrotum

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 none	92	3.1	3.5	3.5
	2 one	91	3.1	3.5	7.0
	3 two	2413	81.8	93.0	100.0
	Total	2596	88.0	100.0	
Missing	-7 Missing due to printing error	1	.0		
	-1 Missing	354	12.0		
	Total	355	12.0		
Total		2951	100.0		

D3. *Did he ever have an operation on his penis, testes or scrotum?*

- *Yes*
- *No*

pub165 d3v1 - has child had operation on penis, testes or scrotum

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 yes	161	5.5	5.5	5.5
	2 no	2740	92.8	94.5	100.0
	Total	2901	98.3	100.0	
Missing	-7 Missing due to printing error	1	.0		
	-1 Missing	49	1.7		
	Total	50	1.7		
Total		2951	100.0		

If yes. Please give the name of the operation……

[Keyed as text]

Final standard questions:-

These were questions D1 to D3 in the girls questionnaire and E1 to E3 in the boys.

D/E1. This questionnaire was completed by: (tick all that apply)

a)	*mother*	1
b)	*daughter*	1
c)	*other (please describe)*	1

pub190 Who completed questionnaire?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1.00 Parent only	5117	81.8	82.5	82.5
	2.00 Child only	81	1.3	1.3	83.8
	3.00 Parent and child	953	15.2	15.4	99.2
	4.00 Other only	31	.5	.5	99.7
	5.00 Parent and other	6	.1	.1	99.8
	6.00 Child and other	5	.1	.1	99.9
	7.00 Parent, child and other	9	.1	.1	100.0
	Total	6202	99.2	100.0	
Missing	-1.00 Missing	53	.8		
Total		6255	100.0		

D/E2. *Please give the date on which you completed this questionnaire:*

day *month* *year*

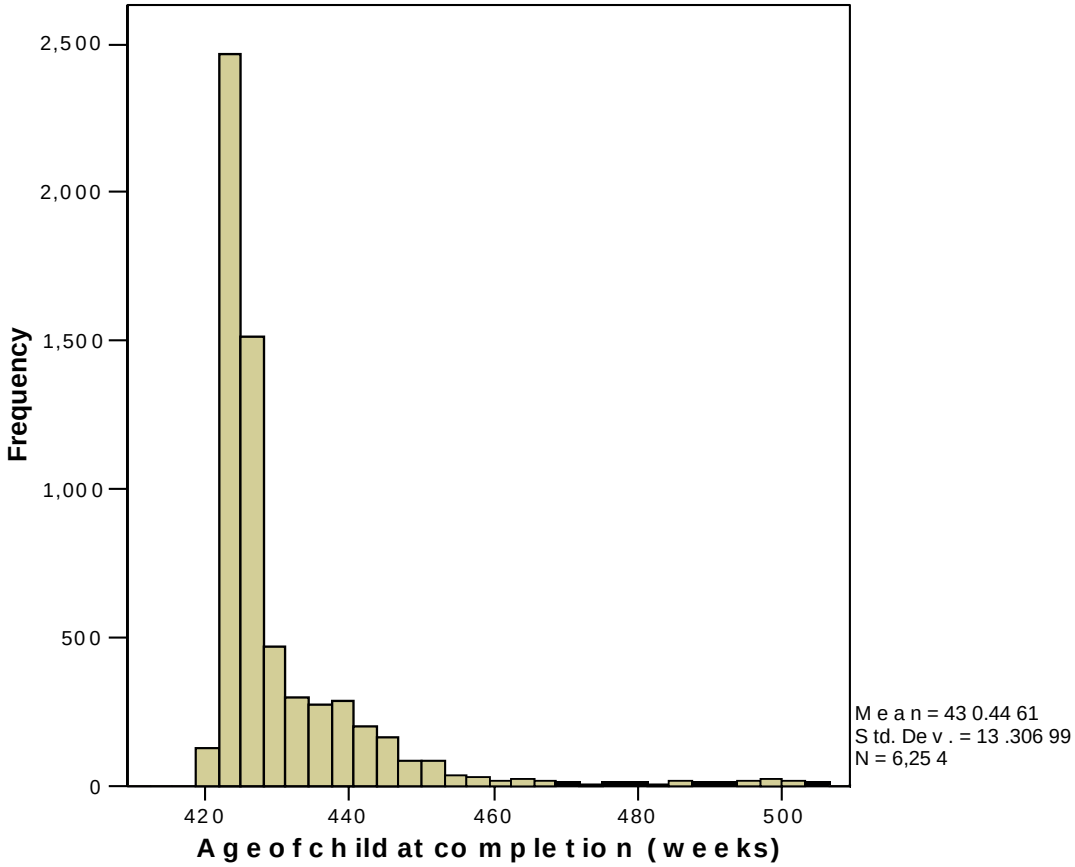
D/E3. *Please give the date of birth of your daughter/son:*

day *month* *year*

199

These were used to derive:-

Pub194 Age of child in weeks



And also:

pub195 Age of child at completion (months)

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	94.00	1	.0	.0	.0
	96.00	89	1.4	1.4	1.4
	97.00	3068	49.0	49.1	50.5
	98.00	1237	19.8	19.8	70.3
	99.00	464	7.4	7.4	77.7
	100.00	408	6.5	6.5	84.2
	101.00	342	5.5	5.5	89.7
	102.00	221	3.5	3.5	93.2
	103.00	104	1.7	1.7	94.9
	104.00	61	1.0	1.0	95.9
	105.00	42	.7	.7	96.5
	106.00	28	.4	.4	97.0
	107.00	26	.4	.4	97.4
	108.00	13	.2	.2	97.6
	109.00	13	.2	.2	97.8
	110.00	13	.2	.2	98.0
	111.00	15	.2	.2	98.3
	112.00	19	.3	.3	98.6
	113.00	25	.4	.4	99.0
	114.00	30	.5	.5	99.4
	115.00	15	.2	.2	99.7
	116.00	10	.2	.2	99.8
	117.00	2	.0	.0	99.9
	118.00	1	.0	.0	99.9
	119.00	4	.1	.1	100.0
	125.00	1	.0	.0	100.0
	129.00	1	.0	.0	100.0
	133.00	1	.0	.0	100.0
	Total	6254	100.0	100.0	
Missing	-1.00 Missing	1	.0		
Total		6255	100.0		

In the event of a missing or erroneous date of completion, the date of receipt of the questionnaire into our post-room was used. An indicator will be present on the file to show when this was done.

The following variables will also be present on the file:-

pub196 Month of completion

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1	827	13.2	13.2	13.2
	2	505	8.1	8.1	21.3
	3	418	6.7	6.7	28.0
	4	309	4.9	4.9	32.9
	5	373	6.0	6.0	38.9
	6	308	4.9	4.9	43.8
	7	349	5.6	5.6	49.4
	8	348	5.6	5.6	55.0
	9	337	5.4	5.4	60.3
	10	1066	17.0	17.0	77.4
	11	983	15.7	15.7	93.1
	12	431	6.9	6.9	100.0
	Total	6254	100.0	100.0	
Missing	-1 Missing	1	.0		
Total		6255	100.0		

pub197 Year of completion

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1999	1621	25.9	25.9	25.9
	2000	3858	61.7	61.7	87.6
	2001	772	12.3	12.3	99.9
	2002	4	.1	.1	100.0
	Total	6255	100.0	100.0	