Cohabitation

Collabitation							
Question Crosswalk							
U.S. Department of Labor							
Questions & Responses	Agency, Survey, and Year						
	Wage and Hour Division	Bureau of Labor Statistics					
	FMLA	CE	NCS	NLSY79	NLSY97	TPOPS	
	2000	2011- 2012	2012	2008	2008	2012	
Current Cohabitation Status							
Are you currently living as a partner with someone? Yes No				*			
Cohabitation Status-Based Indirect Measures							
If respondent answers 'Other non-relatives health condition' they are asked, What is the person's relationship to you? Domestic partner Other (specify)	*						
Follow-Up Measures (Longitudinal Data)							
Since [DII] during the times that you were not							

Since [DLI], during the times that you were not married, did you ever live with anyone as a domestic partner for a period of 3 months or more? READ IF NECESSARY: Please include time that you lived with your (husband/wife) when you were not married.

Yes No

You said your marital status was [MARITAL STATUS AT START F MARRIAGE GAP] as of [START DATE OF MARRIAGE GAP], and you were not married, reunited or remarried between [START DATE OF MARRIAGE GAP] and [END DATE OF MARRIAGE GAP]. During that period, did you live with any partner for at least three months?

Yes

No

Before we discuss your relationship with [PARTNER /People listed above], tell me please, have you had any other marriages or marriage-like relationships with a partner where you had established one household and lived together since the last interview on [DLI]?

Yes No

Since the date of our last interview on [DLI], have you lived with a partner in a marriage-like relationship where you established one household and lived together?

Yes

No





	Agency, Survey, and Year						
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Since the last interview on [DLI], have you been in a marriage or marriage-like relationship with any of the people on this list? Yes No					*		
Since the date of our last interview on [DLI], have you gotten married? Yes No					*		
Since [DLI], did you ever live with this partner? Yes No					*		
Did you ever live with this partner again? Yes No					*		
Since [DLI], have you lived with this partner? Yes No					*		
In this study, we define living together as having a sexual relationship in which partners establish one household and live together. Have you ever lived together in a marriage-like relationship with [dating partner/spouse]? Yes No					*		
These next questions are about marriages and marriage-like relationships. In a marriage, there may be times when a husband and wife live in different households. In this study we define a marriage-like relationship as a sexual relationship in which partners establish one household and live together. When we talked to you during our last interview in [DLI], you were not married or living in a marriage-like relationship at that time.					*		
Select to continue Select if R volunteers a correction							
Does the partner you were living with at the time of the last interview currently live in your household? Yes No					*		
These next questions are about marriages and marriage-like relationships. When we talked to you during our last interview in [DLI], you were in a marriage-like relationship with [DLI PARTNER) at that time. Select to continue Select if R volunteers a correction					*		

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Does that spouse or partner currently live in your household? Yes No					*		
So just to check, you are still living with this partner in a marriage-like relationship where you have established one household together? Yes					*		
No What is the current status of your relationship with							
this partner? (How did this relationship finally end?) Break-up Annulment, nothing legal							
Legal separation only (no legal divorce) Legal divorce R & spouse/partner are still together but not living					*		
together R & Spouse are still married but do not live together							
At the time of the last interview, you said you were dating [NAME]. What best describes your current relationship with [partner at the last interview]? We are still dating We are married We are currently living together, but not married We are no longer together					*		
What best describes your current relationship with [dating partner/spouse]? We are still dating We are married We are currently living together, but not married					*		
We are no longer together Cohal	bitation Histor	v Measu	res				
Have you ever been married to or lived with someone in a marriage-like relationship? Yes No		,			*		
How many times in total have you ever lived with a sexual partner? Number					*		
Did you ever live with [PARTNER] again? Yes No					*		
	Cohabitation	Dates					
You said your marital status was [MARITAL STATUS AT START OF MARRIAGE GAP] as of [START DATE OF MARRIAGE GAP], and you were not married,							

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reunited or remarried between [START DATE OF MARRIAGE GAP] and [END DATE OF MARRIAGE GAP]. During that period, did you live with any partner for at least three months? Yes No				*			
When did you start living with this partner between [START DATE OF MARRIAGE GAP] and [END DATE OF MARRIAGE GAP]? INTERVIEW: If R was living with partner at last interview, please enter date of last interview. ENTER MONTH ENTER YEAR				*			
Since [MONTH/YEAR STARTED LIVING WITH PARTNER], [(have/did) you live(s)] continuously with that partner until [END OF MARRIAGE GAP], or did you ever stop living with that partner? Stopped living with that partner Have lived with that partner continuously				*			
When did you stop living with that partner between [MONTH/YEAR STARTED LIVING WITH PARTNER] and [END OF MARRIAGE GAP]? ENTER MONTH ENTER YEAR				*			
In what month and year did you start living with {PARTNER} for the first time? ENTER MONTH ENTER YEAR					*		
When did you next start living with [PARTNER] (again)? ENTER MONTH ENTER YEAR					*		
Sex of Respondent and Household Member							

Note: Sex of Respondent and Household Membership is collected using a screener instrument before the FMLA survey is conducted. We're in interested in talking to someone in the household in more depth about workplace and family leave. In order to do that, I need to list all the first names of members in the household, their ages, and genders. May I start with your name? First name [CODE UP TO 7 RESPONSES] Sex [CODE UP TO 7 RESPONSES

Are you/Is (name) male or female? Male

Female

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Sex of respondent Male Female				*	*		
Sex of each household member Male Female				*			
Is [dating partner/spouse] male or female? Male Female					*		

Surveys

FMLA: Family Medical & Leave Act Survey

CE: Consumer Expenditure Survey
CPS: Current Population Survey

NCS: National Compensation Survey

NLSY79: National Longitudinal Survey of Youth 79 NLSY97: National Longitudinal Survey of Youth 97

TPOPS: Telephone Point of Purchase Survey

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