Content of 2001 NHSDA Instrument

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* **CAPI** (computer-assisted personal interviewing): FI reads questions and records responses.
** **ACASI** (audio computer-assisted self-interviewing): Respondent reads questions on screen or listens to questions through headphones and then records answers into computer.

2001 National Household Survey on Drug Abuse
Specifications for Programming

Core Demographics

STARTUP   INTERVIEWER: SELECT THE LANGUAGE TO BE USED IN THIS INTERVIEW.

      1   ENGLISH
      2   SPANISH
      3   MULTIMEDIA LANGUAGE

NOTE1   FI: DO NOT READ ALOUD UNLESS RESPONDENT QUESTIONS THE BURDEN (OR TIME) ASSOCIATED WITH THIS INTERVIEW.

NOTICE: Public reporting burden for this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to SAMHSA Reports Clearance Officer, Paperwork Reduction Project (0930-0110); Room 16-105; Parklawn Building; 5600 Fishers Lane; Rockville, MD 20857. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0110.

PRESS [ENTER] TO CONTINUE.

REMINDFI   [IF QUESTID INDICATES MAIN STUDY OR VALIDITY CASE] INTERVIEWER: IF YOU HAVE NOT READ THE "INTRO TO CAI" IN YOUR SHOWCARD BOOKLET ALOUD TO THIS RESPONDENT DO SO NOW. WHEN RESPONDENT IS FULLY INFORMED, CONTINUE WITH THE INTERVIEW.

[IF QUESTID INDICATES $20 INCENTIVE CASE] INTERVIEWER: IF YOU HAVE NOT READ THE **YELLOW** INCENTIVE VERSION OF THE "INTRO TO CAI" ALOUD TO THIS RESPONDENT, DO SO NOW. WHEN RESPONDENT IS FULLY INFORMED, CONTINUE WITH THE INTERVIEW.

[IF QUESTID INDICATES $40 INCENTIVE CASE] INTERVIEWER: IF YOU HAVE NOT READ THE **GREEN** INCENTIVE VERSION OF THE "INTRO TO CAI" ALOUD TO THIS RESPONDENT, DO SO NOW. WHEN RESPONDENT IS FULLY INFORMED, CONTINUE WITH THE INTERVIEW.

PRESS [ENTER] TO CONTINUE.

AGE1   What is your date of birth?

ENTER MM-DD-YYYY

DOB: _____
DK/REF

DEFINE CALCAGE:
      CALCAGE = AGE CALCULATED BY "SUBTRACTING" DATE OF BIRTH FROM DATE OF INTERVIEW.

ODDAGE   [IF CALCAGE > 90] INTERVIEWER: PLEASE RE-ENTER THE RESPONDENT'S DATE OF BIRTH.

ENTER MM-DD-YYYY

DOB: _____

UPDATE: IF ODDAGE NOT BLANK THEN CALCAGE = AGE CALCULATED BASED ON ODDAGE

CONFIRM   That would make you [CALCAGE] years old. Is this correct?

                   1   YES
                   2   NO
                   DK/REF

HARD ERROR: [IF CONFIRM = 2] INTERVIEWER: PRESS [ENTER] TO CLOSE THIS BOX AND THEN PRESS THE [F9] KEY ONCE TO BACKUP TO THE SCREEN LABELED AGE1 AND CORRECT THE RESPONDENT'S DATE OF BIRTH.

UNDER12   [IF CONFIRM = 1 OR DK/REF AND CALCAGE < 12] Since you are [CALCAGE] years old, we cannot interview you for this study. Thank you for your cooperation. *PROGRAM SHOULD ROUTE TO FIEXIT.*

DKREFAGE   [IF (CALCAGE IS 12 OR OLDER AND CONFIRM = DK/REF) OR AGE1 = DK/REF] For this study it is very important that I collect your correct age so that you will be asked the right questions. Could you please tell me your correct age?

                   AGE: _____ [RANGE: 1 - 110]
                   DK/REF

IF DKREFAGE NOT (BLANK OR DK/REF) THEN CALCAGE = DKREFAGE

UNDER12b [IF DKREFAGE < 12] Since you are [CALCAGE] years old, we cannot interview you for this study. Thank you for your cooperation. *PROGRAM SHOULD ROUTE TO FIEXIT*

LASTCHANCE   [IF DKREFAGE = DK/REF] Since I am not certain what your age is, I cannot interview you for this study. Thank you for your cooperation. *PROGRAM SHOULD ROUTE TO FIEXIT*

         DEFINE CURNTAGE:
                   IF CALCAGE > 11 AND CONFIRM = 1, CURNTAGE = CALCAGE
                   IF CALCAGE > 11 AND CONFIRM = DK/REF AND DKREFAGE > 11, CURNTAGE = DKREFAGE
                   IF AGE1 = DK/REF AND DKREFAGE > 11, CURNTAGE = DKREFAGE
                   ELSE RESPONDENT IS INELIGIBLE; ROUTE TO ENDAUDIO

FIPE1   INTERVIEWER: WERE 2 PERSONS SELECTED FOR AN INTERVIEW AT THIS SDU?

                   1   YES
                   2   NO

FIPE2   [IF FIPE1 = 1 AND CURNTAGE = 18 OR OLDER] INTERVIEWER: WAS A 12 - 17 YEAR OLD CHILD SELECTED FOR AN INTERVIEW AT THIS SDU?

                   1   YES
                   2   NO

FIPE3   [IF FIPE2 = 1] INTERVIEWER: IS **THIS** RESPONDENT THE PARENT OR LEGAL GUARDIAN OF THE 12 - 17 YEAR OLD CHILD WHO WAS SELECTED FOR AN INTERVIEW? (VERIFY THIS WITH THE RESPONDENT IF YOU ARE UNSURE.)

                   1   YES
                   2   NO

         NOTE: IF FIPE3 = 1, SET THE FLAG TO ADMINISTER THE PARENTING EXPERIENCES MODULE DURING ACASI.

FIPE4   INTERVIEWER: IN WHAT STATE IS THIS SAMPLE DWELLING UNIT (SDU) LOCATED?

                   1   ALABAMA   27   MONTANA
                   2   ALASKA   28   NEBRASKA
                   3   ARIZONA   29   NEVADA

4	ARKANSAS	30	NEW HAMPSHIRE
5	CALIFORNIA	31	NEW JERSEY
6	COLORADO	32	NEW MEXICO
7	CONNECTICUT	33	NEW YORK
8	DELAWARE	34	NORTH CAROLINA
9	THE DISTRICT OF COLUMBIA (WASHINGTON, DC)	35	NORTH DAKOTA
10	FLORIDA	36	OHIO
11	GEORGIA	37	OKLAHOMA
12	HAWAII	38	OREGON
13	IDAHO	39	PENNSYLVANIA
14	ILLINOIS	40	RHODE ISLAND
15	INDIANA	41	SOUTH CAROLINA
16	IOWA	42	SOUTH DAKOTA
17	KANSAS	43	TENNESSEE
18	KENTUCKY	44	TEXAS
19	LOUISIANA	45	UTAH
20	MAINE	46	VERMONT
21	MARYLAND	47	VIRGINIA
22	MASSACHUSETTS	48	WASHINGTON
23	MICHIGAN	49	WEST VIRGINIA
24	MINNESOTA	50	WISCONSIN
25	MISSISSIPPI	51	WYOMING
26	MISSOURI		

FIPE5   INTERVIEWER: THE STATE YOU ENTERED IS:

FIPE4 STATE NAME FILL

IS THIS CORRECT?

1   YES
2   NO

HARD ERROR: [IF FIPE5 = 2] INTERVIEWER: PRESS [ENTER] TO CLOSE THIS BOX AND THEN PRESS THE [F9] KEY ONCE TO BACKUP TO THE SCREEN LABELED FIPE4 AND CORRECT THE STATE WHERE YOU ARE CONDUCTING THIS INTERVIEW.

QD01   The first questions are for statistical purposes only, to help us analyze the results of the study.

INTERVIEWER: RECORD RESPONDENT'S SEX.

5   MALE
9   FEMALE
DK/REF

QD03   Are you of Hispanic, Latino, or Spanish origin or descent?

1   YES
2   NO
DK/REF

QD04   [IF QD03 = 1] HAND R SHOWCARD 1. Which of these Hispanic, Latino, or Spanish groups best describes you? Just give me the number or numbers from the card.

TO SELECT MORE THAN ONE CATEGORY, PRESS THE SPACE BAR BETWEEN EACH CATEGORY YOU SELECT.

1   MEXICAN / MEXICAN AMERICAN / MEXICANO / CHICANO
2   PUERTO RICAN
3   CENTRAL OR SOUTH AMERICAN
4   CUBAN / CUBAN AMERICAN

5   OTHER (SPECIFY)
DK/REF

QDO4OTHR [IF QD04 = 5] SPECIFY OTHER HISPANIC COUNTRY OR ORIGIN

    _____

QD05 HAND R SHOWCARD 2. Which of these groups describes you? Just give me the number or numbers from the card.

    TO SELECT MORE THAN ONE CATEGORY, PRESS THE SPACE BAR BETWEEN EACH CATEGORY YOU SELECT.

    RESPONDENTS WHO REPORT THEIR RACE AS NATIVE AMERICAN SHOULD BE INCLUDED IN RESPONSE CATEGORY 3.

    1 WHITE
    2 BLACK / AFRICAN AMERICAN
    3 AMERICAN INDIAN OR ALASKA NATIVE (AMERICAN INDIAN INCLUDES NORTH AMERICAN, CENTRAL AMERICAN, AND SOUTH AMERICAN INDIANS)
    4 NATIVE HAWAIIAN
    5 OTHER PACIFIC ISLANDER
    6 ASIAN (FOR EXAMPLE: ASIAN INDIAN, CHINESE, FILIPINO, JAPANESE, KOREAN, AND VIETNAMESE)
    7 OTHER (SPECIFY)
    DK/REF

QD05ASIA [IF QD05 = 6] HAND R SHOWCARD 3. Which of these Asian groups best describes you? Just give me the number or numbers from the card.

    TO SELECT MORE THAN ONE CATEGORY, PRESS THE SPACE BAR BETWEEN EACH CATEGORY YOU SELECT.

    1 ASIAN INDIAN
    2 CHINESE
    3 FILIPINO
    4 JAPANESE
    5 KOREAN
    6 VIETNAMESE
    7 OTHER (SPECIFY)
    DK/REF

QD05OTHA [IF QD05ASIA = 7] SPECIFY OTHER **ASIAN** GROUP

    OTHER ASIAN GROUP: _____
    DK/REF

QD05OTHR [IF QD05 = 7] SPECIFY OTHER RACIAL GROUP

    OTHER RACIAL GROUP: _____

DEFINE RACEFILL:
    RACEFILL = RESPONSES GIVEN IN QD05 AND QD05ASIA AND TEXT FROM QD05OTHR AND QD05OTHA IF APPLICABLE
    [Responses should appear in regular case and be separated by commas. The last response should be preceded by the word "or." For example, if a respondent selects categories 1, 3, and 6 in QD05, and QD05ASIA = 1, RACEFILL should be: "White, American Indian or Alaskan Native, or Chinese"]

QD06 [IF MORE THAN ONE RESPONSE SELECTED IN QD05] Which **one** of these groups, that is [RACEFILL], **best** describes you?
    SELECT ONLY **ONE** ANSWER FROM THE CATEGORIES SHOWN **IN BLUE** BELOW.

    1 WHITE

2   BLACK / AFRICAN AMERICAN
3   AMERICAN INDIAN OR ALASKA NATIVE (AMERICAN INDIAN INCLUDES NORTH AMERICAN, CENTRAL AMERICAN, AND SOUTH AMERICAN INDIANS)
4   NATIVE HAWAIIAN
5   OTHER PACIFIC ISLANDER
6   ASIAN INDIAN
7   CHINESE
8   FILIPINO
9   JAPANESE
10   KOREAN
11   VIETNAMESE
12   IF QD05 = 7, FILL TEXT FROM QD05OTHR
           IF QD05 NE 7 FILL WITH "OTHER (SPECIFY)"
13   IF QD05ASIA = 7, FILL TEXT FROM QD05OTHA
           IF QD05ASIA = BLANK, FILL WITH "NOT APPLICABLE"
14   NONE OF THESE
DK/REF

INTERVIEWER NOTE:
If the respondent expresses any concerns about this question or asks why it has been included, please press F8 and record what they have said in the Comment Box. Do not probe for this information! Only record a comment if the respondent spontaneously brings up the topic.

[NOTE: ONLY CODES FOR RESPONSE CATEGORIES ENTERED IN QD05 OR QD05OTH OR QD05ASIA OR QD05OTHA WILL BE ACTIVE FOR THIS QUESTION. IF THE INTERVIEW ENTERS AN INACTIVE RESPONSE CATEGORY, THE RANGE ERROR BOX WILL APPEAR. CATEGORY 14 WILL ALWAYS SHOW IN BLUE AND WILL ALWAYS BE A SELECTABLE RESPONSE.]

QD07   [IF CURNTAGE = 15 OR OLDER] Are you now married, widowed, divorced or separated, or have you never married?

1   MARRIED
2   WIDOWED
3   DIVORCED OR SEPARATED
4   NEVER MARRIED
DK/REF

INTERVIEWER NOTE:
If the respondent is divorced but currently remarried, code as married. By "divorce" we mean a legal cancellation or annulment of a marriage. By "separated" we mean legally or informally separating due to marital discord.

QD08   [IF QDO7 = 1 OR 2 OR 3] How many times have you been married?

NUMBER OF TIMES: _____ [RANGE: 1 - 9]
DK/REF

QD09   [IF CURNTAGE = 17 OR OLDER] Have you ever been in the United States' armed forces?

1   YES
2   NO
DK/REF

QD10   [IF QD09 = 1 OR DK/REF] Are you **currently** on **active** duty in the armed forces, in a reserves component, or now separated or retired from either reserves or active duty?

1   ON ACTIVE DUTY IN THE ARMED FORCES
2   IN A RESERVES COMPONENT
3   NOW SEPARATED OR RETIRED FROM EITHER RESERVES OR ACTIVE DUTY
DK/REF

MILTERM1 [IF QD10 = 1] I need to verify what I just entered into the computer. You said you are **currently** on active duty in the armed forces. Is that correct?

    1   YES
    2   NO
    DK/REF

MILCONT [IF MILTERM1 = 2 OR DK/REF] INTERVIEWER: PRESS [ENTER] TO CLOSE THIS BOX AND THEN USE THE [F9] KEY TO BACKUP TO THE SCREEN LABELED QD10 AND CORRECT THE RESPONDENT'S CURRENT MILITARY STATUS.

MILTERM2 [IF MILTERM1 = 1] People who are currently on active duty in the armed forces are not eligible to be interviewed in this study. I appreciate you taking the time to speak with me. Thank you.

    PRESS [ENTER] TO CONTINUE.
    [ROUTE TO ENDAUDIO]

QD11 HAND R SHOWCARD 4. What is the highest grade or year of school you have **completed**?

Please tell me the number from the card.

INCLUDE JUNIOR OR COMMUNITY COLLEGE ATTENDANCE; DO NOT INCLUDE TECHNICAL SCHOOLS (BEAUTICIAN, MECHANIC, ETC.).

    0   NEVER ATTENDED SCHOOL
    1   1ST GRADE COMPLETED
    2   2ND GRADE COMPLETED
    3   3RD GRADE COMPLETED
    4   4TH GRADE COMPLETED
    5   5TH GRADE COMPLETED
    6   6TH GRADE COMPLETED
    7   7TH GRADE COMPLETED
    8   8TH GRADE COMPLETED
    9   9TH GRADE COMPLETED
    10   10TH GRADE COMPLETED
    11   11TH GRADE COMPLETED
    12   12TH GRADE COMPLETED
    13   COLLEGE OR UNIVERSITY / 1ST YEAR COMPLETED
    14   COLLEGE OR UNIVERSITY / 2ND YEAR COMPLETED
    15   COLLEGE OR UNIVERSITY / 3RD YEAR COMPLETED
    16   COLLEGE OR UNIVERSITY / 4TH YEAR COMPLETED
    17   COLLEGE OR UNIVERSITY / 5TH OR HIGHER YEAR COMPLETED
    DK/REF

QD12 This question is about your overall health. Would you say your health in general is excellent, very good, good, fair, or poor?

    1   EXCELLENT
    2   VERY GOOD
    3   GOOD
    4   FAIR
    5   POOR
    DK/REF

CALENDAR   CALENDAR

Throughout the rest of this questionnaire, I will be asking you to answer a number of questions about three specific time periods, namely the past 30 days, the past 12 months, and your lifetime. To help you remember the first two time periods, let's mark this calendar with the beginning dates for each one of them.

SHOW CALENDAR TO RESPONDENT.

Now let's think about the past 30 days. According to the calendar, **DATEFILL** was 30 days ago, so I will write **DATEFILL** here on the calendar. I'll call that your 30-day reference date.

WRITE 30-DAY REFERENCE DATE ON CALENDAR AND CIRCLE DAY; UNDERLINE ENTIRE 30-DAY PERIOD.

A number of questions will ask about the past 12 months, that is since this date last year. Let's look at the calendar and find that date — **DATEFILL**. I'll call that your 12-month reference date.

WRITE 12 MONTH REFERENCE DATE ON CALENDAR AND CIRCLE DAY ON CALENDAR.

Please use this calendar as we go through the interview to help you remember when different things happened. I will remind you to think about your 30-day reference date and your 12-month reference date when I ask you questions.

PRESS [ENTER] TO CONTINUE.

Beginning ACASI Section

INTROACASI   An important part of this interview is the sections you will conduct completely on your own using the computer and headphones. Before you begin, I will help you go through a short practice session to learn how to use the computer.

>   MOVE COMPUTER SO RESPONDENT CAN USE IT AND POINT OUT THE FOLLOWING:
>
>   LABELED KEYS IN TOP ROW (FUNCTION KEYS)
>   NUMBER KEYS
>   [ENTER] KEY
>   SPACE BAR
>   BACKSPACE KEY
>   THE BOTTOM OF THE SCREEN WHERE THEIR ANSWERS WILL APPEAR
>
>   CAUTION RESPONDENT ABOUT ON/OFF SWITCH.
>
>   ADJUST HEADPHONES FOR RESPONDENT AND DEMONSTRATE VOLUME CONTROL.
>
>   WHEN RESPONDENT IS READY, PRESS "1" TO CONTINUE.

Tutorial

INTRO1 Welcome to the RTI self-interviewing system. We developed this system so that you can control the interview yourself and enter your answers in complete privacy.

First, you will learn how to use the system and complete some practice questions. You will learn how to enter answers, how to back-up if you make a mistake and want to change an answer, and what to do if you do not know the answer to a question.

Press the large [ENTER] key on the right side of the keyboard to move to the next screen. The [ENTER] key is the one with the ← symbol on it.

INTRO2 In this system you can read the questions on the computer screen and hear them read through the headphones. If you would like to just see the questions on the screen, you can turn off the voice. You will learn how to do this.

Press the large [ENTER] key on the right side of the keyboard to move to the next screen. The [ENTER] key is the one with the ← symbol on it.

HEAROFF You can lower the sound by adjusting the control on the cord of the headphones. Or, if you don't want to listen to the sound at all, you can press the **[F7]** key to turn the sound off. If you want to hear the questions read aloud, you can press the **[F7]** key again to turn the sound back on.

Press [ENTER] to continue.

GOTDOG You answer questions by putting in numbers that correspond to your answer. The numbers are located in the second row of keys.

To answer a question, you first press the correct number and then press [ENTER] to send the answer to the computer. Practice this now.

Do you have a dog?

1   Yes
2   No

EYECOLOR The last question was a Yes-No question. Sometimes questions will have more answers to choose from, and you will select an answer from a list.

What color are your eyes? Put in the number that best fits you and press the [ENTER] key.

1   Blue
2   Gray
3   Brown
4   Black
5   Some other color

NUMBER Other questions will ask you to type in a number rather than choosing a category.

In the past 30 days, on how many days did you eat breakfast? Type in the number of days you ate breakfast and press [ENTER].

_____ [RANGE: 0 - 30]
DK/REF

STOPLIST If the list is long, and we come to your answer before the end, you can interrupt the voice and put your answer in as soon as you decide what it is.

Try doing this on the next question. Put in your answer while the list is being read. Remember to press [ENTER].

When do you want to interrupt this list?

9

1	First answer
2	Second answer
3	Third answer
4	Fourth answer
5	Fifth answer
6	Sixth answer
7	Seventh answer (Go ahead and press 7 and [ENTER] now.)
8	Eighth answer (This is the last answer choice. Press 8 and [ENTER] now.)

DOAGAIN   You can also hear a question read more than once. To do this, you press the [F10] key. Try this now.

Questions can be read more than once and it is up to you to tell the computer when you want to hear a question read again. You can hear it as many times as you like.

How many times did you listen to this screen?

1	I have listened to this screen more than once.
2	I have listened to this screen one time

BACKUP   If you want to change or review an answer to a previous question, you can back up using the [F9] key. Each time you press the [F9] key the computer will go back one question.

Press [ENTER] to continue.

RANGEERR   For some questions, the computer can only accept certain answers. For example, in the question below, the only answers the computer will accept are 1 for YES and 2 for NO.

If you try to enter some other number as your answer, a small box labeled **Input Invalid** will appear on the screen. To correct your answer, you must press the [ENTER] key to make the box disappear and then use the **Backspace key** to remove your old answer. You can then answer the question again.

Try this with the question below. Type a 3 as your answer. Press the [ENTER] key to remove the **Input Invalid** box. Use the **Backspace key** to remove your answer and type in a valid answer.

Do you have a cat?

1	Yes
2	No

INCONSIS   At times the computer may ask you to review one of your answers. Other times, it may think two of your answers disagree and ask you to tell which one is correct and then fix the wrong one.

Also, at certain times the computer will instruct you to ask your interviewer to show you some pictures. Be sure to ask for these pictures when you get to this instruction.

Press [ENTER] to continue.

ANYQUES   If you have any questions, ask your interviewer now. Otherwise, press [ENTER] to begin.

Tobacco

LEADCIG   These questions are about your use of tobacco products. This includes cigarettes, chewing tobacco, snuff, cigars, and pipe tobacco. The first questions are about cigarettes only.

Press [ENTER] to continue.

CG01   Have you **ever** smoked part or all of a cigarette?

1   Yes
2   No
DK/REF

CGREF1   [IF CG01 = REF] The information respondents provide about their cigarette smoking is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever** smoked part or all of a cigarette?

1   Yes
2   No
DK/REF

CG02   [IF CURNTAGE = 12 - 17 AND (CG01 = 2 OR CGREF1 = 2)] If one of your best friends offered you a cigarette, would you smoke it?

1   Definitely yes
2   Probably yes
3   Probably not
4   Definitely not
DK/REF

CG03   [IF CURNTAGE = 12 - 17 AND (CG01 = 2 OR CGREF1 = 2)] At any time during the next 12 months do you think you will smoke a cigarette?

1   Definitely yes
2   Probably yes
3   Probably not
4   Definitely not
DK/REF

CG04   [IF CG01 = 1 OR CGREF1 = 1] How old were you the **first time** you smoked part or all of a cigarette?

AGE: _____   [(RANGE: 1 - 110]
DK/REF

DEFINE AGE1STCG:
     IF CG04 NE (BLANK OR DK/REF) THEN AGE1STCG = CG04
     ELSE AGE1STCG = BLANK

     IF CURNTAGE < AGE1STCG
          *CGCC01 The computer recorded that you were **[AGE1STCG]** when you first smoked part or all of a cigarette. Is this correct?*

               4   Yes
               6   No
               DK/REF

          CGCC02 [IF CGCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

               *1   I am currently **[CURNTAGE]** years old*

> *2 I was **[AGE1STCG]** years old the first time I smoked part or all of a cigarette*
> *3 Neither answer is correct*
> *DK/REF*

> *CGCC03 [IF CGCC02 = 2 OR CGCC02 = 3] Please answer this question again. What is your **current** age?*
>
> *AGE: _____ [RANGE: 1 - 110]*
> *DK/REF*

>> *CGCC03a [IF CGCC03 < 12] Since you have indicated that you are **[CGCC03 AGE]** years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE ENDAUDIO.*

> *CGCC04 [IF CGCC02 = 1 OR CGCC02 = 3 OR CGCC01 = 6] Please answer this question again. How old were you the **first time** you smoked part or all of a cigarette?*
>
> *AGE: _____ [RANGE: 1 - 110]*
> DK/REF

UPDATE: IF CGCC04 NOT(BLANK OR DK/REF) THEN AGE1STCG = CGCC04

UPDATE: IF CGCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = CGCC03

> IF AGE1STCG = CURNTAGE OR AGE1STCG < 10:
> *CGCC05 The computer recorded that you were **[AGE1STCG]** years old the first time you smoked part or all of a cigarette. Is this correct?*
>
>> *4 Yes*
>> *6 No*
>> *DK/REF*

> *CGCC06 [IF CGCC05 = 6] Please answer this question again. How old were you the **first time** you smoked part or all of a cigarette?*
>
> *AGE: _____ [RANGE: 1 - 110]*
> *DK/REF*

UPDATE: IF CGCC06 NOT(BLANK OR DK/REF) THEN AGE1STCG = CGCC06

CG04a [IF AGE1STCG = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STCG = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first smoke part or all of a cigarette in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1 CURRENT YEAR - 1
2 CURRENT YEAR
DK/REF

CG04b [IF AGE1STCG = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first smoke part or all of a cigarette in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1 CURRENT YEAR - 2
2 CURRENT YEAR - 1
DK/REF

CG04c [IF AGE1STCG = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first smoke part or all of a cigarette?

1 January
2 February
3 March

4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

[Note: Insert range check if CG04c > current month].

CG04d [IF CF04a = 1 OR 2 OR CG04b = 1 OR 2] In what **month** in [YEAR FROM CG04a or CG04b] did you first smoke part or all of a cigarette?

1	January
2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

CG05 [IF CG01 = 1 OR CGREF1 = 1] Now think about the past 30 days, from **DATEFILL** up to and including today. During the past 30 days, have you smoked part or all of a cigarette?

1	Yes
2	No
DK/REF	

CG06 [IF CG05 = 2] How long has it been since you **last** smoked part or all of a cigarette?

1	More than 30 days ago but within the past 12 months
2	More than 12 months ago but within the past 3 years
3	More than 3 years ago
DK/REF	

CG06DK [IF CG06 = DK] What is your **best guess** of how long it has been since you **last** smoked part or all of a cigarette?

1	More than 30 days ago but within the past 12 months
2	More than 12 months ago but within the past 3 years
3	More than 3 years ago
DK/REF	

CG06RE [IF CG06 = REF] The information respondents provide about their cigarette smoking is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** smoked part or all of a cigarette?

1	More than 30 days ago but within the past 12 months
2	More than 12 months ago but within the past 3 years
3	More than 3 years ago
DK/REF	

CG07 [IF CG05 = 1] During the past 30 days, that is, since **DATEFILL**, on how many **days** did you smoke part or all of a cigarette?

OF DAYS: _____ [RANGE: 1 - 30]
DK/REF

CG07DKRE [IF CG07 = DK/REF] What is your **best estimate** of the number of days you smoked part or all of a cigarette during the past 30 days?

    1   1 or 2 days
    2   3 to 5 days
    3   6 to 9 days
    4   10 to 19 days
    5   20 to 29 days
    6   all 30 days
    DK/REF

DEFINE CIGDKRE FILL:
    IF CG07DKRE = 1, THEN CIGDKRE = "1 or 2 days"
    IF CG07DKRE = 2, THEN CIGDKRE = "3 to 5 days"
    IF CG07DKRE = 3, THEN CIGDKRE = "6 to 9 days"
    IF CG07DKRE = 4, THEN CIGDKRE = "10 to 19 days"
    IF CG07DKRE = 5, THEN CIGDKRE = "20 to 29 days"
    IF CG07DKRE =6, THEN CIGDKRE = "30 days"

CG08 [IF CG07 > 1 OR CG07DKRE = 1 - 6]) On the [CG07 days / CIGDKRE] you smoked cigarettes during the past 30 days, how many cigarettes did you smoke per day, on average?

    1   Less than one cigarette per day
    2   1 cigarette per day
    3   2 to 5 cigarettes per day
    4   6 to 15 cigarettes per day (about ½ pack)
    5   16 to 25 cigarettes per day (about 1 pack)
    6   26 to 35 cigarettes per day (about 1 ½ packs)
    7   More than 35 cigarettes per day (about 2 packs or more)
    DK/REF

CG10 (CG07 = 1) On the one day you smoked cigarettes during the past 30 days, how many cigarettes did you smoke?

    1   Less than one cigarette per day
    2   1 cigarette per day
    3   2 to 5 cigarettes per day
    4   6 to 15 cigarettes per day (about ½ pack)
    5   16 to 25 cigarettes per day (about 1 packs)
    6   26 to 35 cigarettes per day (about 1 ½ packs)
    7   More than 35 cigarettes per day (about 2 packs or more)
    DK/REF

CG11 [IF CG05 = 1] The next questions are about the brand of cigarettes you smoke -- the brand is the name that is on the pack. During the past 30 days, what brand of cigarettes did you smoke **most often**?

1	Basic	15	Monarch
2	Benson & Hedges	16	Montclair
3	Cambridge	17	More
4	Camel	18	Newport
5	Capri	19	Pall Mall
6	Carlton	20	Parliament
7	Doral	21	Private Label
8	Forsyth	22	Salem
9	GPC	23	Vantage
10	Kent	24	Viceroy
11	Kool	25	Virginia Slims

12	Marlboro	26	Winston
13	Merit	27	A brand not on this list
14	Misty		

DK/REF

CG11a [IF CG11 = 27] Please think again about the brand of cigarettes you smoke. During the past 30 days, what brand of cigarettes did you smoke **most often**?

1	Alpine	17	Magna	33	Triumph
2	Barclay	18	Maverick	34	True
3	Belair	19	Max	35	A brand not on this list
4	Best Value	20	Now		
5	Bristol	21	Old Gold		
6	Bugler (roll-your-own)	22	Players		
7	Century	23	Pyramid		
8	Chesterfield	24	Raleigh		
9	Commander	25	Richland		
10	Covington	26	Saratoga		
11	Eve	27	Satin		
12	Harley Davidson	28	State Express		
13	Jasmine	29	Sterling		
14	Lark	30	Style		
15	L & M	31	Tareyton		
16	Lucky Strike	32	Top (roll-your-own)		

DK/REF

CG12 (IF CG11a = 35) Please use the keyboard to type in the name of the brand of cigarettes you smoked **most often** during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND SMOKED: _____
DK/REF

CG13 (IF CG11 NE DK/REF OR 27 OR CG11a NE DK/REF OR 35) The computer recorded that during the past 30 days, the cigarette brand you smoked most often was [CG11 OR CG11a FILL]. Is this correct?

1   Yes
2   No
DK/REF

RCG11 [IF CG13 = 2 AND CG11 = 1 - 34] Please review this list again. During the past 30 days, what brand of cigarettes did you smoke **most often**?

1	Basic	15	Monarch
2	Benson & Hedges	16	Montclair
3	Cambridge	17	More
4	Camel	18	Newport
5	Capri	19	Pall Mall
6	Carlton	20	Parliament
7	Doral	21	Private Label
8	Forsyth	22	Salem
9	GPC	23	Vantage
10	Kent	24	Viceroy
11	Kool	25	Virginia Slims
12	Marlboro	26	Winston
13	Merit	27	A brand not on this list
14	Misty		

DK/REF

RCG11a [IF RCG11 = 27 OR IF (CG11a = 1 - 34 AND CG13 = 2)] Please review this list again. During the past 30 days, what brand of cigarettes did you smoke **most often**?

1	Alpine	17	Magna	33	Triumph

2	Barclay	18	Maverick	34	True
3	Belair	19	Max	35	A brand not on this list
4	Best Value	20	Now		
5	Bristol	21	Old Gold		
6	Bugler (roll-your-own)	22	Players		
7	Century	23	Pyramid		
8	Chesterfield	24	Raleigh		
9	Commander	25	Richland		
10	Covington	26	Saratoga		
11	Eve	27	Satin		
12	Harley Davidson	28	State Express		
13	Jasmine	29	Sterling		
14	Lark	30	Style		
15	L & M	31	Tareyton		
16	Lucky Strike	32	Top (roll-your-own)		
DK/REF					

RCG12   [IF RCG11a = 35] Please use the keyboard to type in the name of the brand of cigarettes you smoked **most often** during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND SMOKED: _____
DK/REF

RCG13   [IF RCG11 NE DK/REF OR 27 OR RCG11a NE DK/REF OR 35] The computer recorded that during the past 30 days, the cigarette brand you smoked most often was [RCG11 OR RCG11a FILL]. Is this correct?

1   Yes
2   No
DK/REF

RRCG11 [IF RCG13 = 2 AND RCG11 = 1 - 34] Please review this list again. During the past 30 days, what brand of cigarettes did you smoke **most often**?

1	Basic	15	Monarch
2	Benson & Hedges	16	Montclair
3	Cambridge	17	More
4	Camel	18	Newport
5	Capri	19	Pall Mall
6	Carlton	20	Parliament
7	Doral	21	Private Label
8	Forsyth	22	Salem
9	GPC	23	Vantage
10	Kent	24	Viceroy
11	Kool	25	Virginia Slims
12	Marlboro	26	Winston
13	Merit	27	A brand not on this list
14	Misty		
DK/REF			

RRCG11a   [IF RRCG11 = 27 OR IF (RCG11a = 1 - 34 AND RCG13 = 2)] Please review this list again. During the past 30 days, what brand of cigarettes did you smoke **most often**?

1	Alpine	17	Magna	33	Triumph
2	Barclay	18	Maverick	34	True
3	Belair	19	Max	35	A brand not on this list
4	Best Value	20	Now		
5	Bristol	21	Old Gold		
6	Bugler (roll-your-own)	22	Players		
7	Century	23	Pyramid		
8	Chesterfield	24	Raleigh		
9	Commander	25	Richland		
10	Covington	26	Saratoga		

11	Eve	27	Satin
12	Harley Davidson	28	State Express
13	Jasmine	29	Sterling
14	Lark	30	Style
15	L & M	31	Tareyton
16	Lucky Strike	32	Top (roll-your-own)

DK/REF

RRCG12 [IF RRCG11a = 35] Please use the keyboard to type in the name of the brand of cigarettes you smoked **most often** during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND SMOKED: _____
DK/REF

RRCG13 [IF RRCG11 NE DK/REF OR 27 OR RRCG11a NE DK/REF OR 35] The computer recorded that during the past 30 days, the cigarette brand you smoked most often was [RRCG11 OR RRCG11a FILL]. Is this correct?

1   Yes
2   No
DK/REF

CGTAR1   [IF (CG11 = 1 - 26 AND CG13 = 1) OR IF (RCG11 = 1 - 26 AND RCG13 = 1) OR IF (RRCG11 = 1 - 26 and RRCG13 = 1) OR IF (CG11a =1 - 34 AND CG13 = 1) OR IF (RCG11a = 1 - 34 AND RCG13 = 1) OR IF (RRCG11a = 1 - 34 AND RRCG13 = 1)] During the past 30 days, what **type** of [CG11/CG11a/RCG11/RCG11a/ FILL/RRCG11/RRCG11a] cigarettes did you smoke **most often**?

1   Lights
2   Ultra Lights
3   Full Flavor
DK/REF

CGTAR2   [IF CG12 NE BLANK OR DK/REF OR IF RCG12 NE BLANK OR DK/REF OR IF RRCG12 NE BLANK OR DK/REF OR IF CG11 = DK/REF OR IF RCG11 = DK/REF OR IF RRCG11 = DK/REF OR IF CG13 = DK/REF OR IF RCG13 = DK/REF OR IF (RRCG13 = 2 OR DK/REF) OR IF CG11a = DK/REF OR IF RCG11a = DK/REF OR IF RRCG11a = DK/REF] During the past 30 days, what **type** of cigarettes did you smoke **most often**?

1   Lights
2   Ultra Lights
3   Full Flavor
DK/REF

CGMENTH1   [IF (CG11 = 1 - 26 AND CG13 = 1) OR IF (RCG11 = 1 - 26 AND RCG13 = 1) OR IF (RRCG11 = 1 - 26 AND RRCG13 = 1) OR IF (CG11a =1 - 34 AND CG13 = 1) OR IF (RCG11a = 1 - 34 AND RCG13 = 1) OR IF RRCG11a = 1 - 34 AND RRCG13 = 1)] During the past 30 days, did you smoke [CG11/CG11a/RCG11/RCG11a/RRCG11/RRCG11a FILL] menthol or regular cigarettes **most often**?

1   Menthol
2   Regular
DK/REF

CGMENTH2   [IF CG12 NE BLANK OR DK/REF OR IF RCG12 NE BLANK OR DK/REF OR IF RRCG12 NE BLANK OR DK/REF OR IF CG11 = DK/REF OR IF RCG11 = DK/REF OR IF RRCG11 = DK/REF OR IF CG13 = DK/REF OR IF RCG13 = DK/REF OR IF (RRCG13 = 2 OR DK/REF) OR IF CG11a = DK/REF OR IF RCG11a = DK/REF OR IF RRCG11a = DK/REF] During the past 30 days, did you smoke menthol or regular cigarettes **most often**?

1   Menthol
2   Regular
DK/REF

CG14   (IF CG11a NE 6 OR 32) During the past 30 days, that is, since **DATEFILL**, have you smoked part or all of a roll-

your-own tobacco cigarette?

1   Yes
2   No
DK/REF

CG15   [IF (CG06 = 1-3 OR DK/REF) OR (CG07 = 1 - 29 OR DK/REF) OR CG07DKRE = 1 - 5 OR DK/REF)] Has there ever been a period in your life when you smoked cigarettes every day for at least 30 days?

1   Yes
2   No
DK/REF

CG16   [IF CG07 = 30 OR CG07DKRE = 6 OR CG15 = 1] How old were you when you first started smoking cigarettes every day?

AGE: _____   [RANGE: 1-110]
DK/REF

DEFINE DAILYCIG:
    DAILYCIG = CG16

    IF DAILYCIG < AGE1STCG
        CGCC07 The computer recorded that you were DAILYCIG years old when you first started smoking cigarettes every day. Is this correct?

            4   Yes
            6   No
            DK/REF

        CGCC08 [IF CGCC07 = 4] The answers for this last question and an earlier question disagree. Which answer is correct?

            *1   I was **DAILYCIG** years old when I first started smoking cigarettes every day*
            *2   I was **AGE1STCG** years old the first time I smoked part or all of a cigarette*
            3   Neither answer is correct
            DK/REF

        *CGCC09 [IF CGCC08 =2 OR CGCC08 = 3] Please answer this question again. How old were you the **first time** you smoked part or all of a cigarette?*

            AGE: _____   [RANGE: 1-110]
            DK/REF

        CGCC10 [IF CGCC08 = 1 OR CGCC08 = 3 OR CGCC07 = 6] Please answer this question again. How old were you when you first started smoking cigarettes every day?

            AGE: _____   [RANGE: 1-110]
            DK/REF

UPDATE: IF CGCC09 NOT (BLANK OR DK/REF) THEN AGE1STCG = CGCC09

UPDATE: IF CGCC10 NOT (BLANK OR DK/REF) THEN DAILYCIG = CGCC10

    IF DAILYCIG > CURNTAGE:
        *CGCC11 The computer recorded that you were **DAILYCIG** years old when you first started smoking cigarettes every day. Is this correct?*

            4   Yes
            6   No
            DK/REF

CGCC12 [IF CGCC11 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

> *1   I am currently [**CURNTAGE**] years old*
> *2   I was [**DAILYCIG**] years old when I first started smoking cigarettes every day*
> *3   Neither answer is correct*
> *DK/REF*

*CGCC13 [IF CGCC12 = 2 OR CGCC12 = 3] Please answer this question again. What is your **current** age?*

> *AGE: _____ [RANGE: 1 - 110]*
> *DK/REF*

>> *CGCC13a   [IF CGCC13 < 12] Since you have indicated that you are [**CGCC13**] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

CGCC14 [IF CGCC11 = 6 OR CGCC12 = 1 OR CGCC12 = 3] Please answer this question again. How old were you when you first started smoking cigarettes every day?

> *AGE: _____ [RANGE: 1- 110]*
> *DK/REF*

UPDATE: IF CGCC13 NOT (BLANK OR DK/REF) THEN CURNTAGE = CGCC13

UPDATE: IF CGCC14 NOT (BLANK OR DK/REF) THEN DAILYCIG = CGCC14

CG16a   [IF (CG05 = 2 OR DK/REF) OR ((CG08 < 4) OR (CG08 = 4 AND CG07 <17) OR (CG08 = 5 AND CG07 <7) OR (CG08 = 6 AND CG07 <4) OR (CG08 = 7 AND CG07 <3 AND CG07DKRE NE BLANK)) Have you smoked at least 100 cigarettes in your entire life?

> 1   Yes
> 2   No
> DK/REF

CG25   These next questions are about your use of **snuff**, sometimes called **dip**.

Snuff is a finely ground form of tobacco that usually comes in a container called a tin. You can use snuff by placing a pinch or dip in your mouth between your lip and gum or between your cheek and gum. Snuff can also be inhaled through the nose. Snuff is sold in both loose form and in ready-to-use packets.

Have you **ever** used snuff, even once?

> 1   Yes
> 2   No
> DK/REF

CGREF3   [IF CG25 = REF] The information respondents provide about their use of snuff is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever** used snuff, even once?

> 1   Yes
> 2   No
> DK/REF

CG26   [IF CG25 = 1 OR CGREF3 = 1] How old were you the **first time** you used snuff?

YEARS OLD: _____ [RANGE: 1 - 110]
DK/REF

DEFINE SNUFFAGE:
       IF CG26 NE (BLANK OR DK/REF) THEN SNUFFAGE = CG26
       ELSE SNUFFAGE = BLANK

       IF CURNTAGE < SNUFFAGE

           *CGSN01 The computer recorded that you were **SNUFFAGE** when you first used snuff. Is this correct?*

           4   Yes
           6   No
           DK/REF

           CGSN02 [IF CGSN01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

           *1   I am currently **CURNTAGE** years old*
           *2   I was **SNUFFAGE** years old the first time I used snuff*
           3   Neither answer is correct
           DK/REF

           *CGSN03 [IF CGSN02 = 2 OR CGSN02 = 3] Please answer this question again. What is your **current** age?*

           AGE: _____ [RANGE: 1 - 110]
           DK/REF

                   *CGSN03a   [IF CGSN03 < 12] Since you have indicated that you are **CGSN03 AGE** years old, we cannot interview your for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

           *CGSN04 [IF CGSN02 = 1 OR CGSN02 = 3 OR CGSN01 = 6] Please answer this question again. How old were you the **first time** you used snuff?*

           AGE: _____ [RANGE: 1 - 110]
           DK/REF

UPDATE: IF CGSN04 NOT(BLANK OR DK/REF) THEN SNUFFAGE = CGSN04

UPDATE: IF CGSN03 NOT(BLANK OR DK/REF) THEN CURNTAGE = CGSN03

       IF SNUFFAGE = CURNTAGE OR SNUFFAGE < 10:
           *CGSN05 The computer recorded that you were **SNUFFAGE** years old the first time you used snuff. Is this correct?*

           4   Yes
           6   No
           DK/REF

           *CGSN06 [IF CGSN05 = 6] Please answer this question again. How old were you the **first time** you used snuff?*

           AGE: _____ [RANGE: 1 - 110]
           DK/REF

UPDATE: IF CGSN06 NOT(BLANK OR DK/REF) THEN SNUFFAGE = CGSN06

CG26a   [IF SNUFFAGE = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF SNUFFAGE = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use snuff in [CURRENT YEAR - 1] or [CURRENT YEAR]?

       1   CURRENT YEAR - 1

2   CURRENT YEAR
DK/REF

CG26b   [IF SNUFFAGE = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use snuff in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

CG26c   [IF SNUFFAGE = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use snuff?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

[Note: Insert range check if CG26c > current month].

CG26d   [IF CG26a = 1 - 2 OR CG26b = 1 - 2] In what **month** in [YEAR FROM CG26a or CG26b] did you first use snuff?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

CG27   [IF CG25 = 1 OR CGREF3 = 1] Now think about the past 30 days, that is from **DATEFILL** up to and including today. During the past 30 days, have you used snuff, even once?

1   Yes
2   No
DK/REF

CG28   [IF CG27 = 2] How long has it been since you **last** used snuff?

1   More than 30 days ago but within the past 12 months
2   More than 12 months ago but within the past 3 years
3   More than 3 years ago
DK/REF

CG28DK   [IF CG28 = DK] What is your **best guess** of how long it has been since you **last** used snuff?

1   More than 30 days ago but within the past 12 months

2   More than 12 months ago but within the past 3 years
3   More than 3 years ago
DK/REF

CG28RE [IF CG28 = REF] The information respondents provide about their use of snuff is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used snuff?

1   More than 30 days ago but within the past 12 months
2   More than 12 months ago but within the past 3 years
3   More than 3 years ago
DK/REF

CG29 [IF CG27 = 1] During the past 30 days, that is, since **DATEFILL**, on how many **days** did you use snuff?

OF DAYS: _____ [RANGE: 1 - 30]
DK/REF

CG29DKRE [IF CG29 = DK/REF] What is your **best estimate** of the number of days you used snuff during the past 30 days?

1 1 or 2 days
2 3 to 5 days
3 6 to 9 days
4 10 to 19 days
5 20 to 29 days
6 all 30 days
DK/REF

CG30 [IF CG27 = 1] During the past 30 days, what brand of snuff did you use **most often**?

1 Copenhagen
2 Gold River
3 Happy Days
4 Hawken
5 Kodiak
6 Redwood
7 Silver Creek
8 Skoal
9 Timber Wolf
10 A brand not on this list
DK/REF

CG31 (IF CG30 = 10) Please use the keyboard to type in the name of the brand of snuff you used most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND USED: _____
DK/REF

CG32 (IF CG30 NE DK/REF OR 10) The computer recorded that during the past 30 days the brand of snuff you used most often was **CG30 FILL**. Is this correct?

1 Yes
2 No
DK/REF

RCG30 [IF CG32 = 2] Please review this list again. During the past 30 days, what brand of snuff did you use **most often**?

1 Copenhagen
2 Gold River

3	Happy Days
4	Hawken
5	Kodiak
6	Redwood
7	Silver Creek
8	Skoal
9	Timber Wolf
10	A brand not on this list
DK/REF	

RCG31 (IF RCG30 = 10) Please use the keyboard to type in the name of the brand of snuff you used most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND USED: _____
DK/REF

RCG32 (IF RCG30 NE DK/REF OR 10) The computer recorded that during the past 30 days the brand of snuff you used most often was **RCG30 FILL**. Is this correct?

1 Yes
2 No
DK/REF

RRCG30 [IF RCG32 = 2] Please review this list again. During the past 30 days, what brand of snuff did you use **most often**?

1 Copenhagen
2 Gold River
3 Happy Days
4 Hawken
5 Kodiak
6 Redwood
7 Silver Creek
8 Skoal
9 Timber Wolf
10 A brand not on this list
DK/REF

RRCG31 (IF RRCG30 = 10) Please use the keyboard to type in the name of the brand of snuff you used most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND USED: _____
DK/REF

RRCG32 (IF RRCG30 NE DK/REF OR 10) The computer recorded that during the past 30 days the brand of snuff you used most often was **RRCG30 FILL**. Is this correct?

1 Yes
2 No
DK/REF

CG17 The next questions are **only** about **chewing tobacco**. **Chewing tobacco** is coarsely shredded tobacco that is sold in pouches of loose tobacco leaves or in a "plug" or "twist" form. To use chewing tobacco, you either chew it or hold it in your cheek or inside your lower lip.

Have you **ever** used chewing tobacco, even once?

1 Yes
2 No
DK/REF

CGREF2 [IF CG17 = REF] The information respondents provide about their use of chewing tobacco is very important to the success of this study. We recognize that this information is personal. Please remember that the

answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever** used chewing tobacco, even once?

1   Yes
2   No
DK/REF

CG18   [IF CG17 = 1 OR CGREF2 = 1] How old were you the **first time** you used chewing tobacco?

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE CHEWAGE:
        IF CG18 NE (BLANK OR DK/REF) THEN CHEWAGE = CG18
        ELSE CHEWAGE = BLANK

        IF CURNTAGE < CHEWAGE
                *CGCH01 The computer recorded that you were **CHEWAGE** when you first used chewing tobacco. Is this
                        correct?*

                4   Yes
                6   No
                DK/REF

                *CGCH02 [IF CGCH01 = 4] The answers for the last question and an earlier question disagree. Which
                        answer is correct?*

                *1   I am currently **CURNTAGE** years old*
                *2   I was **CHEWAGE** years old the first time I used chewing tobacco*
                3   Neither answer is correct
                DK/REF

                *CGCH03 [IF CGCH02 = 2 OR CGCH02 = 3] Please answer this question again. What is your **current**
                        age?*

                        AGE: _____ [RANGE: 1 - 110]
                        DK/REF

                                *CGCH03a   [IF CGCH03 < 12] Since you have indicated that you are **CH03**
                                                AGE years old, we cannot interview you for this study. Please tell
                                                your interviewer that you have finished the survey. Thank you for
                                                your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

                *CGCH04 [IF CGCH02 = 1 OR CGCH02 = 3 OR CGCH01 = 6] Please answer this question again. How
                        old were you the **first time** you used chewing tobacco?*

                        AGE: _____ [RANGE: 1 - 110]
                        DK/REF

UPDATE: IF CGCH04 NOT(BLANK OR DK/REF) THEN CHEWAGE = CGCH04

UPDATE: IF CGCH03 NOT(BLANK OR DK/REF) THEN CURNTAGE = CGCH03

        IF CHEWAGE = CURNTAGE OR CHEWAGE < 10:
                *CGCH05 The computer recorded that you were **CHEWAGE** years old the first time you used chewing
                        tobacco. Is this correct?*

                4   Yes
                6   No
                DK/REF

*CGCH06 [IF CGCH05 = 6] Please answer this question again. How old were you the **first time** you used chewing tobacco?*

> *AGE: _____ [RANGE: 1 - 110]*
> *DK/REF*

UPDATE: IF CGCH06 NOT(BLANK OR DK/REF) THEN CHEWAGE = CGCH06

CG18a   [IF CHEWAGE = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF CHEWAGE = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use chewing tobacco in [CURRENT YEAR - 1] or [CURRENT YEAR]?

   1   CURRENT YEAR - 1
   2   CURRENT YEAR
   DK/REF

CG18b   [IF CHEWAGE = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use chewing tobacco in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

   1   CURRENT YEAR - 2
   2   CURRENT YEAR - 1
   DK/REF

CG18c   [IF CHEWAGE = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use chewing tobacco?

   1   January
   2   February
   3   March
   4   April
   5   May
   6   June
   7   July
   8   August
   9   September
   10   October
   11   November
   12   December
   DK/REF

   [Note: Insert range check if CG18c > current month].

CG18d   [IF CG18a = 1 - 2 OR CG18b = 1 - 2] In what **month** in [YEAR FROM CG18a or CG18b] did you first use chewing tobacco?

   1   January
   2   February
   3   March
   4   April
   5   May
   6   June
   7   July
   8   August
   9   September
   10   October
   11   November
   12   December
   DK/REF

CG19   [IF CG17 = 1 OR CGREF2 = 1] Now think about the past 30 days, that is, from **DATEFILL** up to and including today. During the past 30 days, have you used chewing tobacco, even once?

1   Yes
2   No
DK/REF

CG20   [IF CG19 = 2] How long has it been since you **last** used chewing tobacco?

1   More than 30 days ago but within the past 12 months
2   More than 12 months ago but within the past 3 years
3   More than 3 years ago
DK/REF

CG20DK   [IF CG20 = DK] What is your **best guess** of how long it has been since you **last** used chewing tobacco?

1   More than 30 days ago but within the past 12 months
2   More than 12 months ago but within the past 3 years
3   More than 3 years ago
DK/REF

CG20RE [IF CG20 = REF] The information respondents provide about their use of chewing tobacco is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used chewing tobacco?

1   More than 30 days ago but within the past 12 months
2   More than 12 months ago but within the past 3 years
3   More than 3 years ago
DK/REF

CG21   [IF CG19 = 1] During the past 30 days, that is, since **DATEFILL**, on how many days did you use chewing tobacco?

OF DAYS: _____ [RANGE: 1 - 30]
DK/REF

CG21DKRE   [IF CG21 = DK/REF] What is your **best estimate** of the number of days you used chewing tobacco during the past 30 days?

1   1 or 2 days
2   3 to 5 days
3   6 to 9 days
4   10 to 19 days
5   20 to 29 days
6   all 30 days
DK/REF

CG22   [IF CG19 = 1] During the past 30 days, what brand of **chewing tobacco** did you use **most often**?

1	Beech-Nut	9	Taylors Pride
2	Chattanooga Chew	10	Totems
3	Day's Work	11	Work Horse
4	Granger	12	A brand not on this list
5	H.B. Scott		
6	Levi Garrett		
7	Red Fox		
8	Red Man		

DK/REF

CG23   IF CG22 = 12] Please use the keyboard to type in the name of the brand of chewing tobacco you used most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND USED: _____
DK/REF

CG24   (IF CG22 NE DK/REF OR 12) The computer recorded that during the past 30 days the brand of chewing tobacco you used most often was CG22 FILL. Is this correct?

    1   Yes
    2   No
    DK/REF

RCG22 [IF CG24 = 2] Please review this list again. During the past 30 days, what brand of chewing tobacco did you use **most often**?

1	Beech-Nut	9	Taylors Pride
2	Chattanooga Chew	10	Totems
3	Day's Work	11	Work Horse
4	Granger	12	A brand not on this list
5	H.B. Scott		
6	Levi Garrett		
7	Red Fox		
8	Red Man		

DK/REF

RCG23 IF RCG22 = 12] Please use the keyboard to type in the name of the brand of chewing tobacco you used most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

    BRAND USED: _____
    DK/REF

RCG24   (IF RCG22 NE DK/REF OR 12) The computer recorded that during the past 30 days the brand of chewing tobacco you used most often was RCG22 FILL. Is this correct?

    1   Yes
    2   No
    DK/REF

RRCG22 [IF RCG24 = 2] Please review this list again. During the past 30 days, what brand of chewing tobacco did you use **most often**?

1	Beech-Nut	9	Taylors Pride
2	Chattanooga Chew	10	Totems
3	Day's Work	11	Work Horse
4	Granger	12	A brand not on this list
5	H.B. Scott		
6	Levi Garrett		
7	Red Fox		
8	Red Man		

DK/REF

RRCG23 IF RRCG22 = 12] Please use the keyboard to type in the name of the brand of chewing tobacco you used most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

    BRAND USED: _____
    DK/REF

RRCG24 (IF RRCG22 NE DK/REF OR 12) The computer recorded that during the past 30 days the brand of chewing tobacco you used most often was RRCG22 FILL. Is this correct?

    1   Yes
    2   No
    DK/REF

CG33a [IF (CG22/RCG22/RRCG22 = 1-11 AND CG24/RCG24/RRCG24 = 1) AND (CG30/RCG30/RRCG30 = 1-9 AND CG32/RCG32/RRCG32 = 1)] The computer recorded that the chewing tobacco you used most often during the past 30 days was **CG22/RCG22/RRCG22 FILL** and that the snuff you used most often during the past 30 days was

CG30/RCG30/RRCG30 FILL. Which of these two brands did you use **most often** during the past 30 days?

    1   The CG22/RCG22/RRCG22 FILL brand of chewing tobacco
    2   The CG30/RCG30/RRCG30 FILL brand of snuff
    DK/REF

CG33b [IF CG23/RCG23/RRCG23 NOT(BLANK OR DK/REF) AND (CG30/RCG30/RRCG30 = 1 - 9 AND CG32/RCG32/RRCG32 = 1)] You typed in the following name as the brand of chewing tobacco you used most often during the past 30 days: **CG23/RCG23/RRCG23 FILL**. The computer also recorded that the snuff you used most often during the past 30 days was **CG30/RCG30/RRCG30 FILL**. Which of these two brands did you use **most often** during the past 30 days?

    1   The brand of chewing tobacco you typed into the computer yourself — CG23/RCG23/RRCG23 FILL
    2   The CG30/RCG30/RRCG30 brand of snuff
    DK/REF

CG33c [IF (CG22/RCG22/RRCG22 = 1 - 11 AND CG24/RCG24/RRCG24 = 1) AND CG31/RCG31/RRCG31 NOT (BLANK OR DK/REF)] The computer recorded that the chewing tobacco you used most often during the past 30 days was **CG22/RCG22/RRCG22 FILL**. You typed the following name as the brand of snuff you used most often during the past 30 days: **CG31/RCG31/RRCG31 FILL**. Which of these two brands did you use **most often** during the past 30 days?

    1   The CG22/RCG22/RRCG22 brand of chewing tobacco
    2   The brand of snuff you typed into the computer yourself — CG31/RCG31/RRCG31 FILL
    DK/REF

CG33d [IF CG23/RCG23/RRCG23 NOT(BLANK OR DK/REF) AND CG31/RCG31/RRCG31 NOT(BLANK OR DK/REF)] You typed the following name as the brand of chewing tobacco you used most often during the past 30 days: **CG23/RCG23/RRCG23 FILL**. You also typed the name of the snuff you used most often during the past 30 days as: **CG31/RCG31/RRCG31 FILL**. Which of these brands did you use **most often** during the past 30 days?

    1   The brand of chewing tobacco you typed into the computer yourself — CG23RCG23/RRCG23 FILL
    2   The brand of snuff you typed into the computer yourself — CG31/RCG31/RRCG31 FILL
    DK/REF

CG34 The next questions are about smoking cigars. By cigars we mean any kind, including big cigars, cigarillos, and even little cigars that look like cigarettes.

Have you **ever** smoked part or all of any type of cigar?

    1   Yes
    2   No
    DK/REF

CGREF4   [IF CG34 = REF] The information respondents provide about their cigar smoking is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever** smoked part or all of a cigar?

    1   Yes
    2   No
    DK/REF

CG35 [IF CG34 = 1 OR CGREF4 = 1] How old were you the **first time** you smoked part or all of any type of cigar?

    AGE: _____   [RANGE: 1 - 110]
    DK/REF

DEFINE CIGARAGE:
    IF CG35 NE (BLANK OR DK/REF) THEN CIGARAGE = CG35

ELSE CIGARAGE = BLANK

IF CURNTAGE < CIGARAGE

    *CGCR01 The computer recorded that you were **CIGARAGE** when you first smoked part or all of a cigar. Is this correct?*

        4   Yes
        6   No
        DK/REF

    CGCR02 [IF CGCR01=4] The answers for the last question and an earlier question disagree. Which answer is correct?

        *1   I am currently **CURNTAGE** years old*
        *2   I was **CIGARAGE** years old the first time I smoked part or all of a cigar*
        3   Neither answer is correct
        DK/REF

    *CGCR03 [IF CGCR02 = 2 OR CGCR02 = 3] Please answer this question again. What is your **current** age?*

        AGE: _____ [RANGE: 1 - 110]
        DK/REF

        *CGCR03a   [IF CGCR03 < 12] Since you have indicated that you are **CGCR03 AGE** years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

    *CGCR04 [IF CGCR02 = 1 OR CGCR02 = 3 OR CGCR01 = 6] Please answer this question again. How old were you the **first time** you smoked part or all of a cigar?*

        AGE: _____ [RANGE: 1 - 110]
        DK/REF

UPDATE: IF CGCR04 NOT(BLANK OR DK/REF) THEN CIGARAGE = CGCR04

UPDATE: IF CGCR03 NOT(BLANK OR DK/REF) THEN CURNTAGE = CGCR03

    IF CIGARAGE = CURNTAGE OR CIGARAGE < 10:

    *CGCR05 The computer recorded that you were **CIGARAGE** years old the first time you smoked part or all of a cigar. Is this correct?*

        4   Yes
        6   No
        DK/REF

    *CGCR06 [IF CGCR05 = 6] Please answer this question again. How old were you the **first time** you smoked part or all of a cigar?*

        AGE: _____ [RANGE: 1 - 110]
        DK/REF

UPDATE: IF CGCR06 NOT(BLANK OR DK/REF) THEN CIGARAGE = CGCR06

CG35a [IF CIGARAGE = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF CIGARAGE = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first smoke part or all of a cigar in [CURRENT YEAR - 1] or [CURRENT YEAR]?

    1   CURRENT YEAR - 1
    2   CURRENT YEAR
    DK/REF

CG35b [IF CIGARAGE = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first smoke part or all of a cigar in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1　　　　CURRENT YEAR - 2
2　　　　CURRENT YEAR - 1
DK/REF

CG35c [IF CIGARAGE = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first smoke part or all of a cigar?

1　　　　January
2　　　　February
3　　　　March
4　　　　April
5　　　　May
6　　　　June
7　　　　July
8　　　　August
9　　　　September
10　　　October
11　　　November
12　　　December
DK/REF

[Note: Insert range check if CG35c > current month].

CG35d [IF CG35a = 1 - 2 OR CG35b = 1 - 2] In what **month** in [YEAR FROM CG35a or CG35b] did you first smoke part or all of a cigar?

1　　　　January
2　　　　February
3　　　　March
4　　　　April
5　　　　May
6　　　　June
7　　　　July
8　　　　August
9　　　　September
10　　　October
11　　　November
12　　　December
DK/REF

CG36 [IF CG34 = 1 OR CGREF4 = 1] Now think about the past 30 days, from **DATEFILL** up to and including today. During the past 30 days, have you smoked part or all of any type of cigar?

1　　　　Yes
2　　　　No
DK/REF

CG37 [IF CG36 = 2] How long has it been since you **last** smoked part or all of any type of cigar?

1　　　　More than 30 days ago but within the past 12 months
2　　　　More than 12 months ago but within the past 3 years
3　　　　More than 3 years ago
DK/REF

CG37DK 　　　[IF CG37 = DK] What is your **best guess** of how long it has been since you **last** smoked part or all of any type of cigar?

1　　　　More than 30 days ago but within the past 12 months
2　　　　More than 12 months ago but within the past 3 years

3 More than 3 years ago
DK/REF

CG37RE [IF CG37 = REF] The information respondents provide about their cigar smoking is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** smoked part or all of any type of cigar?

1 More than 30 days ago but within the past 12 months
2 More than 12 months ago but within the past 3 years
3 More than 3 years ago
DK/REF

CG38 [IF CG36 = 1] During the past 30 days, that is, since **DATEFILL**, on how many **days** did you smoke part or all of a cigar?

OF DAYS: _____ [RANGE: 1-30]
DK/REF

CG38DKRE [IF CG38 = DK OR REF] What is your **best estimate** of the number of days you smoked part or all of a cigar during the past 30 days?

  1 1 or 2 days
  2 3 to 5 days
  3 6 to 9 days
  4 10 to 19 days
  5 20 to 29 days
  6 all 30 days
  DK/REF (CG39)

CG39 [IF CG36 = 1] During the past 30 days, what brand of cigars did you smoke **most often**?

1	Antonio y Cleopatra	13	King Edward	24	Tijuana Smalls
2	Backwoods	14	La Corona	25	Universal
3	Bering				
4	Black & Mild	15	Little Nippers	26	White Owl
5	Captain Black	16	Macanudos	27	William Penn
6	Casa Silva	17	Muriel	28	Winchester
7	Cuesta-Rey	18	Partagas	29	A brand not
8	Dutch Masters	19	Phillies		on this list
9	El Producto	20	Rigoletto		
10	Erik Filter	21	Robert Burns		
11	Garcia y Vega	22	Roi-Tan		
12	Havatampa	23	Swisher Sweets		

DK/REF

CG40 [IF CG39 = 29] Please use the keyboard to type in the name of the brand of cigars you smoked most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND SMOKED: _____
DK/REF

CG41 [IF CG39 NE DK/REF OR 28] The computer recorded that during the past 30 days the cigar brand you smoked most often was **CG39 FILL**. Is this correct?

1 Yes
2 No
DK/REF

RCG39 [IF CG41 = 2] Please review this list again. During the past 30 days, what brand of cigars did you smoke **most often**?

1	Antonio y Cleopatra	13	King Edward	24	Tijuana Smalls
2	Backwoods	14	La Corona	25	Universal
3	Bering				
4	Black & Mild	15	Little Nippers	26	White Owl
5	Captain Black	16	Macanudos	27	William Penn
6	Casa Silva	17	Muriel	28	Winchester
7	Cuesta-Rey	18	Partagas	29	A brand not
8	Dutch Masters	19	Phillies		on this list
9	El Producto	20	Rigoletto		
10	Erik Filter	21	Robert Burns		
11	Garcia y Vega	22	Roi-Tan		
12	Havatampa	23	Swisher Sweets		

DK/REF

RCG40 [IF RCG39 = 29] Please use the keyboard to type in the name of the brand of cigars you smoked most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND SMOKED: _____
DK/REF

RCG41 [IF RCG39 NE DK/REF OR 28] The computer recorded that during the past 30 days the cigar brand you smoked most often was **RCG39 FILL**. Is this correct?

1　　　Yes
2　　　No
DK/REF

RRCG39 [IF RCG41 = 2] Please review this list again. During the past 30 days, what brand of cigars did you smoke **most often**?

1	Antonio y Cleopatra	13	King Edward	24	Tijuana Smalls
2	Backwoods	14	La Corona	25	Universal
3	Bering				
4	Black & Mild	15	Little Nippers	26	White Owl
5	Captain Black	16	Macanudos	27	William Penn
6	Casa Silva	17	Muriel	28	Winchester
7	Cuesta-Rey	18	Partagas	29	A brand not
8	Dutch Masters	19	Phillies		on this list
9	El Producto	20	Rigoletto		
10	Erik Filter	21	Robert Burns		
11	Garcia y Vega	22	Roi-Tan		
12	Havatampa	23	Swisher Sweets		

DK/REF

RRCG40 [IF RCG39 = 29] Please use the keyboard to type in the name of the brand of cigars you smoked most often during the past 30 days. If you're not sure how to spell the brand, just make your best guess.

BRAND SMOKED: _____
DK/REF

RRCG41 [IF RRCG39 NE DK/REF OR 28] The computer recorded that during the past 30 days the cigar brand you smoked most often was **RRCG39 FILL**. Is this correct?

1　　　Yes
2　　　No
DK/REF

CG42 The last questions on tobacco products are about using a pipe to smoke tobacco. Have you **ever** smoked tobacco in a pipe, even once?

1　　　Yes
2　　　No

DK/REF

CGREF5   [IF CG42 = REF] The information respondents provide about their pipe smoking is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you ever smoked a pipe?

1   Yes
2   No
DK/REF

CG43   [IF CG42 = 1 OR CGREF5 = 1] During the past 30 days, that is, since **DATEFILL**, have you smoked tobacco in a pipe, even once?

1   Yes
2   No
DK/REF

Alcohol

ALCINTR1   The next questions are about alcoholic beverages, such as beer, wine, brandy, and mixed drinks. Listed on the next screen are examples of the types of beverages we are interested in. Please review this list carefully before you answer these questions.

Press [ENTER] to continue.

CARD3a   **Types of Alcoholic Beverages**
Beer

Regular Beer	Malt liquor	Lager
Lite or light beer	Ale	
Low-alcohol (LA) beer	Stout	

Wine

Red, white, blush wine	Sherry	Fortified wines, such as Cisco
Wine coolers	Homemade wines,	
Champagne	such as muscadine,	
	scuppernong, or fruit	
	wines	

Liquor

Bourbon	Scotch	Homemade liquor, such as moonshine
Gin	Tequila	
Rum	Vodka	

Liqueurs, Cordials, and Brandy

Brandy	Drambuie	Schnapps
Cassis	Grand Marnier	Tia Maria
Cognac	Kahlua	Triple sec
Creme de menthe	Port	Vermouth

Mixed Drinks and Cocktails

Blood Mary	Manhattan	Rob Roy
Bourbon and water	Margarita	Rum and cola
Daiquiri	Martini	Scotch and soda
Gin and tonic	Pina colada	Whiskey sour

Press [ENTER] to continue.

ALCINTR2   These questions are about drinks of alcoholic beverages. Throughout these questions, by a "drink," we mean a can or bottle of beer, a glass of wine or a wine cooler, a shot of liquor, or a mixed drink with liquor in it. We are not asking about times when you only had a sip or two from a drink.

Press [ENTER] to continue.

AL01   Have you **ever**, even once, had a drink of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink.

1   Yes
2   No
DK/REF

ALREF   [IF AL01 = REF] The information respondents provide about their use of alcohol is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, had a drink of any type of alcoholic beverage? Please do not include times when you only had a sip or two from a drink.

1   Yes
2   No

34

DK/REF

AL02   [IF AL01 = 1 OR ALREF = 1] Think about the first time you had a drink of an alcoholic beverage. How old were you the **first time** you had a drink of an alcoholic beverage? Please do not include any time when you only had a sip or two from a drink.

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STAL:
    IF AL02 NE (BLANK OR DK/REF) THEN AGE1STAL = AL02
    ELSE AGE1STAL = BLANK

    IF CURNTAGE < AGE1STAL:
        ALCC01 The computer recorded that you were [AGE1STAL] years old the first time you had a drink of any alcoholic beverage. Is this correct?

            4   Yes
            6   No
            DK/REF

        ALCC02 [IF ALCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

            *1   I am currently **[CURNTAGE]** years old*
            *2   I was **[AGE1STAL]** years old the first time I drank an alcoholic beverage*
            3   Neither answer is correct
            DK/REF

        *ALCC03 [IF ALCC02=2 OR ALCC02=3] Please answer this question again. What is your **current** age?*

            AGE: _____ [RANGE: 1 - 110]
            DK/REF

            ALCC03a   [IF ALCC03 < 12] Since you have indicated that you are [ALCC03] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.

        *ALCC04 [IF ALCC02=1 OR ALCC02=3 OR ALCC01=6] Please answer this question again. Think about the first time you had a drink of an alcoholic beverage. How old were you the **first time** you had a drink of any alcoholic beverage? Please do not include times when you only had a sip or two from a drink.*

            AGE: _____ [RANGE: 1 - 110]
            DK/REF

UPDATE: IF ALCC04 NOT (BLANK OR DK/REF) THEN AGE1STAL = ALCC04

UPDATE: IF ALCC03 NOT (BLANK OR DK/REF) THEN CURNTAGE = ALCC03

    IF AGE1STAL = CURNTAGE OR AGE1STAL < 10:
        ALCC05 The computer recorded that you were [AGE1STAL] years old the first time you had a drink of any alcoholic beverage. Is this correct?

            4   Yes
            6   No
            DK/REF

        *ALCC6 [IF ALCC05=6] Please answer this question again. Think about the first time you had a drink of an alcoholic beverage. How old were you the **first time** you had a drink of any alcoholic beverage? Please do not include times when you only had a sip or two from a drink.*

35

AGE: _____ [RANGE: 1 - 110]
DK/REF

UPDATE: IF ALCC06 NOT (BLANK OR DK/REF) THEN AGE1STAL = ALCC06

AL02a   [IF AGE1STAL = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STAL = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first have a drink of an alcoholic beverage in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

AL02b   [IF AGE1STAL = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first have a drink of an alcoholic beverage in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

AL02c   IF AGE1STAL = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what month in [CURRENT YEAR] did you first have a drink of an alcoholic beverage?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

[Note: Insert range check if AL02c > current month].

AL02d   [IF AL02a = 1 OR 2 OR AL02b = 1 OR 2] In what **month** in [YEAR FROM AL02a or AL02b] did you first have a drink of an alcoholic beverage?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

ALLAST3   [IF AL01 = 1 OR ALREF = 1] How long has it been since you **last** drank an alcoholic beverage?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

ALRECDK   [IF ALLAST3 = DK] What is your **best guess** of how long it has been since you **last** drank an alcoholic beverage?

       1   Within the past 30 days — that is, since **DATEFILL**
       2   More than 30 days ago but within the past 12 months
       3   More than 12 months ago
       DK/REF

ALRECRE   [IF ALLAST3 = REF] The information respondents provide about their use of alcohol is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** drank an alcoholic beverage?

       1   Within the past 30 days — that is, since **DATEFILL**
       2   More than 30 days ago but within the past 12 months
       3   More than 12 months ago
       DK/REF

ALFRAME3   [IF ALLAST3 = 1 OR 2 OR ALRECDK = 1 OR 2 OR ALRECRE = 1 OR 2] Now think about the past 12 months, from **[FILL DATE]** through today. We want to know how many days you've had a drink of an alcoholic beverage during the past 12 months.

What would be the easiest way for you to tell us how many days you drank alcoholic beverages?

       1   Average number of **days per week** during the past 12 months
       2   Average number of **days per month** during the past 12 months
       3   Total number of days during the past 12 months
       DK/REF

ALYRAVE   [IF ALFRAME3 = 3 OR DK/REF] On how many days in the past 12 months did you drink an alcoholic beverage?

TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
DK/REF

ALMONAVE   [IF ALFRAME3 = 2 OR ALYRAVE = DK/REF] On average, how many days did you drink an alcoholic beverage **each month** during the past 12 months?

AVG # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

ALWKAVE   [IF ALFRAME3 = 1 OR ALMONAVE = DK/REF] On average, how many days did you drink an alcoholic beverage **each week** during the past 12 months?

AVG # OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
DK/REF

DEFINE TOTDRINK:
      IF ALYRAVE NOT (BLANK OR DK/REF) THEN TOTDRINK=ALYRAVE
      ELSE IF ALMONAVE NOT(BLANK OR DK/REF) THEN TOTDRINK=ALMONAVE*12
      ELSE IF ALWKAVE NOT (BLANK OR DK/REF) THEN TOTDRINK = ALWKAVE*52
      ELSE TOTDRINK=DK/REF

      IF TOTDRINK = DK/REF → AL06

DEFINE FILL1:
      IF ALYRAVE NOT (BLANK OR DK/REF), THEN FILL1 = "[ALYRAVE] days"
      ELSE IF ALMONAVE NOT (BLANK OR DK/REF), THEN FILL1 = "[ALMONAVE] days per month"
      ELSE IF ALWKAVE NOT (BLANK OR DK/REF), THEN FILL1 = "[ALWKAVE] days per week"

DEFINE FILL1A:
        IF FILL1 = "[ALMONAVE] days per month" OR "[ALWKAVE] days per week" THEN FILL1A = "for a total of [TOTDRINK] days"
        ELSE FILL1A = BLANK

AL06   [IF ALLAST3 = 1 OR ALRECDK = 1] Think specifically about the past 30 days, from **[FILL DATE]**, up to and including today. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?

        # OF DAYS: _____ [RANGE: 0 - 30]
        DK/REF

AL06DKRE   [IF AL06 = DK/REF] What is your **best estimate** of the number of days you drank alcohol during the past 30 days?

        1   1 or 2 days
        2   3 to 5 days
        3   6 to 9 days
        4   10 to 19 days
        5   20 to 29 days
        6   all 30 days
        DK/REF

DEFINE ALC30DAY
        ALC30DAY = AL06

DEFINE ALCEST30
        ALCEST30 = AL06DKRE

DEFINE ESTIALC
        IF ALCEST3O = 1, THEN ESTIALC = 1
        IF ALCEST3O = 2, THEN ESTIALC = 3
        IF ALCEST3O = 3, THEN ESTIALC = 6
        IF ALCEST3O = 4, THEN ESTIALC = 10
        IF ALCEST3O = 5, THEN ESTIALC = 20
        IF ALCEST3O = 6, THEN ESTIALC = 30
        ELSE ESTIALC = BLANK

DEFINE ALCESTFL
        IF AL06DKRE = 1 ALCESTFL = "1 or 2"
        IF AL06DKRE = 2 ALCESTFL = "3 to 5"
        IF AL06DKRE = 3 ALCESTFL = "6 to 9"
        IF AL06DKRE = 4 ALCESTFL = "10 to 19"
        IF AL06DKRE = 5 ALCESTFL = "20 to 29"
        IF AL06DKRE = 6 ALCESTFL = "all 30"
        ELSE ALCESTFL FILL = BLANK

        IF TOTDRINK NOT DK/REF AND (ALC30DAY > TOTDRINK OR ESTIALC > TOTDRINK):
                ALCC17a   *[IF ALC30DAY > TOTDRINK] For the last question, the computer recorded that you drank one or more alcoholic beverages on [**ALC30DAY**] of the past 30 days. Is this correct?*

                        4   *Yes*
                        6   *No*
                        DK/REF

                ALCC17b   *[IF ESTIALC > TOTDRINK] For the last question, the computer recorded that you drank one or more alcoholic beverages on [**ALCESTFL**] of the past 30 days. Is this correct?*

                        4   *Yes*
                        6   *No*

DK/REF

ALCC18 *[IF ALCC17a = 4 OR ALCC17b = 4] The answers for the last question and an earlier question disagree. Which answer is correct?*

1   *I drank alcohol on **[FILL1]** in the past 12 months **[FILL1A]***
2   *I drank alcohol on **[ALC30DAY / ALCESTFL]** days in the past 30 days*
3   *Neither answer is correct*
DK/REF

ALCC19 *[IF ALCC18 = 2 OR ALCC18 = 3] Please answer this question again. Think about the past 12 months, from [**FILL DATE**] through today. We want to know how many days you've had a drink of an alcoholic beverage during the past 12 months.*

What would be the easiest way for you to tell us how many days you drank alcoholic beverages?

1   *Average number of **days per week** during the past 12 months*
2   *Average number of **days per month** during the past 12 months*
3   *Total number of days during the past 12 month*
DK/REF

ALCC20 *[IF ALCC19 = 3] On how many days in the past 12 months did you drink an alcoholic beverage?*

TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
DK/REF

ALCC21 *[IF ALCC19 = 2] On average, how many days did you drink an alcoholic beverage **each month** during the past 12 months?*

 # OF DAYS/MONTH: _____ [RANGE: 1 - 31]
DK/REF

ALCC22 *[IF ALCC19 = 1] On average, how many days did you drink an alcoholic beverage **each week** during the past 12 months?*

 # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
DK/REF

UPDATE TOTDRINK:
        IF ALCC20 NOT(BLANK OR DK/REF) THEN TOTDRINK = ALCC20
        ELSE IF ALCC21 NOT(BLANK OR DK/REF) THEN TOTDRINK = ALCC21*12
        ELSE IF ALCC22 NOT(BLANK OR DK/REF) THEN TOTDRINK = ALCC22*52
        ELSE TOTDRINK=DK/REF

ALCC23a   *[IF (ALCC17a =6 OR ALCC18 = 1 OR ALCC18 =3) AND ALC30DAY NE BLANK]*
        Please answer this question again. Think specifically about the past 30 days, from
        *[**FILL DATE**], up to and including today. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?*

        # OF DAYS: _____ [RANGE: 0 - 30]
        DK/REF

ALCC23b   *[IF (ALCC17b =6 OR ALCC18 = 1 OR ALCC18 =3) AND ALCEST30 NE BLANK]*
        Please answer this question again. Think specifically about the past 30 days, from
        *[**FILL DATE**], up to and including today. What is your **best estimate** of the number of days you drank alcohol during the past 30 days?*

        1   *1 or 2 days*
        2   *3 to 5 days*
        3   *6 to 9 days*
        4   *10 to 19 days*
        5   *20 to 29 days*

> *6   all 30 days*
> *DK/REF*

UPDATE: IF ALCC23a NOT (BLANK OR DK/REF) THEN ALC30DAY = ALCC23a

UPDATE: IF ALCC23b NOT (BLANK OR DK/REF) THEN ALCEST30 = ALCC23b

UPDATE ESTIALC
       IF ALCC23b = 1 THEN ESTIALC = 2
       IF ALCC23b = 2 THEN ESTIALC = 5
       IF ALCC23b = 3 THEN ESTIALC = 9
       IF ALCC23b = 4 THEN ESTIALC = 19
       IF ALCC23b = 5 THEN ESTIALC = 29
       IF ALCC23b = 6 THEN ESTIALC = 30
       ELSE ESTIALC = BLANK

UPDATE ALESTFL
       IF ALCC23b = 1 THEN ALESTFL = "1 or 2"
       IF ALCC23b = 2 THEN ALESTFL = "3 to 5"
       IF ALCC23b = 3 THEN ALESTFL = "6 to 9"
       IF ALCC23b = 4 THEN ALESTFL = "10 to 19"
       IF ALCC23b = 5 THEN ALESTFL = "20 to 29"
       IF ALCC23b = 6 THEN ALESTFL = "all 30"
       ELSE ALESTFL = BLANK

       IF ALC30DAY = 0:

           ALCC24 *The computer recorded that you drank alcoholic beverages on **0 days** during the past 30 days. Is this correct?*

              4   Yes
              6   No
              DK/REF

           ALCC26 *[IF ALCC24 = 6] During the past 30 days, from **[DATE FILL]**, on how many days did you drink one or more drinks of an alcoholic beverage?*

              # OF DAYS: _____ [RANGE: 0 - 30]
              DK/REF

UPDATE: IF ALCC26 NOT (BLANK OR DK/REF) THEN ALC30DAY = ALCC26

AL07   [IF ALC30DAY = 2 - 30 OR ALCEST30 = 1 - 6] On the [ALC30DAY / ALCESTFL] days that you drank during the past 30 days, how many **drinks** did you **usually** have each day? Count as a drink a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.

       [IF ALC30DAY = 1] On the 1 day that you drank during the past 30 days, how many **drinks** did you have? Count as a drink a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.

       [IF ALCEST30 = DK/REF] On the days that you drank during the past 30 days, how many **drinks** did you **usually** have each day? Count as a drink a can or bottle of beer; a wine cooler or a glass of wine, champagne, or sherry; a shot of liquor or a mixed drink or cocktail.

       # OF DRINKS: _____ [RANGE: 1 - 90]
       DK/REF

AL08   [IF ALC30DAY = 1 - 30 OR ALCEST30 = 1 - 6, DK OR REF] During the past 30 days, that is, since **[FILL DATE]**, on how many days did you have **5 or more** drinks on the same occasion? By "occasion," we mean at the same time or within a couple of hours of each other.

       # OF DAYS: _____ [RANGE: 0 - 30]
       DK/REF

IF AL08 > ALC30DAY OR AL08 > ESTIALC:

ALCC27 *The computer recorded that in the past 30 days you drank **5 or more** alcoholic beverages on [AL08] days. Is this correct?*

> *4   Yes*
> *6   No*
> *DK/REF*

ALCC28 *[IF ALCC27 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?*

> *1   I drank one or more alcoholic beverages on **[ALC30DAY / ALCESTFL]** days in the past 30 days*
> *2   I drank 5 or more alcoholic beverages on **[AL08]** days in the past 30 days*
> *3   Neither answer is correct*
> *DK/REF*

ALCC29a *[IF ALCC28 = 2 0R 3 AND ALC30DAY NE BLANK] Please answer this question again. Think specifically about the past 30 days, that is from **[FILL DATE]** through today. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage?*

> *# OF DAYS: _____ [RANGE: 0 -30]*
> *DK/REF*

ALCC29b *[IF ALCC28 = 2 0R 3 AND ALCEST30 NE BLANK] Please answer this question again. Think specifically about the past 30 days, that is from **[FILL DATE]** through today. What is your **best estimate** of the number of days you drank alcohol during the past 30 days?*

> *1   1 or 2 days*
> *2   3 to 5 days*
> *3   6 to 9 days*
> *4   10 to 19 days*
> *5   20 to 29 days*
> *6   all 30 days*
> *DK/REF*

ALCC30 *[IF ALCC27 = 6 OR ALCC28 = 1 OR ALCC28 = 3] Please answer this question again. During the past 30 days, on how many days did you drink **5 or more** alcoholic beverages on the same "occasion?" By "occasion" we mean at the same time or within a couple of hours of each other.*

> *# OF DAYS: _____ [RANGE: 0 - 30]*
> *DK/REF*

Marijuana

MRJINTRO   The next questions are about marijuana and hashish. Marijuana is also called pot or grass. Marijuana is usually smoked, either in cigarettes, called joints, or in a pipe. It is sometimes cooked in food. Hashish is a form of marijuana that is also called "hash." It is usually smoked in a pipe. Another form of hashish is hash oil.

Press [ENTER] to continue.

MJ01   Have you **ever**, even once, used marijuana or hashish?

1   Yes
2   No
DK/REF

MJREF [IF MJ01 = REF] The information respondents provide about their use of marijuana and hashish is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used marijuana or hashish?

1   Yes
2   No
DK/REF

MJ02   [IF MJ01 =1 OR MJREF = 1] How old were you the **first time** you used marijuana or hashish?

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STMJ:
    IF MJ02 NE (BLANK OR DK/REF) THEN AGE1STMJ = MJ02
    ELSE AGE1STMJ = BLANK

    IF CURNTAGE < AGE1STMJ:
        MJCC01 The computer recorded that you were [AGE1STMJ] when you first used marijuana or hashish. Is this correct?

        4   Yes
        6   No
        DK/REF

        MJCC02 [IF MJCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

        *1   I am currently **[CURNTAGE]** years old*
        *2   I was **[AGE1STMJ]** years old the first time I used marijuana or hashish*
        3   Neither answer is correct
        DK/REF

        *MJCC03 [IF MJCC02=2 OR MJCC02=3] Please answer this question again. What is your **current** age?*

        AGE: _____ [RANGE: 1 - 110]
        DK/REF

        MJCC03a   [IF MJCC03 < 12] Since you have indicated that you are [MJCC03] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.

        *MJCC04 [IF MJCC02=1 OR MJCC02=3 OR MJCC01=6] Please answer this question again. Think about the first time you used marijuana or hashish. How old were you the **first time** you used marijuana*

or hashish?

> *AGE: _____ [RANGE: 1 - 110]*
> *DK/REF*

UPDATE: IF MJCC04 NOT(BLANK OR DK/REF) THEN AGE1STMJ = MJCC04

UPDATE: IF MJCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = MJCC03

> IF AGE1STMJ = CURNTAGE OR AGE1STMJ <10:
> > MJCC05 *The computer recorded that you were [AGE1STMJ] years old the first time you used marijuana or hashish. Is this correct?*
> >
> > > *4   Yes*
> > > *6   No*
> > > *DK/REF*
> >
> > MJCC06 *[IF MJCC05=6] Please answer this question again. Think about the first time you used marijuana or hashish. How old were you the **first time** you used marijuana or hashish?*
> >
> > > *AGE: _____ [RANGE: 1 - 110]*
> > > *DK/REF*

UPDATE: IF MJCC06 NOT(BLANK OR DK/REF) THEN AGE1STMJ = MJCC06

MJ03a   [IF AGE1STMJ = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STMJ = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use marijuana or hashish in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

MJ03b   [IF AGE1STMJ = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use marijuana or hashish in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

MJ03c   IF AGE1STMJ = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use marijuana or hashish?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

[Note: Insert range check if MJ03c > current month].

MJ03d   [IF MJ03a = 1-2 OR MJO3b = 1 - 2] In what **month** in [YEAR FROM MJ03a or MJ03b] did you first use marijuana or hashish?

1	January
2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

MJLAST3   [IF MJ01 = 1 OR MJREF = 1] How long has it been since you **last** used marijuana or hashish?

1   Within the past 30 days -- that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

MJRECDK   [IF MJLAST3 = DK] What is your **best guess** of how long it has been since you **last** used marijuana or hashish?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

MJRECRE   [IF MJLAST3 = REF] The information respondents provide about their use of marijuana and hashish is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used marijuana or hashish?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

MJFRAME3   [IF MJLAST3 = 1 -2 OR MJRECDK = 1 -2 OR MJRECRE = 1 - 2] Now think about the past 12 months, from **[FILL DATE]** through today. We want to know how many days you've used marijuana or hashish during the past 12 months.

What would be the easiest way for you to tell us how many days you've used it?

1   Average number of **days per week** during the past 12 months
2   Average number of **days per month** during the past 12 months
3   Total number of days during the past 12 months
DK/REF

MJYRAVE   [IF MJFRAME3 = 3 OR DK/REF] On how many days in the past 12 months did you use marijuana or hashish?

TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
DK/REF

MJMONAVE   [IF MJFRAME3 = 2 OR MJYRAVE = DK/REF] On average, how many days did you use marijuana or hashish **each month** during the past 12 months?

AVERAGE # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

MJWKAVE   [IF MJFRAME3 = 1 OR MJMONAVE = DK/REF] On average, how many days did you use marijuana or hashish **each week** during the past 12 months?

    AVERAGE # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
    DK/REF

MJ06   [IF MJLAST3=1 OR MJRECDK = 1 OR MJRECRE = 1] Think specifically about the past 30 days, from **[FILL DATE]** up to and including today. During the past 30 days, on how many days did you use marijuana or hashish?

    NUMBER OF DAYS: _____ [RANGE: 0 - 30]
    DK/REF

MJ06DKRE   [IF MJ06 = DK/REF] What is your **best estimate** of the number of days you used marijuana or hashish during the past 30 days?

    1 1 or 2 days
    2 3 to 5 days
    3 6 to 9 days
    4 10 to 19 days
    5 20 to 29 days
    6 all 30 days
    DK/REF

DEFINE ESTIMJ
    IF MJ06DKRE = 1, THEN ESTIMJ = 1
    IF MJ06DKRE = 2, THEN ESTIMJ = 3
    IF MJ06DKRE = 3, THEN ESTIMJ = 6
    IF MJ06DKRE = 4, THEN ESTIMJ = 10
    IF MJ06DKRE = 5, THEN ESTIMJ = 20
    IF MJ06DKRE = 6, THEN ESTIMJ = 30
    ELSE ESTIMJ = BLANK

DEFINE MJ30DAY
    IF MJ06DKRE = 1 MJ30DAY = "1 or 2"
    IF MJ06DKRE = 2 MJ30DAY = "3 to 5"
    IF MJ06DKRE = 3 MJ30DAY = "6 to 9"
    IF MJ06DKRE = 4 MJ30DAY = "10 to 19"
    IF MJ06DKRE = 5 MJ30DAY = "20 to 29"
    IF MJ06DKRE = 6 MJ30DAY = "all 30"
    ELSE MJ30DAY = BLANK

DEFINE TOTMJ:
    IF MJYRAVE NOT(BLANK OR DK/REF) THEN TOTMJ = MJYRAVE
    ELSE IF MJMONAVE NOT(BLANK OR DK/REF) THEN TOTMJ = MJMONAVE*12
    ELSE IF MJWKAVE NOT (BLANK OR DK/REF) THEN TOTMJ = MJWKAVE*52
    ELSE TOTMJ = DK/REF
    IF TOTMJ = DK/REF, SKIP TO COCINTRO

    IF TOTMJ NOT DK/REF AND ((MJ06 NE DK/REF OR BLANK AND MJ06 > TOTMJ) OR (MJ06 = DK/REF AND ESTIMJ > TOTMJ)):
      MJCC07a   *[IF MJ06 > TOTMJ] For the last question, the computer recorded that you used marijuana or hashish on [MJ06] of the past 30 days. Is this correct?*

            4 Yes
            6 No
            DK/REF

      MJCC07b   *[IF ESTIMJ > TOTMJ] For the last question, the computer recorded that you used marijuana or hashish on [MJ30DAY] of the past 30 days. Is this correct?*

DEFINE FILLMJ:
      IF MJYRAVE NOT (BLANK OR DK/REF), THEN FILLMJ = "[MJYRAVE] days"
      ELSE IF MJMONAVE NOT (BLANK OR DK/REF), THEN FILLMJ = "[MJMONAVE] days per month"
      ELSE IF MJWKAVE NOT (BLANK OR DK/REF), THEN FILLMJ = "[MJWKAVE] days per week"

DEFINE FILLMJA:
      IF FILLMJ = "[MJMONAVE] days per month" OR "[MJWKAVE] days per week" FILLMJA = "for a total of OTMJ days"
      ELSE FILLMJA = BLANK

    MJCC08 *[IF MJCC07a = 4 OR MJCC07b = 4] The answers for the last question and an earlier question disagree. Which answer is correct?*

        *1   I used marijuana or hashish on **[FILLMJ]** in the past 12 months **[FILLMJA]***
        *2   I used marijuana or hashish on **[MJ06 / MJ30DAY] days** in the past 30 days*
        3   Neither answer is correct
        DK/REF

    MJCC09 *[IF MJCC08 = 2 OR MJCC08 = 3] Please answer this question again. Think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used marijuana or hashish during the past 12 months.*

      What would be the easiest way for you to tell us how many days you've used it?

        *1   Average number of **days per week** during the past 12 months*
        *2   Average number of **days per month** during the past 12 months*
        3   Total number of days during the past 12 months
        DK/REF

    MJCC10 *[IF MJCC09 = 3] On how many days in the past 12 months did you use marijuana or hashish?*

      TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
      DK/REF

    MJCC11 *[IF MJCC09 = 2] On average, how many days did you use marijuana or hashish **each month** during the past 12 months?*

      # OF DAYS/MONTH: _____ [RANGE: 1 - 31]
      DK/REF

    MJCC12 *[IF MJCC09 = 1] On average, how many days did you use marijuana or hashish **each week** during the past 12 months?*

      # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
      DK/REF

IF MJCC10 NOT(BLANK OR DK/REF) THEN TOTMJ = MJCC10
ELSE IF MJCC11 NOT(BLANK OR DK/REF) THEN TOTMJ = MJCC11*12
ELSE IF MJCC12 NOT(BLANK OR DK/REF) THEN TOTMJ = MJCC12*52
ELSE TOTMJ = DK/REF

    MJCC13a   *[IF MJCC07a=6 OR ((MJCC08 = 1 OR MJCC08 = 3) AND MJCC07a NE BLANK OR DK/REF)] Please answer this question again. Think specifically about the past 30 days, from **[FILL DATE]**, up to and including today. During the past 30 days, on how many days did you use marijuana or hashish?*

      # OF DAYS: _____ [RANGE: 0 - 30]
      DK/REF

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MJCC13b   *[IF MJCC07b = 6 OR ((MJCC08 = 1 OR 3) AND MJCC07b NE BLANK OR DK/REF)]*
Please answer this question again. Think specifically about the past 30 days, from
[FILL DATE] *up to and including today. What is your **best estimate** of the number of*
days you used marijuana or hashish during the past 30 days?

> *1   1 or 2 days*
> *2   3 to 5 days*
> *3   6 to 9 days*
> *4   10 to 19 days*
> *5   20 to 29 days*
> *6   all 30 days*
> *DK/REF*

IF MJ06 = 0:

MJCC14 *The computer recorded that you used marijuana or hashish on **0 days** during the past 30 days. Is this correct?*

> *4   Yes*
> *6   No*
> *DK/REF*

MJCC16 *[IF MJCC14 = 6] During the past 30 days, that is, since **[DATE FILL]**, on how many days did you use marijuana or hashish?*

> *# OF DAYS: _____   [RANGE: 0 - 30]*
> *DK/REF*

Cocaine

COCINTRO   These questions are about cocaine, including all the different forms of cocaine such as powder, "crack," free base, and coca paste.

Press [ENTER] to continue.

CC01   Have you **ever**, even once, used any form of cocaine?

1   Yes
2   No
DK/REF

CCREF   [IF CC01 = REF] The information respondents provide about their use of cocaine is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used any form of cocaine?

1   Yes
2   No
DK/REF

CC02   [IF CC01 =1 OR CCREF = 1] How old were you the **first time** you used cocaine, in any form?

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STCC:
    IF CC02 NE (BLANK OR DK/REF) THEN AGE1STCC = CC02
    ELSE AGE1STCC = BLANK

IF CURNTAGE < AGE1STCC:
    CCCC01 The computer recorded that you were [AGE1STCC] when you first used cocaine. Is this correct?

    4   Yes
    6   No
    DK/REF

    CCCC02 [IF CCCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

    1   I am currently [CURNTAGE] years old
    2   I was [AGE1STCC] years old the first time I used cocaine
    3   Neither answer is correct
    DK/REF

    CCCC03 [IF CCCC02=2 OR CCCC02=3] Please answer this question again. What is your current age?

    AGE: _____ [RANGE: 1 - 110]
    DK/REF

    CCCC03a   [IF CCCC03 < 12] Since you have indicated that you are [CCCC03 AGE] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.

    *CCCC04 [IF CCCC02=1 OR CCCC02=3 OR CCCC01=6] Please answer this question again. Think about the first time you used cocaine. How old were you the **first time** you used cocaine in any form?*

    AGE: _____ [RANGE: 1 - 110]
    DK/REF

UPDATE: IF CCCC04 NOT(BLANK OR DK/REF) THEN AGE1STCC = CCCC04

UPDATE: IF CCCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = CCCC03

IF AGE1STCC=CURNTAGE OR AGE1STCC < 10:
CCCC05 The computer recorded that you were [AGE1STCC] years old the first time you used cocaine. Is this correct?

4   Yes
6   No
DK/REF

*CCCC06 [IF CCCC05=6] Please answer this question again. Think about the first time you used cocaine. How old were you the **first time** you used cocaine in any form?*

AGE: _____ [RANGE: 1 - 110]
DK/REF

UPDATE: IF CCCC06 NOT (BLANK OR DK/REF) THEN AGE1STCC = CCCC06

CC03a   [IF AGE1STCC = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STCC = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use cocaine in any form in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

CC03b   [IF AGE1STCC = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use cocaine in any form in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

CC03c   IF AGE1STCC = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use cocaine in any form?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

[Note: Insert range check if CC03c > current month].

CC03d   [IF CC03a = 1 - 2 OR CC03b = 1 - 2] In what **month** in [YEAR FROM CC03a or CC03b] did you first use cocaine?

1   January
2   February
3   March
4   April
5   May
6   June

7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

CCLAST3 [IF CC01 = 1 OR CCREF = 1] How long has it been since you **last** used any form of cocaine?

1 Within the past 30 days -- that is, since **DATEFILL**
2 More than 30 days ago but within the past 12 months
3 More than 12 months ago
DK/REF

CCRECDK [IF CCLAST3 = DK] What is your **best guess** of how long it has been since you **last** used cocaine?

1 Within the past 30 days — that is, since **DATEFILL**
2 More than 30 days ago but within the past 12 months
3 More than 12 months ago
DK/REF

CCRECRE [IF CCLAST3 = REF] The information respondents provide about their use of cocaine is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used cocaine?

1 Within the past 30 days — that is, since **DATEFILL**
2 More than 30 days ago but within the past 12 months
3 More than 12 months ago
DK/REF

CCFRAME3 [IF CCLAST3 = 1 OR 2 OR CCRECDK = 1 OR 2 OR CCRECRE = 1 OR 2] Now think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used cocaine during the past 12 months.

What would be the easiest way for you to tell us how many days you've used it?

1 Average number of **days per week** during the past 12 months
2 Average number of **days per month** during the past 12 months
3 Total number of days during the past 12 months
DK/REF

CCYRAVE [IF CCFRAME3 = 3 OR DK/REF] On how many days in the past 12 months did you use cocaine?

TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
DK/REF

CCMONAVE [IF CCFRAME3 = 2 OR CCYRAVE = DK/REF] On average, how many days did you use cocaine **each month** during the past 12 months?

AVERAGE # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

CCWKAVE [IF CCFRAME3 = 1 OR CCMONAVE = DK/REF] On average, how many days did you use cocaine **each week** during the past 12 months?

AVERAGE # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
DK/REF

CC06 [IF CCLAST3 =1 OR CCRECDK = 1 OR CCRECRE = 1] Think specifically about the past 30 days, from [FILL DATE] up to and including today. During the past 30 days, on how many days did you use cocaine?

> # OF DAYS: _____   [RANGE: 0 - 30]
> DK/REF

CC06DKRE [IF CC06 = DK/REF] What is your **best estimate** of the number of days you used cocaine during the past 30 days?

> 1   1 or 2 days
> 2   3 to 5 days
> 3   6 to 9 days
> 4   10 to 19 days
> 5   20 to 29 days
> 6   all 30 days
> DK/REF

DEFINE ESTICC:
>   IF CC06DKRE = 1, THEN ESTICC = 1
>   IF CC06DKRE = 2, THEN ESTICC = 3
>   IF CC06DKRE = 3, THEN ESTICC = 6
>   IF CC06DKRE = 4, THEN ESTICC = 10
>   IF CC06DKRE = 5, THEN ESTICC = 20
>   IF CC06DKRE = 6, THEN ESTICC = 30
>   ELSE ESTICC = BLANK

DEFINE TOTCOKE:
>   IF CCYRAVE NOT(BLANK OR DK/REF) THEN TOTCOKE= CCYRAVE
>   IF CCMONAVE NOT(BLANK OR DK/REF) THEN TOTCOKE=CCMONAVE*12
>   IF CCWKAVE NOT(BLANK OR DK/REF) THEN TOTCOKE=CCWKAVE*52
>   ELSE TOTCOKE = DK/REF

DEFINE COC30DAY
>   IF CC06DKRE = 1 COC30DAY = "1 or 2"
>   IF CC06DKRE = 2 COC30DAY = "3 to 5"
>   IF CC06DKRE = 3 COC30DAY = "6 to 9"
>   IF CC06DKRE = 4 COC30DAY = "10 to 19"
>   IF CC06DKRE = 5 COC30DAY = "20 to 29"
>   IF CC06DKRE = 6 COC30DAY = "all 30"
>   ELSE COC30DAY = BLANK

>   IF TOTCOKE = DK/REF → NEXT SECTION

>   IF TOTCOKE NOT DK/REF AND (CC06 NE BLANK OR DK/REF AND CC06 > TOTCOKE) OR (CC06 = DK/REF AND ESTICC > TOTCOKE):

>> *CCCC07a*   *[IF CC06 > TOTCOKE] For the last question, the computer recorded that you used cocaine on [CC06] of the past 30 days. Is this correct?*
>>
>> *4   Yes*
>> *6   No*
>> *DK/REF*

>> *CCCC07b*   *[IF ESTICC > TOTCOKE] For the last question, the computer recorded that you used cocaine on [COC30DAY] of the past 30 days. Is this correct?*
>>
>> *4   Yes*
>> *6   No*
>> *DK/REF*

DEFINE FILLCN:
>   IF CCYRAVE NOT (BLANK OR DK/REF), THEN FILLCN = "[CCYRAVE] days"
>   IF CCMONAVE NOT (BLANK OR DK/REF), THEN FILLCN = "[CCMONAVE] days per month"

IF CCWKAVE NOT (BLANK OR DK/REF), THEN FILLCN= "[CCWKAVE] days per week"

DEFINE FILCNA:
IF FILLCN = "[CCMONAVE] days per month" OR "[CCWKAVE] days per week" THEN FILLCNA = "for a total of [TOTCOKE] days"
ELSE FILLCNA = BLANK

CCCC08 [IF CCCC07a = 4 OR CCCC07b = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

1	I used cocaine on **[FILLCN]** days in the past 12 months **[FILLCNA]**
2	I used cocaine on [**CC06** / **COC30DAY**] days in the past 30 days
3	Neither answer is correct
DK/REF

CCCC09 [IF CCCC08 = 2 OR CCCC08 = 3] Please answer this question again. Think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used cocaine during the past 12 months.

What would be the easiest way for you to tell us how many days you've used it?

1	Average number of **days per week** during the past 12 months
2	Average number of **days per month** during the past 12 months
3	Total number of days during the past 12 month
DK/REF

CCCC10 [IF CCCC09 = 3] On how many days in the past 12 months did you use cocaine?

TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
DK/REF

CCCC11 [IF CCCC9 = 2] On average, how many days did you use cocaine **each month** during the past 12 months?

OF DAYS/MONTH: _____ [RANGE: 1 - 31]
DK/REF

CCCC12 [IF CCCC09 = 1] On average, how many days did you use cocaine **each week** during the past 12 months?

OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
DK/REF

IF CCCC10 NOT(BLANK OR DK/REF) THEN TOTCOKE = CCCC10
ELSE IF CCCC11 NOT(BLANK OR DK/REF THEN TOTCOKE=CCCC11*12
ELSE IF CC-12 NOT(BLANK OR DK/REF) THEN TOTCOKE=CCCC12*52
ELSE TOTCOKE = DK/REF
IF TOTCOKE = DK/REF → CKINTRO

CCCC13a	[IF (CCCC07a=6 OR ((CCCC08 = 1 OR CCCC08 = 3) AND CCCC07a NE BLANK OR DK/REF)] Please answer this question again. Think specifically about the past 30 days, from [FILL DATE], up to and including today. During the past 30 days, on how many days did you use cocaine?

OF DAYS: _____ [RANGE: 0 - 30]
DK/REF

CCCC13b	[IF CCCC07b = 6 or ((CCCC08 = 1 OR 3) AND CCCC07b NE BLANK OR DK/REF)] Please answer this question again. Think specifically about the past 30 days, from **[FILL DATE]** up to and including today. What is your **best estimate** of the number of days you used cocaine during the past 30 days?

1   *1 or 2 days*
2   *3 to 5 days*
3   *6 to 9 days*
4   *10 to 19 days*
5   *20 to 29 days*
6   *all 30 days*
DK/REF

IF CC06 = 0:

*CCCC14 The computer recorded that you used any form of cocaine on **0 days** during the past 30 days. Is this correct?*

4   *Yes*
6   *No*
DK/REF

CCCC16 [IF CCCC14 = 6] During the past 30 days, that is, since [DATE FILL], on how many days did you use cocaine?

 # OF DAYS: _____ [RANGE: 0 - 30]
DK/REF

Crack

CKINTRO The next questions are about "crack," that is cocaine in rock or chunk form, and **not** the other forms of cocaine.

Press [ENTER] to continue.

CK01 Have you **ever**, even once, used "crack?"

1   Yes
2   No
DK/REF

CKREF [IF CK01 = REF] The information respondents provide about their use of "crack" is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used "crack"?

1   Yes
2   No
DK/REF

CK02 [IF CK01 = 1 OR CKREF = 1] How old were you the **first time** you used "crack?"

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STCK:
       IF CK02 NE (BLANK OR DK/REF) THEN AGE1STCK = CK02
       ELSE AGE1STCK = BLANK

       IF CURNTAGE < AGE1STCK:
             CKCC01 The computer recorded that you were [AGE1STCK] when you first used "crack." Is this correct?

                   4   Yes
                   6   No
                   DK/REF

              CKCC02 [IF CKCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

                   *1   I am currently **[CURNTAGE]** years old*
                   *2   I was **[AGE1STCK]** years old the first time I used "crack"*
                   3   Neither answer is correct
                   DK/REF

              *CKCC03 [IF CKCC2=2 OR CKCC2=3] Please answer this question again. What is your **current** age?*

                   AGE: _____ [RANGE: 1 - 110]
                   DK/REF

                   CKCC03a   [IF CKCC03 < 12] Since you have indicated that you are [CCKCC03 AGE] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.

              *CKCC04 [IF CKCC02=1 OR CKCC02=3 OR CKCC01=6] Please answer this question again. Think about the first time you used "crack." How old were you the **first time** you used "crack?"*

                   AGE: _____ [RANGE: 1 - 110]
                   DK/REF

UPDATE: IF CKCC04 NOT(BLANK OR DK/REF) THEN AGE1STCK = CKCC04

UPDATE: IF CKCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = CKCC03

> IF AGE1STCK=CURNTAGE OR AGE1STCK < 10:
> > *CKCC05 The computer recorded that you were [AGE1STCK] years old the first time you used "crack." Is this correct?*
> >
> > *4   Yes*
> > *6   No*
> > *DK/REF*
> >
> > *CKCC06 [IF CKCC05=6] Please answer this question again. Think about the first time you used "crack." How old were you the **first time** you used "crack?"*
> >
> > *AGE: _____ [RANGE: 1 - 110]*
> > *DK/REF*

UPDATE: IF CKCC06 NOT(BLANK OR DK/REF) THEN AGE1STCK = CKCC06

CK03a   [IF AGE1STCK = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STCK = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use 'crack' in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

CK03b   [IF AGE1STCK = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use "crack" in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

CK03c   IF AGE1STCK = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use "crack"?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

[Note: Insert range check if CK03c > current month].

CK03d   [IF CK03a = 1 OR 2 OR CK03b = 1 OR 2] In what **month** in [YEAR FROM CK03a or CK03b] did you first use "crack"?

1   January
2   February
3   March
4   April
5   May
6   June

7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

CKLAST3   [IF CK01 = 1 OR CKREF = 1] How long has it been since you **last** used "crack"?

1   Within the past 30 days -- that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

CKRECDK   [IF CKLAST3 = DK] What is your **best guess** of how long it has been since you **last used** "crack"?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

CKRECRE   [IF CKLAST3 = REF] The information respondents provide about their use of "crack" is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used "crack"?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

CKFRAME3   [IF CKLAST3 = 1 OR 2 OR CKRECDK = 1 OR 2 OR CKRECRE = 1 OR 2] Now think about the past 12 months, from **[FILL DATE]** through today. We want to know how many days you've used "crack" during the past 12 months.

What would be the easiest way for you to tell us how many days you've used it?

1   Average number of **days per week** during the past 12 months
2   Average number of **days per month** during the past 12 months
3   Total number of days during the past 12 months
DK/REF

CKYRAVE   [IF CKFRAME3 = 3 OR DK/REF] On how many days in the past 12 months did you use "crack?"

TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
DK/REF

CKMONAVE   [IF CKFRAME3 = 2 OR CKYRAVE = DK/REF] On average, how many days did you use "crack" **each month** during the past 12 months?

AVERAGE # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

CKWKAVE   [IF CKFRAME3 = 1 OR CKMONAVE = DK/REF] On average, how many days did you use "crack" **each week** during the past 12 months?

AVERAGE # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
DK/REF

CK06 [IF CKLAST3=1 OR CKRECDK =1 OR CKRECRE = 1] Think specifically about the past 30 days, from **[FILL DATE]** up to and including today. During the past 30 days, on how many days did you use "crack?"

OF DAYS: _____ [RANGE: 0 - 30]
DK/REF

CK06DKRE [IF CK06 = DK/REF] What is your **best estimate** of the number of days you used "crack" during the past 30 days?

1   1 or 2 days
2   3 to 5 days
3   6 to 9 days
4   10 to 19 days
5   20 to 29 days
6   all 30 days
DK/REF

DEFINE ESTICK:
IF CK06DKRE = 1 THEN ESTICK = 1
IF CK06DKRE = 2 THEN ESTICK = 3
IF CK06DKRE = 3 THEN ESTICK = 6
IF CK06DKRE = 4 THEN ESTICK = 10
IF CK06DKRE = 5 THEN ESTICK = 20
IF CK06DKRE = 6 THEN ESTICK = 30
ELSE ESTICK = BLANK

DEFINE CRK30DAY
IF CK06DKRE = 1 CRK30DAY = "1 or 2"
IF CK06DKRE = 2 CRK30DAY = "3 to 5"
IF CK06DKRE = 3 CRK30DAY = "6 to 9"
IF CK06DKRE = 4 CRK30DAY = "10 to 19"
IF CK06DKRE = 5 CRK30DAY = "20 to 29"
IF CK06DKRE = 6 CRK30DAY = "all 30"
ELSE CRK30DAY = BLANK

DEFINE TOTCRACK:
IF CKYRAVE NOT(BLANK OR DK/REF) THEN TOTCRACK = CKYRAVE
ELSE IF CKMONAVE NOT(BLANK OR DK/REF) THEN TOTCRACK= CKMONAVE*12
ELSE IF CKWKAVE NOT(BLANK OR DK/REF) THEN TOTCRACK=CKWKAVE*52
ELSE TOTCRACK= DK/REF
IF TOTCRACK = DK/REF SKIP TO HEINTRO

IF TOTCRACK NOT DK/REF AND (CK06 NE DK/REF OR BLANK AND CK06 > TOTCRACK) OR CK06 = DK/REF AND ESTICK > TOTCRACK:

CKCC07a *[IF CK06 >TOTCRACK] For the last question, the computer recorded that you used "crack" on [CK06] of the past 30 days. Is this correct?*

4   Yes
6   No
DK/REF

CKCC07b *[IF ESTICK > TOTCRACK] For the last question, the computer recorded that you used "crack" on [CRK30DAY] of the past 30 days. Is this correct?*

4   Yes
6   No
DK/REF

DEFINE FILLCK:
IF CKYRAVE NOT (BLANK OR DK/REF) THEN FILLCK = "[CKYRAVE] days"
IF CKMONAVE NOT (BLANK OR DK/REF) THEN FILLCK = "[CKMONAVE] days per month"
IF CKWKAVE NOT (BLANK OR DK/REF) THEN FILLCK = "[CKWKAVE] days per week"

DEFINE FILLCKA:
     IF FILLCK = "[CKMONAVE] days per month" OR {CKWKAVE] days per week" THEN FILLCKA = "for a total of TOTCRACK] days"
     ELSE FILLCKA = BLANK

CKCC08 [IF CKCC07a = 4 OR CKCC07b = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

     1   I used "crack" on **[FILLCK]** days in the past 12 months [FILLCKA]
     2   I used "crack" on **[CK06 / CRK30DAY] days** in the past 30 days
     3   Neither answer is correct
     DK/REF

CKCC09 [IF CKCC08 = 2 OR CKCC08 = 3] Please answer this question again. Think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used "crack" during the past 12 months.

     What would be the easiest way for you to tell us how many days you've used it?

     1   Average number of **days per week** during the past 12 months
     2   Average number of **days per month** during the past 12 months
     3   Total number of days during the past 12 month
     DK/REF

CKCC10 [IF CKCC09 = 3] On how many days in the past 12 months did you use "crack?"

     TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
     DK/REF

CKCC11 [IF CKCC09 = 2] On average, how many days did you use "crack" **each month** during the past 12 months?

     # OF DAYS/MONTH: _____ [RANGE: 1 - 31]
     DK/REF

CKCC12 [IF CKCC09 = 1] On average, how many days did you use "crack" **each week** during the past 12 months?

     # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
     DK/REF

IF CKCC10 NOT(BLANK OR DK/REF) THEN TOTCRACK = CKCC10
IF CKCC11 NOT(BLANK OR DK/REF) THEN TOTCRACK= CKCC11*12
IF CKCC12 NOT(BLANK OR DK/REF) THEN TOTCRACK= CKCC12*52
ELSE TOTCRACK = DK/REF

CKCC13a   [IF CKCC07a = 6 OR ((CKCC08 = 1 OR CKCC08 = 3) AND CKCC07a NE BLANK OR DK/REF)] Please answer this question again. Think specifically about the past 30 days, from **[FILL DATE]**, up to and including today. During the past 30 days, on how many days did you use "crack?"

     # OF DAYS: _____ [RANGE: 0 - 30]
     DK/REF

CKCC13b   [IF CKCC07b = 6 OR (CKCC08 = 1 OR CKCC08 = 3) AND (CKCC07b NE BLANK OR DK/REF)] Please answer this question again. Think specifically about the past 30 days, from [**FILL DATE**] up to and including today. What is your **best estimate** of the number of days you used "crack" during the past 30 days?

     1   1 or 2 days
     2   3 to 5 days
     3   6 to 9 days

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                    4   10 to 19 days
                    5   20 to 29 days
                    6   all 30 days

IF CK06 = 0:

   CKCC14 *The computer recorded that you used"crack" on **0 days** during the past 30 days. Is this correct?*

          4   Yes
          6   No
          DK/REF

   CKCC16 *[IF CKCC14 = 6] During the past 30 days, that is, since [DATE FILL], on how many days did you use "crack?"*

          # OF DAYS: _____   [RANGE: 0 - 30]
          DK/REF

Heroin

HEINTRO   These next questions are about heroin.

Press [ENTER] to continue.

HE01   Have you **ever**, even once, used heroin?

1   Yes
2   No
DK/REF

HEREF   [IF HE01 = REF] The information respondents provide about their drug use is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used heroin?

1   Yes
2   No
DK/REF

HE02   [IF HE01 = 1 OR HEREF = 1] How old were you the **first time** you used heroin?

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STHR:
        IF HE02 NE (BLANK OR DK/REF) THEN AGE1STHR = HE02
        ELSE AGE1STHR = BLANK

        IF CURNTAGE < AGE1STHR:
                HECC01 The computer recorded that you were [AGE1STHR] when you first used heroin. Is this correct?

                4   Yes
                6   No
                DK/REF

                HECC02 [IF HECC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

                *1   I am currently **[CURNTAGE]** years old*
                *2   I was **[AGE1STHR]** years old the first time I used heroin*
                3   Neither answer is correct
                DK/REF

                *HECC03 [IF HECC02=2 OR HECC02=3] Please answer this question again. What is your **current** age?*

                AGE: _____ [RANGE: 1 - 110]
                DK/REF

                HECC03a   [IF HECC03 < 12] Since you have indicated that you are [HECC03 AGE] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.

                *HECC04 [IF HECC02=1 OR HECC02=3 OR HECC01=6] Please answer this question again. Think about the first time you used heroin. How old were you the **first time** you used heroin?*

                AGE: _____ [RANGE: 1 - 110]
                DK/REF

UPDATE: IF HECC04 NOT(BLANK OR DK/REF) THEN AGE1STHR = HECC04

UPDATE: IF HECC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = HECC03

IF AGE1STHR = CURNTAGE OR AGE1STHR<10:

HECC05 The computer recorded that you were [AGE1STHR] years old the first time you used heroin. Is this correct?

4   Yes
6   No
DK/REF

*HECC06 [IF HECC05=6] Please answer this question again. Think about the first time you used heroin. How old were you the **first time** you used heroin?*

AGE: _____ [RANGE: 1 - 110]
DK/REF

UPDATE: IF HECC06 NOT(BLANK OR DK/REF) THEN AGE1STHR = HECC06

HE03a   [IF AGE1STHR = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STHR = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use heroin in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

HE03b   [IF AGE1STHR = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use heroin in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

HE03c   IF AGE1STHR = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use heroin?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

[Note: Insert range check if HE03c > current month].

HE03d [IF HE03a = 1 OR 2 OR HE03b = 1 OR 2] In what **month** in [YEAR FROM HE03a or HE03b] did you first use heroin?

1   January
2   February
3   March
4   April
5   May
6   June

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7	July
8	August
9	September
10	October
11	November
12	December

DK/REF

HELAST3 [IF HE01 = 1 OR HEREF = 1] How long has it been since you **last** used heroin?

1   Within the past 30 days -- that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

HERECDK [IF HELAST3 = DK] What is your **best guess** of how long it has been since you **last** used heroin?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

HERECRE [IF HELAST3 = REF] The information respondents provide about their use of heroin is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used heroin?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

HEFRAME3 [IF HELAST3 = 1 OR 2 OR HERECDK = 1 OR 2 OR HERECRE = 1 OR 2] Now think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used heroin during the past 12 months.

What would be the easiest way for you to tell us how many days you've used it?

1   Average number of **days per week** during the past 12 months
2   Average number of **days per month** during the past 12 months
3   Total number of days during the past 12 months
DK/REF

HEYRAVE [IF HEFRAME3 = 3 OR DK/REF] On how many days in the past 12 months did you use heroin?

TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
DK/REF

HEMONAVE [IF HEFRAME3 = 2 OR HEYRAVE = DK/REF] On average, how many days did you use heroin **each month** during the past 12 months?

AVERAGE # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

HEWKAVE [IF HEFRAME3 = 1 OR HEMONAVE = DK/REF] On average, how many days did you use heroin **each week** during the past 12 months?

AVERAGE # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
DK/REF

HE06   [IF HELAST3=1 OR HERECDK = 1 OR HERECRE = 1] Think specifically about the past 30 days, from [FILL DATE] up to and including today. During the past 30 days, on how many days did you use heroin?

       # OF DAYS: _____   [RANGE: 0 - 30]
       DK/REF

HE06DKRE   [IF HE06 = DK/REF] What is your **best estimate** of the number of days you used heroin during the past 30 days?

       1   1 or 2 days
       2   3 to 5 days
       3   6 to 9 days
       4   10 to 19 days
       5   20 to 29 days
       6   all 30 days
       DK/REF

DEFINE ESTIHE:
       IF HE06DKRE = 1 THEN ESTIHE = 1
       IF HE06DKRE = 2 THEN ESTIHE = 3
       IF HE06DKRE = 3 THEN ESTIHE = 6
       IF HE06DKRE = 4 THEN ESTIHE = 10
       IF HE06DKRE = 5 THEN ESTIHE = 20
       IF HE06DKRE = 6 THEN ESETIHE = 30
       ELSE ESTICC = B7LANK

DEFINE HER30DAY
       IF HE06DKRE = 1HER30DAY = "1 or 2"
       IF HE06DKRE = 2HER30DAY = "3 to 5"
       IF HE06DKRE = 3HER30DAY = "6 to 9"
       IF HE06DKRE = 4HER30DAY = "10 to 19"
       IF HE06DKRE = 5HER30DAY = "20 to 29"
       IF HE06DKRE = 6HER30DAY = "all 30"
       ELSEHER30DAY = BLANK

DEFINE TOTHERO:
       IF HEYRAVE NOT(BLANK OR DK/REF) THEN TOTHERO = HEYRAVE
       ELSE IF HEMONAVE NOT(BLANK OR DK/REF) THEN TOTHERO = HEMONAVE*12
       ELSE IF HEWKAVE NOT(BLANK OR DK/REF) THEN TOTHERO=HEWKAVE*52
       ELSE TOTHERO = DK/REF

       IF TOTHERO = DK/REF, SKIP TO HALINTRO

       IF TOTHERO NOT DK/REF AND (HE06 NE BLANK OR DK/REF AND HE06 > TOTHERO) OR (HE06 = DK/REF AND ESTIHE > TOTHERO:

           HECC07a   *[IF HE06 > TOTHERO] For the last question, the computer recorded that you used heroin on [HE06] of the past 30 days. Is this correct?*

                     4   *Yes*
                     6   *No*
                     DK/REF

           HECC07b   *[IF ESTIHE > TOTHERO] For the last question, the computer recorded that you used heroin on [HEEST30] of the past 30 days. Is this correct?*

                     4   *Yes*
                     6   *No*
                     DK/REF

DEFINE FILLHER:
       IF HEYRAVE NOT (BLANK OR DK/REF), THEN FILLHER = "[HEYRAVE] days"
       ELSE IF HEMONAVE NOT (BLANK OR DK/REF), THEN FILLHER = "[HEMONAVE] days per month"

ELSE IF HEWKAVE NOT (BLANK OR DK/REF), THEN FILLHER = "[HEWKAVE] days per week"

DEFINE FILLHERA:
IF FILLHER = "[HEMONAVE] days per month" OR "[HEWKAVE] days per week" THEN FILLHERA = "for a total of TOTHERO days"
ELSE FILLHERA = BLANK

HECC08 [IF HECC07a = 4 OR HECC07b = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

1 I used heroin on **[FILLHERO]** days in the past 12 months **[FILLHERA]**
2 I used heroin on **[HE06** /**HER30DAY]** days in the past 30 days
3 Neither answer is correct
DK/REF

HECC09 [IF HECC08 = 2 OR HECC08 = 3] Please answer this question again. Think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used heroin during the past 12 months.

What would be the easiest way for you to tell us how many days you've used it?

1 Average number of **days per week** during the past 12 months
2 Average number of **days per month** during the past 12 months
3 Total number of days during the past 12 months
DK/REF

HECC10 [IF HECC09 = 3] On how many days in the past 12 months did you use heroin?

TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
DK/REF

HECC11 [IF HECC09 = 2] On average, how many days did you use heroin **each month** during the past 12 months?

OF DAYS/MONTH: _____ [RANGE: 1 - 31]
DK/REF

HECC12 [IF HECC09 = 1] On average, how many days did you use heroin **each week** during the past 12 months?

OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
DK/REF

IF HECC10 NOT(BLANK OR DK/REF) THEN TOTHERO = HECC10
ELSE IF HECC11 NOT(BLANK OR DK/REF) THEN TOTHERO = HECC11*12
ELSE IF HECC12 NOT(BLANK OR DK/REF0 THEN TOTHERO = HECC12*52
ELSE TOTHERO = DK/REF

HECC13a [IF HECC07a = 6 OR ((HECC08 = 1 OR 3) AND HECC07a NE BLANK OR DK/REF)] Please answer this question again. Think specifically about the past 30 days, from [FILL DATE], up to and including today. During the past 30 days, on how many days did you use heroin?

OF DAYS: _____ [RANGE: 0 - 30]
DK/REF

HECC13b [IF HECC7b = 2 OR ((HECC08 = 1 OR 3) AND HECC07b NE BLANK OR DK/REF)] Please answer this question again. Think specifically about the past 30 days, from [**FILL DATE]** up to and including today. What is your best estimate of the number of days you used heroin during the past 30 days?

1 1 or 2 days

2   3 to 5 days
3   6 to 9 days
4   10 to 19 days
5   20 to 29 days
6   all 30 days
DK/REF

IF HE06 = 0:

    *HECC14 The computer recorded that you used heroin on **0 days** during the past 30 days. Is this correct?*

        4   Yes
        6   No
        DK/REF

    HECC16 [IF HECC14 = 6] During the past 30 days, that is, since [DATE FILL], on how many days did you use heroin?

        # OF DAYS: _____ [RANGE: 0 - 30]
        DK/REF

Hallucinogens

HALINTRO   The next questions are about substances called hallucinogens. These drugs often cause people to see or experience things that are not real.

A list of some common hallucinogens is shown below. These and many other substances that people use as hallucinogens are often known by street names, and we can't list them all. Please take a moment to look at the substances listed below so you know what kind of drugs the next questions are about.

> LSD, also called "acid"
> PCP, also called "angel dust" or phencyclidine
> Peyote
> Mescaline
> Psilocybin
> "Ecstasy," also called MDMA

Press [ENTER] to continue.

LS01a   Have you **ever**, even once, used **LSD**, also called "**acid**"?

1   Yes
2   No
DK/REF

LSREF1 [IF LS01a = REF] The information respondents provide about their use of LSD is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used **LSD**, also called **"acid"**?

1   Yes
2   No
DK/REF

LS01b   Have you **ever**, even once, used **PCP**, also called "**angel dust**" or **phencyclidine**?

1   Yes
2   No
DK/REF

LSREF2 [IF LS01b = REF] The information respondents provide about their use of PCP is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used **PCP**, also called **"angel dust"** or **phencyclidine**?

1   Yes
2   No
DK/REF

LS01c   Have you **ever**, even once, used **peyote**?

1   Yes
2   No
DK/REF

LS01d   Have you **ever**, even once, used **mescaline**?

1   Yes
2   No
DK/REF

LS01e   Have you **ever**, even once, used **psilocybin, found in mushrooms**?

       1   Yes
       2   No
       DK/REF

LS01f   Have you **ever**, even once, used **"Ecstasy,"** also known as **MDMA**?

       1   Yes
       2   No
       DK/REF

LSREF3 [IF LS01f = REF] The information respondents provide about their use of "Ecstasy" is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

       Please reconsider answering this question: Have you **ever**, even once, used **"Ecstasy"**, also known as **MDMA**?

       1   Yes
       2   No
       DK/REF

LS01h   Have you **ever**, even once used any other hallucinogens besides the ones that have been listed?

       1   Yes
       2   No
       DK/REF

LS01hs1 [IF LS01h = 1] You have indicated that you have used hallucinogens **other than the ones that were specifically mentioned in the previous questions.** Please use the keyboard to type in the names of these other hallucinogens you have used. Type in the name of **one** of the other hallucinogens you have used. If you're not sure how to spell the name of the hallucinogen you used, just make your best guess.

       When you have finished, press the [ENTER] key to go to the next question. Remember, you do not need to type in the names of any hallucinogens that you already indicated using in the previous questions.

       _____
       DK/REF

LS01hs2 [IF LSOTHS1 NE (BLANK OR DK/REF)] Please type in the name of any **other hallucinogen** you have used other than those you have already mentioned. If you have not used any other hallucinogens, press the [ENTER] key to go to the next question.

       _____
       DK/REF

LS01hs3   [IF LSOTHS2 NE (BLANK OR DK/REF)] Please type in the name of any **other hallucinogen** you have used other than those you have already mentioned. If you have not used any other hallucinogens, press the [ENTER] key to go to the next question.

       _____
       DK/REF

LS01hs4 [IF LSOTHS3 NE (BLANK OR DK/REF)] Please type in the name of any **other hallucinogen** you have used other than those you have already mentioned. If you have not used any other hallucinogens, press the [ENTER] key to go to the next question.

       _____
       DK/REF

LS01hs5 [IF LSOTHS4 NE (BLANK OR DK/REF)] Please type in the name of any **other hallucinogen** you have used other than those you have already mentioned. If you have not used any other hallucinogens, press the [ENTER] key to go to

the next question.

DK/REF

DEFINE LSFILL:
    IF (LS01a = 1 OR LSREF1 = 1) AND (LS01b = 2 OR DK/REF AND LSREF2 = 2 OR DK/REF AND LS01c = 2 OR DK/REF AND LS01d = 2 OR DK/REF AND LS01e = 2 OR DK/REF AND LS01f = 2 OR DK/REF AND LSREF3 = 2 OR DK/REF AND LS01h = 2 OR DK/REF), LSFILL = "LSD"
    IF (LS01b = 1 OR LSREF2 = 1) AND (LS01a = 2 OR DK/REF AND LSREF1 = 2 OR DK/REF AND LS01c = 2 OR DK/REF AND LS01d = 2 OR DK/REF AND LS01e = 2 OR DK/REF AND LS01f = 2 OR DK/REF AND LSREF3 = 2 OR DK/REF AND LS01h = 2 OR DK/REF), LSFILL = "PCP"
    IF (LS01F = 1 OR LSREF3 = 1) AND (LS01a = 2 OR DK/REF AND LSREF1 = 2 OR DK/REF AND LS01b = 2 OR DK/RE AND LSREF1 = 2 OR DK/REF AND LS01c = 2 OR DK/REF AND LS01d = 2 OR DK/REF AND LS01e = 2 OR DK/REF AND LS01h = 2 OR DK/REF), LSFILL = "Ecstasy"
    ELSE, LSFILL = "any hallucinogen"

LS02   [IF ANY IN LS01a TO LS01f =1 OR LS01h = 1 OR LSREF1 = 1 OR LSREF2 = 1 OR LSREF3 = 1] How old were you the **first time** you used *[LSFILL]*?

    AGE:_____ [RANGE: 1 - 110]
    DK/REF

DEFINE AGE1STHA:
    IF LS02 NE (BLANK OR DK/REF) THEN AGE1STHA = LS02
    ELSE AGE1STHA = BLANK

    IF CURNTAGE < AGE1STHA:
        LSCC01 *The computer recorded that you were [AGE1STHA] when you first used [LSFILL]. Is this correct?*

            4   *Yes*
            6   *No*
            DK/REF

        LSCC02 *[IF LSCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?*

            1   *I am currently **[CURNTAGE]** years old*
            2   *I was **[AGE1STHA]** years old the first time I used [LSFILL]*
            3   *Neither answer is correct*
            DK/REF

        LSCC03 *[IF LSCC02=2 OR LSCC02=3] Please answer this question again. What is your **current** age?*

            AGE: _____ [RANGE: 1 - 110]
            DK/REF

        LSCC03a *[IF LSCC03 < 12] Since you have indicated that you are [LSCC03] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

        LSCC04 *[IF LSCC02=1 OR LSCC02=3 OR LSCC01=6] Please answer this question again. Think about the first time you used [LSFILL]. How old were you the **first time** you used [LSFILL]?*

            AGE: _____ [RANGE: 1 - 110]
            DK/REF

UPDATE: IF LSCC04 NOT(BLANK OR DK/REF) THEN AGE1STHA = LSCC04

UPDATE: IF LSCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = LSCC03

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IF AGE1STHA =CURNTAGE OR AGE1STHA <10:

    LSCC05 *The computer recorded that you were [AGE1STHA] years old the first time you used [LSFILL]. Is this correct?*

        4   *Yes*
        6   *No*
        DK/REF

    LSCC06 *[IF LSCC05=6] Please answer this question again. Think about the first time you used [LSFILL]. How old were you the **first time** you used [LSFILL]?*

        AGE: _____ [RANGE: 1 - 110]
        DK/REF

UPDATE: IF LSCC06 NOT(BLANK OR DK/REF) THEN AGE1STHA = LSCC06

LS03a   [IF AGE1STHA = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STHA = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use *[LSFILL]* in [CURRENT YEAR - 1] or [CURRENT YEAR]?

    1   CURRENT YEAR - 1
    2   CURRENT YEAR
    DK/REF

LS03b   [IF AGE1STHA = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use *[LSFILL]* in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

    1   CURRENT YEAR - 2
    2   CURRENT YEAR - 1
    DK/REF

LS03c   IF AGE1STHA = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use *[LSFILL]*?

    1   January
    2   February
    3   March
    4   April
    5   May
    6   June
    7   July
    8   August
    9   September
    10   October
    11   November
    12   December
    DK/REF

[Note: Insert range check if LS03c > current month].

LS03d   [IF LS03a = 1 OR 2 OR LS03b = 1 OR 2] In what **month** in [YEAR FROM LS03a or LS03b] did you first use *[LSFILL]*?

    1   January
    2   February
    3   March
    4   April
    5   May
    6   June
    7   July
    8   August
    9   September
    10   October

11   November
12   December
DK/REF

LSLAST [IF LS01a = 1 OR LSREF1 = 1 OR LS01b = 1 OR LSREF2 = 1 OR LS01c = 1 OR LS01d = 1 OR LS01e = 1 OR LSREF3 = 1 OR LS01f = 1 OR LS01h = 1] How long has it been since you **last used** *[LSFILL]* ?

1   Within the past 30 days -- that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

LSRECDK   [IF LSLAST3 = DK] What is your **best guess** of how long it has been since you **last** used *[LSFILL]*?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

LSRECRE   [IF LSLAST = REF] The information respondents provide about their use of [LSFILL] is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used [LSFILL]?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

DEFINE HALLREC:
      IF LSLAST = 1 OR LSRECDK = 1 OR LSRECRE = 1, THEN HALLREC = 1
      IF LSLAST = 2 OR LSRECDK = 2 OR LSRECRE = 2, THEN HALLREC = 2
      IF LSLAST =3 OR LSRECDK = 3 OR LSRECRE = 3, THEN HALLREC = 3
      ELSE HALLREC = BLANK

LSFRAME3   [IF HALLREC = 1 OR 2] Now think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used *[LSFILL]* during the past 12 months.

What would be the easiest way for you to tell us how many days you've used it?

1   Average number of **days per week** during the past 12 months
2   Average number of **days per month** during the past 12 months
3   Total number of days during the past 12 months
DK/REF

LSYRAVE   [IF LSFRAME3 = 3 OR DK/REF] On how many days in the past 12 months did you use *[LSFILL]*?

TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
DK/REF

LSMONAVE   [IF LSFRAME3 = 2 OR LSYRAVE = DK/REF] On average, how many days did you use *[LSFILL]* **each month** during the past 12 months?

AVERAGE # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

LSWKAVE   [IF LSFRAME3 = 1 OR LSMONAVE = DK/REF] On average, how many days did you use *[LSFILL]* **each week** during the past 12 months?

AVERAGE # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
DK/REF

LS04   [IF LSLAST=1 OR LSRECDK = 1 OR LSRECRE = 1] Think specifically about the past 30 days, from **[FILL DATE]** up to and including today. During the past 30 days, on how many days did you use *[LSFILL]*?

    NUMBER OF DAYS: _____   [RANGE: 0 - 30]
    DK/REF

LS04DKRE   [IF LS04 = DK/REF] What is your **best estimate** of the number of days you used *[LSFILL]* during the past 30 days?

    1   1 or 2 days
    2   3 to 5 days
    3   6 to 9 days
    4   10 to 19 days
    5   20 to 29 days
    6   all 30 days
    DK/REF

DEFINE ESTILS:
    IF LS04DKRE = 1 ESTILS = 1
    IF LS04DKRE = 2 ESTILS = 3
    IF LS04DKRE = 3 ESTILS = 6
    IFLS04DKRE = 4 ESTILS = 10
    IF LS04DKRE =5 ESTILS = 20
    IF LS04DKRE = 6 ESTILS = 30
    ELSE ESTILS = BLANK

DEFINE HAL30DAY
    IF LS04DKRE = 1 HAL30DAY = "1 or 2"
    IF LS04DKRE = 2 HAL30DAY = "3 to 5"
    IF LS04DKRE = 3 HAL30DAY = "6 to 9"
    IF LS04DKRE = 4 HAL30DAY = "10 to 19"
    IF LS04DKRE = 5 HAL30DAY = "20 to 29"
    IF LS04DKRE = 6 HAL30DAY = "all 30"
    ELSE HAL30DAY = BLANK

DEFINE TOTHALL:
    IF LSYRAVE NOT(BLANK OR DK/REF) THEN TOTHALL = LSYRAVE
    ELSE IF LSMONAVE NOT(BLANK OR DK/REF) THEN TOTHALL = LSMONAVE*12
    ELSE IF LSWKAVE NOT(BLANK OR DK/REF) THEN TOTHALL = LSWKAVE*52
    ELSE TOTHALL = DK/REF
    IF TOTHALL = DK/REF, SKIP TO LOGIC1

    IF TOTHALL NOT DK/REF AND ((LS04 NE DK/REF OR BLANK AND LS04 > TOTHALL) OR (LS04 = DK/REF AND ESTILS > TOTHALL)):
        LSCC07a [IF LS06 > TOTHALL] For the last question, the computer recorded that you used [LSFILL] on [LS04] of the past 30 days. Is this correct?

            4   Yes
            6   No
            DK/REF

        LSCC07b [IF ESTILS > TOTHALL] For the last question, the computer recorded that you used [LSFILL] on ***[HAL30DAY]*** *of the past 30 days. Is this correct?*

            4   Yes
            6   No
            DK/REF

DEFINE FILLHAL:
    IF LSYRAVE NOT (BLANK OR DK/REF), THEN FILLHAL = "[LSYRAVE] days"

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ELSE IF LSMONAVE NOT (BLANK OR DK/REF), THEN FILLHAL = "[LSMONAVE] days per month"
ELSE IF LSWKAVE NOT (BLANK OR DK/REF), THEN FILLHAL = "[LSWKAVE] days per week"

DEFINE FILLHALA
  IF FILLHAL = "[LSMONAVE] days per month OR "[LSWKAVE] days per week" THEN FILLHALA = "for a total of TOTHALL days"
  ELSE FILLHALA = BLANK

LSCC08 [IF LSCC07a = 4 OR LSCC07b = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

1   I used [LSFILL] **[FILLHAL]** in the past 12 months **[FILLHALA]**
2   I used [LSFILL] **[LS04 / HAL30DAY]** days in the past 30 days
3   Neither answer is correct
DK/REF

LSCC09 [IF LSCC08 = 2 OR LSCC08 = 3] Please answer this question again. Think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used [LSFILL] during the past 12 months.

What would be the easiest way for you to tell us how many days you've used it?

1   Average number of **days per week** during the past 12 months
2   Average number of **days per month** during the past 12 months
3   Total number of days during the past 12 months
DK/REF

LSCC10 [IF LSCC09 = 3] On how many days in the past 12 months did you use [LSFILL]?

TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
DK/REF

LSCC11 [IF LSCC09 = 2] On average, how many days did you use [LSFILL] **each month** during the past 12 months?

OF DAYS/MONTH: _____ [RANGE: 1 - 31]
DK/REF

LSCC12 [IF LSCC09 = 1] On average, how many days did you use [LSFILL] **each week** during the past 12 months?

OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
DK/REF

IF LSCC10 NOT(BLANK OR DK/REF) THEN TOTHALL = LSCC10
ELSE IF LSCC11 NOT(BLANK OR DK/REF) THEN TOTHALL=LSCC11*12
ELSE IF LSCC12 NOT(BLANK OR DK/REF) THENTOTHALL=LSCC12*52
ELSE TOTHALL = DK/REF

LSCC13a [IF LSCC07a = 6 OR ((LSCC08 = 1 OR LSCC8 = 3) AND (LSCC07a NE BLANK OR DK/REF)]
Please answer this question again. Think specifically about the past 30 day, from [FILL DATE], up to and including today. During the past 30 days, on how many days did you use [LSFILL]?

OF DAYS: _____ [RANGE: 0 - 30]
DK/REF

LSCC13b [IF LSCC07b = 6 OR ((LSCC08 = 1 OR LSCC08 = 3) AND LSCC07b NE BLANK OR DK/REF)]
Please answer this question again. Think specifically about the past 30 days, from [FILL DATE],up to and including today. What is your **best estimate** of the number of days you used [LSFILL] during the past 30 days?

1   1 or 2 days

2   3 to 5 days
3   6 to 9 days
4   10 to 19 days
5   20 to 29 days
6   all 30 days
DK/REF

IF LS04 = 0:

    *LSCC14   The computer recorded that you used [LSFILL] on **0 days** during the past 30 days. Is this correct?*

    4   Yes
    6   No
    DK/REF

    LSCC16   [IF LSCC14 = 6] During the past 30 days, that is, since [DATE FILL], on how many days did you use [LSFILL]?

    # OF DAYS: _____ [RANGE: 0 - 30]
    DK/REF

.
LS05   [IF (LS01a = 1 OR LSREF1 =1) AND (LS01b = 1 OR LSREF2 = 1 OR LS01c = 1 OR LS01d = 1 OR LS01e = 1 OR LSREF3 = 1 OR LS01f = 1 OR LS01h = 1)] Now think only about LSD. How old were you the **first time** you used LSD?

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STLS:
    IF LS05 NE (BLANK OR DK/REF) THEN AGE1STLS = LS05
    ELSE AGE1STLS = BLANK

    IF CURNTAGE < AGE1STLS:

    LSCC17   The computer recorded that you were [AGE1STLS] when you first used LSD. Is this correct?

    4   Yes
    6   No
    DK/REF

    LSCC18   [IF LSCC17 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

    *1   I am currently **[CURNTAGE]** years old*
    *2   I was **[AGE1STLS]** years old the first time I used LSD*
    3   Neither answer is correct
    DK/REF

    *LSCC19   [IF LSCC18=2 OR LSCC18=3] Please answer this question again. What is your **current** age?*

    AGE: _____ [RANGE: 1 - 110]
    DK/REF

    LSCC19a [IF LSCC19 < 12] Since you have indicated that you are [LSCC19] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.

    *LSCC20   [IF LSCC18 =1 OR LSCC18=3 OR LSCC17=6] Please answer this question again. Think about the first time you used LSD. How old were you the **first time** you used LSD?*

    AGE: _____ [RANGE: 1 - 110]
    DK/REF

UPDATE: IF LSCC20 NOT(BLANK OR DK/REF) THEN AGE1STLS = LSCC20

UPDATE: IF LSCC19 NOT(BLANK OR DK/REF) THEN CURNTAGE = LSCC19

IF AGE1STLS =CURNTAGE OR AGE1STLS <10:

LSCC21   *The computer recorded that you were [AGE1STLS] years old the first time you used LSD. Is this correct?*

4   Yes
6   No
DK/REF

LSCC22   *[IF LSCC21 =6] Please answer this question again. Think about the first time you used LSD. How old were you the **first time** you used LSD?*

AGE: _____ [RANGE: 1 - 110]
DK/REF

UPDATE: IF LSCC22 NOT(BLANK OR DK/REF) THEN AGE1STLS = LSCC22

IF AGE1STLS < AGE1STHA:

LSCC23   *The answers for the last question and an earlier question disagree. Which answer is correct?*

*1   I was [**AGE1STHA**] years old the first time I used [LSFILL]*
*2   I was **[AGE1STLS]** years old the first time I used LSD*
3   Neither answer is correct
DK/REF

LSCC24   *[IF LSCC23=2 OR LSCC23=3] Please answer this question again. Think about the first time you used [LSFILL]. How old were you the **first time** you used [LSFILL]?*

AGE: _____ [RANGE: 1 - 110]
DK/REF

LSCC25   *[IF LSCC23 = 1 OR LSCC23 = 3] Please answer this question again. Think about the first time you used LSD. How old were you the first time you used LSD?*

AGE: _____   [RANGE: 1 - 110]
DK/REF

UPDATE: IF LSCC24 NOT(BLANK OR DK/REF) THEN AGE1STHA = LSCC24

UPDATE: IF LSCC25 NOT(BLANK OR DK/REF) THEN AGE1STLS = LSCC25

LS06   [IF AGE1STLS = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STLS = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use LSD in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

LS07   [IF AGE1STLS = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use LSD in [CURRENT YEAR - 2] OR [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

LS08   [IF AGE1STLS = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use LSD?

1   January

2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

[Note: Insert range check if LS08 > current month].

LS09   [IF LS06 = 1 OR 2 OR LS07 = 1 OR 2] In what **month** in [YEAR FROM LS06 or LS07] did you first use LSD?

1	January
2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

LS10   [IF (LS01a =1 OR LSREF1 = 1) AND (LS01b = 1 OR LSREF2=1 OR LS01c = 1 OR LS01d = 1 OR LS01e = 1 OR LS01f = 1 OR LSREF3 = 1 OR LS01h = 1)] How long has it been since you **last** used LSD?

1   Within the past 30 days – that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

DEFINE LSDREC
          IF LS10 NE (BLANK OR DK/REF) THEN LSDREC = LS10
          ELSE LSDREC = BLANK

          IF LSDREC < HALLREC:
                    LSCC26 The computer recorded that you last used LSD [LSDREC FILL]. Is this correct?

                              4   Yes
                              6   No
                              DK/REF

                    LSCC27 [IF LSCC26 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

                              1   I last used [LSFILL] **[HALLREC FILL]**
                              2   I last used LSD **[LSDREC FILL]**
                              3   Neither answer is correct
                              DK/REF

                    *LSCC28 [IF LSCC27 = 2 OR LSCC27 = 3] Please answer this question again. How long has it been since you **last** used [LSFILL]?*

1 *Within the past 30 days – that is, since* **DATEFILL**
2 *More than 30 days ago but within the past 12 months*
3 *More than 12 months ago*
DK/REF

 LSCC29 *[IF LSCC26 =6 OR LSCC27 = 1 OR LSCC27 = 3] Please answer this question again. Think only about LSD. How long has it been since you **last** used LSD?*

1 *Within the past 30 days – that is, since* **DATEFILL**
2 *More than 30 days ago but within the past 12 months*
3 *More than 12 months ago*
DK/REF

UPDATE: IF LSCC28 NOT (BLANK OR DK/REF) THEN HALLREC = LSCC28

UPDATE: IF LSCC29 NOT (BLANK OR DK/REF) THEN LSDREC = LSCC29

LS11 [IF (LS01b = 1 OR LSREF2 =1) AND (LS01a = 1 OR LSREF2 = 1 OR LS01c = 1 OR LS01d = 1 OR LS01e = 1 OR LSREF3 = 1 OR LS01f = 1 OR LS01h = 1)] Now think only about PCP. How old were you the **first time** you used PCP?

  AGE: _____ [RANGE: 1 - 110]
  DK/REF

DEFINE AGE1ST PC
  IF LS11 NE (BLANK OR DK/REF) THEN AGE1STPC = LS11
  ELSE AGE1STPC = BLANK

  IF CURNTAGE < AGE1STPC:
    LSCC30 *The computer recorded that you were [AGE1STPC] when you first used PCP. Is this correct?*

4 *Yes*
6 *No*
DK/REF

    LSCC31 *[IF LSCC30 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?*

1 *I am currently* **[CURNTAGE]** *years old*
2 *I was* **[AGE1STPC]** *years old the first time I used PCP*
3 *Neither answer is correct*
DK/REF

    LSCC32 *[IF LSCC31=2 OR LSCC31=3] Please answer this question again. What is your **current** age?*

AGE: _____ [RANGE: 1 - 110]
DK/REF

    LSCC32a *[IF LSCC32 < 12] Since you have indicated that you are [LSCC32] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

    LSCC33 *[IF LSCC30 =6 OR LSCC31=1 OR LSCC31=3] Please answer this question again. Think about the first time you used PCP. How old were you the **first time** you used PCP?*

AGE: _____ [RANGE: 1 - 110]
DK/REF

UPDATE: IF LSCC33 NOT(BLANK OR DK/REF) THEN AGE1STPC = LSCC33

UPDATE: IF LSCC32 NOT(BLANK OR DK/REF) THEN CURNTAGE = LSCC32

IF AGE1STPC =CURNTAGE OR AGE1STPC <10:

LSCC34 *The computer recorded that you were [AGE1STPC] years old the first time you used PCP. Is this correct?*

    4   Yes
    6   No
    DK/REF

LSCC35 *[IF LSCC34 =6] Please answer this question again. Think about the first time you used PCP. How old were you the **first time** you used PCP?*

    AGE: _____ *[RANGE: 1 - 110]*
    DK/REF

UPDATE: IF LSCC35 NOT(BLANK OR DK/REF) THEN AGE1STPC = LSCC35

IF AGE1STPC < AGE1STHA:

LSCC36 *The answers for the last question and an earlier question disagree. Which answer is correct?*

    *1   I was [**AGE1STHA**] years old the first time I used [LSFILL]*
    *2   I was **[AGE1STPC]** years old the first time I used PCP*
    3   Neither answer is correct
    DK/REF

LSCC37 *[IF LSCC36 =2 OR LSCC36 =3] Please answer this question again. Think about the first time you used [LSFILL]. How old were you the **first time** you used [LSFILL]?*

    AGE: _____ *[RANGE: 1 - 110]*
    DK/REF

LSCC38 *[IF LSCC36 = 1 OR LSCC36 = 3] Please answer this question again. Think about the first time you used PCP. How old were you the first time you used PCP?*

    AGE: _____ *[RANGE: 1 - 110]*
    DK/REF

UPDATE: IF LSCC37 NOT(BLANK OR DK/REF) THEN AGE1STHA = LSCC37

UPDATE: IF LSCC38 NOT(BLANK OR DK/REF) THEN AGE1STPC = LSCC38

LS12 [IF AGE1STPC = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STPC = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use PCP in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

LS13 [IF AGE1STPC = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use PCP in [CURRENT YEAR - 2] OR [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

LS14 IF AGE1STPC = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use PCP?

1   January
2   February
3   March
4   April

5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

[Note: Insert range check if LS14 > current month].

LS15   [IF LS12 = 1 OR 2 OR LS13 = 1 OR 2] In what **month** in [YEAR FROM LS12 or LS13] did you first use PCP?

1	January
2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

LS16   [IF (LS01b = 1 OR LSREF2 = 1) AND (LS01a = 1 OR LREF1 = 1 OR LS01c = 1 OR LS01d = 1 OR LS01e = 1 OR LS01f = 1 OR LSREF3 = 1 OR LS01h = 1)] How long has it been since you **last** used PCP?

1	Within the past 30 days – that is, since **DATEFILL**
2	More than 30 days ago but within the past 12 months
3	More than 12 months ago
DK/REF	

DEFINE PCPREC:
    IF LS16 NE (BLANK OR DK/REF) THEN PCPREC = LS16
    ELSE PCPREC = BLANK

    IF PCPREC < HALLREC:
        LSCC39 The computer recorded that you last used PCP [PCPREC FILL]. Is this correct?

            4   Yes
            6   No
            DK/REF

        LSCC40 [IF LSCC39 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

            *1   I last used [LSFILL] **[HALLREC FILL]***
            *2   I last used PCP **[PCPREC FILL]***
            3   Neither answer is correct
            DK/REF

        *LSCC41 [IF LSCC40 = 2 OR LSCC40 = 3] Please answer this question again. How long has it been since you **last** used [LSFILL]?*

            *1   Within the past 30 days – that is, since **DATEFILL***
            2   More than 30 days ago but within the past 12 months
            3   More than 12 months ago
            DK/REF

*LSCC42 [IF LSCC39 =6 OR LSCC40 = 1 OR LSCC40 = 3] Please answer this question again. Think only about PCP. How long has it been since you **last** used PCP?*

> *1   Within the past 30 days – that is, since **DATEFILL***
> *2   More than 30 days ago but within the past 12 months*
> *3   More than 12 months ago*
> *DK/REF*

UPDATE: IF LSCC41 NOT (BLANK OR DK/REF), THEN HALLREC = LSCC41

UPDATE: IF LSCC42 NOT (BLANK OR DK/REF), THEN PCPREC = LSCC42

LS17 [IF (LS01f = 1 OR LSREF3 =1) AND (LS01a = 1 OR LSREF2 = 1 OR LS01b = 1 OR LSREF2 = 1 OR LS01c = 1 OR LS01d = 1 OR LS01e = 1 OR LS01h = 1)] Now think only about "Ecstasy." How old were you the **first time** you used "Ecstasy," also known as MDMA?

> AGE: _____ [RANGE: 1 - 110]
> DK/REF

DEFINE AGE1STEC
> IF LS17 NE (BLANK OR DK/REF) THEN AGE1STEC = LS17
> ELSE AGE1STEC = BLANK

> IF CURNTAGE < AGE1STEC:
>> *LSCC43 The computer recorded that you were [AGE1STEC] when you first used "Ecstasy." Is this correct?*
>>
>> *4   Yes*
>> *6   No*
>> *DK/REF*
>>
>> *LSCC44 [IF LSCC43 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?*
>>
>> *1   I am currently **[CURNTAGE]** years old*
>> *2   I was **[AGE1STEC]** years old the first time I used "Ecstasy"*
>> *3   Neither answer is correct*
>> *DK/REF*
>>
>> *LSCC45 [IF LSCC44=2 OR LSCC44=3] Please answer this question again. What is your **current** age?*
>>
>> *AGE: _____ [RANGE: 1 - 110]*
>> *DK/REF*
>>
>> *LSCC45a [IF LSCC45 < 12] Since you have indicated that you are [LSCC45] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*
>>
>> *LSCC46 [IF LSCC43 =6 OR LSCC44=1 OR LSCC44=3] Please answer this question again. Think about the first time you used "Ecstasy." How old were you the **first time** you used "Ecstasy," also known as MDMA?*
>>
>> *AGE: _____ [RANGE: 1 - 110]*
>> *DK/REF*

UPDATE: IF LSCC46 NOT(BLANK OR DK/REF) THEN AGE1STEC = LSCC46

UPDATE: IF LSCC45 NOT(BLANK OR DK/REF) THEN CURNTAGE = LSCC45

> IF AGE1STEC =CURNTAGE OR AGE1STEC <10:
>> *LSCC47 The computer recorded that you were [AGE1STEC] years old the first time you used "Ecstasy." Is*

this correct?

> *4   Yes*
> *6   No*
> *DK/REF*

> *LSCC48 [IF LSCC47 =6] Please answer this question again. Think about the first time you used "Ecstasy." How old were you the **first time** you used "Ecstasy," also known as MDMA?*
>
> *AGE: _____ [RANGE: 1 - 110]*
> *DK/REF*

UPDATE: IF LSCC48 NOT(BLANK OR DK/REF) THEN AGE1STEC = LSCC48

> IF AGE1STEC < AGE1STHA:
>
> > *LSCC49 The answers for the last question and an earlier question disagree. Which answer is correct?*
> >
> > *1   I was [**AGE1STHA**] years old the first time I used [LSFILL]*
> > *2   I was [**AGE1STEC**] years old the first time I used "Ecstasy"*
> > *3   Neither answer is correct*
> > *DK/REF*
>
> > *LSCC50 [IF LSCC49 =2 OR LSCC49 =3] Please answer this question again. Think about the first time you used [LSFILL]. How old were you the **first time** you used [LSFILL]?*
> >
> > *AGE: _____ [RANGE: 1 - 110]*
> > *DK/REF*
>
> > *LSCC51 [IF LSCC49 = 1 OR LSCC49 = 3] Please answer this question again. Think about the first time you used "Ecstasy." How old were you the first time you used "Ecstasy," also known as MDMA?*
> >
> > *AGE: _____ [RANGE: 1 - 110]*
> > *DK/REF*

UPDATE: IF LSCC50 NOT(BLANK OR DK/REF) THEN AGE1STHA = LSCC50

UPDATE: IF LSCC51 NOT(BLANK OR DK/REF) THEN AGE1STEC = LSCC51

LS18   [IF AGE1STEC = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STEC = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use "Ecstasy" in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

LS19   [IF AGE1STEC = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use "Ecstasy" in [CURRENT YEAR - 2] OR [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

LS20   IF AGE1STEC = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use "Ecstasy?"

1   January
2   February
3   March
4   April
5   May
6   June

7	July
8	August
9	September
10	October
11	November
12	December

DK/REF

[Note: Insert range check if LS20 > current month].

LS21 [IF LS18 = 1 OR 2 OR LS19 = 1 OR 2] In what **month** in [YEAR FROM LS18 or LS19] did you first use "Ecstasy?"

1	January
2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December

DK/REF

LS22 [IF (LS01f = 1 OR LSREF3 = 1) AND (LS01a = 1 OR LSREF1 = 1 OR LS01b = 1 OR LSREF2 = 1 OR LS01c = 1 OR LS01d = 1 OR LS01e = 1 OR LS01h = 1)] How long has it been since you **last** used "Ecstasy," also known as MDMA?

1	Within the past 30 days – that is, since **DATEFILL**
2	More than 30 days ago but within the past 12 months
3	More than 12 months ago

DK/REF

DEFINE ECSTREC:
  IF LS22 NE (BLANK OR DK/REF) THEN ECSTREC = LS22
  ELSE ECSTREC = BLANK

  IF ECSTREC < HALLREC:
    LSCC52 The computer recorded that you last used "Ecstasy" [ECSTREC FILL]. Is this correct?

4	*Yes*
6	*No*
DK/REF	

    LSCC53 [IF LSCC52 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

1	*I last used [LSFILL]* ***[HALLREC FILL]***
2	*I last used "Ecstasy"* ***[ECSTREC FILL]***
3	*Neither answer is correct*
DK/REF	

    *LSCC54 [IF LSCC53 = 2 OR LSCC40 = 3] Please answer this question again. How long has it been since you **last** used [LSFILL]?*

1	*Within the past 30 days – that is, since **DATEFILL***
2	*More than 30 days ago but within the past 12 months*
3	*More than 12 months ago*
DK/REF	

    LSCC55 [IF LSCC52 =6 OR LSCC54 = 1 OR LSCC54 = 3] Please answer this question again. Think only

*about "Ecstasy." How long has it been since you **last** used "Ecstasy," also known as MDMA?*

*1   Within the past 30 days – that is, since **DATEFILL***
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

UPDATE: IF LSCC54 NOT (BLANK OR DK/REF), THEN HALLREC = LSCC54

UPDATE: IF LSCC55 NOT (BLANK OR DK/REF), THEN ECSTREC = LSCC55

Inhalants

INHINTRO   These next questions are about liquids, sprays, and gases that people sniff or inhale to get high or to make them feel good. We are not interested in times when you inhaled a substance accidentally — such as when painting, cleaning an oven, or filling a car with gasoline.

The questions use the word "inhalant" to include all the things listed below, as well as any other substances that people sniff or inhale for kicks or to get high. Take a moment to look at the substances listed below so you know what kinds of liquids, sprays, and gases these questions are about.

Amyl nitrite, "poppers," locker room odorizers, or "rush"
Correction fluid, degreaser, or cleaning fluid
Gasoline or lighter fluid
Glue, shoe polish, or toluene
Halothane, ether, or other paint solvents
Lighter gases, such as butane or propane
Nitrous oxide or "whippets"
Spray paints
Other aerosol sprays

Press [ENTER] to continue.

IN01a   Have you **ever**, even once, inhaled **amyl nitrite, "poppers," locker room odorizers,** or **"rush"** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01b   Have you **ever**, even once, inhaled **correction fluid, degreaser,** or **cleaning fluid** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01c   Have you **ever**, even once, inhaled **gasoline** or **lighter fluid** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01d   Have you **ever**, even once, inhaled **glue, shoe polish,** or **toluene** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01e   Have you **ever**, even once, inhaled **halothane, ether,** or **other anesthetics** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01f   Have you **ever**, even once, inhaled **lacquer thinner** or **other paint solvents** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01g   Have you **ever**, even once, inhaled **lighter gases,** such as **butane or propane** for kicks or to get high?

1   Yes

2   No
DK/REF

IN01h   Have you **ever**, even once, inhaled **nitrous oxide** or **whippets** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01i   Have you **ever**, even once, inhaled **spray paints** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01j   Have you **ever**, even once, inhaled **some other aerosol spray** for kicks or to get high?

1   Yes
2   No
DK/REF

IN01l   Have you **ever**, even once used any other inhalants for kicks or to get high besides the ones that have been listed?

1   Yes
2   No
DK/REF

IN01OTH1   [IF IN01l = 1] You have indicated that you have used inhalants **other than the ones that were specifically mentioned in the previous questions.** Please use the keyboard to type in the names of these other inhalants you have used. Type in the name of **one** of the other inhalants you have used. If you're not sure how to spell the name of the inhalant you used, just make your best guess.

When you have finished, press the [ENTER] key to go to the next question. Remember, you do not need to type in the names of any inhalants that you already indicated using in the previous questions.

_____

INOTHS2   [IF IN01OTH1 NE (BLANK OR DK/REF)] Please type in the name of any **other inhalant** you have used other than those you have already mentioned. If you have not used any other inhalants, press the [ENTER] key to go to the next question.

_____

INOTHS3   [IFINOTHS2 NE (BLANK OR DK/REF)] Please type in the name of any **other inhalant** you have used other than those you have already mentioned. If you have not used any other inhalants, press the [ENTER] key to go to the next question.

_____

INOTHS4   [IF INOTHS3 NE (BLANK OR DK/REF)] Please type in the name of any **other inhalant** you have used other than those you have already mentioned. If you have not used any other inhalants, press the [ENTER] key to go to the next question.

_____

INOTHS5   [IF INOTHS4 NE (BLANK OR DK/REF)] Please type in the name of any **other inhalant** you have used other than those you have already mentioned. If you have not used any other inhalants, press the [ENTER] key to go to the next question.

_____

INREF   [IF IN01a = REF AND IN01b = REF AND IN01c = REF AND IN01d = REF AND IN01e = REF AND IN01f = REF

AND IN01g = REF AND IN01h = REF AND IN01i = REF AND IN01j = REF AND IN01l = REF] The information respondents provide about their use of inhalants is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used **any type of inhalant** for kicks or to get high?

1   Yes
2   No
DK/REF

IN02   [IF IN01a = 1 OR IN01b = 1 OR IN01c = 1 OR IN01d = 1 OR IN01e = 1 OR IN01f = 1 OR IN01g = 1 OR IN01h = 1 OR IN01i = 1 OR IN01j = 1 OR IN01l = 1 OR INREF = 1] How old were you the **first time** you used any inhalant for kicks or to get high?

AGE:_____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STIN:
        IF IN02 NE (BLANK OR DK/REF) THEN AGE1STIN = IN02
        ELSE AGE1STIN = BLANK

        IF CURNTAGE < AGE1STIN:
                INCC01   The computer recorded that you were [AGE1STIN] when you first used an inhalant of any kind for kicks or to get high. Is this correct?

                        4   Yes
                        6   No
                        DK/REF

                INCC02   [IF INCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

                        1   I am currently [CURNTAGE] years old
                        2   I was [AGE1STIN] years old the first time I used an inhalant of any kind for kicks or to get high
                        3   Neither answer is correct
                        DK/REF

                INCC03   [IF INCC02=2 OR INCC02=3] Please answer this question again. What is your current age?

                        AGE: _____ [RANGE: 1 - 110]
                        DK/REF

                        INCC03a [IF INCC03 < 12] Since you have indicated that you are [INCC03] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.

                *INCC04   [IF INCC02=1 OR INCC02=3 OR INCC01=6] Please answer this question again. Think about the first time you used an inhalant of any kind for kicks or to get high. How old were you the **first time** you used an inhalant for kicks or to get high?*

                        AGE: _____ [RANGE: 1 - 99]
                        DK/REF

UPDATE: IF INCC04 NOT(BLANK OR DK/REF) THEN AGE1STIN = INCC04

UPDATE: IF INCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = INCC03

IF AGE1STIN = CURNTAGE OR AGE1STIN < 10:

    INCC05 *The computer recorded that you were [AGE1STIN] years old the first time you used an inhalant of any kind for kicks or to get high. Is this correct?*

        4   Yes
        6   No
        DK/REF

    INCC06 *[IF INCC05=6] Please answer this question again. Think about the first time you used an inhalant of any kind for kicks or to get high. How old were you the first time you used an inhalant of any kind for kicks or to get high?*

        AGE: _____ [RANGE: 1 - 110]
        DK/REF

UPDATE: IF IINCC06 NOT(BLANK OR DK/REF) THEN AGE1STIN = INCC06

IN03a   [IF AGE1STIN = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STIN = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use an inhalant of any kind for kicks or to get high in [CURRENT YEAR - 1] or [CURRENT YEAR]?

    1   CURRENT YEAR - 1
    2   CURRENT YEAR
    DK/REF

IN03b   [IF AGE1STIN = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use an inhalant of any kind for kicks or to get high in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

    1   CURRENT YEAR - 2
    2   CURRENT YEAR - 1
    DK/REF

IN03c   IF AGE1STIN = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use an inhalant of any kind for kicks or to get high?

    1   January
    2   February
    3   March
    4   April
    5   May
    6   June
    7   July
    8   August
    9   September
    10   October
    11   November
    12   December
    DK/REF

[Note: Insert range check if IN03c > current month].

IN03d   [IF IN03a = 1 OR 2 OR IN03b = 1 OR 2] In what **month** in [YEAR FROM IN03a or IN03b] did you first use an inhalant of any kind for kicks or to get high?

    1   January
    2   February
    3   March
    4   April
    5   May
    6   June
    7   July
    8   August

9	September
10	October
11	November
12	December
DK/REF	

INLAST [IF IN01a = 1 OR IN01b = 1 OR IN01c = 1 OR IN01d = 1 OR IN01e = 1 OR IN01f = 1 OR IN01g = 1 OR IN01h = 1 OR IN01i = 1 OR IN01j = 1 OR IN01L = 1 OR INREF = 1] How long has it been since you **last** used any inhalant for kicks or to get high?

    1   Within the past 30 days – that is, since **DATEFILL**
    2   More than 30 days ago but with the past 12 months
    3   More than 12 months ago
    DK/REF

INRECDK   [IF INLAST = DK] What is your **best guess** of how long it has been since you **last** used any inhalant for kicks or to get high?

    1   Within the past 30 days — that is, since **DATEFILL**
    2   More than 30 days ago but within the past 12 months
    3   More than 12 months ago
    DK/REF

INRECRE   [IF INLAST = REF] The information respondents provide about their use of inhalants is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used any inhalant for kicks or to get high?

    1   Within the past 30 days — that is, since **DATEFILL**
    2   More than 30 days ago but within the past 12 months
    3   More than 12 months ago
    DK/REF

INFRAME3   [IF INLAST = 1 OR 2 OR INRECDK = 1 OR 2 OR INRECRE = 1 OR 2] Now think about the past 12 months, from [FILL DATE] through today. We want to know how many days you've used an inhalant of any kind for kicks or to get high during the past 12 months.

What would be the easiest way for you to tell us how many days you've done this?

    1   Average number of **days per week** during the past 12 months
    2   Average number of **days per month** during the past 12 months
    3   Total number of days during the past 12 months
    DK/REF

INYRAVE   [IF INFRAME 3 = 3 OR DK/REF] On how many days in the past 12 months did you use an inhalant of any kind for kicks or to get high?

TOTAL # OF DAYS:_____ [RANGE: 1 - 366]
DK/REF

INMONAVE   [IF INFRAME3 = 2 OR INYRAVE = DK/REF] On average, how many days did you use an inhalant of any kind for kicks or to get high **each month** during the past 12 months?

AVERAGE # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

INWKAVE   [IF INFRAME3 = 1 OR INMONAVE = DK/REF] On average, how many days did you use an inhalant of any kind for kicks or to get high **each week** during the past 12 months?

AVERAGE # OF DAYS PER WEEK:_____ [RANGE: 1 - 7]
DK/REF

IN06   [IF INLAST=1 OR INRECDK = 1 OR INRECRE = 1] Think specifically about the past 30 days, from [FILL DATE] up to and including today. During the past 30 days, on how many days did you use any inhalant for kicks or to get high?

NUMBER OF DAYS: _____ [RANGE: 0 - 30]
DK/REF

IN06DKRE   [IF IN06 = DK/REF] What is your **best estimate** of the number of days you used any inhalant for kicks or to get high during the past 30 days?

1   1 or 2 days
2   3 to 5 days
3   6 to 9 days
4   10 to 19 days
5   20 to 29 days
6   all 30 days
DK/REF

DEFINE ESTIIN:
        IF IN06DKRE = 1 THEN ESTIIN = 1
        IF IN06DKRE = 2 THEN ESTIIN = 3
        IF IN06DKRE = 3 THEN ESTIIN = 6
        IF IN06DKRE = 4 THEN ESTIIN = 10
        IF IN06DKRE = 5 THEN ESTIIN = 20
        IF IN06DKRE = 6 THEN ESTIIN = 30
        ELSE ESTIIN = BLANK

DEFINE INH30DAY
        IF IN06DKRE = 1 INH30DAY = "1 or 2"
        IF IN06DKRE = 2 INH30DAY = "3 to 5"
        IF IN06DKRE = 3 INH30DAY = "6 to 9"
        IF IN06DKRE = 4 INH30DAY = "10 to 19"
        IF IN06DKRE = 5 INH30DAY = "20 to 29"
        IF IN06DKRE = 6 INH30DAY = "all 30"
        ELSE INH30DAY = BLANK

DEFINE TOTINHAL:
        IF INYRAVE NOT(BLANK OR DK/REF) THEN TOTINHAL = INYRAVE
        ELSE IF INMONAVE NOT(BLANK OR DK/REF) THEN TOTINHAL=INMONAVE*12
        ELSE IF INWKAVE NOT(BLANK OR DK/REF) THEN TOTINHAL=INWKAVE*52
        ELSE TOTINHAL = DK/REF
        IF TOTINHAL = DK/REF, SKIP TO INTROAN1

        IF TOTINHAL NOT DK/REF AND ((IN06 NE DK/REF OR BLANK AND IN06 > TOTINHAL)) OR (IN06 = DK/REF AND ESTIIN > TOTINHAL:
                INCC07a [IF IN06 > TOTINHAL] For the last question, the computer recorded that you used an inhalant for kicks or to get high on [IN06] of the past 30 days. Is this correct?

                4   Yes
                6   No
                DK/REF

                *INCC07b [IF ESTIIN > TOTINHAL] For the last question, the computer recorded that you used an inhalant for kicks or to get high on [**INH30DAY**] of the past 30 days. Is this correct?*

                4   Yes
                6   No
                DK/REF

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DEFINE FILLINH:
     IF INYRAVE NOT (BLANK OR DK/REF) THEN FILLINH = "[INYRAVE] days"
     ELSE IF INMONAVE NOT (BLANK OR DK/REF), THEN FILLINH = "[INMONAVE] days per month"
     ELSE IF INWKAVE NOT (BLANK OR DK/REF), THEN FILLINH = "[INWKAVE] days per week"

DEFINE FILLINHA:
     IF FILLINH = "[INMONAVE] days per month" OR "[INWKAVE] days per week" THEN FILLINHA = "for a total
     of [TOTINHAL] days"
     ELSE FILLINHA = BLANK

INCC08 *The answers for the last question and an earlier question disagree. Which answer is correct?*

     1   *I used an inhalant for kicks or to get high on* **[FILLINH]** *days in the past 12 months*
             [FILLINHA]
     2   *I used an inhalant for kicks or to get high on* **[IN06 / INH30DAY]** *days in the past 30
             days*
     3   *Neither answer is correct*
     DK/REF

INCC09 *[IF INCC08 = 2 OR INCC08 = 3] Please answer this question again. Think about the past 12
months, from [FILL DATE] through today. We want to know how many days you've used an
inhalant of any kind for kicks or to get high during the past 12 months.*

     What would be the easiest way for you to tell us how many days you've used it?

     1   *Average number of **days per week** during the past 12 months*
     2   *Average number of **days per month** during the past 12 months*
     3   *Total number of days during the past 12 months*
     DK/REF

INCC10 *[IF INCC09 = 3] On how many days in the past 12 months did you use an inhalant of any kind for
kicks or to get high?*

     TOTAL # OF DAYS: _____ *[RANGE: 1 - 366]*
     DK/REF

INCC11 *[IF INCC09 = 2] On average, how many days did you use an inhalant of any kind for kicks or to
get high **each month** during the past 12 months?*

     # OF DAYS/MONTH: _____ *[RANGE: 1 - 31]*
     DK/REF

INCC12 *[IF INCC09 = 1] On average, how many days did you use an inhalant of any kind for kicks or to
get high **each week** during the past 12 months?*

     # OF DAYS PER WEEK: _____ *[RANGE: 1 - 7]*
     DK/REF

IF INCC10 NOT(BLANK OR DK/REF) THEN TOTINHAL = INCC10
ELSE IF INCC11 NOT(BLANK OR DK/REF) THEN TOTINHAL= INCC11*12
ELSE IF INCC12 NOT(BLANK OR DK/REF) THEN TOTINHAL= INCC12*52
ELSE TOTINHAL = DK/REF

INCC13a *[IF INCC07a = 6 OR ((INCC08 = 1 OR INCC08 = 3) AND INCC07a NE BLANK OR DK/REF)]
Please answer this question again. Think specifically about the past 30 days, from [FILL DATE],
up to and including today. During the past 30 days, on how many days did you use any inhalant
for kicks or to get high?*

     # OF DAYS: _____ *[RANGE: 0 - 30]*
     DK/REF

INCC13b *[IF INCC07b = 6 OR ((INCC08 = 1 OR 3) AND INCC07b NE BLANK OR DK/REF)] Please
answer this question again. Think specifically about the past 30 days, from **[FILL DATE]** up to*

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*and including today. What is your **best estimate** of the number of days you used any inhalant for kicks or to get high?*

1   1 or 2 days
2   3 to 5 days
3   6 to 9 days
4   10 to 19 days
5   20 to 29 days
6   all 30 days
DK/REF

IF IN06 = 0:

INCC14   *The computer recorded that you used an inhalant for kicks or to get high on **0 days** during the past 30 days. Is this correct?*

4   Yes
6   No
DK/REF

INCC16   *[IF INCC14 = 6] During the past 30 days, that is, since [DATE FILL], on how many days did you use an inhalant of any kind for kicks or to get high?*

 # OF DAYS: _____ [RANGE: 0 - 30]
DK/REF

INTRPILL   Now we have some questions about drugs that people are supposed to take only if they have a prescription from a doctor. We are only interested in your use of a drug if:

- the drug was **not** prescribed for you, or
- you took the drug only for the experience or feeling it caused.

Press [ENTER] to continue.

Pain Relievers

INTROPR1   These questions are about the use of **pain relievers**. We are **not** interested in your use of "over-the-counter" pain relievers such as aspirin, Tylenol, or Advil that can be bought in drug stores or grocery stores without a doctor's prescription.

Ask your interviewer to show you Card A.

Press [ENTER] to continue.

INTROPR2   Card A shows pictures of some different kinds of prescription pain relievers and lists the names of some others. These pictures show only pills, but we are interested in your use of **any** form of prescription pain relievers that were **not** prescribed for you or that you took only for the experience or feeling they caused.

Please look at Card A carefully as you answer the next questions.

Press [ENTER] to continue.

PR01   Please look at the pain relievers shown in Box 1 **above** the red line on Card A.

Have you ever, even once, used **Darvocet, Darvon, or Tylenol with codeine** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

PR02   Please look at the pain relievers shown in Box 2.

Have you ever, even once, used **Percocet, Percodan, or Tylox** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

PR03   Please look at the pain relievers shown in Box 3.

Have you ever, even once, used **Vicodin, Lortab, or Lorcet** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

PR04   Please look at the pain relievers shown **below** the red line on Card A.

Have you ever, even once, used any of these pain relievers when they were **not** prescribed for you or that you took only for the experience or feeling they caused?

1   Yes
2   No
DK/REF

PR04a   [IF PR04 = 1] Which of the pain relievers shown **below** the red line on Card A have you used when they were **not** prescribed for you or that you took only for the experience or feeling they caused?

To select more than one drug from the list, press the space bar between each number you type. When you have finished, press [ENTER].

4   Codeine
5   Demerol

6	Dilaudid
7	Fioricet
8	Fiorinal
9	Hydrocodone
10	Methadone
11	Morphine
12	Oxycontin
13	Phenaphen with Codeine
14	Propoxyphene
15	SK-65
16	Stadol
17	Talacen
18	Talwin
19	Talwin NX
20	Tramadol
21	Ultram
DK/REF	

PR05 Have you ever, even once, used **any other prescription pain reliever**, besides the ones shown on Card A, when it was **not** prescribed for you or that you took only for the experience or feeling it caused?

1 Yes
2 No
DK/REF

PR05a [IF PR05 = 1] You have indicated that you have used prescription pain relievers **other than the ones on Card A** when they were not prescribed for you or that you took only for the experience or feeling they caused. Type in the name of **one** of the other prescription pain killers you have used. If you're not sure how to spell the name of the pain reliever you used, just make your best guess.

When you have finished, press the [ENTER] key to go to the next question. Remember, you do not need to type in the names of any prescription pain relievers you already indicated using in the previous questions.

_____

DK/REF

PR05b [IF PR05a NE (BLANK OR DK/REF)] Please type in the name of **any other prescription pain reliever** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription pain relievers, press the [ENTER] key to go to the next question.

_____

DK/REF

PR05c [IF PR05b NE (BLANK OR DK/REF)] Please type in the name of **any other prescription pain reliever** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription pain relievers, press the [ENTER] key to go to the next question.

_____

DK/REF

PR05d [IF PR05c NE (BLANK OR DK/REF)] Please type in the name of **any other prescription pain reliever** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription pain relievers, press the [ENTER] key to go to the next question.

_____

DK/REF

PR05e [IF PR05d NE (BLANK OR DK/REF)] Please type in the name of **any other prescription pain reliever** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription pain relievers, press the [ENTER] key to go to the next question.

DK/REF

PRREF [IF PR01 = REF AND PR02 = REF AND PR03 = REF AND PR04 = REF AND PR05 = REF] The information respondents provide about the prescription pain relievers they've used that were not prescribed for them or that they took only for the experience or feeling they caused is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used **any type of prescription pain reliever** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

    1   Yes
    2   No
    DK/REF

PR06 [IF PR01 = 1 OR PR02 = 1 OR PR03 = 1 OR PR04 = 1 OR PR05 = 1 OR PRREF = 1] How old were you the first time you used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

    AGE: _____ [RANGE: 1 - 110]
    DK/REF

DEFINE AGE1STPR:
      IF PR06 NE (BLANK OR DK/REF) THEN AGE1STPR = PR06
      ELSE AGE1STPR = BLANK

      IF CURNTAGE < AGE1STPR

              PRCC01 The computer recorded that you were [AGE1STPR] when you first used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?

                    4   Yes
                    6   No
                    DK/REF

               PRCC02 [IF PRCC01 = 4]The answers for the last question and an earlier question disagree. Which answer is correct?

                    1   I am currently [CURNTAGE] years old
                    2   I was [AGE1STPR] years old the first time I used any prescription pain reliever that was not prescribed or that I took only for the experience or feeling it caused
                    3   Neither answer is correct
                    DK/REF

               *PRCC03 [IF PRCC02=2 OR PRCC02=3] Please answer this question again. What is your **current** age?*

                    AGE: _____
                    DK/REF

                    PRCC03a   [IF PRCC03 < 12] Since you have indicated that you are [PRCC03] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.

               *PRCC04 [IF PRCC02=1 OR PRCC02=3 OR PRCC01=6] Please answer this question again. Think about the first time you used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used a prescription pain reliever in either of these ways?*

                    AGE: _____ [RANGE: 1 - 110]
                    DK/REF

UPDATE: IF PRCC04 NOT(BLANK OR DK/REF) THEN AGE1STPR = PRCC04

UPDATE: IF PRCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = PRCC03

IF AGE1STPR = CURNTAGE OR AGE1STPR <10:

PRCC05 *The computer recorded that you were **[AGE1STPR]** years old the first time you used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?*

4   Yes
6   No
DK/REF

PRCC06 *[IF PRCC05=6] Please answer this question again. Think about the first time you used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used a prescription pain reliever in either of these ways?*

AGE: _____ [RANGE: 1 - 110]
DK/REF

UPDATE: IF PRCC06 NOT(BLANK OR DK/REF) THEN AGE1STPR = PRCC06

PR07a   [IF AGE1STPR = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STPR = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

PR07b   [IF AGE1STPR = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

PR08a   IF AGE1STPR = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

[Note: Insert range check if PR08a > current month].

PR08b   [IF PR07a = 1 OR 2 OR PR07b = 1 OR 2] In what **month** in [YEAR FROM PR07a or PR07b] did you first use any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

1	January
2	February
3	March
4	April
5	May
6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

PR09   [IF PR01 = 1 OR PR02 = 1 OR PR03 = 1 OR PR04 = 1 OR PR05 = 1 OR PRREF = 1] How long has it been since you **last** used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

PRRECDK   [IF PR09 = DK] What is your **best guess** of how long it has been since you **last** used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

PRRECRE   [IF PR09 = REF] The information respondents provide about their use of prescription pain relievers is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

PR10   [IF PR09 = 1 OR 2 OR PRRECDK = 1 OR 2 OR PRRECRE = 1 OR 2] Now think about the past 12 months, from **[FILL DATE]** through today. We want to know how many days you've used any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused during the past 12 months.

What would be the easiest way for you to tell us how many days you used a prescription pain reliever in either of these ways?

1   Average number of **days per week** during the past 12 months
2   Average number of **days per month** during the past 12 months
3   Total number of days during the past 12 months
DK/REF

PR11   [IF PR10 = 3 OR DK/REF] On how many days in the past 12 months did you use any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
DK/REF

PR12   [IF PR10 = 2 OR PR11 = DK/REF] On average, how many days **each month** during the past 12 months did you use any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

AVG # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

PR13   [IF PR10 = 1 OR PR12 = DK/REF] On average, how many days **each week** during the past 12 months did you use any prescription pain reliever that was not prescribed for you or that you took only for the experience or feeling it caused?

AVG # OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
DK/REF

Tranquilizers

INTROTR1   These next questions ask about the use of **tranquilizers**. Tranquilizers are usually prescribed to relax people, to calm people down, to relieve anxiety, or to relax muscle spasms. Some people call tranquilizers "nerve pills."

Ask your interviewer to show you Card B.

Press [ENTER] to continue.

INTROTR2   Card B shows pictures of some different kinds of prescription tranquilizers. These pictures show only pills, but we are interested in your use of **any** form of prescription tranquilizers that were **not** prescribed for you, or that you took only for the experience or feeling they caused.

Please look at Card B carefully as you answer the next questions.

Press [ENTER] to continue.

TR01   Please look at the tranquilizers shown in Box 1 **above** the red line on Card B.

Have you ever, even once, used **Klonopin or Clonazepam** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

TR02   Please look at the tranquilizers shown in Box 2.

Have you ever, even once, used **Xanax, Alprazolam, Ativan, or Lorazepam** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

TR03   Please look at the tranquilizers shown in Box 3.

Have you ever, even once, used **Valium or Diazepam** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

TR04   Please look at the tranquilizers shown **below** the red line on Card B.

Have you ever, even once, used any of these tranquilizers when they were **not** prescribed for you or that you took only for the experience or feeling they caused?

1   Yes
2   No
DK/REF

TR04a   Which of the tranquilizers shown **below** the red line on Card B have you used when they were **not** prescribed for you or that you took only for the experience or feeling they caused?

To select more than one drug from the list, press the space bar between each number you type. When you have finished, press [ENTER].

4   Atarax
5   BuSpar

6	Equanil

6   Equanil
7   Flexeril
8   Librium
9   Limbitrol
10   Meprobamate
11   Miltown
12   Rohypnol
13   Serax
14   Soma
15   Tranxene
16   Vistaril
DK/REF

TR05   Have you ever, even once, used **any other prescription tranquilizer**, besides the ones shown on Card B, when it was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

TR05a [IF TR05 = 1] You have indicated that you have used prescription tranquilizers **other than the ones on Card B** when they were not prescribed for you or that you took only for the experience or feeling they caused. Type in the name of **one** of the other prescription tranquilizers you have used. If you're not sure how to spell the name of the tranquilizer you used, just make your best guess.

When you have finished, press the [ENTER] key to go to the next question. Remember, you do not need to type in the names of any prescription tranquilizers you already indicated using in the previous questions.

_____
DK/REF

TR05b [IF TR05a NE (BLANK OR DK/REF)] Please type in the name of **any other prescription tranquilizer** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription tranquilizers, press the [ENTER] key to go to the next question.

_____
DK/REF

TR05c [IF TR05b NE (BLANK OR DK/REF)] Please type in the name of **any other prescription tranquilizer** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription tranquilizers, press the [ENTER] key to go to the next question.

_____
DK/REF

TR05d [IF TR05c NE (BLANK OR DK/REF)] Please type in the name of **any other prescription tranquilizer** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription tranquilizers, press the [ENTER] key to go to the next question.

_____
DK/REF

TR05e [IF TR05d NE (BLANK OR DK/REF)] Please type in the name of **any other prescription tranquilizer** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription tranquilizers, press the [ENTER] key to go to the next question.

_____
DK/REF

TRREF [IF TR01 = REF AND TR02 = REF AND TR03 = REF AND TR04 = REF AND TR05 = REF] The information respondents provide about the prescription tranquilizers they've used that were not prescribed for them or that they took only for the experience or feeling they caused is very important to the success of this study. We recognize that

this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used **any type of prescription tranquilizer** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

TR06   [IF TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 = 1 OR TR05 = 1 OR TRREF = 1] How old were you the **first time** you used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STTR:
        IF TR06 NE (BLANK OR DK/REF) THEN AGE1STTR = TR06
        ELSE AGE1STTR = BLANK

        IF CURNTAGE < AGE1STTR
                *TRCC01 The computer recorded that you were **[AGE1STTR]** when you first used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?*

                        4   Yes
                        6   No
                        DK/REF

                TRCC02 [IF TRCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

                        *1   I am currently **[CURNTAGE]** years old*
                        *2   I was **[AGE1STTR]** years old the first time I used any prescription tranquilizer that was not prescribed or that I took only for the experience or feeling it caused*
                        3   Neither answer is correct
                        DK/REF

                *TRCC03 [IF TRCC02=2 OR TRCC02=3] Please answer this question again. What is your **current** age?*

                        AGE: _____ [RANGE: 1 - 110]
                        DK/REF

                        *TRCC03a   [IF TRCC03 < 12] Since you have indicated that you are **[TRCC03]** years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

                *TRCC04 [IF TRCC02=1 OR TRCC02=3 OR TRCC01=6] Please answer this question again. Think about the first time you used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used a prescription tranquilizer in either of these ways?*

                        AGE: _____ [RANGE: 1 - 110]
                        DK/REF

UPDATE: IF TRCC04 NOT(BLANK OR DK/REF) THEN AGE1STTR = TRCC04

UPDATE: IF TRCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = TRCC03

        IF AGE1STTR = CURNTAGE OR AGE1STTR <10:

TRCC05 *The computer recorded that you were **[AGE1STTR]** years old the first time you used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?*

       4   Yes
       6   No
       DK/REF

TRCC06 *[IF TRCC05=6] Please answer this question again. Think about the first time you used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used a prescription tranquilizer in either of these ways?*

       AGE: _____ [RANGE: 1 - 110]
       DK/REF

UPDATE: IF TRCC6 NOT(BLANK OR DK/REF) THEN AGE1STTR = TRCC6

TR07a [IF AGE1STTR = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STTR = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 1] or [CURRENT YEAR]?

       1   CURRENT YEAR - 1
       2   CURRENT YEAR
       DK/REF

TR07b [IF AGE1STTR = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

       1   CURRENT YEAR - 2
       2   CURRENT YEAR - 1
       DK/REF

TR08a IF AGE1STTR = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

       1   January
       2   February
       3   March
       4   April
       5   May
       6   June
       7   July
       8   August
       9   September
       10   October
       11   November
       12   December
       DK/REF

[Note: Insert range check if TR08A > current month].

TR08b [IF TR07a = 1 OR 2 OR TR07b = 1 OR 2] In what **month** in [YEAR FROM TR07a or TR07b] did you first use any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

       1   January
       2   February
       3   March
       4   April
       5   May

6	June
7	July
8	August
9	September
10	October
11	November
12	December
DK/REF	

TR09 [IF TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 = 1 OR TR05 = 1 OR TRREF = 1] How long has it been since you **last** used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

    1   Within the past 30 days — that is, since **DATEFILL**
    2   More than 30 days ago but within the past 12 months
    3   More than 12 months ago
    DK/REF

TRRECDK   [IF TR09 = DK] What is your **best guess** of how long it has been since you **last** used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

        1   Within the past 30 days — that is, since **DATEFILL**
        2   More than 30 days ago but within the past 12 months
        3   More than 12 months ago
        DK/REF

TRRECRE   [IF TR09 = REF] The information respondents provide about their use of prescription tranquilizers is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

        Please reconsider answering this question: How long has it been since you **last** used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

        1   Within the past 30 days — that is, since **DATEFILL**
        2   More than 30 days ago but within the past 12 months
        3   More than 12 months ago
        DK/REF

TR10 [IF TR09 = 1 OR 2 OR TRRECDK = 1 OR 2 OR TRRECRE = 1 OR 2] Now think about the past 12 months, from **[FILL DATE]** through today. We want to know how many days you've used any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused during the past 12 months.

    What would be the easiest way for you to tell us how many days you used a prescription tranquilizer in either of these ways?

    1   Average number of **days per week** during the past 12 months
    2   Average number of **days per month** during the past 12 months
    3   Total number of days during the past 12 months
    DK/REF

TR11 [IF TR10 = 3 OR DK/REF] On how many days in the past 12 months did you use any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

    TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
    DK/REF

TR12 [IF TR10 = 2 OR TR11 = DK/REF] On average, how many days **each month** during the past 12 months did you use any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

    AVG # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
    DK/REF

TR13   [IF TR10 = 1 OR TR12 = DK/REF] On average, how many days **each week** during the past 12 months did you use any prescription tranquilizer that was not prescribed for you or that you took only for the experience or feeling it caused?

AVG # OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
DK/REF

Stimulants

INTROST1   These next questions ask about the use of drugs such as amphetamines that are known as **stimulants**, "uppers," or "speed." People sometimes take these drugs to lose weight, to stay awake, or for attention deficit disorders. We are not interested in the use of "over-the-counter" stimulants such as Dexatrim or No-Doz that can be bought in drug stores or grocery stores without a doctor's prescription.

Ask your interviewer to show you Card C.

Press [ENTER] to continue.

INTROST2   Card C shows pictures of some different kinds of prescription stimulants and lists the names of some others. These pictures show only pills, but we are interested in your use of **any** form of prescription stimulants that were **not** prescribed for you, or that you took only for the experience or feeling they caused.

Please look at Card C carefully as you answer the next questions.

Press [ENTER] to continue.

ST01   Please look at the stimulants shown in Box 1 **above** the red line on Card C.

Have you ever, even once, used **Methamphetamine, Desoxyn, or Methedrine** that was **not** prescribed for you or that you took only for the experience or feeling it caused? Methamphetamine is also known as crank, crystal, ice, or speed.

1   Yes
2   No
DK/REF

STREF1 [IF ST01 = REF] The information respondents provide about the Methamphetamine, Desoxyn, and Methedrine they've used that were not prescribed for them or that they took only for the experience or feeling they caused is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used **Methamphetamine, Desoxyn, or Methedrine** that was **not** prescribed for you or that you took only for the experience or feeling it caused? Methamphetamine is also known as crank, crystal, ice, or speed.

1   Yes
2   No
DK/REF

ST02   Please look at the stimulants shown in Box 2.

Have you ever, even once, used **prescription diet pills, such as Amphetamines, Benzedrine, Biphetamine, Fastin, or Phentermine,** that were **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

ST03   Please look at the stimulants shown in Box 3.

Have you ever, even once, used **Ritalin or Methylphenidate** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

ST04   Please look at the stimulants shown **below** the red line on Card C.

Have you ever, even once, used any of these stimulants when they were **not** prescribed for you or that you took only for the experience or feeling they caused?

1 Yes
2 No
DK/REF

ST04a Which of the stimulants shown **below** the red line on Card C have you used when they were **not** prescribed for you or that you took only for the experience or feeling they caused?

To select more than one drug from the list, press the space bar between each number you type. When you have finished, press [ENTER].

4 Cylert
5 Dexedrine
6 Dextroamphetamine
7 Didrex
8 Eskatrol
9 Ionamin
10 Mazanor
11 Obedrin - L.A.
12 Plegine
13 Preludin
14 Sanorex
15 Tenuate
DK/REF

ST05 Have you ever, even once, used **any other prescription stimulant**, besides the ones shown on Card C when it was **not** prescribed for you or that you took only for the experience or feeling it caused?

1 Yes
2 No
DK/REF

ST05a [IF ST05 = 1] You have indicated that you have used prescription stimulants **other than the ones on Card C** when they were not prescribed for you or that you took only for the experience or feeling they caused. Type in the name of **one** of the other prescription stimulants you have used. If you're not sure how to spell the name of the stimulant you used, just make your best guess.

When you have finished, press the [ENTER] key to go to the next question. Remember, you do not need to type in the names of any prescription stimulants you already indicated using in the previous questions.

_____
DK/REF

ST05b [IF ST05a NE (BLANK OR DK/REF)] Please type in the name of **any other prescription stimulant** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription stimulants, press the [ENTER] key to go to the next question.

_____
DK/REF

ST05c [IF ST05b NE (BLANK OR DK/REF)] Please type in the name of **any other prescription stimulant** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription stimulants, press the [ENTER] key to go to the next question.

_____
DK/REF

ST05d [IF ST05c NE (BLANK OR DK/REF)] Please type in the name of **any other prescription stimulant** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription stimulants, press the [ENTER] key to go to the next question.

DK/REF

ST05e   [IF ST05d NE (BLANK OR DK/REF)] Please type in the name of **any other prescription stimulant** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription stimulants, press the [ENTER] key to go to the next question.

_____

DK/REF

STREF2 [IF ST01 = REF AND STREF1 = REF AND ST02 = REF AND ST03 = REF AND ST04 = REF AND ST05 = REF]
The information respondents provide about the prescription stimulants they've used that were not prescribed for them or that they took only for the experience or feeling they caused is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used **any type of prescription stimulant** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

ST06   [IF ((ST01 = 1 OR STREF1 = 1) AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1)) OR ((ST01 NE 1 AND STREF1 NE 1) AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1))]
How old were you the **first time** you used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

AGE: _____   [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STST:
        IF ST06 NE (BLANK OR DK/REF) THEN AGE1STST = ST06
        ELSE AGE1STST = BLANK

        IF CURNTAGE < AGE1STST
                STCC01   *The computer recorded that you were **[AGE1STST]** when you first used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?*

                         4   Yes
                         6   No
                         DK/REF

                STCC02   *[IF STCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?*

                         *1   I am currently **[CURNTAGE]** years old*
                         *2   I was **[AGE1STST]** years old the first time I used any prescription stimulant that was not prescribed or that I took only for the experience or feeling it caused*
                         3   Neither answer is correct
                         DK/REF

                STCC03   *[IF STCC02=2 OR STCC02=3] Please answer this question again. What is your **current** age?*

                         AGE: _____
                         DK/REF

                                STCC03a [IF STCC03 < 12] Since you have indicated that you are **[STCC03]** years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

*STCC04. [IF STCC02=1 OR STCC02=3 OR STCC01=6] Please answer this question again. Think about the first time you used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used a prescription stimulant in either of these ways?*

> *AGE: _____ [RANGE: 1 - 110]*
> *DK/REF*

UPDATE: IF STCC04 NOT(BLANK OR DK/REF) THEN AGE1STST = STCC04

UPDATE: IF STCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = STCC03

> IF AGE1STST = CURNTAGE OR AGE1STST <10:
>> *STCC05 The computer recorded that you were **[AGE1STST]** years old the first time you used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?*
>>
>> *4 Yes*
>> *6 No*
>> *DK/REF*
>>
>> *STCC06 [IF STCC05=6] Please answer this question again. Think about the first time you used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used a prescription stimulant in either of these ways?*
>>
>> *AGE: _____ [RANGE: 1 - 110]*
>> *DK/REF*

UPDATE: IF STCC06 NOT(BLANK OR DK/REF) THEN AGE1STST = STCC06

ST07a [IF AGE1STST = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STST = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1 CURRENT YEAR - 1
2 CURRENT YEAR
DK/REF

ST07b [IF AGE1STST = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

1 CURRENT YEAR - 2
2 CURRENT YEAR - 1
DK/REF

ST08a [IF AGE1STST = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

1 January
2 February
3 March
4 April
5 May
6 June
7 July
8 August
9 September
10 October
11 November

12   December
DK/REF

[Note: Insert range check if ST08a > current month].

ST08b   [IF ST07a = 1 OR 2 OR ST07b = 1 OR 2] In what **month** in [YEAR FROM ST07a or ST07b] did you first use any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

ST09   [IF ((ST01 = 1 OR STREF1 = 1) AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1)) OR (ST01 NE 1 AND STREF1 NE 1 AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1))] How long has it been since you **last** used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

STRECDK   [IF ST09 = DK] What is your **best guess** of how long it has been since you **last** used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

STRECRE   [IF ST09 = REF] The information respondents provide about their use of prescription stimulants is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

DEFINE STIMREC:
        IF ST09 = 1 OR STRECDK = 1 OR STRECRE = 1, THEN STIMREC = 1
        IF ST09 = 2 OR STRECDK = 2 OR STRECRE = 2, THEN STIMREC = 2
        IF ST09 = 3 OR STRECDK = 3 OR STRECRE = 3, THEN STIMREC = 3
        ELSE STIMREC = BLANK

ST10   [IF STIMREC = 1] Now think about the past 12 months, from **[FILL DATE]** through today. We want to know how many days you've used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused during the past 12 months.

What would be the easiest way for you to tell us how many days you used a prescription stimulant in either of these ways?

    1   Average number of **days per week** during the past 12 months
    2   Average number of **days per month** during the past 12 months
    3   Total number of days during the past 12 months
    DK/REF

ST11   [IF ST10 = 3 OR DK/REF] On how many days in the past 12 months did you use any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

    TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
    DK/REF

ST12   [IF ST10 = 2 OR ST11 = DK/REF] On average, how many days **each month** during the past 12 months did you use any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

    AVG # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
    DK/REF

ST13   [IF ST10 = 1 OR ST12 = DK/REF] On average, how many days **each week** during the past 12 months did you use any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?

    AVG # OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
    DK/REF

ST14   [IF (ST01 = 1 OR STREF1 = 1) AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1)] Now think only about your use of Methamphetamine, Desoxyn, or Methedrine. How old were you the first time you used Methamphetamine, Desoxyn, or Methedrine?

    [IF (ST01 = 1 OR STREF1 = 1) AND ST02 = 2 OR DK/REF AND ST03 = 2 OR DK/REF AND ST04 = 2 OR DK/REF AND ST05 = 2 OR DK/REF AND STREF2 = 2 OR DK/REF] How old were you the first time you used Methamphetamine, Desoxyn, or Methedrine?

    AGE: _____ [RANGE: 1 - 110]
    DK/REF

DEFINE AGE1STME:
    IF ST14 NE (BLANK OR DK/REF) THEN AGE1STME = ST14
    ELSE AGE1STME = BLANK

    IF CURNTAGE < AGE1STME
        STCC07 *The computer recorded that you were **[AGE1STME]** when you first used Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?*

            4   Yes
            6   No
            DK/REF

        STCC08 *[IF STCC07 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?*

            *1   I am currently **[CURNTAGE]** years old*
            *2   I was **[AGE1STME]** years old the first time I used Methamphetamine, Desoxyn, or Methedrine that was not prescribed or that I took only for the experience or feeling it caused*
            3   Neither answer is correct
            DK/REF

        STCC09 *[IF STCC08=2 OR STCC08=3] Please answer this question again. What is your **current** age?*

AGE: ____
DK/REF

STCC09a *[IF STCC09 < 12] Since you have indicated that you are **[STCC03]** years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

STCC10. *[IF STCC08=1 OR STCC08=3 OR STCC07=6] Please answer this question again. Think about the first time you used Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used Methamphetamine, Desoxyn, or Methedrine in either of these ways?*

AGE: ____ *[RANGE: 1 - 110]*
DK/REF

UPDATE: IF STCC10 NOT(BLANK OR DK/REF) THEN AGE1STME = STCC10

UPDATE: IF STCC09 NOT(BLANK OR DK/REF) THEN CURNTAGE = STCC09

IF AGE1STSME= CURNTAGE OR AGE1STME <10:
STCC11 *The computer recorded that you were **[AGE1STME]** years old the first time you used Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?*

4   *Yes*
6   *No*
DK/REF

STCC12 *[IF STCC11=6] Please answer this question again. Think about the first time you used Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used Methamphetamine, Desoxyn, or Methedrine in either of these ways?*

AGE: ____ *[RANGE: 1 - 110]*
DK/REF

UPDATE: IF STCC12 NOT(BLANK OR DK/REF) THEN AGE1STME = STCC12

IF AGE1STME < AGE1STST:
STCC13 *The answers for the last question and an earlier question disagree. Which answer is correct?*

1   *I was [AGE1STST] the first time I used any prescription stimulant that was not prescribed for me or that I took only for the experience or feeling it caused*
2   *I was **[AGE1STME]** years old the first time I used Methamphetamine, Desoxyn, or Methedrine that was not prescribed or that I took only for the experience or feeling it caused*
3   *Neither answer is correct*
DK/REF

STCC14 *[IF STCC13 = 2 OR STCC13 = 3] Please answer this question again. Think about the first time you used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the first time you used any prescription stimulant in either of these ways?*

AGE: ____ *[RANGE: 1 - 110]*
DK/REF

STCC15 *[IF STCC13 =1 OR STCC13 =3] Please answer this question again. Think about the first time you used Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used Methamphetamine, Desoxyn, or Methedrine in either of these ways?*

AGE: _____ *[RANGE: 1 - 110]*
DK/REF

UPDATE: IF STCC14 NOT (BLANK OR DK/REF) THEN AGE1STST = STCC14

UPDATE: IF STCC15 NOT (BLANK OR DK/REF) THEN AGE1STME = STCC15

ST15   [IF AGE1STME = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STME = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1   CURRENT YEAR - 1
2   CURRENT YEAR
DK/REF

ST16   [IF AGE1STME = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 2] OR [CURRENT YEAR - 1]?

1   CURRENT YEAR - 2
2   CURRENT YEAR - 1
DK/REF

ST17   [IF AGE1STME = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF

[Note: Insert range check if ST14a > current month].

ST18   [IF ST15 = 1 OR 2 OR ST16 = 1 OR 2] In what **month** in [YEAR FROM ST15 or ST16] did you first use Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused?

1   January
2   February
3   March
4   April
5   May
6   June
7   July
8   August
9   September
10   October
11   November
12   December
DK/REF (ST15)

ST19   [IF ST14 NE BLANK] How long has it been since you last used Methamphetamine, Desoxyn, or Methedrine?

1   Within the past 30 days -- that is, since **DATEFILL**
2   More than 30 days ago, but within the past 12 months
3   More than 12 months ago
DK/REF

DEFINE METHREC:
METHREC = ST19

IF METHREC < STIMREC:
STCC16 *The computer recorded that you last used Methamphetamine, Desoxyn, or Methedrine [METHREC FILL]. Is that correct?*

4   Yes
6   No
DK/REF

STCC17 *[IF STCC16=4] The answers for the last question and an earlier question disagree. Which answer is correct?*

*1   I last used any prescription stimulant that was not prescribed or that I took only for the experience or feeling it caused **[ST09/STRECDK/STRECRE FILL]***
*2   I last used Methamphetamine, Desoxyn, or Methedrine **[METHREC FILL]***
3   Neither answer is correct
DK/REF

STCC18 *[IF STCC17 = 2 OR STCC17 = 3] Please answer this question again. How long has it been since you last used any prescription stimulant that was not prescribed for you or that you took only for the experience or feeling it caused?*

*1   Within the past 30 days – that is, since **DATEFILL***
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

STCC19 *[IF STCC16 =6 OR STCC17 = 1 OR STCC17 = 3] Please answer this question again. Think only about Methamphetamine, Desoxyn, and Methedrine. How long has it been since you last used Methamphetamine, Desoxyn, or Methedrine?*

*1   Within the past 30 days – that is, since **DATEFILL***
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

UPDATE: IF STCC18 NOT (BLANK OR DK/REF) THEN STIMREC = STCC18

UPDATE: IF STCC19 NOT (BLANK OR DK/REF) THEN METHREC = STCC19

ST20   [IF METHREC = 1 OR 2] Now think about the past 12 months, from **[FILL DATE]** through today. We want to know how many days you've used Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused during the past 12 months.

What would be the easiest way for you to tell us how many days you used Methamphetamine, Desoxyn, or Methedrine in either of these ways?

1   Average number of **days per week** during the past 12 months
2   Average number of **days per month** during the past 12 months
3   Total number of days during the past 12 months
DK/REF

ST21   [IF ST20 = 3 OR DK/REF] On how many days in the past 12 months did you use Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused?

TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
DK/REF

ST22 [IF ST20 = 2 OR ST21 = DK/REF] On average, how many days **each month** during the past 12 months did you use Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused?

AVG # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

ST23 [IF ST20 = 1 OR ST22 = DK/REF] On average, how many days **each week** during the past 12 months did you use Methamphetamine, Desoxyn, or Methedrine that was not prescribed for you or that you took only for the experience or feeling it caused?

AVG # OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
DK/REF

Sedatives

INTROSV1   These next questions ask about the use of **sedatives or barbiturates**. These drugs are also called "downers," or "sleeping pills." People take these drugs to help them relax or to help them sleep. We are not interested in the use of "over-the-counter" sedatives such as Sominex, Unisom, Nytol, or Benadryl that can be bought in drug stores or grocery stores without a doctor's prescription.

Ask your interviewer to show you Card D.

Press [ENTER] to continue.

INTROSV2   Card D shows pictures of some different kinds of prescription sedatives and lists the names of some others. These pictures show only pills, but we are interested in your use of **any** form of prescription sedatives that were **not** prescribed for you, or that you took only for the experience or feeling they caused.

Please look at Card D carefully as you answer the next questions.

Press [ENTER] to continue.

SV01   Please look at the sedatives shown in Box 1 **above** the red line on Card D.

Have you ever, even once, used **Methaqualone, Sopor, or Quaalude** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

SV02   Please look at the sedatives shown in Box 2.

Have you ever, even once, used **barbiturates such as Nembutal, Pentobarbital, Seconal, Secobarbital, or Butalbital** that were **not** prescribed for you or that you took only for the experience or feeling they caused?

1   Yes
2   No
DK/REF

SV03   Please look at the sedatives shown in Box 3.

Have you ever, even once, used **Restoril or Temazepam** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

SV04   Please look at the sedatives shown **below** the red line on Card D.

Have you ever, even once, used any of these sedatives when they were **not** prescribed for you or that you took only for the experience or feeling they caused?

1   Yes
2   No
DK/REF

SV04a   [IF SV04=1]Which of the sedatives shown **below** the red line on Card A have you used when they were **not** prescribed for you or that you took only for the experience or feeling they caused?

To select more than one drug from the list, press the space bar between each number you type. When you have finished, press [ENTER].

4	Amytal
5	Butisol
6	Chloral Hydrate
7	Dalmane
8	Halcion
9	Phenobarbital
10	Placidyl
11	Tuinal

DK/REF

SV05 Have you ever, even once, used **any other prescription sedative**, besides the ones shown on Card D when it was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

SV05a [IF SV05 = 1] You have indicated that you have used prescription sedatives **other than the ones on Card D** when they were **not** prescribed for you or that you took only for the experience or feeling they caused. Type in the name of **one** of the other prescription sedatives you have used. If you're not sure how to spell the name of the sedative you used, just make your best guess.

When you have finished, press the [ENTER] key to go to the next question. Remember, you do not need to type in the names of any prescription sedatives you already indicated using in the previous questions.

_____

DK/REF

SV05b [IF SV05a NE (BLANK OR DK/REF)] Please type in the name of **any other prescription sedative** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription sedatives, press the [ENTER] key to go to the next question.

_____

DK/REF

SV05c [IF SV05b NE (BLANK OR DK/REF)] Please type in the name of **any other prescription sedative** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription sedatives, press the [ENTER] key to go to the next question.

_____

DK/REF

SV05d [IF SV05c NE (BLANK OR DK/REF)] Please type in the name of **any other prescription sedative** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription sedatives, press the [ENTER] key to go to the next question.

_____

DK/REF

SV05e [IF SV05d NE (BLANK OR DK/REF)] Please type in the name of **any other prescription sedative** you have used when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used any other prescription sedatives, press the [ENTER] key to go to the next question.

_____

DK/REF

SVREF [IF SV01 = REF AND SV02 = REF AND SV03 = REF AND SV04 = REF AND SV05 = REF] The information respondents provide about the prescription sedatives they've used that were not prescribed for them or that they took only for the experience or feeling they caused is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: Have you **ever**, even once, used **any type of prescription sedative** that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

SV06   [IF SV01 = 1 OR SV02 = 1 OR SV03 = 1 OR SV04 = 1 OR SV05 = 1 OR SVREF = 1] How old were you the first time you used any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

AGE: _____ [RANGE: 1 - 110]
DK/REF

DEFINE AGE1STSV:
    IF SV06 NE (BLANK OR DK/REF) THEN AGE1STSV = SV06
    ELSE AGE1STSV = BLANK

    IF CURNTAGE < AGE1STSV
        *SVCC01 The computer recorded that you were [**AGE1STSV**] when you first used any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused. Is this correct?*

            4   Yes
            6   No
            DK/REF

        SVCC02 [IF SVCC01 = 4] The answers for the last question and an earlier question disagree. Which answer is correct?

            *1   I am currently [**CURNTAGE**] years old*
            *2   I was [**AGE1STSV**] years old the first time I used any prescription sedative that was not prescribed or that I took only for the experience or feeling it caused*
            3   Neither answer is correct
            DK/REF

        *SVCC03 [IF SVCC02=2 OR SVCC02=3] Please answer this question again. What is your **current** age?*

            AGE: _____ [RANGE: 1 - 110]
            DK/REF

            *SVCC03a[IF SVCC03 < 12] Since you have indicated that you are [**SVCC03**] years old, we cannot interview you for this study. Please tell your interviewer that you have finished the survey. Thank you for your cooperation. PROGRAM SHOULD ROUTE TO ENDAUDIO.*

        *SVCC04 [IF SVCC02=1 OR SVCC02=3 OR SVCC01=6] Please answer this question again. Think about the first time you used any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used a prescription sedative in either of these ways?*

            AGE: _____ [RANGE: 1 - 110]
            DK/REF

UPDATE: IF SVCC04 NOT(BLANK OR DK/REF) THEN AGE1STSV = SVCC04

UPDATE: IF SVCC03 NOT(BLANK OR DK/REF) THEN CURNTAGE = SVCC03

    IF AGE1STSV = CURNTAGE OR AGE1STSV <10:
        *SVCC05 The computer recorded that you were [**AGE1STSV**] years old the first time you used any prescription sedative that was not prescribed for you or that you took only for the experience or*

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feeling it caused. Is this correct?

    4   Yes
    6   No
    DK/REF

    SVCC06 *[IF SVCC05=6] Please answer this question again. Think about the first time you used any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused. How old were you the **first time** you used a prescription sedative in either of these ways?*

    AGE: _____ [RANGE: 1 - 110]
    DK/REF

UPDATE: IF SVCC06 NOT(BLANK OR DK/REF) THEN AGE1SVSV = SVCC06

SV07a   [IF AGE1STSV = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STSV = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 1] or [CURRENT YEAR]?

    1   CURRENT YEAR - 1
    2   CURRENT YEAR
    DK/REF

SV07b   [IF AGE1STSV = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?

    1   CURRENT YEAR - 2
    2   CURRENT YEAR - 1
    DK/REF

SV08a   IF AGE1STSV = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what **month** in [CURRENT YEAR] did you first use any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

    1   January
    2   February
    3   March
    4   April
    5   May
    6   June
    7   July
    8   August
    9   September
    10   October
    11   November
    12   December
    DK/REF

[Note: Insert range check if SV08a > current month].

SV08b   [IF SV07a = 1 OR 2 OR SV07b = 1 OR 2] In what **month** in [YEAR FROM SV07a or SV07b] did you first use any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

    1   January
    2   February
    3   March
    4   April
    5   May
    6   June
    7   July

8   August
9   September
10   October
11   November
12   December
DK/REF

SV09   [IF SV01 = 1 OR SV02 = 1 OR SV03 = 1 OR SV04 = 1 OR SV05 = 1 OR SVREF = 1] How long has it been since you **last** used any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

SVRECDK   [IF SV09 = DK] What is your **best guess** of how long it has been since you **last** used any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

SVRECRE   [IF SV09 = REF] The information respondents provide about their use of prescription sedatives is very important to the success of this study. We recognize that this information is personal. Please remember that the answers you give will be kept strictly confidential and they will never be linked to your name.

Please reconsider answering this question: How long has it been since you **last** used any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days — that is, since **DATEFILL**
2   More than 30 days ago but within the past 12 months
3   More than 12 months ago
DK/REF

SV10   [IF SV09 = 1 OR 2 OR SVRECDK = 1 OR 2 OR SVRECRE = 1 OR 2] Now think about the past 12 months, from **[FILL DATE]** through today. We want to know how many days you've used any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused during the past 12 months.

What would be the easiest way for you to tell us how many days you used a prescription sedative in either of these ways?

1   Average number of **days per week** during the past 12 months
2   Average number of **days per month** during the past 12 months
3   Total number of days during the past 12 months
DK/REF

SV11   [IF SV10 = 3 OR DK/REF] On how many days in the past 12 months did you use any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

TOTAL # OF DAYS: _____ [RANGE: 1 - 366]
DK/REF

SV12   [IF SV10 = 2 OR SV11= DK/REF] On average, how many days **each month** during the past 12 months did you use any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

AVG # OF DAYS PER MONTH: _____ [RANGE: 1 - 31]
DK/REF

SV13   [IF SV10 = 1 OR SV12 = DK/REF] On average, how many days **each week** during the past 12 months did you use any prescription sedative that was not prescribed for you or that you took only for the experience or feeling it caused?

AVG # OF DAYS PER WEEK: _____ [RANGE: 1 - 7]
DK/REF

Special Drugs

INTROSD   These next questions are about the different ways that certain drugs can be used.

Press [ENTER] to continue.

SD01   [IF HE01 = 1 OR HEREF = 1] Have you **ever**, even once, **smoked** heroin?

1   Yes
2   No
DK/REF

SD02   [IF SD01 = 1] How long as it been since you **last smoked** heroin?

1   within the past 30 days -- that is, since **DATEFILL**
2   more than 30 days ago but within the past 12 months
3   more than 12 months ago
DK/REF

SD03   [IF HE01 = 1 OR HEREF = 1] Have you **ever**, even once, **sniffed** or **"snorted"** heroin powder through your nose?

1   Yes
2   No
DK/REF

SD04   [IF SD03 = 1] How long has it been since you **last sniffed** or "snorted" heroin powder through your nose?

1   within the past 30 days -- that is, since **DATEFILL**
2   more than 30 days ago but within the past 12 months
3   more than 12 months ago
DK/REF

SD08   [IF HE01 = 1 OR HEREF = 1] Have you **ever**, even once, used a needle to inject **heroin**?

1   Yes
2   No
DK/REF

SDHEUSE   [IF SD01 = 2 AND SD03 = 2 AND SD08 = 2] Earlier the computer recorded that you had used heroin. In what way have you used heroin?

To select more than one way, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   You smoked heroin
2   You sniffed or "snorted" heroin
3   You injected heroin with a needle
4   You used heroin some other way
DK/REF

SDHEUSE2   [IF SDHEUSE = 4 ONLY -- NO OTHER CATEGORIES SELECTED] Please use the keyboard to type in the way you have used heroin. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____

DK/REF

SD09   [IF SD08 = 1 OR SDHEUSE = 3] How long has it been since you **last** used a needle to inject **heroin**?

1   Within the past 30 days -- that is, since **DATEFILL**
2   more than 30 days ago but within the past 12 months
3   more than 12 months ago

DK/REF

SD10a   [IF ST01 = 1 OR STREF1 = 1] Have you **ever**, even once, used a needle to inject **Methamphetamine, Desoxyn, or Methedrine** when it was not prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

SD10b   [IF SD10a = 1] How long has it been since you **last** used a needle to inject **Methamphetamine, Desoxyn, or Methedrine** when it was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days -- that is, since **DATEFILL**
2   more than 30 days ago but within the past 12 months
3   more than 12 months ago
DK/REF

SD10c   [IF ST01 = 1 OR STREF1 = 1 AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1)] Have you **ever**, even once, used a needle to inject **any other stimulant** when it was not prescribed for you or that you took only for the experience or feeling it caused?

[IF ST01 = 2 OR DK/REF OR STREF1 = 2 OR DK/REF AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1)] Have you **ever**, even once, used a needle to inject a **stimulant** when it was not prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

SD11   [IF SD10c = 1] How long has it been since you **last** used a needle to inject (**any other stimulant** / any **stimulant**) when it was not prescribed for you or that you took only for the experience or feeling it caused?

1   Within the past 30 days -- that is, since **DATEFILL**
2   more than 30 days ago but within the past 12 months
3   more than 12 months ago
DK/REF

SD06   [IF CC01 = 1 OR CCREF = 1] Have you **ever**, even once, used a needle to inject **cocaine**?

1   Yes
2   No
DK/REF

SD07   [IF SD06 = 1] How long has it been since you **last** used a needle to inject **cocaine**?

1   within the past 30 days -- that is, since **DATEFILL**
2   more than 30 days ago but within the past 12 months
3   more than 12 months ago
          DK/REF

SD05   [IF SD06 = 1 OR SD08 = 1 OR SD10a = 1 OR SD10c = 1 OR SDHEUSE = 3] Have you **ever**, even once, used a needle to inject any other drug that was **not** prescribed for you or that you took only for the experience or feeling it caused?

[IF SD06 NE 1 AND SD08 NE 1 AND SD10a NE 1 AND SD10c NE 1 AND SDHEUSE NE 3] Have you **ever**, even once, used a needle to inject any drug that was **not** prescribed for you or that you took only for the experience or feeling it caused?

1   Yes
2   No
DK/REF

SD05a   [IF SD05 = 1] You have indicated that you have used a needle to inject a drug that was not prescribed for you or that you took only for the experience or feeling it caused. Type in the name of **one** of the drugs you have used a needle to inject. If you're not sure how to spell the name of the drug you used a needle to inject, just make your best guess.

When you have finished, press the [ENTER] key to go to the next question.

_____

DK/REF

SD05b   [IF SD05a NE (BLANK OR DK/REF)] Please type in the name of **any other drug** you have used a needle to inject when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used a needle to inject any other drugs, press the [ENTER] key to go to the next question.

_____

DK/REF

SD05c   [IF SD05c NE (BLANK OR DK/REF)] Please type in the name of **any other drug** you have used a needle to inject when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used a needle to inject any other drugs, press the [ENTER] key to go to the next question.

_____

DK/REF

SD05d   [IF SD05c NE (BLANK OR DK/REF)] Please type in the name of **any other drug** you have used a needle to inject when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used a needle to inject any other drugs, press the [ENTER] key to go to the next question.

_____

DK/REF

SD05e   [IF SD05d NE (BLANK OR DK/REF)] Please type in the name of **any other drug** you have used a needle to inject when it was not prescribed for you or that you took only for the experience or feeling it caused. If you have not used a needle to inject any other drugs, press the [ENTER] key to go to the next question.

_____

DK/REF

SD12   [IF SD08 = 1 OR SDHEUSE = 3 OR SD10a = 1 OR SD10c = 1 OR SD06 = 1 ORSD05 = 1] Think about the **last time** you used a needle for injecting drugs. The last time you used a needle for injecting drugs, were you reusing a needle that **you** had used before?

1   Yes
2   No
DK/REF

SD13   [IF SD08 = 1 OR SDHEUSE = 3 OR SD10a = 1 OR SD10c = 1 OR SD06 = 1 OR SD05 = 1] The **last** time you used a needle for injecting drugs, did you use a needle that you knew or suspected **someone else** had used before?

1   Yes
2   No
DK/REF

SD14   [IF SD08 = 1 OR SDHEUSE = 3 OR SD10a = 1 OR SD10c = 1 OR SD06 = 1 OR SD05 = 1] The **last** time you used a needle for injecting drugs, did you use bleach to clean the needle before you used it?

1   Yes
2   No
DK/REF

SD15   [IF SD08 = 1 OR SDHEUSE = 3 OR SD10a = 1 OR SD10c = 1 OR SD06 = 1 OR SD05 = 1] The **last** time you used a needle for injecting drugs, did someone else use the needle after you?

1   Yes
2   No
DK/REF

SD16   [IF SD08 = 1 OR SDHEUSE = 3 OR SD10a = 1 OR SD10c = 1 OR SD06 = 1 ORSD05 = 1] The **last** time you used a needle for injecting drugs, how did you get the needle?

1   bought the needle from a pharmacy
2   got the needle from a needle exchange
3   bought the needle on the street
4   got the needle in a shooting gallery
5   got the needle some other way
DK/REF

SD16SP [IF SD16 = 5] Please use the keyboard to type a description of how you got the needle you used the last time you used a needle for injecting drugs. You do not need to give a detailed description — just a few words will be sufficient. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

Risk/Availability Section

RKQ1   We are interested in your opinion about the effects of using certain drugs and other substances, about whether it's difficult or easy to get drugs, and the extent to which drugs are available in your neighborhood.

Please indicate how much you think people risk harming themselves physically and in other ways when they do each of the following activities.

If you're not sure, choose an answer for the amount of risk that comes closest to what you think might be true for that activity.

Press [ENTER] to continue.

RK01a   How much do people risk harming themselves physically and in other ways when they smoke **one or more packs of cigarettes per day**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01b   How much do people risk harming themselves physically and in other ways when they smoke **marijuana once a month**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01c   How much do people risk harming themselves physically and in other ways when they smoke **marijuana once or twice a week**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01d   How much do people risk harming themselves physically and in other ways when they try **LSD once or twice**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01e   How much do people risk harming themselves physically and in other ways when they use **LSD once or twice a week**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01f   How much do people risk harming themselves physically and in other ways when they try **heroin once or twice**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk

RK01g   How much do people risk harming themselves physically and in other ways when they use **heroin once or twice a week**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01h   How much do people risk harming themselves physically and in other ways when they use **cocaine once a month**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01i   How much do people risk harming themselves physically and in other ways when they use **cocaine once or twice a week**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01j   How much do people risk harming themselves physically and in other ways when they have **four or five drinks of an alcoholic beverage nearly every day**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RK01k   How much do people risk harming themselves physically and in other ways when they have **five or more drinks of an alcoholic beverage once or twice a week**?

1   No risk
2   Slight risk
3   Moderate risk
4   Great risk
DK/REF

RKQ2   The next questions ask how difficult you think it would be for you to get each of the following types of drugs, if you wanted some.

Press [ENTER] to continue.

RK02a   How difficult or easy would it be for you to get some **marijuana**, if you wanted some?

1   Probably impossible
2   Very difficult
3   Fairly difficult
4   Fairly easy
5   Very easy
DK/REF

RK02b   How difficult or easy would it be for you to get some **LSD**, if you wanted some?

1   Probably impossible
2   Very difficult
3   Fairly difficult
4   Fairly easy
5   Very easy
DK/REF

RK02c   How difficult or easy would it be for you to get some **cocaine**, if you wanted some?

1   Probably impossible
2   Very difficult
3   Fairly difficult
4   Fairly easy
5   Very easy
DK/REF

RK02d   How difficult or easy would it be for you to get some **'crack'**, if you wanted some?

1   Probably impossible
2   Very difficult
3   Fairly difficult
4   Fairly easy
5   Very easy
DK/REF

RK02e   How difficult or easy would it be for you to get some **heroin**, if you wanted some?

1   Probably impossible
2   Very difficult
3   Fairly difficult
4   Fairly easy
5   Very easy
DK/REF

RK03   In the past 30 days, has anyone approached you to sell you an illegal drug?

1   Yes
2   No
DK/REF

RK04a   How often do you get a real kick out of doing things that are a little dangerous?

1   Never
2   Seldom
3   Sometimes
4   Always
DK/REF

RK04b   How often do you like to test yourself by doing something a little risky?

1   Never
2   Seldom
3   Sometimes
4   Always
DK/REF

RK04c   How often do you wear a seatbelt when you ride in the front passenger seat of a car?

1   Never
2   Seldom

3   Sometimes
4   Always
DK/REF

RK04d   How often do you wear a seatbelt when you drive a car?

1   Never
2   Seldom
3   Sometimes
4   Always
5   I don't drive
DK/REF

RK05   Here is a list of things that you may or may not have done during the past 12 months:

Rode with a drunk driver
Walked alone after dark through a dangerous neighborhood
Rode a bicycle without a helmet
Went swimming or played outdoor sports during a lightning storm

How many of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

0   None of these things
1   One of these things
2   Two of these things
3   Three of these things
4   All four of these things
DK/REF

DEFINE ICFILL1:
IF RK05 = 0, THEN ICFILL1 = "none of the things"
IF RK05 = 1 THEN ICFILL1 = "one of the things"

IF RK05 = 2 THEN ICFILL1 = "two of the things"
IF RK05 = 3 THEN ICFILL1 = "three of the things"
IF RK05 = 4 THEN ICFILL1 = "four of the things"
ELSE ICFILL1 = BLANK

RK06   [IF RK05 = 0 - 4] The computer recorded that you did [ICFILL1] from the list below during the past 12 months:

Rode with a drunk driver
Walked alone after dark through a dangerous neighborhood
Rode a bicycle without a helmet
Went swimming or played outdoor sports during a lightning storm

Is that correct?

1   Yes
2   No
DK/REF

RK07   [IF RK06 = 2] Please answer this question again. **How many** of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

Rode with a drunk driver
Walked alone after dark through a dangerous neighborhood
Rode a bicycle without a helmet
Went swimming or played outdoor sports during a lightning storm

0   None of these things
1   One of these things

2   Two of these things
3   Three of these things
4   All four of these things
DK/REF

NOTE: RESPONDENT IS RANDOMLY ASSIGNED TO EITHER SAMPLE A OR SAMPLE B FOR PURPOSES OF RK08 - RK19]

RK08   [IF RANDOM SAMPLE = A] Here is another list of things you may or may not have done during the past 12 months:

      [IF CURNTAGE = 18 OR OLDER] Drove a car more than 100 miles per hour
      [IF CURNTAGE = 12 - 17] Ran away from home and slept on the street
      Gained or lost more than 50 pounds
      [IF CURNTAGE = 18 OR OLDER] Were injured when you tried to stop a fight or an assault
      [IF CURNTAGE = 12 - 17] Were seriously injured in a fight
      Used steroids to become more muscular

How many of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

0   None of these things
1   One of these things
2   Two of these things
3   Three of these things
4   All four of these things
DK/REF

DEFINE ICFILL2:
      IF RK08 = 0, THEN ICFILL2 = "none of the things"
      IF RK08 = 1 THEN ICFILL2 = "one of the things"
      IF RK08 = 2 THEN ICFILL2 = "two of the things"
      IF RK08 = 3 THEN ICFILL2 = "three of the things"
      IF RK08 = 4 THEN ICFILL2 = "four of the things"
      ELSE ICFILL2 = BLANK

RK09   [IF RK08 = 0 - 4] The computer recorded that you did [ICFILL2] from the list below during the past 12 months:

      [IF CURNTAGE = 18 OR OLDER] Drove a car more than 100 miles per hour
      [IF CURNTAGE = 12 - 17] Ran away from home and slept on the street
      Gained or lost more than 50 pounds
      [IF CURNTAGE = 18 OR OLDER] Were injured when you tried to stop a fight or an assault
      [IF CURNTAGE = 12 - 17] Were seriously injured in a fight
      Used steroids to become more muscular

Is that correct?

1   Yes
2   No
DK/REF

RK10   [IF RK09 = 2] Please answer this question again. **How many** of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

      [IF CURNTAGE = 18 OR OLDER] Drove a car more than 100 miles per hour
      [IF CURNTAGE = 12 - 17] Ran away from home and slept on the street
      Gained or lost more than 50 pounds
      [IF CURNTAGE = 18 OR OLDER] Were injured when you tried to stop a fight or an assault
      [IF CURNTAGE = 12 - 17] Were seriously injured in a fight
      Used steroids to become more muscular

0   None of these things
1   One of these things
2   Two of these things
3   Three of these things
4   All four of these things
DK/REF

RK11   [IF RANDOM SAMPLE = A] Here is another list of things you may or may not have done during the past 12 months**:**
        Crossed railroad tracks when a train was coming and almost got hit by the train
        Used laxatives or vomited on purpose in order to keep your weight down
        [IF CURNTAGE = 18 OR OLDER] Passed another vehicle when you knew it was not safe to pass
        [IF CURNTAGE = 12 - 17] Hacked into a government computer system
        Used cocaine, in any form, one or more times
        Was careless and set a large or serious fire with a cigarette or a match

How many of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

0   None of these things
1   One of these things
2   Two of these things
3   Three of these things
4   Four of these things
5   All five of these things
DK/REF

DEFINE ICFILL3:
        IF RK11 = 0, THEN ICFILL3 = "none of the things"
        IF RK11 = 1 THEN ICFILL3 = "one of the things"
        IF RK11 = 2 THEN ICFILL3 = "two of the things"
        IF RK11 = 3 THEN ICFILL3 = "three of the things"
        IF RK11 = 4 THEN ICFILL3 = "four of the things"
        IF RK11 = 5 THEN ICFILL3 = "five of the things"
        ELSE ICFILL3 = BLANK

RK12   [IF RK11 = 0 - 4] The computer recorded that you did [ICFILL3] from the list below during the past 12 months:

        Crossed railroad tracks when a train was coming and almost got hit by the train
        Used laxatives or vomited on purpose in order to keep your weight down
        [IF CURNTAGE = 18 OR OLDER] Passed another vehicle when you knew it was not safe to pass
        [IF CURNTAGE = 12 - 17] Hacked into a government computer system
        Used cocaine, in any form, one or more times
        Was careless and set a large or serious fire with a cigarette or a match

Is that correct?

1   Yes
2   No
DK/REF

RK13   [IF RK12 = 2] Please answer this question again. **How many** of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

        Crossed railroad tracks when a train was coming and almost got hit by the train
        Used laxatives or vomited on purpose in order to keep your weight down
        [IF CURNTAGE = 18 OR OLDER] Passed another vehicle when you knew it was not safe to pass
        [IF CURNTAGE = 12 - 17] Hacked into a government computer system

Used cocaine, in any form, one or more times
Was careless and set a large or serious fire with a cigarette or a match

0	None of these things
1	One of these things
2	Two of these things
3	Three of these things
4	Four of these things
5	All five of these things

DK/REF

RK14   [IF RANDOM SAMPLE = B] Here is another list of things you may or may not have done during the past 12 months:
Crossed railroad tracks when a train was coming and almost got hit by the train
Used laxatives or vomited on purpose in order to keep your weight down
[IF CURNTAGE = 18 OR OLDER] Passed another vehicle when you knew it was not safe to pass
[IF CURNTAGE = 12 - 17] Hacked into a government computer system
Was careless and set a large or serious fire with a cigarette or a match

How many of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

0	None of these things
1	One of these things
2	Two of these things
3	Three of these things
4	All four of these things

DK/REF

DEFINE ICFILL4:
IF RK14 = 0, THEN ICFILL4 = "none of the things"
IF RK14 = 1 THEN ICFILL4 = "one of the things"
IF RK14 = 2 THEN ICFILL4 = "two of the things"
IF RK14 = 3 THEN ICFILL4 = "three of the things"
IF RK14 = 4 THEN ICFILL4 = "four of the things"
ELSE ICFILL4 = BLANK

RK15   [IF RK14 = 0 - 4] The computer recorded that you did [ICFILL4] from the list below during the past 12 months:

Crossed railroad tracks when a train was coming and almost got hit by the train
Used laxatives or vomited on purpose in order to keep your weight down
[IF CURNTAGE = 18 OR OLDER] Passed another vehicle when you knew it was not safe to pass
[IF CURNTAGE = 12 - 17] Hacked into a government computer system
Was careless and set a large or serious fire with a cigarette or a match

Is that correct?

1	Yes
2	No

DK/REF

RK16   [IF RK15 = 2] Please answer this question again. **How many** of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

Crossed railroad tracks when a train was coming and almost got hit by the train
Used laxatives or vomited on purpose in order to keep your weight down
[IF CURNTAGE = 18 OR OLDER] Passed another vehicle when you knew it was not safe to pass
[IF CURNTAGE = 12 - 17] Hacked into a government computer system
Was careless and set a large or serious fire with a cigarette or a match

0	None of these things
1	One of these things

2   Two of these things
3   Three of these things
4   All four of these things
DK/REF

RK17   [IF RANDOM SAMPLE = B] Here is another list of things you may or may not have done during the past 12 months**:**

        [IF CURNTAGE = 18 OR OLDER] Drove a car more than 100 miles per hour
        [IF CURNTAGE = 12 - 17] Ran away from home and slept on the street
        Gained or lost more than 50 pounds
        [IF CURNTAGE = 18 OR OLDER] Were injured when you tried to stop a fight or an assault
        [IF CURNTAGE = 12 - 17] Were seriously injured in a fight
        Used cocaine, in any form, one or more times
        Used steroids to become more muscular

How many of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

0   None of these things
1   One of these things
2   Two of these things
3   Three of these things
4   Four of these things
5   All five of these things
DK/REF

DEFINE ICFILL5:
        IF RK17 = 0, THEN ICFILL5 = "none of the things"
        IF RK17 = 1 THEN ICFILL5 = "one o f the things"
        IF RK17 = 2 THEN ICFILL5 = "two of the things"
        IF RK17 = 3 THEN ICFILL5 = "three of the things"
        IF RK17 = 4 THEN ICFILL5 = "four of the things"
        IF RK17 = 5 THEN ICFILL5 = "five of the things"
        ELSE ICFILL5 = BLANK

RK18   [IF RK17 = 0 - 5] The computer recorded that you did [ICFILL5] from the list below during the past 12 months:

        [IF CURNTAGE = 18 OR OLDER] Drove a car more than 100 miles per hour
        [IF CURNTAGE = 12 - 17] Ran away from home and slept on the street
        Gained or lost more than 50 pounds
        [IF CURNTAGE = 18 OR OLDER] Were injured when you tried to stop a fight or an assault
        [IF CURNTAGE = 12 - 17] Were seriously injured in a fight
        Used cocaine, in any form, one or more times
        Used steroids to become more muscular

Is that correct?

1   Yes
2   No
DK/REF

RK19   [IF RK18 = 2] Please answer this question again. **How many** of the things on this list did you do during the past 12 months, that is, since [DATE FILL]?

        [IF CURNTAGE = 18 OR OLDER] Drove a car more than 100 miles per hour
        [IF CURNTAGE = 12 - 17] Ran away from home and slept on the street
        Gained or lost more than 50 pounds
        [IF CURNTAGE = 18 OR OLDER] Were injured when you tried to stop a fight or an assault
        [IF CURNTAGE = 12 - 17] Were seriously injured in a fight

Used cocaine, in any form, one or more times
Used steroids to become more muscular

0   None of these things
1   One of these things
2   Two of these things
3   Three of these things
4   Four of these things
5   All five of these things
DK/REF

Specialty Cigarettes

SPCIG01   The next questions are about bidis, or "beedies," which are small brown cigarettes from India consisting of tobacco wrapped in a leaf and tied with a thread.

Have you **ever** smoked part or all of a bidi?

1   Yes
2   No
DK/REF

SPCIG02   [IF SPCIG01 = 1] Now think about the past 30 days, from [DATE FILL] up to and including today. During the past 30 days, have you smoked part or all of a bidi?

1   Yes
2   No
DK/REF

SPCIG03   [IF SPCIG02 = 2] How long has it been since you **last** smoked part or all of a bidi?

1   More than 30 days ago, but within the past 12 months
2   More than 12 months ago, but within the past 3 years
3   More than 3 years ago
DK/REF

SPCIG04   [IF SPCIG02 = 1] During the past 30 days, that is, since [DATE FILL], on how many **days** did you smoke part or all of a bidi?

# of days: _____ [RANGE: 0 - 30]
DK/REF

SPCIG05   The next questions are about clove cigarettes, which are cigarettes containing tobacco and clove flavoring. Some common brands of clove cigarettes are Djarum, Gudang Garam, and Sampoerna.

Have you **ever** smoked part or all of a clove cigarette?

1   Yes
2   No
DK/REF

SPCIG06   [IF SPCIG05 = 1] Now think about the past 30 days, from [DATE FILL] up to and including today. During the past 30 days, have you smoked part or all of a clove cigarette?

1   Yes
2   No
DK/REF

SPCIG07   [IF SPCIG06 = 2] How long has it been since you **last** smoked part or all of a clove cigarette?

1   More than 30 days ago, but within the past 12 months
2   More than 12 months ago, but within the past 3 years
3   More than 3 years ago
DK/REF

SPCIG08   [IF SPCIG06 = 1] During the past 30 days, that is, since [DATE FILL], on how many **days** did you smoke part or all of a clove cigarette?

# of days: _____ [RANGE: 0 - 30]
DK/REF

Definitions for Use in the Drugs Module

DEFINE CIG30DAY:
    IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1 THEN CIG30DAY = 1
    ELSE CIG30DAY = 2

DEFINE ALC12MON:
    IF (ALLAST3 = 1 OR 2 OR ALRECDK = 1 OR 2 OR ALRECRE = 1 OR 2) AND TOTDRINK = DK/REF,
        THEN ALC12MON = 1
    ELSE TOTDRINK > 5, THEN ALC12MON = 2
    ELSE ALCC30 > 5 OR ALCC29b = 3 - 6 OR ALCC29a > 5 OR (AL08 >5 AND ALCC27 = 4) OR AL06 >
    5 OR ESTIALC > 2, THEN ALC12MON = 3
    ELSE, ALC12MON = 4

DEFINE MAR12MON:
    IF (MJLAST3 = 1 OR 2 OR MJRECDK = 1 OR 2 OR MJRECRE = 1 OR 2) AND TOTMJ = DK/REF,
        THEN MAR12MON = 1
    ELSE TOTMJ > 5, THEN MAR12MON = 2
    ELSE MJCC16 > 5 OR MJCC13a > 5 OR MJC13b = 3 - 6 OR (MJ06 > 5 AND MJCC07a = 4) OR
        (MJ06DKRE = 3 - 6 AND MJCC07b = 4), THEN MAR12MON = 3
    ELSE MAR12MON = 4

DEFINE COC12MON:
    IF CCLAST3 = 1 OR 2 OR CCRECDK = 1 OR 2 OR CCRECRE = 1 OR 2 OR SD07 = 1 OR 2, THEN
    COC12MON = 1
    ELSE COC12MON = 2

DEFINE CRK12MON:
    IF CKLAST3 = 1 OR 2 OR CKRECDK = 1 OR 2 OR CKRECRE = 1 OR 2, THEN CRK12MON = 1
    ELSE CRK12MON = 2

DEFINE HER12MON:
    IF HELAST3 = 1 OR 2 OR HERECDK = 1 OR 2 OR HERECRE = 1 OR 2 OR SD02 = 1 OR 2 OR SD04 =
    1 OR 2 OR SD09 = 1 OR 2, THEN HER12MON = 1
    ELSE HER12MON = 2

DEFINE HAL12MON:
    IF HALLREC = 1 OR 2 OR LSDREC = 1 OR 2 OR PCPREC = 1 OR 2 OR ECSTREC = 1 OR 2, THEN
    HAL12MON = 1
    ELSE HAL12MON = 2

DEFINE INH12MON:
    IF INLAST = 1 OR 2 OR INRECDK = 1 OR 2 OR INRECRE = 1 OR 2, THEN INH12MON = 1
    ELSE INH12MON = 2

DEFINE PAI12MON:
    IF PR09 = 1 OR 2 OR PRRECDK = 1 OR 2 OR PRRECRE = 1 OR 2, THEN PAI12MON = 1
    ELSE PAI12MON = 2

DEFINE TRA12MON:
    IF TR09 = 1 OR 2 OR TRRECDK = 1 OR 2 OR TRRECRE = 1 OR 2, THEN TRA12MON = 1
    ELSE TRA12MON = 2

DEFINE STI12MON:
    IF STIMREC = 1 OR 2 OR METHREC = 1 OR 2 OR SD11 = 1 OR 2, THEN STI12MON= 1
    ELSE STI12MON = 2

DEFINE SED12MON
    IF SV09 = 1 OR 2 OR SVRECDK = 1 OR 2 OR SVRECRE = 1 OR 2, THEN SED12MON = 1
    ELSE SED12MON = 2

Drug Dependence and Withdrawal

INTRODR   [IF CIG30DAY = 1 OR ALC12MON = 1 OR 2 OR 3 OR MAR12MON = 1 OR 2 OR 3 OR COC12MON = 1 OR CRK12MON = 1 OR HER12MON = 1 OR HAL12MON = 1 OR INH12MON = 1 OR PAI12MON = 1 OR TRA12MON = 1 OR STI12MON = 1 OR SED12MON =] Now we'd like for you to tell us about your experiences with the

[CIG30DAY = 1 AND ALC12MON = 4 AND (MAR12MON = 4 AND COC12MON = 2 AND CRK12MON = 2 AND HER12MON = 2 AND HAL12MON = 2 AND INH12MON = 2 AND PAI12MON = 2 AND TRA12MON = 2 AND STI12MON = 2 AND SED12MON = 2)] cigarettes you smoked.

[CIG30DAY = 1 AND ALC12MON = 1 OR 2 OR 3 AND (MAR12MON = 4 AND COC12MON = 2 AND CRK12MON = 2 AND HER12MON = 2 AND HAL12MON = 2 AND INH12MON = 2 AND PAI12MON = 2 AND TRA12MON = 2 AND STI12MON = 2 AND SED12MON = 2)] cigarettes you smoked and the alcohol you drank.

[CIG30DAY = 2 AND ALC12MON =1 OR 2 OR 3 AND (MAR12MON = 4 AND COC12MON = 2 AND CRK12MON = 2 AND HER12MON = 2 AND HAL12MON = 2 AND INH12MON = 2 AND PAI12MON = 2 AND TRA12MON = 2 AND STI12MON = 2 AND SED12MON = 2)] alcohol you drank.

[CIG30DAY = 1 AND ALC12MON = 4 AND (MAR12MON = 1 OR 2 OR 3 OR COC12MON = 1 OR CRK12MON =1 O2 HER12MON = 1 OR HAL12MON = 1 OR INH12MON = 1 OR PAI12MON = 1 OR TRA12MON = 1 OR STI12MON = 1 OR SED12MON = 1)] cigarettes you smoked and the other drugs that you used.

[CIG30DAY = 2 AND ALC12MON = 1 OR 2 OR 3 OR AND (MAR12MON = 1 OR 2 OR 3 OR COC12MON = 1 OR CRK12MON =1 O2 HER12MON = 1 OR HAL12MON = 1 OR INH12MON = 1 OR PAI12MON = 1 OR TRA12MON = 1 OR STI12MON = 1 OR SED12MON = 1)] alcohol you drank and the other drugs that you used.

[CIG30DAY = 1 AND ALC12MON = 1 OR 2 OR 3 AND (MAR12MON = 1 OR 2 OR 3 OR COC12MON = 1 OR CRK12MON =1 O2 HER12MON = 1 OR HAL12MON = 1 OR INH12MON = 1 OR PAI12MON = 1 OR TRA12MON = 1 OR STI12MON = 1 OR SED12MON = 1)]cigarettes you smoked, the alcohol you drank, and the other drugs that you used.

[CIG30DAY = 2 AND ALC12MON = 4 AND (MAR12MON = 1 OR 2 OR 3 OR COC12MON = 1 OR CRK12MON =1 O2 HER12MON = 1 OR HAL12MON = 1 OR INH12MON = 1 OR PAI12MON = 1 OR TRA12MON = 1 OR STI12MON = 1 OR SED12MON = 1)]drugs that you used.

Press [ENTER] to continue.

DRCIG [IF CIG30DAY = 1] Think about your use of **cigarettes** during the past 30 days as you answer these next questions.

Press [ENTER] to continue.

DRCGE01   [IF CIG30DAY=1] Please think about how true each statement is **of you**.

After not smoking for a while, you need to smoke in order to feel less restless and irritable.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE02   [IF CIG30DAY=1] When you don't smoke for a few hours, you start to crave cigarettes.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true

5 Extremely true
DK/REF

DRCGE03 [IF CIG30DAY=1] You sometimes have strong cravings for a cigarette where it feels like you're in the grip of a force you can't control.

1 Not at all true
2 Somewhat true
3 Moderately true
4 Very true
5 Extremely true
DK/REF

DRCGE04 [IF CIG30DAY=1] You feel a sense of control over your smoking — that is, you can "take it or leave it" at any time.

1 Not at all true
2 Somewhat true
3 Moderately true
4 Very true
5 Extremely true
DK/REF

DRCGE05 [IF CIG30DAY=1] You tend to avoid places that don't allow smoking, even if you would otherwise enjoy them.

1 Not at all true
2 Somewhat true
3 Moderately true
4 Very true
5 Extremely true
DK/REF

DRCGE06a [IF CIG30DAY=1] Do you have any friends who do **not** smoke cigarettes?

1 Yes
2 No
DK/REF

DRCGE06b [IF CGE6A = 1] There are times when you choose not to be around your friends who don't smoke because they won't like it if you smoke.

1 Not at all true
2 Somewhat true
3 Moderately true
4 Very true
5 Extremely true
DK/REF

DRCGE07 [IF CIG30DAY=1] Even if you're traveling a long distance, you'd rather not travel by airplane because you wouldn't be allowed to smoke.

1 Not at all true
2 Somewhat true
3 Moderately true
4 Very true
5 Extremely true
DK/REF

DRCGE08 [IF CIG30DAY=1] You sometimes worry that you will run out of cigarettes.

1 Not at all true

2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE09   [IF CIG30DAY=1] You smoke cigarettes fairly regularly throughout the day.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE10   [IF CIG30DAY=1] You smoke about the same amount on weekends as on weekdays.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE11   [IF CIG30DAY=1] You smoke just about the same number of cigarettes from day to day.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE12   [IF CIG30DAY=1] It's hard to say how many cigarettes you smoke per day because the number often changes.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE13   [IF CIG30DAY=1] It's normal for you to smoke several cigarettes in an hour, then not have another one until hours later.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE14   [IF CIG30DAY=1] The number of cigarettes you smoke per day is often influenced by other things -- how you're feeling, or what you're doing, for example.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE15   [IF CIG30DAY=1] Your smoking is not affected much by other things. For example, you smoke about the same amount whether you're relaxing or working, happy or sad, alone or with others.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE16   [IF CIG30DAY=1] Since you started smoking, the amount you smoke has increased.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE17   [IF CIG30DAY=1] Compared to when you first started smoking, you need to smoke a lot more now in order to be satisfied.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE18   [IF CIG30DAY=1] Compared to when you first started smoking, you can smoke much, much more now before you start to feel anything.

1   Not at all true
2   Somewhat true
3   Moderately true
4   Very true
5   Extremely true
DK/REF

DRCGE19a   [IF CIG30DAY=1 AND CG07=30] How soon after you wake up do you have your first cigarette?

1   Within the first 5 minutes after you wake up
2   Between 6 and 30 minutes after you wake up
3   Between 31 and 60 minutes after you wake up
4   More than 60 minutes after you wake up
DK/REF

DRCGE19b   [IF CIG30DAY=1 AND CG07 = 1 - 29]   On the days that you smoke, how soon after you wake up do you have your first cigarette?

1   Within the first 5 minutes after you wake up
2   Between 6 and 30 minutes after you wake up
3   Between 31 and 60 minutes after you wake up
4   More than 60 minutes after you wake up
DK/REF

DRCIG18   [IF CIG30DAY = 1 AND CURNTAGE = 18 OR OLDER] Do you buy your **cigarettes** by the pack or by the carton?

1   Pack
2   Carton
DK/REF

DRCIG19   [IF DRCIG18 = 1] What was the price you paid for the last pack of **cigarettes** you bought?

1   Less than $1.00
2       $1.00 - $1.50
3       $1.51 - $2.00
4       $2.01 - $2.50
5       $2.51 - $3.00
6       $3.01 - $3.50
7       $3.51 - $4.00
8       $4.01 - $4.50
9       $4.51 - $5.00
10   More than $5.00
DK/REF

DRCIG20   [IF DRCIG18 = 2] What was the price you paid for the last carton of **cigarettes** you bought?

1   Less than $10.00
2       $10.00 - $13.00
3       $13.01 - $16.00
4       $16.01 - $19.00
5       $19.01 - $22.00
6       $22.01 - $25.00
7       $25.01 - $28.00
8       $28.01 - $31.00
9       $31.01 - $34.00
10      $34.01 - $37.00
11      $37.01 - $40.00
12      $40.01 - $43.00
13      $43.01 - $46.00
14      $46.01 - $49.00
15   More than $49.00
DK/REF

DRALC [IF ALC12MON = 1 - 3] Think about your use of **alcohol** during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DRALC01   [IF ALC12MON = 1 - 3] During the past 12 months, was there a month or more when you spent a lot of your time getting or drinking **alcohol**?

1   Yes
2   No
DK/REF

DRALC02   [IF DRALC01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of time getting over the effects of the **alcohol** you drank?

1   Yes
2   No
DK/REF

DRALC04   [IF ALC12MON = 1 - 3] During the past 12 months, did you try to set limits on how often or how much **alcohol** you would drink?

1   Yes
2   No
DK/REF

DRALC05   [IF DRALC04 = 1] Were you able to keep to the limits you set, or did you often drink more than you intended to?

1	Usually kept to the limits set
2	Often drank more than intended
DK/REF	

DRALC06   [IF ALC12MON = 1 - 3] During the past 12 months, did you need to drink more **alcohol** than you used to in order to get the effect you wanted?

1	Yes
2	No
DK/REF	

DRALC07   [IF DRALCO6=2 OR DK/REF] During the past 12 months, did you notice that drinking the same amount of **alcohol** had less effect on you than it used to?

1	Yes
2	No
DK/REF	

DRALC08   [IF ALC12MON = 1 - 3] During the past 12 months, did you **want to** or **try to** cut down **or** stop drinking **alcohol**?

1	Yes
2	No
DK/REF	

DRALC09   [IF DRALC08 = 1] During the past 12 months, were you **able to** cut down or stop drinking **alcohol every time** you wanted to or tried to?

1	Yes
2	No
DK/REF	

DRALC10   [IF IF DRALC08 = 2 OR DK/REF OR DRALC09 = 2 OR DK/REF] During the past 12 months, did you cut down or stop drinking **at least one time**?

1	Yes
2	No
DK/REF	

DRALC11   [IF DRALC09 = 1 OR DRALC10 = 1] Please look at the symptoms listed below. During the past 12 months, did you have **2 or** more of these symptoms after you cut back or stopped drinking **alcohol**?

- Sweating or feeling that your heart was beating fast
- Having your hands tremble
- Having trouble sleeping
- Vomiting or feeling nauseous
- Seeing, hearing, or feeling things that weren't really there
- Feeling like you couldn't sit still
- Feeling anxious
- Having seizures or fits

1	Yes
2	No
DK/REF	

DRALC12   [IF DRALC11 = 1] Please look at the symptoms listed below. During the past 12 months, did you have **2 or more of these symptoms at the same time** that lasted for longer than a day after you cut back or stopped drinking **alcohol**?

- Sweating or feeling that your heart was beating fast
- Having your hands tremble

- Having trouble sleeping
- Vomiting or feeling nauseous
- Seeing, hearing, or feeling things that weren't really there
- Feeling like you couldn't sit still
- Feeling anxious
- Having seizures or fits

1   Yes
2   No
DK/REF

DRALC13   [IF ALC12MON = 1 - 3] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by drinking **alcohol**?

1   Yes
2   No
DK/REF

DRALC14   [IF DRALC13 = 1] Did you continue to drink **alcohol** even though you thought drinking was causing you to have problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRALC15   [IF DRALC13 = 2 OR DK/REF OR DRALC14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by drinking **alcohol**?

1   Yes
2   No
DK/REF

DRALC16   [IF DRALC15 = 1] Did you continue to drink **alcohol** even though you thought drinking was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRALC17   [IF ALC12MON = 1 - 3] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did drinking **alcohol** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRALC18   [IF ALC12MON = 1 - 3] Sometimes people who drink **alcohol** have serious problems at home, work or school — such as:

- neglecting their children
- missing work or school
- doing a poor job at work or school
- losing a job or dropping out of school

During the past 12 months, did drinking **alcohol** cause you to have serious problems like this either at home, work, or school?

1   Yes

2   No

DK/REF

DRALC19   [IF ALC12MON = 1 - 3] During the past 12 months, did you regularly drink **alcohol** and then do something where being drunk might have put you in physical danger?

1   Yes
2   No
DK/REF

DRALC20   [IF ALC12MON = 1 - 3] During the past 12 months, did drinking **alcohol** cause you to do things that repeatedly got you in trouble with the law?

1   Yes
2   No
DK/REF

DRALC21   [IF ALC12MON = 1 - 3] During the past 12 months, did you have any problems with family or friends that were probably caused by your drinking?

1   Yes
2   No
DK/REF

DRALC22   [IF DRALC21 = 1] Did you continue to drink **alcohol** even though you thought your drinking caused problems with family or friends?

1   Yes
2   No
DK/REF

DRMJ   [IF MAR12MON = 1 - 3] Think about your use of **marijuana or hashish** during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DRMJ01 [IF MAR12MON= 1 - 3] During the past 12 months, was there a month or more when you spent a lot of your time getting or using **marijuana or hashish**?

1   Yes
2   No
DK/REF

DRMJ02 [IF DRMJ01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **marijuana or hashish** you used?

1   Yes
2   No
DK/REF

DRMJ04 [IF MAR12MON= 1 - 3] During the past 12 months, did you try to set limits on how often or how much **marijuana or hashish** you would use?

1   Yes
2   No
DK/REF

DRMJ05 [IF DRMJ04 = 1] Were you able to keep to the limits you set, or did you often use **marijuana or hashish** more than you intended to?

1   Usually kept to the limits set
2   Often used more than intended

DRMJ06 [IF MAR12MON = 1 - 3] During the past 12 months, did you need to use more **marijuana or hashish** than you used to in order to get the effect you wanted?

1   Yes
2   No
DK/REF

DRMJ07 [IF DRMJ06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **marijuana or hashish** had less effect on you than it used to?

1   Yes
2   No
DK/REF

DRMJ08 [IF MAR12MON= 1 - 3] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **marijuana or hashish**?

1   Yes
2   No
DK/REF

DRMJ09 [IF DRMJ08 = 1] During the past 12 months, were you **able to** cut down or stop using **marijuana or hashish every time** you wanted to or tried to?

1   Yes
2   No
DK/REF

DRMJ13 [IF MAR12MON= 1 - 3] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **marijuana or hashish**?

1   Yes
2   No
DK/REF

DRMJ14 [IF DRMJ13 = 1] Did you continue to use **marijuana or hashish** even though you thought it was causing you to have problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRMJ15 [IF DRMJ13 = 2 OR DK/REF OR DRMJ14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **marijuana or hashish**?

1   Yes
2   No
DK/REF

DRMJ16 [IF DRMJ15 = 1] Did you continue to use **marijuana or hashish** even though you thought it was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRMJ17 [IF MAR12MON= 1 - 3] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **marijuana or hashish** cause you to give up or spend less time doing these types of important activities?

1 Yes
2 No
DK/REF

DRMJ18 [IF MAR12MON= 1 - 3] Sometimes people who use **marijuana or hashish** have serious problems at home, work or school — such as:

   - neglecting their children
   - missing work or school
   - doing a poor job at work or school
   - losing a job or dropping out of school

During the past 12 months, did using **marijuana or hashish** cause you to have serious problems like this either at home, work, or school?

1 Yes
2 No
DK/REF

DRMJ19 [IF MAR12MON= 1 - 3] During the past 12 months, did you regularly use **marijuana or hashish** and then do something where using **marijuana or hashish** might have put you in physical danger?

1 Yes
2 No
DK/REF

DRMJ20 [IF MAR12MON= 1 - 3] During the past 12 months, did using **marijuana or hashish** cause you to do things that repeatedly got you in trouble with the law?

1 Yes
2 No
DK/REF

DRMJ21 [IF MAR12MON= 1 - 3] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **marijuana or hashish**?

1 Yes
2 No
DK/REF

DRMJ22 [IF DRMJ21 = 1] Did you continue to use **marijuana or hashish** even though you thought it caused problems with family or friends?

1 Yes
2 No
DK/REF

DRCC [IF COC12MON = 1 OR CRK12MON = 1] Think about your use of **cocaine** ([IF CRK12MON = 1] **, including the form of cocaine called "crack"**) during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DEFINE COKEFILL:
  IF 12 MONCC = 1 AND CRK12MON NE 1, THEN COKEFILL = 'cocaine'
  IF COC12MON = 1 AND CRK12MON = 1 THEN COKEFILL = 'cocaine or "crack"'
  IF COC12MON 1 AND CRK12MON = 1 THEN COKEFILL = '"crack"'
  ELSE COKEFILL = BLANK

DRCC01 [IF COC12MON = 1 OR CRK12MON = 1] During the past 12 months, was there a month or more when you spent a

lot of your time getting or using **[COKEFILL]**?

    1   Yes
    2   No
    DK/REF

DRCC02 [IF DRCC01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **[COKEFILL]** you used?

    1   Yes
    2   No
    DK/REF

DRCC04 [IF COC12MON = 1 OR CRK12MON = 1] During the past 12 months, did you try to set limits on how often or how much **[COKEFILL]** you would use?

    1   Yes
    2   No
    DK/REF

DRCC05 [IF DRCC04 = 1] Were you able to keep to the limits you set, or did you often use **[COKEFILL]** more than you intended to?

    1   Usually kept to the limits set
    2   Often used more than intended
    DK/REF

DRCC06 [IF COC12MON = 1 OR CRK12MON = 1] During the past 12 months, did you need to use more **[COKEFILL]** than you used to in order to get the effect you wanted?

    1   Yes
    2   No
    DK/REF

DRCC07 [IF DRCC06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **[COKEFILL]** had less effect on you than it used to?

    1   Yes
    2   No
    DK/REF

DRCC08 [IF COC12MON = 1 OR CRK12MON = 1] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **[COKEFILL]**?

    1   Yes
    2   No
    DK/REF

DRCC09 [IF DRCC08 = 1] During the past 12 months, were you **able to** cut down or stop using **[COKEFILL] every time** you wanted to or tried to?

    1   Yes
    2   No
    DK/REF

DRCC10 [IF DRCC8 = 2 OR DK/REF OR DRCC9 = 2 OR DK/REF] During the past 12 months, did you cut down or stop using **[COKEFILL] at least one time**?

    1   Yes
    2   No
    DK/REF

DRCC10a   [IF DRCC09 = 1 OR DRCC10 = 1] During the past 12 months, have you felt kind of blue or down when you cut down or stopped using **[COKEFILL]**?

    1   Yes
    2   No
    DK/REF

DRCC11 [IF DRCC10a = 1] Please look at the symptoms listed below. During the past 12 months, did you have **2 or more** of these symptoms after you cut back or stopped using **[COKEFILL]**?

    •   Feeling tired or exhausted
    •   Having bad dreams
    •   Having trouble sleeping or sleeping more than you normally do
    •   Feeling hungry more often
    •   Feeling either very slowed down or like you couldn't sit still

    1   Yes
    2   No
    DK/REF

DRCC12 [IF DRCC11 = 1] Please look at the symptoms listed below. During the past 12 months, did you have **2 or more of these symptoms at the same time** that lasted for longer than a day after you cut back or stopped using **[COKEFILL]**?

    •   Feeling tired or exhausted
    •   Having bad dreams
    •   Having trouble sleeping or sleeping more than you normally do
    •   Feeling hungry more often
    •   Feeling either very slowed down or like you couldn't sit still

    1   Yes
    2   No
    DK/REF

DRCC13 [IF COC12MON = 1 OR CRK12MON = 1] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **[COKEFILL]**?

    1   Yes
    2   No
    DK/REF

DRCC14 [IF DRCC13 = 1] Did you continue to use **[COKEFILL]** even though you thought it was causing you to have problems with your emotions, nerves, or mental health?

    1   Yes
    2   No
    DK/REF

DRCC15 [IF DRCC13 = 2 OR DK/REF OR DRCC14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **[COKEFILL]**?

    1   Yes
    2   No
    DK/REF

DRCC16 [IF DRCC15 = 1] Did you continue to use **[COKEFILL]** even though you thought it was causing you to have physical problems?

    1   Yes
    2   No
    DK/REF

DRCC17 [IF COC12MON = 1 OR CRK12MON = 1] This question is about important activities such as working, going to

school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **[COKEFILL]** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRCC18 [IF COC12MON = 1 OR CRK12MON = 1] Sometimes people who use **[COKEFILL]** have serious problems at home, work or school — such as:

- neglecting their children
- missing work or school
- doing a poor job at work or school
- losing a job or dropping out of school

During the past 12 months, did using **[COKEFILL]** cause you to have serious problems like this either at home, work, or school?

1   Yes
2   No
DK/REF

DRCC19 [IF COC12MON = 1 OR CRK12MON = 1] During the past 12 months, did you regularly use **[COKEFILL]** and then do something where using **[COKEFILL]** might have put you in physical danger?

1   Yes
2   No
DK/REF

DRCC20 [IF COC12MON = 1 OR CRK12MON = 1] During the past 12 months, did using **[COKEFILL]** cause you to do things that repeatedly got you in trouble with the law?

1   Yes
2   No
DK/REF

DRCC21 [IF COC12MON = 1 OR CRK12MON = 1] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **[COKEFILL]**?

1   Yes
2   No
DK/REF

DRCC22 [IF DRCC21 = 1] Did you continue to use **[COKEFILL]** even though you thought it caused problems with family or friends?

1   Yes
2   No
DK/REF

DRHE [IF HER12MON = 1] Think about your use of **heroin** during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DRHE01 [IF HER12MON = 1] During the past 12 months, was there a month or more when you spent a lot of your time getting or using **heroin**?

1   Yes
2   No
DK/REF

DRHE02 [IF DRHE01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **heroin** you used?

       1   Yes
       2   No
       DK/REF

DRHE04 [IF HER12MON = 1] During the past 12 months, did you try to set limits on how often or how much **heroin** you would use?

       1   Yes
       2   No
       DK/REF

DRHE05 [IF DRHE04 = 1] Were you able to keep to the limits you set, or did you often use **heroin** more than you intended to?

       1   Usually kept to the limits set
       2   Often used more than intended
       DK/REF

DRHE06 [IF HER12MON = 1] During the past 12 months, did you need to use more **heroin** than you used to in order to get the effect you wanted?

       1   Yes
       2   No
       DK/REF

DRHE07 [IF DRHE06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **heroin** had less effect on you than it used to?

       1   Yes
       2   No
       DK/REF

DRHE08 [IF HER12MON = 1] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **heroin**?

       1   Yes
       2   No
       DK/REF

DRHE09 [IF DRHE08 = 1] During the past 12 months, were you **able to** cut down or stop using **heroin every time** you wanted to or tried to?

       1   Yes
       2   No
       DK/REF

DRHE10 [IF DRHE08 = 2 OR DK/REF OR DRHE09 = 2 OR DK/REF] During the past 12 months, did you cut down or stop using **heroin at least one time**?

       1   Yes
       2   No
       DK/REF

DRHE11 [IF DRHE09 = 1 OR DRHE10 = 1] Please look at the symptoms listed below. During the past 12 months, did you have **3 or more** of these symptoms after you cut back or stopped using **heroin**?

         •   Feeling kind of blue or down
         •   Vomiting or feeling nauseous
         •   Having cramps or muscle aches

- Having teary eyes or a runny nose
- Feeling sweaty, having enlarged eye pupils, or having body hair standing up on your skin
- Having diarrhea
- Yawning
- Having a fever
- Having trouble sleeping

1   Yes
2   No
DK/REF

DRHE12 [IF DRHE11 = 1] Please look at the symptoms listed below. During the past 12 months, did you have **3 or more of these symptoms at the same time** that lasted for longer than a day after you cut back or stopped using **heroin**?

- Feeling kind of blue or down
- Vomiting or feeling nauseous
- Having cramps or muscle aches
- Having teary eyes or a runny nose
- Feeling sweaty, having enlarged eye pupils, or having body hair standing up on your skin
- Having diarrhea
- Yawning
- Having a fever
- Having trouble sleeping

1   Yes
2   No
DK/REF

DRHE13 [IF HER12MON = 1] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **heroin**?

1   Yes
2   No
DK/REF

DRHE14 [IF DRHE13 = 1] Did you continue to use **heroin** even though you thought it was causing you to have problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRHE15 [IF DRHE13 = 2 OR DK/REF OR DRHE14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **heroin**?

1   Yes
2   No
DK/REF

DRHE16 [IF DRHE15 = 1] Did you continue to use **heroin** even though you thought it was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRHE17 [IF HER12MON = 1] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **heroin** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRHE18 [IF HER12MON = 1] Sometimes people who use **heroin** have serious problems at home, work or school — such as:

- neglecting their children
- missing work or school
- doing a poor job at work or school
- losing a job or dropping out of school

During the past 12 months, did using **heroin** cause you to have serious problems like this either at home, work, or school?

1   Yes
2   No
DK/REF

DRHE19 [IF HER12MON = 1] During the past 12 months, did you regularly use **heroin** and then do something where using **heroin** might have put you in physical danger?

1   Yes
2   No
DK/REF

DRHE20 [IF HER12MON = 1] During the past 12 months, did using **heroin** cause you to do things that repeatedly got you in trouble with the law?

1   Yes
2   No
DK/REF

DRHE21 [IF HER12MON = 1] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **heroin**?

1   Yes
2   No
DK/REF

DRHE22 [IF DRHE21 = 1] Did you continue to use **heroin** even though you thought it caused problems with family or friends?

1   Yes
2   No
DK/REF

DRLS [IF HAL12MON = 1] Think about your use of **hallucinogens,** such as LSD, "acid", PCP, "Ecstasy", psilocybin (mushrooms), mescaline, or peyote during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DRLS01 [IF HAL12MON = 1] During the past 12 months, was there a month or more when you spent a lot of your time getting or using **hallucinogens**?

1   Yes
2   No
DK/REF

DRLS2 [IF DRLS01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **hallucinogens** you used?

1   Yes
2   No

150

DK/REF

DRLS04 [IF HAL12MON = 1] During the past 12 months, did you try to set limits on how often or how much **hallucinogens** you would use?

1 Yes
2 No
DK/REF

DRLS05 [IF DRLS04 = 1] Were you able to keep to the limits you set, or did you often use **hallucinogens** more than you intended to?

1 Usually kept to the limits set
2 Often used more than intended
DK/REF

DRLS06 [IF HAL12MON = 1] During the past 12 months, did you need to use more **hallucinogens** than you used to in order to get the effect you wanted?

1 Yes
2 No
DK/REF

DRLS07 [IF DRLS06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **hallucinogens** had less effect on you than it used to?

1 Yes
2 No
DK/REF

DRLS08 [IF HAL12MON = 1] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **hallucinogens**?

1 Yes
2 No
DK/REF

DRLS09 [IF DRLS08 = 1] During the past 12 months, were you **able to** cut down or stop using **hallucinogens every time** you wanted to or tried to?

1 Yes
2 No
DK/REF

DRLS13 [IF HAL12MON = 1] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **hallucinogens**?

1 Yes
2 No
DK/REF

DRLS14 [IF DRLS13 = 1] Did you continue to use **hallucinogens** even though you thought this was causing you to have problems with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

DRLS15 [IF DRLS13 = 2 OR DK/REF OR DRLS14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **hallucinogens**?

1 Yes
2 No

DK/REF

DRLS16 [IF DRLS15 = 1] Did you continue to use **hallucinogens** even though you thought this was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRLS17 [IF HAL12MON = 1] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **hallucinogens** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRLS18 [IF HAL12MON = 1] Sometimes people who use **hallucinogens** have serious problems at home, work or school — such as:

            - neglecting their children
            - missing work or school
            - doing a poor job at work or school
            - losing a job or dropping out of school

During the past 12 months, did using **hallucinogens** cause you to have serious problems like this either at home, work, or school?

1   Yes
2   No
DK/REF

DRLS19 [IF HAL12MON = 1] During the past 12 months, did you regularly use **hallucinogens** and then do something where using **hallucinogens** put you in physical danger?

1   Yes
2   No
DK/REF

DRLS20 [IF HAL12MON = 1] During the past 12 months, did using **hallucinogens** cause you to do things that repeatedly got you in trouble with the law?

1   Yes
2   No
DK/REF

DRLS21 [IF HAL12MON = 1] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **hallucinogens**?

1   Yes
2   No
DK/REF

DRLS22 [IF DRLS21 = 1] Did you continue to use **hallucinogens** even though you thought this caused problems with family or friends?

1   Yes
2   No
DK/REF

DRIN [IF 12 MONIN = 1] Think about your use of **inhalants**, such as amyl nitrite, "poppers," nitrous oxide, gasoline or lighter fluids, glue, spray paints or correction fluids during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DRIN01 [IF INH12MON = 1] During the past 12 months, was there a month or more when you spent a lot of your time getting or using **inhalants**?

1   Yes
2   No
DK/REF

DRIN02 [IF DRIN01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **inhalants** you used?

1   Yes
2   No
DK/REF

DRIN04 [IF INH12MON = 1] During the past 12 months, did you try to set limits on how often or how much **inhalants** you would use?

1   Yes
2   No
DK/REF

DRIN05 [IF DRIN04 = 1] Were you able to keep to the limits you set, or did you often use **inhalants** more than you intended to?

1   Usually kept to the limits set
2   Often used more than intended
DK/REF

DRIN06 [IF INH12MON = 1] During the past 12 months, did you need to use more **inhalants** than you used to in order to get the effect you wanted?

1   Yes
2   No
DK/REF

DRIN07 [IF DRIN06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **inhalants** had less effect on you than it used to?

1   Yes
2   No
DK/REF

DRIN08 [IF INH12MON = 1] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **inhalants**?

1   Yes
2   No
DK/REF

DRIN09 [IF DRIN08 = 1] During the past 12 months, were you **able to** cut down or stop using **inhalants every time** you wanted to or tried to?

1   Yes
2   No
DK/REF

DRIN13 [IF INH12MON = 1] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **inhalants**?

1   Yes
2   No
DK/REF

DRIN14 [IF DRIN13 = 1] Did you continue to use **inhalants** even though you thought this was causing you to have problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRIN15 [IF DRIN13 = 2 OR DK/REF OR DRIN14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **inhalants**?

1   Yes
2   No
DK/REF

DRIN16 [IF DRIN15 = 1] Did you continue to use **inhalants** even though you thought this was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRIN17 [IF INH12MON = 1] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **inhalants** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRIN18 [IF INH12MON = 1] Sometimes people who use **inhalants** have serious problems at home, work or school — such as:

- neglecting their children
- missing work or school
- doing a poor job at work or school
- losing a job or dropping out of school

During the past 12 months, did using **inhalants** cause you to have serious problems like this either at home, work, or school?

1   Yes
2   No
DK/REF

DRIN19 [IF INH12MON = 1] During the past 12 months, did you regularly use **inhalants** and then do something where using **inhalants** might have put you in physical danger?

1   Yes
2   No
DK/REF

DRIN20 [IF INH12MON = 1] During the past 12 months, did using **inhalants** cause you to do things that repeatedly got you in trouble with the law?

1   Yes
2   No
DK/REF

DRIN21 [IF INH12MON = 1] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **inhalants**?

    1   Yes
    2   No
    DK/REF

DRIN22 [IF DRIN21 = 1] Did you continue to use **inhalants** even though you thought this caused problems with family or friends?

    1   Yes
    2   No
    DK/REF

DRPR [IF PAI12MON = 1] Think about your use of **prescription pain relievers** during the past 12 months as you answer these next questions. Remember, we are only interested in your use of prescription pain relievers that were not prescribed for you or that you used only for the experience or feeling they caused.

    Press [ENTER] to continue.

DRPR01 [IF PAI12MON = 1] During the past 12 months, was there a month or more when you spent a lot of your time getting or using **prescription pain relievers**?

    1   Yes
    2   No
    DK/REF

DRPR02 [IF DRPR01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **prescription pain relievers** you used?

    1   Yes
    2   No
    DK/REF

DRPR04 [IF PAI12MON = 1] During the past 12 months, did you try to set limits on how often or how much **prescription pain relievers** you would use?

    1   Yes
    2   No
    DK/REF

DRPR05 [IF DRPR04 = 1] Were you able to keep to the limits you set, or did you often use **prescription pain relievers** more than you intended to?

    1   Usually kept to the limits set
    2   Often used more than intended
    DK/REF

DRPR06 [IF PAI12MON = 1] During the past 12 months, did you need to use more **prescription pain relievers** than you used to in order to get the effect you wanted?

    1   Yes
    2   No
    DK/REF

DRPR07 [IF DRPR06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **prescription pain relievers** had less effect on you than it used to?

    1   Yes
    2   No
    DK/REF

DRPR08 [IF PAI12MON = 1] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **prescription pain relievers**?

    1   Yes
    2   No
    DK/REF

DRPR09 [IF DRPR08 = 1] During the past 12 months, were you **able to** cut down or stop using **prescription pain relievers every time** you wanted to or tried to?

    1   Yes
    2   No
    DK/REF

DRPR10 [IF DRPR08 = 2 OR DK/REF OR DRPR09 = 2 OR DK/REF] During the past 12 months, did you cut down or stop using **prescription pain relievers at least one time**?

    1   Yes
    2   No
    DK/REF

DRPR11 [IF DRPR09 = 1 OR DRPR10 = 1]   Please look at the symptoms listed below. During the past 12 months, did you have **3 or more** of these symptoms after you cut back or stopped using **prescription pain relievers**?

- Feeling kind of blue or down
- Vomiting or feeling nauseous
- Having cramps or muscle aches
- Having teary eyes or a runny nose
- Feeling sweaty, having enlarged eye pupils, or having body hair standing up on your skin
- Having diarrhea
- Yawning
- Having a fever
- Having trouble sleeping

    1   Yes
    2   No
    DK/REF

DRPR12 [IF DRPR11 = 1] Please look at the symptoms listed below. During the past 12 months, did you have **3 or more of these symptoms at the same time** that lasted for longer than a day after you cut back or stopped using **prescription pain relievers**?

- Feeling kind of blue or down
- Vomiting or feeling nauseous
- Having cramps or muscle aches
- Having teary eyes or a runny nose
- Feeling sweaty, having enlarged eye pupils, or having body hair standing up on your skin
- Having diarrhea
- Yawning
- Having a fever
- Having trouble sleeping

    1   Yes
    2   No
    DK/REF

DRPR13 [IF PAI12MON = 1] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **prescription pain relievers**?

    1   Yes
    2   No
    DK/REF

DRPR14 [IF DRPR13 = 1] Did you continue to use **prescription pain relievers** even though you thought this was causing you to have problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRPR15 [IF DRPR13 = 2 OR DK/REF OR DRPR14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **prescription pain relievers**?

1   Yes
2   No
DK/REF

DRPR16 [IF DRPR15 = 1] Did you continue to use **prescription pain relievers** even though you thought this was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRPR17 [IF PAI12MON = 1] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **prescription pain relievers** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRPR18 [IF PAI12MON = 1] Sometimes people who use **prescription pain relievers** have serious problems at home, work or school — such as:

      - neglecting their children
      - missing work or school
      - doing a poor job at work or school
      - losing a job or dropping out of school

During the past 12 months, did using **prescription pain relievers** cause you to have serious problems like this either at home, work, or school?

1   Yes
2   No
DK/REF

DRPR19 [IF PAI12MON = 1] During the past 12 months, did you regularly use **prescription pain relievers** and then do something where using **prescription pain relievers** might have put you in physical danger?

1   Yes
2   No
DK/REF

DRPR20 [IF PAI12MON = 1] During the past 12 months, did using **prescription pain relievers** cause you to do things that repeatedly got you in trouble with the law?

1   Yes
2   No
DK/REF

DRPR21 [IF PAI12MON = 1] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **prescription pain relievers**?

1   Yes
2   No
DK/REF

DRPR22 [IF DRPR21 = 1] Did you continue to use **prescription pain relievers** even though you thought this caused problems with family or friends?

1   Yes
2   No
DK/REF

DRTR   [IF TRA12MON = 1] Think about your use of **prescription tranquilizers** during the past 12 months as you answer these next questions. Remember, we are only interested in your use of **prescription tranquilizers** that were not prescribed for you or that you used only for the experience or feeling they caused.

Press [ENTER] to continue.

DRTR01 [IF TRA12MON = 1] During the past 12 months, was there a month or more when you spent a lot of your time getting or using **prescription tranquilizers**?

1   Yes
2   No
DK/REF

DRTR02 [IF DRTR01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **prescription tranquilizers** you used?

1   Yes
2   No
DK/REF

DRTR04 [IF TRA12MON = 1] During the past 12 months, did you try to set limits on how often or how much **prescription tranquilizers** you would use?

1   Yes
2   No
DK/REF

DRTR05 [IF DRTR04 = 1] Were you able to keep to the limits you set, or did you often use **prescription tranquilizers** more than you intended to?

1   Usually kept to the limits set
2   Often used more than intended
DK/REF

DRTR06 [IF TRA12MON = 1] During the past 12 months, did you need to use more **prescription tranquilizers** than you used to in order to get the effect you wanted?

1   Yes
2   No
DK/REF

DRTR07 [IF DRTR06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **prescription tranquilizers** had less effect on you than it used to?

1   Yes
2   No
DK/REF

DRTR08 [IF TRA12MON = 1] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **prescription tranquilizers**?

1   Yes
2   No
DK/REF

DRTR09 [IF DRTR08 = 1] During the past 12 months, were you **able to** cut down or stop using **prescription tranquilizers every time** you wanted to or tried to?

1   Yes
2   No
DK/REF

DRTR13 [IF TRA12MON = 1] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **prescription tranquilizers**?

1   Yes
2   No
DK/REF

DRTR14 [IF DRTR13 = 1] Did you continue to use **prescription tranquilizers** even though you thought this was causing you to have problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRTR15 [IF DRTR13 = 2 OR DK/REF OR DRTR14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **prescription tranquilizers**?

1   Yes
2   No
DK/REF

DRTR16 [IF DRTR15 = 1] Did you continue to use **prescription tranquilizers** even though you thought this was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRTR17 [IF TRA12MON = 1] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **prescription tranquilizers** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRTR18 [IF TRA12MON = 1] Sometimes people who use **prescription tranquilizers** have serious problems at home, work or school — such as:

> - neglecting their children
> - missing work or school
> - doing a poor job at work or school
> - losing a job or dropping out of school

During the past 12 months, did using **prescription tranquilizers** cause you to have serious problems like this either at home, work, or school?

1   Yes
2   No

DK/REF

DRTR19 [IF TRA12MON = 1] During the past 12 months, did you regularly use **prescription tranquilizers** and then do something where using **prescription tranquilizers** might have put you in physical danger?

    1   Yes
    2   No
    DK/REF

DRTR20 [IF TRA12MON = 1] During the past 12 months, did using **prescription tranquilizers** cause you to do things that repeatedly got you in trouble with the law?

    1   Yes
    2   No
    DK/REF

DRTR21 [IF TRA12MON = 1] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **prescription tranquilizers**?

    1   Yes
    2   No
    DK/REF

DRTR22 [IF DRTR21 = 1] Did you continue to use **prescription tranquilizers** even though you thought this caused problems with family or friends?

    1   Yes
    2   No
    DK/REF

DRST [IF STI12MON = 1] Think about your use of **prescription stimulants** during the past 12 months as you answer these next questions. Remember, we are only interested in your use of **prescription stimulants** that were not prescribed for you or that you used only for the experience or feeling they caused.

Press [ENTER] to continue.

DRST01 [IF STI12MON = 1] During the past 12 months, was there a month or more when you spent a lot of your time getting or using **prescription stimulants**?

    1   Yes
    2   No
    DK/REF

DRST02 [IF DRST01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **prescription stimulants** you used?

    1   Yes
    2   No
    DK/REF

DRST04 [IF STI12MON = 1] During the past 12 months, did you try to set limits on how often or how much **prescription stimulants** you would use?

    1   Yes
    2   No
    DK/REF

DRST05 [IF DRST04 = 1] Were you able to keep to the limits you set, or did you often use **prescription stimulants** more than you intended to?

    1   Usually kept to the limits set

2   Often used more than intended
DK/REF

DRST06 [IF STI12MON = 1] During the past 12 months, did you need to use more **prescription stimulants** than you used to in order to get the effect you wanted?

1   Yes
2   No
DK/REF

DRST07 [IF DRST06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **prescription stimulants** had less effect on you than it used to?

1   Yes
2   No
DK/REF

DRST08 [IF STI12MON = 1] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **prescription stimulants**?

1   Yes
2   No
DK/REF

DRST09 [IF DRST08 = 1] During the past 12 months, were you **able to** cut down or stop using **prescription stimulants every time** you wanted to or tried to?

1   Yes
2   No
DK/REF

DRST10 [IF DRST8 = 2 OR DK/REF OR DRST9 = 2 OR DK/REF] During the past 12 months, did you cut down or stop using **prescription stimulants at least one time**?

1   Yes
2   No
DK/REF

DRST10a   [IF DRST09 = 1 OR DRST10 = 1] During the past 12 months, have you felt kind of blue or down when you cut down or stopped using **prescription stimulants**?

1   Yes
2   No
DK/REF

DRST11 [IF DRST10a = 1] Please look at the symptoms listed below. Please look at the symptoms listed below. During the past 12 months, did you have **2 or more** of these symptoms after you cut back or stopped using **prescription stimulants**?

•   Feeling tired or exhausted
•   Having bad dreams
•   Having trouble sleeping or sleeping more than you normally do
•   Feeling hungry more often
•   Feeling either very slowed down or like you couldn't sit still

1   Yes
2   No
DK/REF

DRST12 [IF DRST11 = 1] Please look at the symptoms listed below.   During the past 12 months, did you have **2 or more of these symptoms at the same time** that lasted for longer than a day after you cut back or stopped using **prescription**

stimulants?

- Feeling tired or exhausted
- Having bad dreams
- Having trouble sleeping or sleeping more than you normally do
- Feeling hungry more often
- Feeling either very slowed down or like you couldn't sit still

1   Yes
2   No
DK/REF

DRST13 [IF STI12MON = 1] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **prescription stimulants**?

1   Yes
2   No
DK/REF

DRST14 [IF DRST13 = 1] Did you continue to use **prescription stimulants** even though you thought this was causing you to have problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRST15 [IF DRST13 = 2 OR DK/REF OR DRST14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **prescription stimulants**?

1   Yes
2   No
DK/REF

DRST16 [IF DRST15 = 1] Did you continue to use **prescription stimulants** even though this was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRST17 [IF STI12MON = 1] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **prescription stimulants** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRST18 [IF STI12MON = 1] Sometimes people who use **prescription stimulants** have serious problems at home, work or school — such as:

- neglecting their children
- missing work or school
- doing a poor job at work or school
- losing a job or dropping out of school

During the past 12 months, did using **prescription stimulants** cause you to have serious problems like this either at home, work, or school?

1   Yes
        2   No
        DK/REF

DRST19 [IF STI12MON = 1] During the past 12 months, did you regularly use **prescription stimulants** and then do something where using **prescription stimulants** might have put you in physical danger?

        1   Yes
        2   No
        DK/REF

DRST20 [IF STI12MON = 1] During the past 12 months, did using **prescription stimulants** cause you to do things that repeatedly got you in trouble with the law?

        1   Yes
        2   No
        DK/REF

DRST21 [IF STI12MON = 1] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **prescription stimulants**?

        1   Yes
        2   No
        DK/REF

DRST22 [IF DRST21 = 1] Did you continue to use **prescription stimulants** even though you thought this caused problems with family or friends?

        1   Yes
        2   No
        DK/REF

DRSV [IF SED12MON = 1] Think about your use of **prescription sedatives** during the past 12 months as you answer these next questions. Remember, we are only interested in your use of prescription sedatives that were not prescribed for you or that you used only for the experience or feeling they caused.

        Press [ENTER] to continue.

DRSV01 [IF SED12MON = 1] During the past 12 months, was there a month or more when you spent a lot of your time getting or using **prescription sedatives**?

        1   Yes
        2   No
        DK/REF

DRSV02 [IF DRSV01 = 2 OR DK/REF] During the past 12 months, was there a month or more when you spent a lot of your time getting over the effects of the **prescription sedatives** you used?

        1   Yes
        2   No
        DK/REF

DRSV04 [IF SED12MON = 1] During the past 12 months, did you try to set limits on how often or how much **prescription sedatives** you would use?

        1   Yes
        2   No
        DK/REF

DRSV05 [IF DRSV04 = 1] Were you able to keep to the limits you set, or did you often use **prescription sedatives** more than you intended to?

1   Usually kept to the limits set
2   Often used more than intended
DK/REF

DRSV06 [IF SED12MON = 1] During the past 12 months, did you need to use more **prescription sedatives** than you used to in order to get the effect you wanted?

1   Yes
2   No
DK/REF

DRSV07 [IF DRSV06=2 OR DK/REF] During the past 12 months, did you notice that using the same amount of **prescription sedatives** had less effect on you than it used to?

1   Yes
2   No
DK/REF

DRSV08 [IF SED12MON = 1] During the past 12 months, did you **want to** or **try to** cut down **or** stop using **prescription sedatives**?

1   Yes
2   No
DK/REF

DRSV09 [IF DRSV08 = 1] During the past 12 months, were you **able to** cut down or stop using **prescription sedatives every time** you wanted to or tried to?

1   Yes
2   No
DK/REF

DRSV10 [IF DRSV08 = 2 OR DK/REF OR DRSV09 = 2 OR DK/REF] During the past 12 months, did you cut down or stop using **prescription sedatives at least one time**?

1   Yes
2   No
DK/REF

DRSV11 [IF DRSV09 = 1 OR DRSV10 = 1] Please look at the symptoms listed below.   During the past 12 months, did you have **1 or more** of these symptoms after you cut back or stopped using **prescription sedatives**?

- Sweating or feeling that your heart was beating fast
- Having your hands tremble
- Having trouble sleeping or sleeping more than you normally do
- Vomiting or feeling nauseous
- Seeing, hearing, or feeling things that weren't really there
- Feeling like you couldn't sit still
- Feeling anxious
- Having seizures or fits

1   Yes
2   No
DK/REF

DRSV12 [IF DRSV11 = 1] Please look at the symptoms listed below.   During the past 12 months, did you have **1 or more of these symptoms at the same time** that lasted for longer than a day after you cut back or stopped using **prescription sedatives**?

- Sweating or feeling that your heart was beating fast
- Having your hands tremble

- Having trouble sleeping or sleeping more than you normally do
- Vomiting or feeling nauseous
- Seeing, hearing, or feeling things that weren't really there
- Feeling like you couldn't sit still
- Feeling anxious
- Having seizures or fits

1   Yes
2   No
DK/REF

DRSV13 [IF SED12MON = 1] During the past 12 months, did you have any problems with your emotions, nerves, or mental health that were probably caused or made worse by your use of **prescription sedatives**?

1   Yes
2   No
DK/REF

DRSV14 [IF DRSV13 = 1] Did you continue to use **prescription sedatives** even though you thought this was causing you to have problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRSV15 [IF DRSV13 = 2 OR DK/REF OR DRSV14 = 2 OR DK/REF] During the past 12 months, did you have any physical health problems that were probably caused or made worse by your use of **prescription sedatives**?

1   Yes
2   No
DK/REF

DRSV16 [IF DRSV15 = 1] Did you continue to use **prescription sedatives** even though you thought this was causing you to have physical problems?

1   Yes
2   No
DK/REF

DRSV17 [IF SED12MON = 1] This question is about important activities such as working, going to school, taking care of children, doing fun things such as hobbies and sports, and spending time with friends and family.

During the past 12 months, did using **prescription sedatives** cause you to give up or spend less time doing these types of important activities?

1   Yes
2   No
DK/REF

DRSV18 [IF SED12MON = 1] Sometimes people who use **prescription sedatives** have serious problems at home, work or school — such as:

- neglecting their children
- missing work or school
- doing a poor job at work or school
- losing a job or dropping out of school

During the past 12 months, did using **prescription sedatives** cause you to have serious problems like this either at home, work, or school?

1   Yes
2   No

DK/REF

DRSV19 [IF SED12MON = 1] During the past 12 months, did you regularly use **prescription sedatives** and then do something where using **prescription sedatives** might have put you in physical danger?

    1   Yes
    2   No
    DK/REF

DRSV20 [IF SED12MON = 1] During the past 12 months, did using **prescription sedatives** cause you to do things that repeatedly got you in trouble with the law?

    1   Yes
    2   No
    DK/REF

DRSV21 [IF SED12MON = 1] During the past 12 months, did you have any problems with family or friends that were probably caused by your use of **prescription sedatives**?

    1   Yes
    2   No
    DK/REF

DRSV22 [IF DRSV21 = 1] Did you continue to use **prescription sedatives** even though you thought this caused problems with family or friends?

    1   Yes
    2   No
    DK/REF

Special Topics

INTROSP   The next questions are about encounters with the police or the court system.

                 Press [ENTER] to continue.

SP01   Not counting minor traffic violations, have you **ever** been arrested and booked for breaking the law?

              Being 'booked' means that you were taken into custody and processed by the police or by someone connected with the courts, even if you were then released.

              1   Yes
              2   No
              DK/REF

SP02   [IF SP01 = 1] Not counting minor traffic violations, how many times during the **past 12 months** have you been arrested and booked for breaking a law?

              _____ [RANGE: 0 - 99]
              DK/REF

INTROBK   [IF SP02 = 1 - 99 OR DK/REF] The next questions are about offenses that are against the law. As you read each question, please answer whether you were arrested and booked for that offense during the **past 12 months**.

                 Press [ENTER] to continue.

SP03a   [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **motor vehicle theft**?

              1   Yes
              2   No
              DK/REF

SP03b   [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **larceny or theft**? [IF SP03a = 1 OR DK/REF] Do not include motor vehicle theft.

              1   Yes
              2   No
              DK/REF

SP03c   [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **burglary or breaking and entering**?

              1   Yes
              2   No
              DK/REF

SP03d   [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **aggravated assault**?

              1   Yes
              2   No
              DK/REF

SP03e   [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **other assault, such as simple assault or battery**?

              1   Yes
              2   No
              DK/REF

SP03f [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **robbery**?

1 Yes
2 No
DK/REF

SP03g [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **forcible rape**?

1 Yes
2 No
DK/REF

SP03h [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **murder, homicide, or nonnegligent manslaughter**?

1 Yes
2 No
DK/REF

SP03i [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **arson**?

1 Yes
2 No
DK/REF

SP03j [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **driving under the influence of alcohol or drugs**?

1 Yes
2 No
DK/REF

SP03k [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **drunkenness or other liquor law violations**?

1 Yes
2 No
DK/REF

SP03l [IF SP02 = 1 - 99 OR DK/REF AND CURNTAGE = 12 - 17] In the **past 12 months**, were you arrested and booked **for possession of tobacco**?

1 Yes
2 No
DK/REF

SP03m [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **possession, manufacture, or sale of drugs**?

1 Yes
2 No
DK/REF

SP03n [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **prostitution or commercialized sex**?

1 Yes
2 No
DK/REF

SP03o [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **any other sexual offense, excluding rape or prostitution**?

1 Yes
2 No
DK/REF

SP03p [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **fraud, possessing stolen goods, or vandalism**?

1 Yes
2 No
DK/REF

SP03q [IF SP02 = 1 - 99 OR DK/REF] In the **past 12 months**, were you arrested and booked for **some other offense** besides these that have been named? Please do not include minor traffic violations.

1 Yes
2 No
DK/REF

SP03qsp [IF SP03q = 1] You have indicated that, during the past 12 months, you were arrested and booked for offenses **other than those that were just mentioned**. Please use the keyboard to type **one** of the offenses for which you were arrested and booked during the past 12 months. For this question, do not include minor traffic violations. When you have finished, press the [ENTER] key to go to the next question.

_____

DK/REF

SP04 Were you on **probation** at any time **during the past 12 months**?

1 Yes
2 No
DK/REF

SP05 Were you on **parole, supervised release, or other conditional release from prison** at any time **during the past 12 months**?

1 Yes
2 No
DK/REF

SP06a [IF (ALLAST3 = 1 OR 2 OR ALRECDK = 1 OR 2 OR ALRECRE = 1 OR 2) AND (MJLAST3 = 1 OR 2 OR MJRECDK = 1 OR 2 OR MJRECRE = 1 OR 2 OR COC12MON = 1 OR CRK12MON = 1 OR HER12MON = 1 OR HAL12MON = 1 OR INH12MON = 1 OR PAI12MON =1 OR TRA12MON = 1 OR STI12MON = 1 OR SED12MON = 1)] **During the past 12 months**, have you driven a vehicle while you were under the influence of a combination of alcohol and illegal drugs used together?

1 Yes
2 No
DK/REF

SP06b [IF SP06a = BLANK AND (ALLAST3 = 1 OR 2 OR ALRECDK = 1 OR 2 OR ALRECRE = 1 OR 2) **During the past 12 months**, have you driven a vehicle while you were under the influence of alcohol?

[IF SP06a NE BLANK] **During the past 12 months**, have you driven a vehicle while you were under the influence of alcohol only?

1 Yes
2 No
DK/REF

SP06c [IF SP06a = BLANK AND (MJLAST3 = 1 OR 2 OR MJRECDK = 1 OR 2 OR MJRECRE = 1 OR 2 OR COC12MON = 1 OR CRK12MON = 1 OR HER12MON = 1 OR HAL12MON = 1 OR INH12MON = 1 OR PAI12MON =1 OR TRA12MON = 1 OR STI12MON = 1 OR SED12MON = 1)] **During the past 12 months**, have you driven a vehicle while you were under the influence of illegal drugs?

[IF SP06a NE BLANK] **During the past 12 months**, have you driven a vehicle while you were under the influence of illegal drugs only?

1   Yes
2   No
DK/REF

SP07 What is the **maximum legal penalty** in [STATE FILL FROM FIPE4] for first offense possession of an ounce or less of marijuana for your own use?

1   A fine
2   Probation
3   Community service
4   Possible prison sentence
5   Mandatory prison sentence
DK/REF

SP08 [IF SP07 NE DK/REF] How sure are you that [FILL ANSWER FROM SP07] is the maximum legal penalty for first offense possession of an ounce or less of marijuana in [STATE FILL FROM FIPE4]?

1   Very sure
2   Somewhat sure
3   Not at all sure
DK/REF

SP09 In [STATE FILL FROM FIPE4], has marijuana been legally approved for medical use?

1   Yes
2   No
DK/REF

Market Information for Marijuana

MJE01 [IF MJLAST3 = 1 OR 2 OR MJRECDK = 1 OR 2 OR MJRECRE = 1 OR 2] Now think about the last time you used marijuana. How did you get this marijuana?

    1   You bought it
    2   You traded something else for it
    3   You got it for free or shared someone else's
    4   You grew it yourself
    DK/REF

MJE02 [IF MJE01 = 1] How long has it been since you **last bought** any marijuana?

    1   Within the past 30 days, that is since [DATE FILL]
    2   More than 30 days ago, but within the past 12 months
    3   More than 12 months ago
    DK/REF

MJE03 [IF MJE01 = 2 - 4 OR DK/REF] During the past 12 months, that is, since [DATE FILL], did you **buy** any marijuana?

    1   Yes
    2   No
    DK/REF

MJE04 [IF MJE03 = 1] How long has it been since you **last bought** any marijuana?

    1   Within the past 30 days, that is since [DATE FILL]
    2   More than 30 days ago, but within the past 12 months
    DK/REF

MJE05 [IF MJE02 = 1 OR MJE04 = 1] During the past 30 days, that is, since [DATE FILL], on how many days did you buy marijuana?

    # OF DAYS: _____ [RANGE: 1 - 30]
    DK/REF

MJE06 [IF MJE02 = 1 - 3 OR MJE03 = 1] Think about the **last time** you bought marijuana. Did you buy marijuana that had already been rolled into joints or did you buy the marijuana in loose form?

    1   You bought joints
    2   You bought the marijuana in loose form
    DK/REF

MJE07 [IF MJE06 = 1] How many joints did you buy the **last time** you bought marijuana?

    # OF JOINTS: _____ [RANGE: 1 - 500]
    DK/REF

MJE08 [IF MJE07 > 1 OR DK/REF] How much did you pay for the joints you bought this last time?

    [IF MJE07 = 1] How much did you pay for the joint you bought this last time?

    1   less than $5.00
    2        $5.00 to $10.99
    3        $11.00 to $20.99
    4        $21.00 to $50.99
    5        $51.00 to $100.99
    6        $101.00 to $150.99
    7        $151.00 to $200.99
    8        $201.00 to $250.99
    9        $251.00 to $300.99
    10      $301.00 to $500.99

11        $501.00 to $1000.99
12   More than $1000.99
DK/REF

MJE09   [IF MJE08 = 4 AND MJE07 > 1 OR DK/REF] More specifically, which of these categories includes the price you paid for the joints you bought this last time?

[IF MJE08 = 4 AND MJE07 = 1] More specifically, which of these categories includes the price you paid for the joint you bought this last time?

1        $21.00 to $30.99
2        $31.00 to $40.99
3        $41.00 to $50.99
DK/REF

MJE10   [IF MJE08 = 5 AND MJE07 > 1 OR DK/REF] More specifically, which of these categories includes the price you paid for the joints you bought this last time?

[IF MJE08 = 5 AND MJE07 = 1] More specifically, which of these categories includes the price you paid for the joint you bought this last time?

1        $51.00 to $60.99
2        $61.00 to $70.99
3        $71.00 to $80.99
4        $81.00 to $90.99
5        $91.00 to $100.99
DK/REF

MJE11   [IF MJE08 = 6 AND MJE07 > 1 OR DK/REF] More specifically, which of these categories includes the price you paid for the joints you bought this last time?

[IF MJE08 = 6 AND MJE07 = 1] More specifically, which of these categories includes the price you paid for the joint you bought this last time?

1        $101.00 to $110.99
2        $111.00 to $120.99
3        $121.00 to $130.99
4        $131.00 to $140.99
5        $141.00 to $150.99
DK/REF

MJE12   [IF MJE08 = 10 AND MJE07 > 1 OR DK/REF] More specifically, which of these categories includes the price you paid for the joints you bought this last time?

[IF MJE08 = 10 AND MJE07 = 1] More specifically, which of these categories includes the price you paid for the joint you bought this last time?

1        $301.00 to $350.99
2        $351.00 to $400.99
3        $401.00 to $450.99
4        $451.00 to $500.99
DK/REF

MJE13   [IF MJE08 = 11 AND MJE07 > 1 OR DK/REF] More specifically, which of these categories includes the price you paid for the joints you bought this last time?

[IF MJE08 = 11 AND MJE07 = 1] More specifically, which of these categories includes the price you paid for the joint you bought this last time?

1        $501.00 to $550.99
2        $551.00 to $600.99
3        $601.00 to $650.99

4	$651.00 to $700.99
5	$701.00 to $750.99
6	$751.00 to $800.99
7	$801.00 to $850.99
8	$851.00 to $900.99
9	$901.00 to $950.99
10	$951.00 to $1000.99
DK/REF	

MJE14 [IF MJE06 = 2] Now we want to know how much marijuana you bought the **last time** you bought marijuana.

Do you want to give your answer in grams, ounces, or pounds?

1 Grams
2 Ounces
3 Pounds
DK/REF

DEFINE MJUNIT1A:
IF MJE14 = 1 THEN MJUNIT1A = "grams"
IF MJE14 = 2 THEN MJUNIT1A = "ounces"
IF MJE14 = 3 THEN MJUNIT1A = "pounds"
ELSE MJUNIT1A = BLANK

MJE15 [IF MJE14 NE DK/REF AND MJUNIT1A= "grams"] The **last time** you bought marijuana, how many grams did you buy?

1 At least 1 but less than 5 grams
2 At least 5 but less than 10 grams
3 10 grams or more
DK/REF

MJE16 [IF MJE15 =3] How many grams of marijuana did you buy?

OF GRAMS: _____ [RANGE 10 - 99]

MJE17 [IF MJE14 NE DK/REF AND MJUNIT1A= "ounces"] The **last time** you bought marijuana, how many ounces did you buy?

1 At least 1/8, but less than 1/4 of an ounce
2 At least 1/4 but less than 1/3 of an ounce
3 At least 1/3 but less than ½ of an ounce
4 At least ½ but less than 1 ounce
5 At least 1 but less than 5 ounces
6 At least 5 but less than 10 ounces
7 At least 10 but less than 16 ounces
DK/REF

MJE18 [IF MJE14 NE DK/REF AND MJUNIT1A= "pounds"] The **last time** you bought marijuana, how many pounds did you buy?

1 At least 1 but less than 2 pounds
2 At least 2 but less than 3 pounds
3 At least 3 but less than 4 pounds
4 At least 4 but less than 5 pounds
5 5 or more pounds
DK/REF

MJE19 [IF MJE18 = 5] How many pounds of marijuana did you buy?

OF POUNDS: _____ [RANGE: 5 - 99]
DK/REF

173

MJE20 [IF MJE14 NE BLANK] How much did you pay for the marijuana you bought this last time?

     1   less than $5.00
     2        $5.00 to $10.99
     3        $11.00 to $20.99
     4        $21.00 to $50.99
     5        $51.00 to $100.99
     6        $101.00 to $150.99
     7        $151.00 to $200.99
     8        $201.00 to $250.99
     9        $251.00 to $300.99
     10      $301.00 to $500.99
     11      $501.00 to $1000.99
     12   More than $1000.99
     DK/REF

MJE21 [IF MJE20 = 4] More specifically, which of these categories includes the price you paid for the marijuana you bought this last time?

     1        $21.00 to $30.99
     2        $31.00 to $40.99
     3        $41.00 to $50.99
     DK/REF

MJE22 [IF MJE20 = 5] More specifically, which of these categories includes the price you paid for the marijuana you bought this last time?

     1        $51.00 to $60.99
     2        $61.00 to $70.99
     3        $71.00 to $80.99
     4        $81.00 to $90.99
     5        $91.00 to $100.99
     DK/REF

MJE23 [IF MJE20 = 6] More specifically, which of these categories includes the price you paid for the marijuana you bought this last time?

     1        $101.00 to $110.99
     2        $110.00 to $120.99
     3        $121.00 to $130.99
     4        $131.00 to $140.99
     5        $141.00 to $150.99
     DK/REF

MJE24 [IF MJE20 = 10] More specifically, which of these categories includes the price you paid for the marijuana you bought this last time?

     1        $301.00 to $350.99
     2        $351.00 to $400.99
     3        $401.00 to $450.99
     4        $451.00 to $500.99
     DK/REF

MJE25 [IF MJE20 = 11] More specifically, which of these categories includes the price you paid for the marijuana you bought this last time?

     1        $501.00 to $550.99
     2        $551.00 to $600.99
     3        $601.00 to $650.99
     4        $651.00 to $700.99

5	$701.00 to $750.99
6	$751.00 to $800.99
7	$801.00 to $850.99
8	$851.00 to $900.99
9	$901.00 to $950.99
10	$951.00 to $1000.99
DK/REF	

MJE26 [IF MJE02 = 1 - 3 OR MJE03 = 1] The **last time** you bought marijuana, who did you buy it from?

1   A friend
2   A relative or family member
3   Someone I had just met or didn't know well
DK/REF

MJE27 [IF MJE02 = 1 - 3 OR MJE03 = 1] The **last time** you bought marijuana, where were you when you bought it?

1   Inside a public building, such as a store, restaurant, sports arena, bar, or club
2   Inside a school building
3   Outside on school property
4   Inside a home, apartment, or dorm
5   Outside in a public area, such as a parking lot, street, or park
6   Some other place
DK/REF

MJE28 [IF CURNTAGE = 15 OR OLDER AND (MJE02 = 1 - 3 OR MJE03 = 1)] The last time you bought marijuana were you at work at your job or business?

1   Yes
2   No
3   Do not work at a job or business
DK/REF

MJE29 [IF MJE02 = 1 - 3 OR MJE03 = 1] The **last time** you bought marijuana, where did you buy it?

1   Near where you are now living
2   Somewhere else
DK/REF

MJE30 [IF MJE02 = 1 - 3 OR MJE03 = 1] Did you sell any of the marijuana you bought this last time?

1   Yes
2   No
DK/REF

MJE31 [IF MJE02 = 1 - 3 OR MJE03 = 1] Did you give away or share any of the marijuana you bought this last time?

1   Yes
2   No
DK/REF

MJE32 [IF MJE01 = 3 - 4 AND MJE03 = 2] During the past 12 months, that is, since [DATE FILL], did you trade something for marijuana?

1   Yes
2   No
DK/REF

MJE33 [IF MJE32 = 1] During the past 30 days, that is, since [DATE FILL], did you trade something for marijuana?

1   Yes
2   No

DK/REF

MJE34 [IF MJE01 = 2 AND MJE03 = 2] How long has it been since you **last traded something** for marijuana?

    1   Within the past 30 days, that is since [DATE FILL]
    2   More than 30 days ago, but within the past 12 months
    3   More than 12 months ago
    DK/REF

MJE35 [IF MJE33 = 1 OR MJE34 = 1] During the past 30 days, that is, since [DATE FILL], on how many days did you trade something for marijuana?

    # OF DAYS: _____ [RANGE: 1 - 30]
    DK/REF

MJE36 [IF (MJE34 = 1 OR 2) OR MJE32 = 1] Think about the **last time** you traded something for marijuana. Did you get marijuana that had already been rolled into joints or did you get the marijuana in loose form?

    1   You got joints
    2   You got the marijuana in loose form
    DK/REF

MJE37 [IF MJE36 = 1] How many joints did you get the **last time** you traded something for marijuana?

    # OF JOINTS: _____ [RANGE: 1 - 500]
    DK/REF

MJE38 [IF MJE37 > 1 OR DK/REF] How much do you think the marijuana in these joints was worth?

    [IF MJE37 = 1] How much do you think the marijuana in this joint was worth?

    1   less than $5.00
    2        $5.00 to $10.99
    3        $11.00 to $20.99
    4        $21.00 to $50.99
    5        $51.00 to $100.99
    6        $101.00 to $150.99
    7        $151.00 to $200.99
    8        $201.00 to $250.99
    9        $251.00 to $300.99
    10      $301.00 to $500.99
    11      $501.00 to $1000.99
    12   More than $1000.99
    DK/REF

MJE39 [IF MEJ38 = 4 AND MJE37 > 1] More specifically, which of these categories includes the price you think the marijuana in these joints was worth?

    [IF MJE38 = 4 AND MJE37 = 1] More specifically, which of these categories includes the price you think the marijuana in this joint was worth?

    1        $21.00 to $30.99
    2        $31.00 to $40.99
    3        $41.00 to $50.99
    DK/REF

MJE40 [IF MJE38 = 5 AND MJE37 > 1] More specifically, which of these categories includes the price you think the marijuana in these joints was worth?

    [IF MJE38 = 5 AND MJE37 = 1] More specifically, which of these categories includes the price you think the marijuana in this joint was worth?

1        $51.00 to $60.99
2        $61.00 to $70.99
3        $71.00 to $80.99
4        $81.00 to $90.99
5        $91.00 to $100.99
DK/REF

MJE41 [IF IF MJE38 = 6 AND MJE37 > 1] More specifically, which of these categories includes the price you think the marijuana in these joints was worth?

[IF MJE38 = 6 AND MJE37 = 1] More specifically, which of these categories includes the price you think the marijuana in this joint was worth?

1        $101.00 to $110.99
2        $111.00 to $120.99
3        $121.00 to $130.99
4        $131.00 to $140.99
5        $141.00 to $150.99
DK/REF

MJE42 [IF MEJ38 = 10 AND MJE37 > 1] More specifically, which o f these categories includes the price you think the marijuana in these joints was worth?

[IF MJE38 = 10 AND MJE37 = 1] More specifically, which of these categories includes the price you think the marijuana in this joint was worth?

1        $301.00 to $350.99
2        $351.00 to $400.99
3        $401.00 to $450.99
4        $451.00 to $500.99
DK/REF

MJE43 [IF MEJ38 = 11 AND MJE37 > 1] More specifically, which of these categories includes the price you think the marijuana in these joints was worth?

[IF MJE38 = 11 AND MJE37 = 1] More specifically, which of these categories includes the price you think the marijuana in this joint was worth?

1        $501.00 to $550.99
2        $551.00 to $600.99
3        $601.00 to $650.99
4        $651.00 to $700.99
5        $701.00 to $750.99
6        $751.00 to $800.99
7        $801.00 to $850.99
8        $851.00 to $900.99
9        $901.00 to $950.99
10      $951.00 to $1000.99
DK/REF

MJE44 [IF MJE36 = 2] Now we want to know how much marijuana you got the **last time** you traded something for marijuana.

Do you want to give your answer in grams, ounces, or pounds?

1   Grams
2   Ounces
3   Pounds
DK/REF

DEFINE MJUNIT2A:
        IF MJE44 = 1 THEN MJUNIT2A = "grams"
        IF MJE44 = 2 THEN MJUNIT2A = "ounces"

IF MJE44 = 3 THEN MJUNIT2A = "pounds"
ELSE MJUNIT2A = BLANK

MJE45 [IF MJUNIT2A= "grams"] The **last time** you traded something for marijuana, how many grams did you get?

1   At least 1 but less than 5 grams
2   At least 5 but less than 10 grams
3   10 grams or more
DK/REF

MJE46 [IF MJE45=3] How many grams did you get?

\# OF GRAMS: _____   [RANGE 10 - 99].

MJE47 [IF MJUNIT2A= "ounces"] The **last time** you traded something for marijuana, how many ounces did you get?

1   At least 1/8, but less than 1/4 of an ounce
2   At least 1/4 but less than 1/3 of an ounce
3   At least 1/3 but less than ½ of an ounce
4   At least ½ but less than 1 ounce
5   At least 1 but less than 5 ounces
6   At least 5 but less than 10 ounces
7   At least 10 but less than 16 ounces
DK/REF

MJE48 [IF MJUNIT2A= "pounds"] The **last time** you traded something for marijuana, how many pounds did you get?

1   At least 1 but less than 2 pounds
2   At least 2 but less than 3 pounds
3   At least 3 but less than 4 pounds
4   At least 4 but less than 5 pounds
5   5 or more pounds
DK/REF

MJE49 [IF MJE48 = 5] How many pounds of marijuana did you get?

\# OF POUNDS: _____   [RANGE: 5 - 99]
DK/REF

MJE50 [IF MJE44 NE BLANK] How much do you think the marijuana you got this last time was worth?

1   less than $5.00
2          $5.00 to $10.99
3          $11.00 to $20.99
4          $21.00 to $50.99
5          $51.00 to $100.99
6          $101.00 to $150.99
7          $151.00 to $200.99
8          $201.00 to $250.99
9          $251.00 to $300.99
10         $301.00 to $500.99
11         $501.00 to $1000.99
12   More than $1000.99
DK/REF

MJE51 [IF MJE50 = 4] More specifically, which of these categories includes the price you think the marijuana you got this last time was worth?

1          $21.00 to $30.99
2          $31.00 to $40.99
3          $41.00 to $50.99

DK/REF

MJE52 [IF MJE50 = 5] More specifically, which of these categories includes the price you think the marijuana you got this last time was worth?

1      $51.00 to $60.99
2      $61.00 to $70.99
3      $71.00 to $80.99
4      $81.00 to $90.99
5      $91.00 to $100.99
DK/REF

MJE53 [IF MJE50 = 6] More specifically, which of these categories includes the price you think the marijuana you got this last time was worth?

1      $101.00 to $110.99
2      $111.00 to $120.99
3      $121.00 to $130.99
4      $131.00 to $140.99
5      $141.00 to $150.99
DK/REF

MJE54 [IF MJE50 = 10] More specifically, which of these categories includes the price you think the marijuana you got this last time was worth?

1      $301.00 to $350.99
2      $351.00 to $400.99
3      $401.00 to $450.99
4      $451.00 to $500.99
DK/REF

MJE55 [IF MJE50 = 11] More specifically, which of these categories includes the price you think the marijuana you got this last time was worth?

1      $501.00 to $550.99
2      $551.00 to $600.99
3      $601.00 to $650.99
4      $651.00 to $700.99
5      $701.00 to $750.99
6      $751.00 to $800.99
7      $801.00 to $850.99
8      $851.00 to $900.99
9      $901.00 to $950.99
10    $951.00 to $1000.99
DK/REF

MJE56 [IF (MJE01 = 2 AND MJE03 = 2) OR MJE32 = 1] The **last time** you traded something for marijuana, who did you get it from?

1   A friend
2   A relative or family member
3   Someone I had just met or didn't know well
DK/REF

MJE57 [IF (MJE01 = 2 AND MJE03 = 2) OR MJE32 = 1] The **last time** you traded something for marijuana, where were you when you got it?

1   Inside a public building, such as a store, restaurant, sports arena, bar, or club
2   Inside a school building
3   Outside on school property
4   Inside a home, apartment, or dorm
5   Outside in a public area, such as a parking lot, street, or park

6   Some other place
DK/REF

MJE58   [IF (MJE01 = 2 AND MJE03 = 2) OR MJE32 = 1] The **last time** you traded something for marijuana, where did you get it?

1   Near where you are now living
2   Somewhere else
DK/REF

MJE59   [IF (MJE01 = 2 AND MJE03 = 2) OR MJE32 = 1] The **last time** you traded something for marijuana, did you keep it all for yourself?

1   Yes
2   No
DK/REF

MJE60   [IF MJE59 = 2] Did you sell any of the marijuana you got this last time?

1   Yes
2   No
DK/REF

MJE61   [IF MJE59 = 2] Did you give away any of the marijuana you got this last time?

1   Yes
2   No
DK/REF

MJE62   [IF MJE01 = 4 AND MJE03 = 2 AND MJE32 =2] The **last time** you grew marijuana, did you keep it all for yourself?

1   Yes
2   No
DK/REF

MJE63   [IF MJE62 = 2] Did you sell any of the marijuana you grew this last time?

1   Yes
2   No
DK/REF

MJE64   [IF MJE62 = 2] The **last time** you grew marijuana, did you give any of it away for free?

1   Yes
2   No
DK/REF

MJE65   [IF MJE01 =3 AND MJE03 = 2 AND MJE32 = 2] The **last time** you got marijuana for free, who did you get it from?

1   A friend
2   A relative or family member
3   Someone I had just met or didn't know well
DK/REF

MJE66   [IF MJE01 = 3 AND MJE03 = 2 AND MJE32 = 2] The **last time** you got marijuana for free, where were you when you got it?

1   Inside a public building, such as a store, restaurant, sports arena, bar, or club
2   Inside a school building
3   Outside on school property
4   Inside a home, apartment, or dorm

5   Outside in a public area, such as a parking lot, street, or park
6   Some other place
DK/REF

MJE67 [IF MJE01 = 3 AND MJE03 = 2 AND MJE32 = 2] The **last time** you got marijuana for free, where did you get it?

1   Near where you are now living
2   Somewhere else
DK/REF

MJE68 [IF MJE01 = 3 AND MJE03 = 2 AND MJE32 = 2] The **last time** you got marijuana for free, did you keep it all for yourself?

1   Yes
2   No
DK/REF

MJE69 [IF MJE68 = 2] Did you sell any of the marijuana you got this last time?

1   Yes
2   No
DK/REF

MJE70 [IF MJE68 = 2] Did you give away any of the marijuana you got this last time?

1   Yes
2   No
DK/REF

Drug Treatment

Introtx [IF AL01 =1 OR ALREF = 1 OR MJ01 =1 OR MJREF = 1 OR CC01 = 1 OR CCREF = 1 OR CK01 = 1 OR CKREF = 1 OR HE01 = 1 OR HEREF = 1 OR LS01a =1 LSREF1 = 1 OR LS01b = 1 OR LSREF2 = 1 OR LS01c = 1 OR LS01d =1 OR LS01e = 1 OR LS01f =1 OR LSREF3 = 1 OR LS01h = 1 OR IN01a =1 OR IN01b =1 OR IN01c =1 OR IN01d = 1 OR IN01e = 1OR IN01f = 1 OR IN01g = 1 OR IN01h = 1 OR IN01i = 1 OR IN01j = 1 OR IN01l = 1 OR INREF = 1 OR PR01 = 1 OR OR PR02 = 1 OR PR03 = 1 OR PR04 = 1 OR PR05 = 1 OR PRREF = 1 OR TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 = 1 OR TR05 = 1 OR TRREF = 1 OR ST01 = 1 OR STREF1 = 1 ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1 OR SV01 = 1 OR SV02 = 1 OR SV03 = 1 OR SV04 = 1 OR SV05 = 1 OR SVREF = 1] These next questions deal with treatment for alcohol and drug problems, **not including cigarettes**. Please report treatment or counseling designed to help you reduce or stop your alcohol or drug use. Please include detoxification and any other treatment for medical problems associated with your alcohol or drug use.

Press [ENTER] to continue.

TX01 [IF AL01 =1 OR ALREF = 1 OR MJ01 =1 OR MJREF = 1 OR CC01 = 1 OR CCREF = 1 OR CK01 = 1 OR CKREF = 1 OR HE01 = 1 OR HEREF = 1 OR LS01a =1 LSREF1 = 1 OR LS01b = 1 OR LSREF2 = 1 OR LS01c = 1 OR LS01d =1 OR LS01e = 1 OR LS01f =1 OR LSREF3 = 1 OR LS01h = 1 OR IN01a =1 OR IN01b =1 OR IN01c =1 OR IN01d = 1 OR IN01e = 1OR IN01f = 1 OR IN01g = 1 OR IN01h = 1 OR IN01i = 1 OR IN01j = 1 OR IN01l = 1 OR INREF = 1 OR PR01 = 1 OR OR PR02 = 1 OR PR03 = 1 OR PR04 = 1 OR PR05 = 1 OR PRREF = 1 OR TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 = 1 OR TR05 = 1 OR TRREF = 1 OR ST01 = 1 OR STREF1 = 1 ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1 OR SV01 = 1 OR SV02 = 1 OR SV03 = 1 OR SV04 = 1 OR SV05 = 1 OR SVREF = 1] Have you **ever received** treatment or counseling for your use of alcohol or any drug, not counting cigarettes?

1   Yes
2   No
     DK/REF

TX02 [IF TX01 = 1] During the past 12 months, that is, since [**DATEFILL**] have you received treatment or counseling for your use of alcohol or any drug, not counting cigarettes?

1   Yes
2   No
DK/REF

TX03 [IF TX02 = 1] During the past 12 months when you received treatment was the treatment for alcohol use only, drug use only, or both alcohol and drug use?

1   Alcohol use only
2   Drug use only
3   Both alcohol and drug use
DK/REF

DEFINE TXFILL1:
     IF TX03 = 1, TXFILL1 = alcohol use
     IF TX03 = 2, TXFILL1 = drug use
     IF TX03 = 3 OR DK/REF, TXFILL1 = alcohol or drug use
     ELSE, TXFILL1 = BLANK

TX04a [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a **hospital overnight as an inpatient**?

1   Yes
2   No
DK/REF

TX04a1 [IF TX03 = 3 AND TX04a = 1] Was the treatment you received in a hospital overnight as an inpatient for your alcohol use, your drug use, or both?

1   Alcohol use
2   Drug use

3   Both alcohol and drug use
DK/REF

TX04b [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a **residential drug or alcohol rehabilitation facility where you stayed overnight**?

1   Yes
2   No
DK/REF

TX04b1 [IF TX03 = 3 AND TX04b = 1] Was the treatment you received in a residential drug or alcohol rehabilitation facility where you stayed overnight for your alcohol use, your drug use, or both?

1   Alcohol use
2   Drug use
3   Both alcohol and drug use
DK/REF

TX04c [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a **drug or alcohol rehabilitation facility as an outpatient**?

1   Yes
2   No
DK/REF

TX04c1 [IF TX03 = 3 AND TX04c = 1] Was the treatment you received in a residential drug or alcohol rehabilitation facility as an outpatient for your alcohol use, your drug use, or both?

1   Alcohol use
2   Drug use
3   Both alcohol and drug use
DK/REF

TX04d [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a **mental health center or facility as an outpatient**?

1   Yes
2   No
DK/REF

TX04d1 [IF TX03 = 3 AND TX04d = 1] Was the treatment you received in a mental health center or facility as an outpatient for your alcohol use, your drug use, or both?

1   Alcohol use
2   Drug use
3   Both alcohol and drug use
DK/REF

TX04e [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in an **emergency room**?

1   Yes
2   No
DK/REF

TX04e1 [IF TX03 = 3 AND TX04e = 1] Was the treatment you received in an emergency room for your alcohol use, your drug use, or both?

1   Alcohol use
2   Drug use
3   Both alcohol and drug use
DK/REF

TX04f   [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a **private doctor's office**?

  1   Yes
  2   No
  DK/REF

TX04f1 [IF TX03 = 3 AND TX04f = 1] Was the treatment you received in a private doctor's officet for your alcohol use, your drug use, or both?

  1   Alcohol use
  2   Drug use
  3   Both alcohol and drug use
  DK/REF

TX04g   [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a **prison or jail**?

  1   Yes
  2   No
  DK/REF

TX04g1 [IF TX03 = 3 AND TX04g = 1] Was the treatment you received in a prison or jail for your alcohol use, your drug use, or both?

  1   Alcohol use
  2   Drug use
  3   Both alcohol and drug use
  DK/REF

TX04h   [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a **self-help group** such as **Alcoholics Anonymous or Narcotics Anonymous**?

  1   Yes
  2   No
  DK/REF

TX04h1 [IF TX03 = 3 AND TX04h = 1] Was the treatment you received in a self-help group for your alcohol use, your drug use, or both?

  1   Alcohol use
  2   Drug use
  3   Both alcohol and drug use
  DK/REF

TX04i   [IF TX03 NE BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in **some other place** besides these that have been listed?

  1   Yes
  2   No
  DK/REF

TX04ISP [IF TX04I = 1] You have indicated that, during the past 12 months, you received treatment or counseling for your [TXFILL1] in a place other than those just mentioned. Please use the keyboard to type in a description of this place. When you have finished typing your answer, press the [ENTER] key to go to the next question.

  _____
  DK/REF

TX04i1 [IF TX03 = 3 AND TX04i = 1] Was the treatment you received in this other place for your alcohol use, your drug use, or both?

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1   Alcohol use
2   Drug use
3   Both alcohol and drug use
DK/REF

TX05   [IF TX03 = 2 OR 3 AND (MJ01 =1 OR MJREF = 1 OR CC01 = 1 OR CCREF = 1 OR CK01 = 1 OR CKREF = 1 OR HE01 = 1 OR HEREF = 1 OR LS01a =1 OR LS01REF = 1 OR LS01b = 1 OR LSREF2 = 1 OR ST01 = 1 OR STREF1 = 1)] During the past 12 months, that is, since [DATEFILL], did you visit a hospital emergency room to receive treatment for your use of **cocaine, heroin, marijuana, PCP, LSD, or Methamphetamine**?

1   Yes
2   No
DK/REF

TX06   [IF TX05 = 1] During the past 12 months, how many times did you visit a hospital emergency room to receive treatment for your use of **cocaine, heroin, marijuana, PCP, LSD, or Methamphetamine**?

OF TIMES: _____ [RANGE: 1 - 365]
DK/REF

TX07   [IF TX02 = 1] Are you **currently** receiving treatment or counseling for your [TXFILL1]?

1   Yes
2   No
DK/REF

TX08   [IF (TX01 = 2 OR DK/REF) OR ((TX02 =2 OR DK/REF) AND TX07 NE 1)] During the past 12 months, did you **need** treatment or counseling for your **alcohol or drug use**?

1   Yes
2   No
DK/REF

TX09   [IF TX02 = 1 AND TX07 NE 1] During the past 12 months, did you need **additional** treatment or counseling for your alcohol or drug use?

1   Yes
2   No
DK/REF

TX10   [IF TX09 = 1] During the past 12 months, for which of the following drugs did you need **additional** treatment or counseling?

Type the number of each drug for which you needed additional treatment or counseling during the past 12 months. To select more than one drug from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1   Alcohol
2   Marijuana or hashish
3   Cocaine or "crack"
4   Heroin
5   Hallucinogens
6   Inhalants
7   Prescription pain relievers
8   Prescription tranquilizers
9   Prescription stimulants
10   Prescription sedatives
11   Some other drug
DK/REF

TX11   [IF (AL01 = 1 OR ALREF = 1) AND TX08 = 1] During the past 12 months did you **need** treatment or counseling for your use of **alcohol**?

1   Yes
2   No
DK/REF

TX12   [IF (MJ01 = 1 OR MJREF = 1) AND TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **marijuana or hashish**?

1   Yes
2   No
DK/REF

TX13   [IF (CC01 = 1 OR CCREF = 1 OR CK01 =1 OR CKREF = 1) AND TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **cocaine or 'crack'**?

1   Yes
2   No
DK/REF

TX14   [IF (HE01 = 1 OR HEREF = 1) AND TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **heroin**?

1   Yes
2   No
DK/REF

TX15   [IF (LS01a =1 OR LSREF1 = 1 OR LS01b = 1 OR LSREF2 = 1 OR LS01c = 1 OR LS01d =1 OR LS01e = 1 OR LS01f =1 OR LSREF3 = 1 OR LS01h = 1) AND TX08 =1] During the past 12 months, did you **need** treatment or counseling for your use of **hallucinogens**?

1   Yes
2   No
DK/REF

TX16   [IF (IN01a =1 OR IN01b =1 OR IN01c =1 OR IN01d = 1 OR IN01e = 1OR IN01f = 1 OR IN01g = 1 OR IN01h = 1 OR IN01i = 1 OR IN01j = 1 OR IN01l = 1 OR INREF = 1) AND TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **inhalants**?

1   Yes
2   No
DK/REF

TX17   [IF (PR01 = 1 OR PR02 = 1 OR PR03 = 1 OR PR04 = 1 OR PR05 = 1 OR PRREF = 1) AND TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **prescription pain relievers**?

1   Yes
2   No
DK/REF

TX18   [IF (TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 = 1 OR TR05 = 1 OR TRREF = 1) AND TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **prescription tranquilizers**?

1   Yes
2   No
DK/REF

TX19   [IF (ST01 = 1 OR STREF1 = 1 OR ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1) AND TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **prescription stimulants**?

1   Yes
2   No
DK/REF

TX20   [IF (SV01 = 1 OR SV02 = 1 OR SV03 = 1 OR SV04 = 1 OR SV05 = 1 OR SVREF = 1) AND TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **prescription sedatives**?

1   Yes
2   No
DK/REF

TX21   [IF TX08 = 1] During the past 12 months, did you **need** treatment or counseling for your use of **some other drug** besides the ones just listed?

1   Yes
2   No
DK/REF

TX21SP1   [IF TX21 = 1] You have indicated that, during the past 12 months, you needed treatment or counseling for your use of drugs other than the ones just mentioned. Please type in the name of **one** of the drugs you needed treatment or counseling for during the past 12 months. If you're not sure how to spell the drug name, just make your best guess. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

TX21SP2   [IF TX21SP11 NE(BLANK OR DK/REF)] Please type in the name of **any other drug** that you needed treatment or counseling for during the past 12 months other than those you have already mentioned. If you have not needed treatment or counseling for your use of any other drugs, press the [ENTER] key to go to the next question.

_____
DK/REF

TX21SP3   [IF TX21SP2 NE (BLANK OR DK/REF)] Please type in the name of **any other drug** that you needed treatment or counseling for during the past 12 months other than those you have already mentioned. If you have not needed treatment or counseling for your use of any other drugs, press the [ENTER] key to go to the next question.

_____
DK/REF

TX21SP4   [IF TX21SP3 NE (BLANK OR DK/REF)] Please type in the name of **any other drug** that you needed treatment or counseling for during the past 12 months other than those you have already mentioned. If you have not needed treatment or counseling for your use of any other drugs, press the [ENTER] key to go to the next question.

_____
DK/REF

TX21SP5   [IF TX21SP4 NE (BLANK OR DK/REF)] Please type in the name of **any other drug** that you needed treatment or counseling for during the past 12 months other than those you have already mentioned. If you have not needed treatment or counseling for your use of any other drugs, press the [ENTER] key to go to the next question.

_____
DK/REF

DEFINE TXFILL2:
       IF TX11 = 1 AND ALL OF TX12 - TX21 = 2 OR DK/REF, TXFILL2 = alcohol
       IF TX11 = 2 OR DK/REF, AND ANY IN TX12 - TX21 = 1, TXFILL2 = any drug
       ELSE, TXFILL2 = alcohol or any other drug

TX22   [IF TX08 = 1] During the past 12 months, did you **make an effort** to get treatment or counseling for your use of [TXFILL2]?

1   Yes
2   No
DK/REF

TX23   [IF TX09 = 1] During the past 12 months, did you **make an effort** to get **additional** treatment or counseling for your use of alcohol or any other drug?

1   Yes
2   No
DK/REF

TX24   [IF TX07 NE 1] How long has it been since you were **last** in treatment or counseling for your alcohol or drug use, not counting cigarettes?

1   within the past 30 days -- that is, since **[DATEFILL]**
2   more than 30 days ago but within the past 12 months
3   more than 12 months ago

TX25   [IF TX01 = 1 AND TX07 NE 1 OR BLANK] What was the **main** place where you received treatment the **last time** you **started** treatment for your alcohol or other drug use, not counting cigarettes?

[IF TX01 = 1 AND TX07 = 1] What is the **main** place where you are currently receiving treatment for your alcohol or other drug use, not counting cigarettes?

1   A hospital overnight as an inpatient
2   A residential drug or alcohol rehabilitation facility where you stayed at night
3   A drug or alcohol rehabilitation facility as an outpatient where you don't stay at night
4   A mental health center or facility as an outpatient
5   An emergency room
6   A private doctor's office
7   A prison or jail
8   A self-help group
9   Some other place
             DK/REF

TX25SP [IF TX01 = 1 AND (TX07 NE 1 OR BLANK) AND TX25 =9] You have indicated that the last time you started treatment or counseling for your use of alcohol or other drugs, not counting cigarettes, the main place where you received treatment was in a place other than those just mentioned. Please use the keyboard to type in a description of this place. When you have finished typing your answer, press the [ENTER] key to go to the next question.

[IF TX01 = 1 AND TX07 = 1 AND TX25 = 9] You have indicated that the main place you are currently receiving treatment or counseling for your use of alcohol or other drugs, not counting cigarettes is someplace other than those just mentioned. Please use the keyboard to type in a description of this place. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

TX26   [IF (AL01 = 1 OR ALREF = 1) AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **alcohol**?

[IF (AL01 = 1 OR ALREF = 1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **alcohol**?

1   Yes
2   No
DK/REF

TX27 [IF (MJ01 =1 OR MJREF = 1) AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **marijuana or hashish**?

[IF (MJ01 = 1 OR MJREF = 1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **marijuana or hashish**?

1   Yes
2   No
DK/REF

TX28 [IF (CC01 =1 OR CCREF = 1 OR CK01 =1 OR CKREF = 1) AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **cocaine or 'crack'**?

[IF (CC01 = 1 OR CCREF = 1 OR CK01 =1 OR CKREF = 1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **cocaine or 'crack'**?

1   Yes
2   No
DK/REF

TX29 [IF (HE01 =1 OR HEREF = 1) AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **heroin**?

[IF (HE01 = 1 OR HEREF = 1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **heroin**?

1   Yes
2   No
DK/REF

TX30 [IF (LS01a =1 OR LSREF1 = 1 OR LS01b =1 OR LSREF2 = 1 OR LS01c =1 OR LS01d =1 OR LS01e =1 OR LS01f = 1 OR LSREF3 = 1 OR LS01h =1) AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **hallucinogens**?

[IF (LS01a =1 OR LSREF1 = 1 OR LS01b =1 OR LSREF2 = 1 OR LS01c =1 OR LS01d = 1 OR LS01e = 1 OR LS01f = 1 OR LSREF3 = 1 OR LS01h =1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **hallucinogens**?

1   Yes
2   No
DK/REF

TX31 [IF (IN01a =1 OR IN01b =1 OR IN01c =1 OR IN01d = 1 OR IN01e = 1OR IN01f = 1 OR IN01g = 1 OR IN01h = 1 OR IN01i = 1 OR IN01j = 1 OR IN01l = 1 OR INREF = 1) AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **inhalants**?

[IF (IN01a = 1 OR IN01b =1 OR IN01c =1 OR IN01d =1 OR IN01e = 1 OR IN01f =1 OR IN01g=1 OR IN01h =1 OR IN01i =1 OR IN01j =1 OR IN01l =1 OR INREF = 1)AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **inhalants**?

1   Yes
2   No
DK/REF

TX32 [IF (PR01 =1 OR PR02 =1 OR PR03 =1 OR PR04 = 1 OR PR05 = 1 OR PRREF = 1) AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **prescription pain relievers**?

[IF (PR01 = 1 OR PR02 = 1 OR PR03 =1 OR PR04 = 1 OR PR05 =1 OR PRREF = 1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **prescription pain relievers**?

1   Yes
2   No
DK/REF

TX33   [IF (TR01 =1 OR TR02 =1 OR TR03 =1 OR TR04 = 1 OR TR05 = 1 OR TRREF = 1) AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **prescription tranquilizers**?

[IF (TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 =1 OR TR05 =1 OR TRREF = 1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **prescription tranquilizers**?

1   Yes
2   No
DK/REF

TX34   [IF ST01 =1 OR STREF1 = 1 OR ST02 =1 OR ST03 =1 OR ST04 = 1 OR ST05 = 1 OR STREF2 = 1 AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **prescription stimulants**?

[IF (ST01 = 1 OR STREF1 = 1 OR ST02 = 1 OR ST03 =1 OR ST04 =1 OR ST05 =1 OR STREF2 = 1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **prescription stimulants**?

1   Yes
2   No
DK/REF

TX35   [IF SV01 =1 OR SV02 =1 OR SV03 =1 OR SV04 = 1 OR SV05 = 1 OR SVREF = 1 AND TX01 =1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **prescription sedatives**?

[IF (SV01 = 1 OR SV02 = 1 OR SV03 =1 OR SV04 =1 OR SV05 =1 OR SVREF = 1) AND TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **prescription sedatives**?

1   Yes
2   No
DK/REF

TX36   [IF TX01 = 1 AND TX07 NE 1 OR BLANK] The **last time** you **entered** treatment, did you receive treatment or counseling for your use of **any other drug**?

[IF TX01 = 1 AND TX07 = 1] Are you **currently** receiving treatment or counseling for your use of **any other drug**?

1   Yes
2   No
DK/REF

TX36SP1   [IF TX36 = 1 AND TX07 NE 1 OR BLANK] You have indicated that the last time you entered treatment for your drug use it was for a type of drug other than those just mentioned. Please use the keyboard to type in the name of **one** of the drugs you received treatment for the last time. If you're not sure how to spell the name of the drug, just make your best guess. When you have finished typing your answer, press the [ENTER] key to go to the next question.

[IF TX36 = 1 AND TX07 = 1] You have indicated that you are currently receiving treatment or counseling for a type of drug other than those just mentioned. Please use the keyboard to type in the name of **one** of the drugs for which you are currently being treated. If you're not sure how to spell the name of the drug, just make your best guess. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____

DK/REF

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TX36SP2   [IF TX36SP1 NE (BLANK OR DK/REF) AND TX07 NE 1 OR BLANK] Please type in the name of **any other drug** you received treatment or counseling for the last time you entered treatment for your drug use. If there are no other drugs you received treatment or counseling for the last time, other than those you already mentioned, press the [ENTER] key to go to the next question.

[IF TX36SP1 NE (BLANK OR DK/REF) AND TX07 =1] Please type in the name of **any other drug** for which you are currently receiving treatment or counseling. If there are no other drugs you are currently receiving treatment or counseling for, other than those you already mentioned, press the [ENTER] key to go to the next question.

_____
DK/REF

TX36SP3   [IF TX36SP2 NE (BLANK OR DK/REF) AND TX07 NE 1 OR BLANK] Please type in the name of **any other drug** you received treatment or counseling for the last time you entered treatment for your drug use. If there are no other drugs you received treatment or counseling for the last time, other than those you already mentioned, press the [ENTER] key to go to the next question.

[IF TX36SP2 NE (BLANK OR DK/REF) AND TX07 =1] Please type in the name of **any other drug** for which you are currently receiving treatment or counseling. If there are no other drugs you are currently receiving treatment or counseling for, other than those you already mentioned, press the [ENTER] key to go to the next question.

_____
DK/REF

TX36SP4   [IF TX36SP3 NE (BLANK OR DK/REF) AND TX07 NE 1 OR BLANK] Please type in the name of **any other drug** you received treatment or counseling for the last time you entered treatment for your drug use. If there are no other drugs you received treatment or counseling for the last time, other than those you already mentioned, press the [ENTER] key to go to the next question.

[IF TX36SP3 NE (BLANK OR DK/REF) AND TX07 =1] Please type in the name of **any other drug** for which you are currently receiving treatment or counseling. If there are no other drugs you are currently receiving treatment or counseling for, other than those you already mentioned, press the [ENTER] key to go to the next question.

_____
DK/REF

TX36SP5   [IF TX36SP4 NE (BLANK OR DK/REF) AND TX07 NE 1 OR BLANK] Please type in the name of **any other drug** you received treatment or counseling for the last time you entered treatment for your drug use. If there are no other drugs you received treatment or counseling for the last time, other than those you already mentioned, press the [ENTER] key to go to the next question.

[IF TX36SP4 NE (BLANK OR DK/REF) AND TX07 =1] Please type in the name of **any other drug** for which you are currently receiving treatment or counseling. If there are no other drugs you are currently receiving treatment or counseling for, other than those you already mentioned, press the [ENTER] key to go to the next question.

_____
DK/REF

TX37   [IF MORE THAN 1 ITEM IN THE TX26 - TX36 SERIES = 1 OR DK/REF AND TX07 NE 1 OR BLANK] What was the **main** drug you entered treatment for the **last time** you were treated?

[IF MORE THAN 1 ITEM IN THE TX26 - TX36 SERIES = 1 OR DK/REF AND TX07 = 1] What is the **main** drug for which you are currently receiving treatment or counseling?

1   Alcohol
2   Marijuana or hashish
3   Cocaine or "crack"
4   Heroin

5 Hallucinogens
6 Inhalants
7 Prescription pain relievers
8 Prescription tranquilizers
9 Prescription stimulants
10 Prescription sedatives
11 Some other drug
DK/REF

TX38 [IF TX25 = 1 - 8 AND TX07 NE 1 OR BLANK] What was the outcome of the treatment or counseling you last received at [FILL IN ANSWER FROM TX25]?

[IF TX25 = DK/REF OR TX25 = 9 AND TX07 NE 1 OR BLANK] What was the outcome of the treatment or counseling you last received?

1 You are still in treatment
2 You successfully completed treatment
3 You left because you had a problem with the program
4 You left because you couldn't afford to continue treatment
5 You left because your family needed you
6 You left because you began using drugs again
7 Your last treatment had some other outcome
DK/REF

TX38SP [IF TX38 = 7] You have indicated that the outcome of the treatment or counseling you last received was something other than the outcomes just mentioned. Please use the keyboard to type in a description of the outcome of your last treatment or counseling for drug use. You do not need to give a detailed description — just a few words will be sufficient. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

TX39 [IF TX25 = 1- 8 AND TX38 = 2 - 7 OR DK/REF] How long did you stay in treatment for your alcohol or drug use during your last treatment at [FILL IN ANSWER FROM TX25]?

[IF (TX25 = 1 - 8 AND TX38 = 1) OR (TX07 = 1 AND TX25 = 1 - 8)] How long have you been in treatment for your alcohol or drug use at [FILL IN ANSWER FROM TX17]?

[IF TX25 = 9 OR DK/REF AND TX38 = 2 - 7 OR DK/REF] How long did you stay in treatment for your alcohol or drug use during your last treatment?

[IF (TX25 = 9 OR DK/REF AND TX38 = 1) OR TX07 = 1 AND TX25 = 9)] How long have you been in treatment for your alcohol or drug use so far?

Please indicate whether you want to give your answer in days, months, or years.

1 Days
2 Months
3 Years
DK/REF

TX40DAY1 [IF (TX38 = 1 OR TX07 = 1) AND TX39 = 1 OR DK/REF] How many **days** have you been in treatment for your alcohol or drug use so far?

OF DAYS: _____ [RANGE: 1 - 365]
DK/REF

TX40DAY2 [IF TX38 = 2 - 7 OR DK/REF AND TX39 = 1 OR DK/REF] How many **days** did you stay in treatment for your alcohol or drug use the last time?

OF DAYS: _____ [RANGE: 1 - 365]
DK/REF

TX41MON1 [IF (TX38 = 1 OR TX07 = 1) AND TX39 = 2] How many **months** have you been in treatment for your alcohol or drug use so far?

OF MONTHS: _____ [RANGE: 1 - 400]
DK/REF

TX41MON2 [IF TX38 = 2 - 7 OR DK/REF AND TX39 = 2] How many **months** did you stay in treatment for your alcohol or drug use the last time?

OF MONTHS: _____ [RANGE: 1 - 400]
DK/REF

TX41YR1 [IF (TX38 = 1 OR TX07 = 1) AND TX39 = 3] How many **years** have you been in treatment for your alcohol or drug use so far?

OF YEARS: _____ [RANGE: 1 - 60]
DK/REF

TX41YR2 [IF TX38 = 2 - 7 OR DK/REF AND TX39 = 3] How many **years** did you stay in treatment for your alcohol or drug use the last time?

OF YEARS: _____ [RANGE: 1 - 60]
DK/REF

TX42A [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did **private health insurance** pay for the **last** treatment you received, even if it paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will **private health insurance** pay for the treatment you are currently receiving, even if it pays only part of the cost?

1 Yes
2 No
DK/REF

TX42B [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did **Medicare** pay for the **last** treatment you received, even if it paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will **Medicare** pay for the treatment you are currently receiving, even if it pays only part of the cost?

1 Yes
2 No
DK/REF

TX42C [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did **Medicaid** pay for the **last** treatment you received, even if it paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will **Medicaid** pay for the treatment you are currently receiving, even if it pays only part of the cost?

1 Yes
2 No
DK/REF

TX42D [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did **a public assistance program other than Medicaid** pay for the **last** treatment you received, even if it paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will **a public assistance program other than Medicaid** pay for the treatment you are currently receiving, even if it pays only part of the cost?

1   Yes
2   No
DK/REF

TX42E [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did you use **your own savings or earnings** to pay for the **last** treatment you received, even if you paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will you use **your own savings or earnings** to pay for the treatment you are currently receiving, even if you pay only part of the cost?

1   Yes
2   No
DK/REF

TX42F [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did **family members** pay for the **last** treatment you received, even if they paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will **family members** pay for the treatment you are currently receiving, even if they pay only part of the cost?

1   Yes
2   No
DK/REF

TX42G [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did **the courts** pay for the **last** treatment you received, even if it paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will **the courts** pay for the treatment you are currently receiving, even if it pays only part of the cost?

1   Yes
2   No
DK/REF

TX42H [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did **CHAMPUS or TRICARE, CHAMPVA, the VA, or some other military health care** pay for the **last** treatment you received, even if it paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will **CHAMPUS or TRICARE, CHAMPVA, the VA, or some other military health care** pay for the treatment you are currently receiving, even if it pays only part of the cost?

1   Yes
2   No
DK/REF

TX42I [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Did **your employer** pay for the **last** treatment you received, even if it paid only part of the cost?

[IF (TX01 = 1 AND TX07 = 1) IR TX38 = 1] Will **your employer** pay for the treatment you are currently receiving, even if it pays only part of the cost?

1   Yes
2   No
DK/REF

TX42J [IF TX01 = 1 AND TX07 NE 1 OR BLANK] Was your **last** treatment paid for by **some other source** besides those that have been listed?

[IF (TX01 = 1 AND TX07 = 1) OR TX38 = 1] Will the treatment you are currently receiving, be paid for by **some other source** besides those that have been listed?

1   Yes
2   No

DK/REF

TX42JSP [IF TX42J = 1 AND TX07 NE 1 OR BLANK] You have indicated that your **last** treatment or counseling for alcohol or drug use was paid for by a source **other** than those just mentioned. Please use the keyboard to type in a description of the source that paid for your last treatment or counseling for alcohol or drug use. You do not need to give a detailed description — just a few words will be sufficient. When you have finished typing your answer, press the [ENTER] key to go to the next question.

[IF TX42J = 1 AND (TX07 = 1 OR TX38 = 1)] You have indicated that the treatment your are currently receiving will be paid for by a source **other** than those just mentioned. Please use the keyboard to type in a description of the source that will pay for your current treatment or counseling for alcohol or drug use. You do not need to give a detailed description — just a few words will be sufficient. When you have finished typing your answer, press the [ENTER] key to go to the next question.

TX42K [IF TX42A - TX42J = 2 AND TX07 NE 1 OR BLANK] Was the **last** treatment you received **free**?

[IF TX42A - TX42J = 2 AND (TX07 = 1 OR TX38 = 1)] Is the treatment you are currently receiving **free**?

1 Yes
2 No
DK/REF

TX43 [IF TX01 = 1] Were you enrolled in a treatment program for your alcohol or drug use on October 1, 2000?

For this question, please include only treatment you received at a hospital, drug rehabilitation facility, or mental health center.

1 Yes
2 No
DK/REF

TX44 [IF TX03 NE BLANK] Think about all the treatment or counseling you received for your [TXFILL1] during the past 12 months. Was **detoxification** the **only** [TXFILL1] treatment you received during the past 12 months?

1 Yes
2 No
DK/REF

Health Care

HLTHINT These next questions are about your health and health care.

HLTH01 [IF QD01 = 9 AND CURNTAGE = 12 - 44] Are you currently pregnant?

        1   Yes
        2   No
        DK/REF

HLTH02 [IF HLTH01 = 1] How many months pregnant are you?

        # OF MONTHS: _____ [RANGE: 1 - 9]
        DK/REF

HLTH03 During the past 12 months, that is, since DATEFILL, how many different times have you been treated in an emergency room for any reason?

        # OF TIMES: _____ [RANGE: 0 - 90]
        DK/REF

HLTH04 During the past 12 months, have you stayed overnight or longer as an inpatient in a hospital?

        1   Yes
        2   No
        DK/REF

HLTH05 [IF HLTH04 = 1] During the past 12 months, **how many nights** were you an inpatient in a hospital?

        # OF NIGHTS: _____ [RANGE: 1 - 365]

WORKSCHL [IF CURNTAGE = 18 OR OLDER] What were you doing **most** of the past 12 months?

        1   Working at a job or business
        2   Going to school
        3   Keeping house
        4   Doing something else
        DK/REF

WORKPREV [IF CURNTAGE <65 AND WORKSCHL=3 OR 4 OR DK/REF] Did any physical, mental, or emotional problem prevent you from working at a job or business during most of the past 12 months?

        1   Yes
        2   No
        DK/REF

WORKLIM [IF WORKPREV=2 OR DK/REF OR WORKSCHL = 1] Did any physical, mental, or emotional problem **limit you in the kind or amount of work** you could do during most of the past 12 months?

        1   Yes
        2   No
        DK/REF

PROBTYPE [IF WORKPREV=1 OR WORKLIM=1] Was it a physical problem, a mental or emotional problem, or both?

        1   Physical problem
        2   Mental or emotional problem
        3   Both
        DK/REF

Adult Mental Health Service Utilization
(Questions Administered only to respondents 18 or older)

ADINTRO   [IF CURNTAGE = 18 OR OLDER] These next questions are about treatment and counseling for problems with emotions, nerves or mental health. [IF TX01 = 1 OR DK/REF] Please do not include treatment for alcohol or drug use.

Press [ENTER] to continue.

ADMT01   [IF CURNTAGE = 18 OR OLDER] During the past 12 months, have you stayed **overnight or longer** in a hospital or other facility to receive treatment or counseling for any problem you were having with your emotions, nerves, or mental health? [IF TX01 = 1 OR DK/REF] Please do not include treatment for alcohol or drug use.

     1   Yes
     2   No
     DK/REF

ADMT02   [IF ADMT01 = 1] Where did you stay **overnight or longer** to receive mental health treatment or counseling during the past 12 months?

To select more than one place, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

     1   A private or public psychiatric hospital
     2   A psychiatric unit of a general hospital
     3   A medical unit of a general hospital
     4   Another type of hospital
     5   A residential treatment center
     6   Some other type of facility
     DK/REF

ADMT04   [IF ADMT02 = 1] During the past 12 months, how many **nights** did you spend in a private or public psychiatric hospital for mental health care?

     # OF NIGHTS: _____ [RANGE: 1 - 365]
     DK/REF

ADMT05   [IF ADMT02 = 2] During the past 12 months, how many **nights** did you spend in the psychiatric unit of a general hospital for mental health care?

     # OF NIGHTS: _____ [RANGE: 1 - 365]
     DK/REF

ADMT06   [IF ADMT02 = 3] During the past 12 months, how many **nights** did you spend in the medical unit of a general hospital for mental health care?

     # OF NIGHTS: _____ [RANGE: 1 - 365]
     DK/REF

ADMT07   [IF ADMT02 = 4] During the past 12 months, how many **nights** did you spend in some other type of hospital for mental health care?

     # OF NIGHTS: _____ [RANGE: 1 - 365]
     DK/REF

ADMT08   [IF ADMT02 = 5] During the past 12 months, how many **nights** did you spend in a residential treatment center for mental health care?

     # OF NIGHTS: _____ [RANGE: 1 - 365]
     DK/REF

ADMT09 [IF ADMT02 = 6] During the past 12 months, how many **nights** did you spend in some other type of facility for mental health care?

OF NIGHTS: _____ [RANGE: 1 - 365]
DK/REF

ADMT10 [[IF ADMT02 NE BLANK] Who paid or will pay for the **inpatient** mental health care you received during the past 12 months?

To select more than one answer, press the space bar between each number you type. When you have finished, press [ENTER].

1   Self or a family member living with you
2   A family member who does not live with you
3   Private health insurance
4   Medicare
5   Medicaid
6   Rehabilitation program
7   Employer
8   VA or other military program
9   Other public source
10   Other private source
11   No one paid because the treatment was free
DK/REF

ADMT11 [IF MORE THAN 1 RESPONSE SELECTED IN ADMT10 AND ADMT02 NE DK/REF] Who paid or will pay **most** of the cost for the **inpatient** mental health care you received during the past 12 months?

Please select only one answer from those that are shown in blue below.
[NOTE TO PROGRAMMERS: RESPONSES CHOSEN IN ADMT10 SHOULD BE SHOWN IN BLUE. HOWEVER DO NOT IMPLEMENT AN ERROR MESSAGE IF THE RESPONDENT SELECTS ONE OF THE OTHER RESPONSES.]

1   Self or a family member living with you
2   A family member who does not live with you
3   Private health insurance
4   Medicare
5   Medicaid
6   Rehabilitation program
7   Employer
8   VA or other military program
9   Other public source
10   Other private source
11   No one paid because the treatment was free
DK/REF

ADMT12 [IF ADMT10 = 1 AND ADMT02 NE DK/REF] How much did you or your family pay for the **inpatient** mental health care you received during the past 12 months? Do not count any money that has been or will be reimbursed by insurance or any other source.

[IF ADMT10 = 2 AND NE 1 AND ADMT02 NE DK/REF] How much did your family pay for the **inpatient** mental health care you received during the past 12 months? Do not count any money that has been or will be reimbursed by insurance or any other source.

1   Less than $100
2       $100 to $200
3       $201 to $500
4       $501 to $900
5       $901 to $1,500
6       $1,501 to $2,000
7       $2,001 to $5,000

8   More than $5,000
DK/REF

ADMT13   [IF CURNTAGE = 18 OR OLDER] The list below includes some of the places where people can get **outpatient** treatment or counseling for problems with their emotions, nerves, or mental health.

During the past 12 months, did you receive any **outpatient** treatment or counseling for any problem you were having with your emotions, nerves, or mental health at any of the places listed below? [IF TX01 = 1 OR DK/REF] Please do not include treatment for alcohol or drug use.

- •   An outpatient mental health clinic or center
- •   The office of a private therapist, psychologist, psychiatrist, social worker, or counselor that was not part of a clinic
- •   A doctor's office that was not part of a clinic
- •   An outpatient medical clinic
- •   A partial day hospital or day treatment program
- •   Some other place

1   Yes
2   No
DK/REF

ADMT14   [IF ADMT13 = 1] Where did you receive **outpatient** mental health treatment or counseling during the past 12 months?

To select more than one place, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   An outpatient mental health clinic or center
2   The office of a private therapist, psychologist, psychiatrist, social worker, or counselor that was not part of a clinic
3   A doctor's office that was not part of a clinic
4   An outpatient medical clinic
5   A partial day hospital or day treatment program
6   Some other place
DK/REF

ADMT15   [IF ADMT14 = 6] You have indicated that during the past 12 months you received **outpatient** mental health treatment or counseling at a place other than those just listed. Please use the keyboard to type in a description of this place. When you have finished, press the [ENTER] key to go to the next question.

      _____

DK/REF

ADMT16   [IF ADMT14 = 1] During the past 12 months, how many **visits** did you make to an **outpatient** mental health clinic or center for mental health care?

OF VISITS: _____ [RANGE: 1 - 365]
DK/REF

ADMT17   [IF ADMT14 = 2] During the past 12 months, how many **outpatient visits** did you make to a private therapist, psychologist, psychiatrist, social worker, or counselor for mental health care?

OF VISITS: _____ [RANGE: 1 - 365]
DK/REF

ADMT18   [IF ADMT14 = 3] During the past 12 months, how many **outpatient visits** did you make to a doctor's office for mental health care?

OF VISITS: _____ [RANGE: 1 - 365]
DK/REF

ADMT19 [IF ADMT14 = 4] During the past 12 months, how many **outpatient visits** did you make to an outpatient medical clinic for mental health care?

OF VISITS: _____   [RANGE: 1 - 365]
DK/REF

ADMT20 [IF ADMT14 = 5] During the past 12 months, how many **outpatient visits** did you make to a partial day hospital or day treatment program for mental health care?

OF VISITS: _____   [RANGE: 1 - 365]
DK/REF

ADMT21 [IF ADMT14 = 6] During the past 12 months, how many **outpatient visits** did you make to some other type of facility for mental health care?

OF VISITS: _____   [RANGE: 1 - 365]
DK/REF

ADMT22 [IF ADMT14 NE BLANK] Who paid or will pay for the **outpatient** mental health care you received during the past 12 months?

To select more than one answer, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   Self or a family member living with you
2   A family member who does not live with you
3   Private health insurance
4   Medicare
5   Medicaid
6   Rehabilitation program
7   Employer
8   VA or other military program
9   Other public source
10   Other private source
11   No one paid because the treatment was free
DK/REF

ADMT23 [IF MORE THAN 1 RESPONSE SELECTED IN ADMT22 AND ADMT14 NE DK/REF] Who paid or will pay **most** of the cost for the **outpatient** mental health care you received during the past 12 months?

Please select only one answer from those that are shown in blue below.
[NOTE TO PROGRAMMERS: RESPONSES CHOSEN IN ADMT22 SHOULD BE SHOWN IN BLUE. HOWEVER DO NOT IMPLEMENT AN ERROR MESSAGE IF THE RESPONDENT SELECTS ONE OF THE OTHER RESPONSES.]

1   Self or a family member living with you
2   A family member who does not live with you
3   Private health insurance
4   Medicare
5   Medicaid
6   Rehabilitation program
7   Employer
8   VA or other military program
9   Other public source
10   Other private source
11   No one paid because the treatment was free
DK/REF

ADMT24 [IF ADMT22 = 1 AND ADMT14 NE DK/REF] How much did you or your family pay for the **outpatient** mental health care you received during the past 12 months? Do not count any money that has been or will be reimbursed by insurance or any other source.

[IF ADMT22 = 2 AND NE 1 AND ADMT14 NE DK/REF] How much did your family pay for the **outpatient** mental health care you received during the past 12 months? Do not count any money that has been or will be reimbursed by insurance or any other source.

1   Less than $100
2       $100 to $200
3       $201 to $500
4       $501 to $900
5       $901 to $1,500
6       $1,501 to $2,000
7       $2,001 to $5,000
8   More than $5,000
DK/REF

ADMT25   [IF CURNTAGE = 18 OR OLDER] During the past 12 months, did you take any **prescription medication** that was prescribed for you to treat a mental or emotional condition?

1   Yes
2   No
DK/REF

ADMT26   [IF CURNTAGE = 18 OR OLDER] During the past 12 months, was there any time when you **needed** mental health treatment or counseling for yourself but **didn't get it**?

1   Yes
2   No
DK/REF

ADMT27   [IF ADMT26 = 1] Which of these statements explains why you did not get the mental health treatment or counseling you needed?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1   Because you couldn't afford the cost
2   Because you were concerned that getting mental health treatment or counseling might cause your neighbors or community to have a negative opinion of you
3   Because you were concerned that getting mental health treatment or counseling might have a negative effect on your job
4   Because your health insurance does not cover **any** mental health treatment or counseling
5   Because your health insurance does not pay **enough** for mental health treatment or counseling
6   Because you did not know where to go to get services
7   Because you were concerned that the information you gave the counselor might not be kept confidential
8   Because you were concerned that you might be committed to a psychiatric hospital or might have to take medicine
9   Some other reason or reasons
DK/REF

Social Environment (Section Administered to 18 + Year Olds Only)

LEADSEN [IF CURNTAGE = 18 OR OLDER] The next questions are about people in the neighborhood where you currently live.

Press [ENTER] to continue.

SEN03a [IF CURNTAGE = 18 OR OLDER] How do you think most people in your neighborhood would feel about **adults** smoking one or more packs of cigarettes per day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

SEN03b [IF CURNTAGE = 18 OR OLDER] How do you think most people in your neighborhood would feel about **adults** trying marijuana or hashish once or twice?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

SEN03c [IF CURNTAGE = 18 OR OLDER] How do you think most people in your neighborhood would feel about **adults** having one or two drinks of an alcoholic beverage nearly every day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

SEN03d [IF CURNTAGE = 18 OR OLDER] How do you think most people in your neighborhood would feel about **adults** driving a car after having 1 or 2 drinks of an alcoholic beverage?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

SEN04 [IF CURNTAGE = 18 OR OLDER] How many times have you moved in the past 5 years?

TIMES MOVED: _____ [RANGE: 0 - 90]
DK/REF

SEN05 [IF CURNTAGE = 18 OR OLDER] Do one or more other people live here with you in this household?

1 Yes
2 No
DK/REF

SEN06a [IF SEN05 = 1] For each of the next statements, please indicate how much you agree or disagree.

People in your household often insult or yell at each other.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN06b [IF SEN05 = 1] People in your household have serious arguments.

1   Strongly agree
2   Somewhat agree
3   Somewhat disagree
4   Strongly disagree
DK/REF

SEN06c [IF SEN05 = 1] People in your household argue about the same things over and over.

1   Strongly agree
2   Somewhat agree
3   Somewhat disagree
4   Strongly disagree
DK/REF

SEN07 [IF SEN05 = 1] Are you currently living with a spouse or partner?

1   Yes
2   No
DK/REF

SEN08a [IF SEN07 = 1] How many times **during the past 12 months** have you and your spouse or partner spent an hour or more together doing an activity that you both enjoyed?

1   0 times
2   1 to 2 times
3   A Few times
4   Many times
DK/REF

SEN08b [IF SEN07 = 1] How many times **during the past 12 months** were you and your spouse or partner angry with each other?

1   0 times
2   1 to 2 times
3   A Few times
4   Many times
DK/REF

SEN08c [IF SEN07 = 1] How many times **during the past 12 months** did your spouse or partner hit or threaten to hit you?

1   0 times
2   1 to 2 times
3   A Few times
4   Many times
DK/REF

SEN08d [IF SEN07 = 1] How many times **during the past 12 months** did you hit or threaten to hit your spouse or partner?

1   0 times
2   1 to 2 times
3   A Few times
4   Many times
DK/REF

SEN09 [IF SEN07 = 1] How often is your spouse or partner critical of you?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

SEN10 [IF SEN07 = 1] How often does your spouse or partner show concern for your feelings and problems?

    1   Always
    2   Sometimes
    3   Seldom
    4   Never
    DK/REF

SEN11a [IF CURNTAGE = 18 OR OLDER] Not including family members, how many friends do you have who you share personal issues and concerns with?

    1   None
    2   One
    3   2 to 3
    4   4 to 5
    5   more than 5
    DK/REF

SEN11b [IF CURNTAGE = 18 OR OLDER] Not including family members, how many friends do you have who you spend time with on shared interests and activities?

    1   None
    2   One
    3   2 to 3
    4   4 to 5
    5   more than 5
    DK/REF

SEN11c [IF CURNTAGE = 18 OR OLDER] Not including family members, how many friends do you have who really like and care about you?

    1   None
    2   One
    3   2 to 3
    4   4 to 5
    5   more than 5
    DK/REF

SEN12a [IF CURNTAGE = 18 OR OLDER] **During the past 12 months**, how many times have you sold illegal drugs?

    1   0 times
    2   1 or 2 times
    3   3 to 5 times
    4   6 to 9 times
    5   10 or more times
    DK/REF

SEN12b [IF CURNTAGE = 18 OR OLDER] **During the past 12 months**, how many times have you stolen or tried to steal anything worth more than $50?

    1   0 times
    2   1 or 2 times
    3   3 to 5 times
    4   6 to 9 times
    5   10 or more times
    DK/REF

SEN12c [IF CURNTAGE = 18 OR OLDER] **During the past 12 months**, how many times have you attacked someone with the intent to seriously hurt them?

    1   0 times

2	1 or 2 times
3	3 to 5 times
4	6 to 9 times
5	10 or more times
DK/REF	

SEN12d [IF CURNTAGE = 18 OR OLDER AND RANDOM SAMPLE = A] **During the past 12 months**, that is, since [DATE FILL], have you driven a car more than 100 miles per hour?

1 Yes
2 No
DK/REF

SEN12e [IF CURNTAGE = 18 OR OLDER AND RANDOM SAMPLE = A] **During the past 12 months**, have you gained or lost more than 50 pounds?

1 Yes
2 No
DK/REF

SEN12f [IF CURNTAGE = 18 OR OLDER AND RANDOM SAMPLE = A] **During the past 12 months**, have you gotten injured when you tried to stop a fight or an assault?

1 Yes
2 No
DK/REF

SEN12g [IF CURNTAGE = 18 OR OLDER AND RANDOM SAMPLE = A] **During the past 12 months**, have you used steroids to become more muscular?

1 Yes
2 No
DK/REF

SEN12h [IF CURNTAGE = 18 OR OLDER AND RANDOM SAMPLE = B] **During the past 12 months**, have you crossed railroad tracks when a train was coming and almost gotten hit by the train?

1 Yes
2 No
DK/REF

SEN12i [IF CURNTAGE = 18 OR OLDER AND RANDOM SAMPLE = B] **During the past 12 months**, have you used laxatives or vomited on purpose in order to keep your weight down?

1 Yes
2 No
DK/REF

SEN12j [IF CURNTAGE = 18 OR OLDER AND RANDOM SAMPLE = B] **During the past 12 months**, have you passed another vehicle when you knew it was not safe to pass?

1 Yes
2 No
DK/REF

SEN12k [IF CURNTAGE = 18 OR OLDER AND RANDOM SAMPLE = B] **During the past 12 months**, have you been careless and set a large or serious fire with a cigarette or match?

1 Yes
2 No
DK/REF

SEN13a [IF CURNTAGE = 18 OR OLDER] How do you feel about **adults** smoking one or more packs of cigarettes per day?

1   Neither approve nor disapprove
2   Somewhat disapprove
3   Strongly disapprove
DK/REF

SEN13b [IF CURNTAGE = 18 OR OLDER] How do you feel about **adults** trying marijuana or hashish once or twice?

1   Neither approve nor disapprove
2   Somewhat disapprove
3   Strongly disapprove
DK/REF

SEN13c [IF CURNTAGE = 18 OR OLDER] How do you feel about **adults** having one or two drinks of an alcoholic beverage nearly every day?

1   Neither approve nor disapprove
2   Somewhat disapprove
3   Strongly disapprove
DK/REF

SEN13d [IF CURNTAGE = 18 OR OLDER] How do you feel about **adults** driving a car after having one or two drinks of an alcoholic beverage?

1   Neither approve nor disapprove
2   Somewhat disapprove
3   Strongly disapprove
DK/REF

SEN14a [IF CURNTAGE = 18 OR OLDER] How many of your friends would you say smoke cigarettes?

1   None of them
2   A few of them
3   Most of them
4   All of them
DK/REF

SEN14b [IF CURNTAGE = 18 OR OLDER] How many of your friends would you say use marijuana or hashish?

1   None of them
2   A few of them
3   Most of them
4   All of them
DK/REF

SEN14c [IF CURNTAGE = 18 OR OLDER] How many of your friends would you say drink alcoholic beverages?

1   None of them
2   A few of them
3   Most of them
4   All of them
DK/REF

SEN14d [IF CURNTAGE = 18 OR OLDER] How many of your friends would you say get drunk at least once a week?

1   None of them
2   A few of them
3   Most of them
4   All of them
DK/REF

SENRELAT   [IF CURNTAGE = 18 OR OLDER] **During the past 12 months**, how many times did you attend religious services? Please do **not** include special occasions such as weddings, funerals, or other special events in your answer.

      1   0 times
      2   1 to 2 times
      3   3 to 5 times
      4   6 to 24 times
      5   25 to 52 times
      6   More than 52 times
      DK/REF

SENREBE1   [IF CURNTAGE = 18 OR OLDER] These next questions are about the role that religious beliefs may play in your life. For each statement, please indicate whether you strongly disagree, disagree, agree, or strongly agree.

Your religious beliefs are a very important part of your life.

      1   Strongly disagree
      2   Disagree
      3   Agree
      4   Strongly Agree
      DK/REF

SENREBE2   [IF CURNTAGE = 18 OR OLDER] Your religious beliefs influence how you make decisions in your life.

      1   Strongly Disagree
      2   Disagree
      3   Agree
      4   Strongly Agree
      DK/REF

SENREBE3   [IF CURNTAGE = 18 OR OLDER] It is important that your friends share your religious beliefs.

      1   Strongly Disagree
      2   Disagree
      3   Agree
      4   Strongly Agree
      DK/REF

Parenting Experiences

(IF FIPE3 =1 ADMINISTER THIS SECTION; ELSE SKIP TO YOUTH EXPERIENCES IF RESPONDENT IS 12 -17 OR QD13 IF RESPONDENT IS 18 OR OLDER)

LEADPAR   [IF FIPE3 = 1] These questions refer to your child who was also selected to complete an interview. Please think about this child as you answer these questions. If you're not sure which child was selected, please ask your interviewer.

Press [ENTER] to continue.

PE01   [IF FIPE3 = 1] What is the birthdate of your child who was also selected to complete an interview?

Enter your child's birthdate as numbers in the following form: (MM-DD-YYYY)

DOB: _____   [RANGE: ALLOW BIRTH YEARS OF 1982 - 1988 ONLY]
DK/REF

PE01a   [IF PE01 NE DK/REF] The computer calculated that the child who was also selected to complete an interview is [CALCULATED AGE FROM PE01]. Is this correct?

1   Yes
2   No
DK/REF

PE01b   [IF PE01 = DK/REF OR PE01a = 2] How old is the child who was also selected to complete an interview?

AGE: _____   [RANGE: 12 - 18]
DK/REF

PE02   [IF PE01a = 1 OR PE01b = 12 - 18] Think about the past 12 months, that is from DATEFILL through today. Please indicate if you think your child has done any of these things **during the past 12 months**.

In the past 12 months, do you think your child has smoked one or more cigarettes, even once?

1   Yes
2   No
DK/REF

PE02b   [IF PE01a = 1 OR PE01b = 12 - 18] In the past 12 months, do you think your child has used any chewing tobacco or snuff, even once?

1   Yes
2   No
DK/REF

PE02c   [IF PE01a = 1 OR PE01b = 12 - 18] In the past 12 months, do you think your child has drunk any type of alcoholic beverage, even once?

1   Yes
2   No
DK/REF

PE02d   [IF PE01a = 1 OR PE01b = 12 - 18] In the past 12 months, do you think your child has used any marijuana or hashish, even once?

1   Yes
2   No
DK/REF

PE02e   [IF PE01a = 1 OR PE01b = 12 - 18] In the past 12 months, do you think your child has used any form of cocaine, such as powder, 'crack,' free base or coca paste, even once?

1   Yes
2   No
DK/REF

PE02f   [IF PE01a = 1 OR PE01b = 12 - 18] In the past 12 months, do you think your child has used any inhalant, such as nitrous oxide, glue, paint thinner or certain aerosol sprays, even once?

1   Yes
2   No
DK/REF

PE03   [IF PE01a = 1 OR PE01b = 12 - 18] **During the past 12 months**, how many times have you talked with your child about the dangers or problems associated with the use of tobacco, alcohol, or other drugs?

1   0 times
2   1 to 2 times
3   A few times
4   Many times
DK/REF

PE04   [IF PE03 = 2 OR 3 OR 4] Think about the most serious and thorough discussion about drugs you had with your child **during the past 12 months**. About how long did this discussion last?

1   Less than 10 minutes
2   10 to 30 minutes
3   31 to 60 minutes
4   More than 60 minutes
DK/REF

PE05a   [IF PE01a = 1 OR PE01b = 12 - 18] For each of the next statements, please indicate whether you strongly agree, agree, disagree, or strongly disagree.

I wish I knew better what to say to my child about drugs.

1   Strongly agree
2   Agree
3   Disagree
4   Strongly disagree
DK/REF

PE05b   [IF PE01a = 1 OR PE01b = 12 - 18] What I say will have little influence on whether my child uses drugs.

1   Strongly agree
2   Agree
3   Disagree
4   Strongly disagree
DK/REF

PE05c   [IF PE01a = 1 OR PE01b = 12 - 18] Drug education is best handled by the schools, not by parents.

1   Strongly agree
2   Agree
3   Disagree
4   Strongly disagree
DK/REF

PE05d   [IF PE01a = 1 OR PE01b = 12 - 18] There are places in my community where I can learn more about how to help prevent my child from using drugs.

1   Strongly agree
2   Agree

3   Disagree
4   Strongly disagree
DK/REF

Youth Experiences
   (Section Administered to 12 - 17 Year Olds Only; Respondents 18 or Older Skip to QD13)

LEADSEN   [IF CURNTAGE = 12 - 17] The next questions are about school and other activities.

              Press [Enter] to continue.

YE04   [IF CURNTAGE = 12 - 17] How many times have you moved in the past 5 years?

         # TIMES MOVED: _____   [RANGE: 0 - 90]
         DK/REF

YE09   [IF CURNTAGE = 12 - 17] Have you attended any type of school at any time **during the past 12 months**?

         1   Yes
         2   No
         DK/REF

YE09a   [IF YE09 = 2 OR DK/REF] Some parents decide to educate their children at home rather than send them to school.
         Have you been home-schooled at any time **during the past 12 months**?

         1   Yes
         2   No
         DK/REF

YE10   [IF YE09 = 1] Which of the statements below best describes how you felt overall about going to school **during the
         past 12 months**?

         [IF YE09a = 1] Please think about your home-schooling as you answer these next questions about "school."

         Which of the statements below best describes how you felt overall about going to school **during the past 12 months**?

         1   You liked going to school a lot
         2   You kind of liked going to school
         3   You didn't like going to school very much
         4   You hated going to school
         DK/REF

YE11   [IF YE09 = 1 OR YE09a = 1] **During the past 12 months**, how often did you feel that the school work you were
         assigned to do was meaningful and important?

         1   Always
         2   Sometimes
         3   Seldom
         4   Never
         DK/REF

YE12   [IF YE09 = 1 OR YE09a = 1] How important do you think the things you have learned in school **during the past 12
         months** are going to be to you later in life?

         1   Very important
         2   Somewhat important
         3   Somewhat unimportant
         4   Very unimportant
         DK/REF

YE13   [IF YE09 = 1 OR YE09a = 1] How interesting do you think most of your courses at school **during the past 12 months**
         have been?

         1   Very interesting

2   Somewhat interesting
3   Somewhat boring
4   Very boring
DK/REF

YE14   [IF YE09 = 1 OR YE09a = 1] **During the past 12 months**, how often did your teachers at school let you know when you were doing a good job with you school work?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

YE15   [IF YE09 = 1 OR YE09a = 1] What were your grades for the last semester or grading period you **completed**?

1   An 'A+', 'A', or 'A-minus' average
2   A 'B+', 'B', or 'B-minus' average
3   A 'C+', 'C', or 'C-minus' average
4   A 'D' or less than a 'D' average
5   My school does not give these grades
DK/REF

YE16a   [IF YE09 = 1] How many of the students in your grade at school would you say smoke cigarettes?

[IF YE09a = 1] Please think about the school you would be attending if you were not home-schooled, as you answer these next questions.

How many of the students in your grade at school would you say smoke cigarettes?

1   None of them
2   A few of them
3   Most of them
4   All of them
DK/REF

YE16b   [IF YE09 = 1 OR YE09a = 1] How many of the students in your grade at school would you say use marijuana or hashish?

1   None of them
2   A few of them
3   Most of them
4   All of them
DK/REF

YE16c   [IF YE09 = 1 OR YE09a = 1] How many of the students in your grade at school would you say drink alcoholic beverages?

1   None of them
2   A few of them
3   Most of them
4   All of them
DK/REF

YE16d   [IF YE09 = 1 OR YE09a = 1] How many of the students in your grade at school would you say get drunk at least once a week?

1   None of them
2   A few of them
3   Most of them
4   All of them
         DK/REF

YE06a   [IF YE09 = 1 OR YE09a = 1] The next questions ask about your parents. By **parents**, we mean either your biological parents, adoptive parents, stepparents, or adult guardians who live in your household.

During the past 12 months, how often did your parents check on whether you had done your homework?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

YE06b   [IF YE09 = 1 OR YE09a = 1] **During the past 12 months**, how often did your parents provide help with your homework when you needed it?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

YE06c   [IF YE09 =2 OR DK/REF AND YE09a = 2 OR DK/REF ADD: The next questions ask about your parents. By **parents**, we mean either your biological parents, adoptive parents, stepparents, or adult guardians who live in your household. OTHERWISE SIMPLY SHOW QUESTION AS IS.] **During the past 12 months**, how often did your parents make you do chores around the house?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

YE06d   [IF CURNTAGE = 12 - 17] **During the past 12 months**, how often did your parents limit the amount of time you watched TV?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

YE06e   [IF YE09=1 OR YE09a = 1] **During the past 12 months**, how often did your parents limit the amount of time you went out with friends on school nights?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

YE06f   [IF CURNTAGE = 12 - 17] **During the past 12 months**, how often did your parents let you know when you'd done a good job?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

YE06g   [IF CURNTAGE = 12 - 17] **During the past 12 months**, how often did your parents tell you they were proud of you for something you had done?

1   Always
2   Sometimes
3   Seldom
4   Never
DK/REF

YE18a [IF CURNTAGE = 12 - 17] **During the past 12 months**, how many times have you argued or had a fight with at least one of your parents?

1   0 times
2   1 or 2 times
3   3 to 5 times
4   6 to 9 times
5   10 or more times
DK/REF

YE18b [IF CURNTAGE = 12 - 17] **During the past 12 months**, how many times have you gotten into a serious fight at school or work?

1   0 times
2   1 or 2 times
3   3 to 5 times
4   6 to 9 times
5   10 or more times
DK/REF

YE18c [IF CURNTAGE = 12 - 17] **During the past 12 months**, how many times have you taken part in a fight where a group of your friends fought against another group?

1   0 times
2   1 or 2 times
3   3 to 5 times
4   6 to 9 times
5   10 or more times
DK/REF

YE18d [IF CURNTAGE = 12 - 17] **During the past 12 months**, how many times have you carried a handgun?

1   0 times
2   1 or 2 times
3   3 to 5 times
4   6 to 9 times
5   10 or more times
DK/REF

YE18e [IF CURNTAGE = 12 - 17] **During the past 12 months**, how many times have you sold illegal drugs?

1   0 times
2   1 or 2 times
3   3 to 5 times
4   6 to 9 times
5   10 or more times
DK/REF

YE18f [IF CURNTAGE = 12 - 17] **During the past 12 months**, how many times have you stolen or tried to steal anything worth more than $50?

1   0 times
2   1 or 2 times
3   3 to 5 times
4   6 to 9 times

5 10 or more times
DK/REF

YE18g [IF CURNTAGE = 12 - 17] **During the past 12 months**, how many times have you attacked someone with the intent to seriously hurt them?

  1 0 times
  2 1 or 2 times
  3 3 to 5 times
  4 6 to 9 times
  5 10 or more times
  DK/REF

YE18h [IF CURNTAGE = 12 - 17 AND RANDOM SAMPLE = A] **During the past 12 months**, that is, since [DATE FILL], have you run away from home and slept on the street?

  1 Yes
  2 No
  DK/REF

YE18i [IF CURNTAGE = 12 - 17 AND RANDOM SAMPLE = A] **During the past 12 months**, have you gained or lost more than 50 pounds?

  1 Yes
  2 No
  DK/REF

YE18j [IF CURNTAGE = 12 - 17 AND RANDOM SAMPLE = A] **During the past 12 months**, have you been seriously injured in a fight?

  1 Yes
  2 No
  DK/REF

YE18k [IF CURNTAGE = 12 - 17 AND RANDOM SAMPLE = A] **During the past 12 months**, have you used steroids to become more muscular?

  1 Yes
  2 No
  DK/REF

YE18l [IF CURNTAGE = 12 - 17 AND RANDOM SAMPLE = B] **During the past 12 months**, have you crossed railroad tracks when a train was coming and almost gotten hit by the train?

  1 Yes
  2 No
  DK/REF

YE18m [IF CURNTAGE = 12 - 17 AND RANDOM SAMPLE = B] **During the past 12 months**, have you used laxatives or vomited on purpose in order to keep your weight down?

  1 Yes
  2 No
  DK/REF

YE18n [IF CURNTAGE = 12 - 17 AND RANDOM SAMPLE = B] **During the past 12 months**, have you hacked into a government computer system?

  1 Yes
  2 No
  DK/REF

YE18o [IF CURNTAGE = 12 - 17 AND RANDOM SAMPLE = B] **During the past 12 months**, have you been careless and set a large or serious fire with a cigarette or match?

1 Yes
2 No
DK/REF

YE07a [IF CURNTAGE = 12 - 17] How do you think your parents would feel about **you** smoking one or more packs of cigarettes per day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

YE07b [IF CURNTAGE = 12 - 17] How do you think your parents would feel about **you** trying marijuana or hashish once or twice?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

YE07b1 [IF CURNTAGE = 12 - 17] How do you think your parents would feel about **you** using marijuana or hashish once a month or more?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

YE07c [IF CURNTAGE = 12 - 17] How do you think your parents would feel about **you** having one or two drinks of an alcoholic beverage nearly every day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

YE19a [IF CURNTAGE = 12 - 17] How do you feel about someone your age smoking one or more packs of cigarettes a day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

YE19b [IF CURNTAGE = 12 - 17] How do you feel about someone your age trying marijuana or hashish once or twice?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

YE19b1 [IF CURNTAGE = 12 - 17] How do you feel about someone your age using marijuana once a month or more?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

YE19c [IF CURNTAGE = 12 - 17] How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove
DK/REF

YE20a [IF CURNTAGE = 12 - 17] How do you think your close friends would feel about **you** smoking one or more packs of cigarettes a day?

 1 Neither approve nor disapprove
 2 Somewhat disapprove
 3 Strongly disapprove
 DK/REF

YE20b [IF CURNTAGE = 12 - 17] How do you think your close friends would feel about **you** trying marijuana or hashish once or twice?

 1 Neither approve nor disapprove
 2 Somewhat disapprove
 3 Strongly disapprove
 DK/REF

YE20b1 [IF CURNTAGE = 12 - 17] How do you think your close friends would feel about **you** using marijuana or hashish once a month or more?

 1 Neither approve nor disapprove
 2 Somewhat disapprove
 3 Strongly disapprove
 DK/REF

YE20c [IF CURNTAGE = 12 - 17] How do you think your close friends would feel about **you** having one or two drinks of an alcoholic beverage nearly every day?

 1 Neither approve nor disapprove
 2 Somewhat disapprove
 3 Strongly disapprove
 DK/REF

YE22 [IF CURNTAGE = 12 - 17] If you wanted to talk to someone about a serious problem, which of the following people would you turn to?

To select more than one category, press the space bar between each category you select.

 1 There is nobody I can talk to about serious problems
 2 My mother or father or guardian
 3 My boyfriend or girlfriend
 4 Some other adult
 5 Some other person or persons

 DK/REF

YE08 [IF CURNTAGE = 12 - 17] Now think about the past 12 months, that is, from DATEFILL through today. **During the past 12 months**, have you talked with at least one of your parents about the dangers of tobacco, alcohol, or drug use? By **parents**, we mean either your biological parents, adoptive parents, stepparents, or adult guardians -- whether or not they live with you.

 1 Yes
 2 No
 DK/REF

YE23b   [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in a problem solving, communication skills or self-esteem group?

1   Yes
2   No
DK/REF

YE23c   [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in a violence prevention program, where you learn ways to avoid fights and control anger?

1   Yes
2   No
DK/REF

YE23g   [IF CURNTAGE = 12 - 17]   **During the past 12 months** have you participated in a alcohol, tobacco or drug prevention program outside of school, where you learn about the dangers of using, and how to resist using, alcohol, tobacco, or drugs?

1   Yes
2   No
DK/REF

YE23j   [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in a program or meeting to help you deal with drug or alcohol use by you or another member of your family, such as Alcoholics Anonymous, Alateen, or individual or group counseling?

1   Yes
2   No
DK/REF

YE23o   [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in pregnancy or sexually transmitted disease prevention programs?

1   Yes
2   No
DK/REF

YE23p   [IF CURNTAGE = 12 - 17] **During the past 12 months,** in how many different kinds of school-based activities, such as team sports, cheerleading, choir, band, student government, or clubs, have you participated?

0   None
1   One
2   Two
3   3 or more
DK/REF

YE23q   [IF CURNTAGE = 12 - 17] **During the past 12 months**, in how many different kinds of community-based activities, such as volunteer activities, sports, clubs, or groups have you participated?

0   None
1   One
2   Two
3   3 or more
DK/REF

YE23r   [IF CURNTAGE = 12 - 17] **During the past 12 months,** in how many different kinds of church or faith-based activities, such as clubs, youth groups, Saturday or Sunday school, prayer groups, youth trips, service or volunteer activities have you participated?

0   None
1   One
2   Two

3 3 or more
DK/REF

YE23s [IF CURNTAGE = 12 - 17] **During the past 12 months,** in how many different kinds of other activities, such as dance lessons, piano lessons, karate lessons, or horseback riding lessons, have you participated?

0 None
1 One
2 Two
3 3 or more
DK/REF

YE24a [IF YE09 = 1 OR YE09a = 1] **During the past 12 months** have you had a special class about drugs or alcohol in school?

1 Yes
2 No
DK/REF

YE24b [IF YE09 = 1 OR YE09a = 1] **During the past 12 months** have you had films, lectures, discussions, or printed information about drugs or alcohol **in** one of your regular school classes such as health or physical education?

1 Yes
2 No
DK/REF

YE24c [IF YE09 = 1 OR YE09a = 1] **During the past 12 months** have you had films, lectures, discussions, or printed information about drugs or alcohol **outside of** one of your regular classes such as in a special assembly?

1 Yes
2 No
DK/REF

YE25 [IF YE09 = 1 OR YE09a = 1] **During the past 12 months** have you seen or heard any alcohol or drug prevention messages from sources outside school such as posters, pamphlets, radio, or TV?

[IF YE09 = 2 OR DK/REF AND YE09a = 2 OR DK/REF] **During the past 12 months** have you seen or heard any alcohol or drug prevention messages from sources such as posters, pamphlets, radio, or TV?

1 Yes
2 No
DK/REF

YERELATT [IF CURNTAGE = 12 - 17] **During the past 12 months**, how many times did you attend religious services? Please do **not** include special occasions such as weddings, funerals, or other special events in your answer.

1 0 times
2 1 to 2 times
3 3 to 5 times
4 6 to 24 times
5 25 to 52 times
6 More than 52 times
DK/REF

YEREBEL1 [IF CURNTAGE = 12 - 17] These next questions are about the role that religious beliefs may play in your life. For each statement, please indicate whether you strongly disagree, disagree, agree, or strongly agree.

Your religious beliefs are a very important part of your life.

1 Strongly Disagree

2   Disagree
3   Agree
4   Strongly Agree
DK/REF

YEREBEL2   [IF CURNTAGE = 12 - 17] Your religious beliefs influence how you make decisions in your life.

1   Strongly Disagree
2   Disagree
3   Agree
4   Strongly Agree
DK/REF

YEREBEL3   [IF CURNTAGE = 12 - 17] It is important that your friends share your religious beliefs.

1   Strongly Disagree
2   Disagree
3   Agree
4   Strongly Agree
       DK/REF

YE26   [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] These next questions are about how you got the cigarettes you have smoked during the past 30 days.

During the past 30 days, how many times have you gotten cigarettes by having a friend or relative buy them for you?

1   0 times
2   1 time
3   2 times
4   3 to 5 times
5   6 to 9 times
6   10 or more times
DK/REF

YE27   [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times have you bought cigarettes on your own from a vending machine?

1   0 times
2   1 time
3   2 times
4   3 to 5 times
5   6 to 9 times
6   10 or more times
DK/REF

YE28   [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times have you bought cigarettes through the mail?

1   0 times
2   1 time
3   2 times
4   3 to 5 times
5   6 to 9 times
6   10 or more times
DK/REF

YE29   [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times have you bought cigarettes in a store where you pick up the pack or carton and bring it to the check-out counter?

1 0 times
2 1 time
3 2 times
4 3 to 5 times
5 6 to 9 times
6 10 or more times
DK/REF

YE30 [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times have you bought cigarettes in a store where the clerk has to hand you the pack or carton?

1 0 times
2 1 time
3 2 times
4 3 to 5 times
5 6 to 9 times
6 10 or more times
DK/REF

YE31 [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times have you bought cigarettes through the Internet?

1 0 times
2 1 time
3 2 times
4 3 to 5 times
5 6 to 9 times
6 10 or more times
DK/REF

YE32 [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times did **you** buy cigarettes at a big supermarket?

1 0 times
2 1 time
3 2 times
4 3 to 5 times
5 6 to 9 times
6 10 or more times
DK/REF

YE33 [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times did **you** buy cigarettes at a drug store?

1 0 times
2 1 time
3 2 times
4 3 to 5 times
5 6 to 9 times
6 10 or more times
DK/REF

YE34 [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times did **you** buy cigarettes at a small grocery store, a convenience store or at a gas station?

1 0 times
2 1 time

3   2 times
4   3 to 5 times
5   6 to 9 times
6   10 or more times
DK/REF

YE35   [IF CG05 = 1 OR SPCIG02 = 1 OR SPCIG06 = 1] During the past 30 days, how many times have you bought cigarettes from an individual, such as a friend, a relative, or someone at school?

1   0 times
2   1 time
3   2 times
4   3 to 5 times
5   6 to 9 times
6   10 or more times
DK/REF

YE36   [IF YE29 = 2 - 6 OR OR YE30 = 2 - 6 OR YE32 = 2 - 6 OR YE33 = 2 - 6 OR YE34 = 2 - 6] The last time you **tried** to buy cigarettes in a store or gas station, were you asked for proof of your age -- that is, did you have to show some type of ID?

1   Yes
2   No
DK/REF

YE37   [IF YE36 NE BLANK] The last time you tried to buy cigarettes in a store or gas station, were you successful?

1   Yes
2   No
DK/REF

YE38   [IF YE27 = 2 - 6 OR YE28 = 2 - 6 OR YE29 = 2 - 6 OR YE30 = 2 - 6 OR OR YE31 = 2 - 6 OR YE32 = 2 - 6 OR YE33 = 2 - 6 OR YE34 = 2 - 6 OR YE35 = 2 - 6] Do you buy your cigarettes by the pack or by the carton?

1   Pack
2   Carton
DK/REF

YE39   [IF YE38 = 1] What was the price you paid for the last pack of cigarettes you bought?

1   Less than $1.00
2        $1.00 - $1.50
3        $1.51 - $2.00
4        $2.01 - $2.50
5        $2.51 - $3.00
6        $3.01 - $3.50
7        $3.51 - $4.00
8        $4.01 - $4.50
9        $4.51 - $5.00
10   More than $5.00
DK/REF

YE40   [IF YE38 = 2] What was the price you paid for the last carton of cigarettes you bought?

1   Less than $10.00
2        $10.00 - $13.00
3        $13.01 - $16.00
4        $16.01 - $19.00
5        $19.01 - $22.00

6	$22.01 - $25.00
7	$25.01 - $28.00
8	$28.01 - $31.00
9	$31.01 - $34.00
10	$34.01 - $37.00
11	$37.01 - $40.00
12	$40.01 - $43.00
13	$43.01 - $46.00
14	$46.01 - $49.00
15	More than $49.00
DK/REF	

YE41   [IF CURNTAGE = 12 - 17] Sometimes people take some tobacco out of a cigar and replace it with marijuana. This is called a "blunt" or sometimes a "blob."

Have you ever smoked part or all of a cigar with marijuana in it?

1   Yes
2   No
DK/REF

YE42   [IF YE41 = 1] Now think about the past 30 days -- that is, from DATEFILL up to and including today. During the past 30 days, have you smoked part or all of a cigar with marijuana in it?

1   Yes
2   No
DK/REF

YE43   [IF YE42 = 1] On how many of the past 30 days, that is, since DATEFILL, did you smoke part or all of a cigar with marijuana in it?

OF DAYS: _____   [RANGE: 0 - 30]
DK/REF

YE44   [IF CG36 = 1] Earlier you reported that you had smoked part or all of a cigar during the past 30 days. Did you replace any of the tobacco in these cigars with marijuana?

1   Yes
2   No
DK/REF

Serious Mental Illness
   (Questions administered only to respondents 18 or older.)

DIINTRO   [IF CURNTAGE = 18 OR OLDER] The next questions are about problems with your emotions, nerves, or mental health in the past 12 months.

Press [ENTER] to continue.

PNATTACK   [IF CURNTAGE = 18 OR OLDER] **During the past 12 months,** did you have a sudden attack of fear when out of the blue you became very frightened, anxious, or uneasy?

1   Yes
2   No
DK/REF

PNREACT   [IF PNATTACK=1] Attacks like this often cause physical reactions like sweating, shortness of breath, a racing heart, or dizziness. During the past 12 months, did you have physical reactions like these when you had a sudden attack of fear?

1   Yes
2   No
DK/REF

PNATKNUM   [IF PNREACT=1] About how many of these sudden attacks of fear did you have in the past 12 months? If you can't remember the exact number, just give your best estimate.

NUMBER OF ATTACKS: _____   [RANGE: 1 - 500]
DK/REF

DEFEEL   [IF CURNTAGE = 18 OR OLDER] **During the past 12 months**, did you have a period of time **lasting two weeks or longer** when most of the time you felt sad, empty, or depressed?

1   Yes
2   No
DK/REF

DEWEEK1   [IF DEFEEL=1] During the past 12 months, about how many weeks did you feel sad, empty, or depressed? If you can't remember the exact number, just give your best estimate.

NUMBER OF WEEKS: _____ [RANGE: 2-52]
DK/REF

CREATE DEWEEK1 FILL.

DEDAYS   [IF DEWEEK1=2-52] During those [DEWEEK1 FILL] weeks, did you feel sad or depressed nearly every day, or just some days?

1   Nearly every day
2   Just some days
DK/REF

DEDAYSAD   [IF DEDAYS = 1 OR DK/REF] On the days you felt sad or depressed, did you **usually** feel that way all day long, most of the day, about half the day, or less than half the day?

1   All day long
2   Most of the day
3   About half the day
4   Less than half the day
DK/REF

DEFEELPR   [IF DEDAYSAD = 1 OR 2 OR 3] During those [DEWEEK1 FILL] weeks when you felt sad or depressed, did you also have any changes in sleep, energy, appetite, or the ability to concentrate?

1	Yes
2	No
DK/REF	

DELOST   [IF DEDAYS = 2 OR (DEDAYSAD NE 1 OR 2 OR 3) OR DEFEEL=2] During the past 12 months, did you have a period of time lasting **two weeks or longer** when you **lost interest** in most things like work, hobbies, and other things you usually enjoy?

1	Yes
2	No
DK/REF	

DEWEEK2   [IF DELOST=1] During the past 12 months, about how many weeks did you lose interest in most things? If you can't remember the exact number, just give your best estimate.

NUMBER OF WEEKS: _____ [RANGE: 2 - 52]
DK/REF

CREATE DEWEEK2 FILL.

DEDAYS2   [IF DEWEEK2=2-52] During those [DEWEEK2 FILL] weeks, did you lack interest in most things nearly every day or just some days?

1	Nearly every day
2	Just some days
DK/REF	

DEDAYLST   [IF DEDAYS2=1 OR DK/REF] On the days you lost interest, did you usually feel that way all day long, most of the day, about half the day, or less than half the day?

1	All day long
2	Most of the day
3	About half the day
4	Less than half the day
DK/REF	

DELOSTPR   [IF DEDAYLST=1 OR 2 OR 3] During those [DEWEEK2 FILL] weeks when you lost interest in things, did you also have any changes in sleep, energy, appetite, or your ability to concentrate?

1	Yes
2	No
DK/REF	

MAFEEL   [IF CURNTAGE = 18 OR OLDER] **During the past 12 months**, were there at least four days in a row when you were **so excited or hyper** that you **either** got into trouble **or** people worried about your being so excited, **or** a doctor said you were manic?

1	Yes
2	No
DK/REF	

MASLEEP   [IF MAFEEL=1] During the time when you were extremely excited or hyper, did you find that you could hardly sleep at all but still you didn't feel tired?

1	Yes
2	No
DK/REF	

MAPWRS   [IF MAFEEL=1] During the time when you were extremely excited or hyper, did you feel that you had special powers or that you could do things people really cannot do?

1   Yes
2   No
DK/REF

MAFEELEV   [IF MAFEEL=2 OR DK/REF] **In your entire life**, did you **ever** have a time lasting at least 4 days in a row when you were so excited or hyper that you **either** got into trouble **or** people worried about your being so excited **or** a doctor said you were manic?

1   Yes
2   No
DK/REF

MAMED   [IF MAFEELEV=1] During the past 12 months, did you take any prescription medication to prevent another one of these manic episodes from occurring?

1   Yes
2   No
DK/REF

PHSOCIAL   [IF CURNTAGE = 18 OR OLDER] Are you **much more** nervous, anxious, or fearful than most people would be about **social or performance situations,** like giving a speech, meeting new people, going to parties, speaking up at a meeting, or being in a dating situation?

1   Yes
2   No
DK/REF

PHUPSET1   [IF PHSOCIAL =1] Thinking about the social or performance situation that you fear the **most**, how strong is your fear when you find yourself in that situation?

1   Your fear is mild
2   Your fear is moderate
3   Your fear is severe
DK/REF

PHAVOID1   [IF PHUPSET1 =2 OR 3] How often do you try to avoid this type of social or performance situation?

1   Often
2   Sometimes
3   Rarely
4   Never
DK/REF

PHLIFE1   [IF PHUPSET1= 2 OR 3] How much does your fear or avoidance of this social or performance situation interfere with your everyday life or activities?

1   Not at all
2   A little
3   Some
4   A lot
DK/REF

PHCROWD   [IF CURNTAGE = 18 OR OLDER] Are you **much more** nervous, anxious, or fearful than most people would be about being in **crowds**?

1   Yes
2   No
DK/REF

PHPUBLIC   [IF CURNTAGE = 18 OR OLDER] Are you **much more** nervous, anxious, or fearful than most people would be about **going to public places**?

        1   Yes
        2   No
        DK/REF

PHTRAVL   [IF CURNTAGE = 18 OR OLDER] Are you **much more** nervous, anxious, or fearful than most people would be about **traveling in a bus, train, or car**?

        1   Yes
        2   No
        DK/REF

PHAWAY   [IF CURNTAGE = 18 OR OLDER] Are you **much more** nervous, anxious, or fearful than most people would be about **being away from home alone**?

        1   Yes
        2   No
        DK/REF

DEFINE PHOFILL.
        IF PHCROWD=1, PHOFILL1= "being in crowds/in crowds".
        IF PHPUBLIC=1, PHOFILL2= "going to public places".
        IF PHTRAVL=1, PHOFILL3= "traveling in a bus, train, or car".
        IF PHAWAY=1, PHOFILL4= "being away from home alone/away from home alone".

PHWORST   [IF PHCROWD=1 AND [PHPUBLIC=1 OR PHTRAVL=1 OR PHAWAY=1] OR PHPUBLIC=1 AND [PHTRAVL=1 OR PHAWAY=1] OR PHTRAVL=1 AND PHAWAY=1] Think about your fears of [PHOFILL1, PHOFILL2, and PHOFILL UNTIL ALL PHOFILLS INSERTED]. Which of these fears is the strongest?

        1   Being in crowds
        2   Going to public places
        3   Traveling in a bus, train, or car
        4   Being away from home alone
        DK/REF

[**Note to Programmers:** PHOFILLs should appear in lower case and be separated by commas. The last PHOFILL should be preceded by the word "and." For example if a respondent answered yes to PHCROWD and PHPUBLIC, it should read, "Think about your fears of being in crowds and going to public places. Which of these fears is the strongest?" When using PHOFILL1 for this item, always use the "being in crowds" version. When using PHOFILL4 for this item, always use the "being away from home alone" version.

Response categories that correspond to the PHOFILLs will be hi-lighted and audio will play only for these response categories.]

DEFINE WORSTPH.
        IF PHWORST=1 OR [PHCROWD =1 AND PHPUBLIC NE 1 AND PHTRAVL NE 1 AND PHAWAY NE1], WORSTPH = 1
        IF PHWORST=2 OR [PHPUBLIC =1 AND PHCROWD NE 1 AND PHTRAVL NE 1 AND PHAWAY NE1], WORSTPH =2
        IF PHWORST=3 OR [PHTRAVL =1 AND PHPUBLIC NE 1 AND PHCROWD NE 1 AND PHAWAY] NE1, WORSTPH =3
        IF PHWORST=4 OR [PHAWAY =1 AND PHPUBLIC NE 1 AND PHTRAVL NE 1 AND PHCROWD] NE1, WORSTPH =4
        IF PHWORST=DK/REF, WORSTPH=5
        IF PHCROWD=2 OR DK/REF AND PHPUBLIC=2 OR DK/REF AND PHTRAVL=2 OR DK/REF AND PHAWAY=2 OR DK/REF, WORSTPH =BLANK.
        IF PHWORST=BLANK, WORSTPH = BLANK.

DEFINE WSTFILL

IF WORSTPH=1, WSTFILL= PHOFILL1= "being in crowds/in crowds"
IF WORSTPH=2, WSTFILL= PHOFILL2= "going to public places"
IF WORSTPH=3, WSTFILL= PHOFILL3= "traveling in a bus, train, or car"
IF WORSTPH=4, WSTFILL= PHOFILL4= "being away from home alone/away from home alone"
IF WORSTPH=5, WSTFILL= PHOFILL1, PHOFILL2, PHOFILL3 UNTIL ALL PHOFILLS INSERTED. [**Note to Programmers:** PHOFILLs should appear in lower case and be separated by commas. The last PHOFILL should be preceded by the word "and." For example if answered yes to PHCROWD and PHPUBLIC, WSTFILL should read, "being in crowds and going to public places".]
IF WORSTPH=BLANK, WSTFILL=BLANK.

PHFEAR   [IF WORSTPH NE BLANK] How strong is your fear when you find yourself [WSTFILL]?

1   Your fear is mild
2   Your fear is moderate
3   Your fear is severe
DK/REF

[**Note to Programmers:** For PHFEAR only, if WSTFILL=PHOFILL1, use the "in crowds" version of the WSTFILL. If WSTFILL=PHOFILL4, use the "away from home alone" version of the WSTFILL. For all other screens with WSTFILL use the "being in crowds" version of PHOFILL1 and the "being away from home alone" version of PHOFILL4.]

PHAVD [IF PHFEAR = 2 OR 3] How often do you try to avoid [WSTFILL]?

1   Often
2   Sometimes
3   Rarely
4   Never
DK/REF

PHINT   [IF PHFEAR=2 OR 3] How much does your fear or avoidance of [WSTFILL] interfere with your everyday life or activities?

1   Not at all
2   A little
3   Some
4   A lot
DK/REF

GAWORRY   [IF CURNTAGE = 18 OR OLDER] People differ a lot in how much they worry. In general, would you say you worry more than, about the same as, or less than most other people worry about everyday problems?

1   More
2   About the same
3   Less
DK/REF

GAWORLOT   [IF GAWORRY=1] Do you worry a lot more, somewhat more, or only a little more than most other people?

1   A lot more
2   Somewhat more
3   A little more
DK/REF

GANERV   [IF GAWORRY NE 1] In general, would you say you are more nervous or anxious than most other people?

1   Yes
2   No
DK/REF

GANRVLOT   [IF GANERV=1] Are you a lot more, somewhat more, or only a little more nervous or anxious than most other people?

1	A lot
2	Somewhat
3	A little
DK/REF	

GAWEEK1   [IF GAWORLOT = 1] **During the past 12 months,** about how many weeks did you worry more than most other people? If you can't remember the exact number, just give your best estimate.

[IF GANRVLOT=1] **During the past 12 months,** about how many weeks did you feel more nervous or anxious than most other people? If you can't remember the exact number, just give your best estimate.

OF WEEKS: _____   [RANGE: 1 - 52]
DK/REF

CREATE GAWEEK1 FILL.

GANUMWOR   [IF GAWEEK1=26-52 AND GAWORLOT=1] During those [GAWEEK1 FILL] weeks, did you worry about one or two particular things or about a number of different things?

[IF GAWEEK1=26-52 AND GANERVLOT=1] During those [GAWEEK1 FILL] weeks, were you nervous or anxious about one or two particular things or about a number of different things?

1	One or two particular things
2	A number of different things
DK/REF	

GAWORSTR   [IF GANUMWOR=2 AND GAWORLOT=1] During those [GAWEEK1 FILL] weeks, how often was your worry so strong that you couldn't put it out of your mind?

[IF GANUMWOR=2 AND GANERVLOT=1] During those [GAWEEK1 FILL] weeks, how often was your nervousness or anxiety so strong that you couldn't put it out of your mind?

1	All of the time
2	Most of the time
3	Some of the time
4	A little of the time
5	Never
DK/REF	

GAPROB   [IF GAWORSTR=1-4 AND GAWORLOT=1] During those [GAWEEK1 FILL] weeks when you were so worried, did you have other problems, like difficulties in sleep or concentration, or feeling dizzy, easily tired, on edge, or irritable?

[IF GAWORSTR=1-4 AND GANERVLOT=1] During those [GAWEEK1 FILL] weeks when you were so nervous or anxious, did you have other problems, like difficulties in sleep or concentration, or feeling dizzy, easily tired, on edge, or irritable?

1	Yes
2	No
DK/REF	

PTEXPER   The next questions are about reactions people have after extremely stressful experiences. In your life, have you ever had an extremely stressful experience such as being in combat, being involved in a life-threatening accident, being involved in a disaster, being physically beaten or sexually abused, or any other event which was extremely upsetting or stressful for you?

1	Yes
2	No
DK/REF	

PTREACT   [IF PTEXPER=1] After experiences like this, people sometimes have reactions like memories that are

upsetting, feeling emotionally distant from other people, trouble sleeping or concentrating, and feeling jumpy or easily startled. \

During the past 12 months, did you have any of these reactions to any extremely stressful experience, even if the experience was long ago?

1 YES
2 NO
DK/REF

PTWORST [IF PTREACT=1] Think of the time during the past 12 months when those reactions were the worst. How often did you have those reactions during that time?

1 Several times a day
2 Once or twice a day
3 Several times a week
4 Once or twice a week
5 Less than once a week
DK/REF

PTWEEK1 [IF PTWORST=1-3] During the past 12 months, in about how many weeks did you have reactions like this at least several times a week? If you can't remember the exact number, just give your best estimate.

\# OF WEEKS: _____ [RANGE: 1 - 52]
DK/REF

NPVOICE [IF CURNTAGE = 18 OR OLDER] The next questions are about unusual experiences that some people have. When you answer these questions, please do not include times when you were dreaming or half asleep, had a high fever, or were under the influence of illegal drugs or alcohol.

During the past 12 months, have you heard voices — that is, voices that other people said did not exist, voices coming from inside your head, or voices coming out of the air when there was no one around?

1 Yes
2 No
DK/REF

NPFORCE [IF CURNTAGE = 18 OR OLDER] During the past 12 months, have you felt that a force was taking over your mind and trying to make you do things you didn't want to do?

Remember, please do not include times when you were dreaming or half asleep, had a high fever, or were under the influence of illegal drugs or alcohol.

1 Yes
2 No
DK/REF

NPXRAY [IF CURNTAGE = 18 OR OLDER] During the past 12 months, have you felt that some force was inserting thoughts directly into your head by means of x-rays or laser beams or other methods?

Remember, please do not include times when you were dreaming or half asleep, had a high fever, or were under the influence of illegal drugs or alcohol.

1 Yes
2 No
DK/REF

NPTHGHTS [IF CURNTAGE = 18 OR OLDER] During the past 12 months, have you felt that your own thoughts were being stolen out of your mind by someone or something you did not have control over?

Remember, please do not include times when you were dreaming or half asleep, had a high fever, or were under the influence of illegal drugs or alcohol.

1   Yes
2   No
DK/REF

NPCOMM   [IF CURNTAGE = 18 OR OLDER] During the past 12 months, have you felt that some force was trying to communicate directly with you by sending special signs or signals that only you could understand?

Remember, please do not include times when you were dreaming or half asleep, had a high fever, or were under the influence of illegal drugs or alcohol.

1   Yes
2   No
DK/REF

NPPLOT   [IF CURNTAGE = 18 OR OLDER] During the past 12 months, have you believed that there was an unfair plot going on to harm you or to have people follow you — when your family and friends did not believe that this was happening?

Remember, please do not include times when you were dreaming or half asleep, had a high fever, or were under the influence of illegal drugs or alcohol.

1   Yes
2   No
DK/REF

NPVISION   [IF CURNTAGE = 18 OR OLDER] During the past 12 months, have you seen a vision — that is, something that other people could not see?

Remember, please do not include times when you were dreaming or half asleep, had a high fever, or were under the influence of illegal drugs or alcohol.

1   Yes
2   No
DK/REF

SEEDR [IF CURNTAGE = 18 OR OLDER] During the past 12 months, did you see a doctor or mental health professional for any problem with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

HOSPTL   [IF SEEDR=1] During the past 12 months, were you hospitalized overnight for problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

DRVISITS   [IF SEEDR=1 AND HOSPTL=1] During the past 12 months, not counting when you were hospitalized, how many outpatient visits did you make to any doctor or mental health professional for problems with your emotions, nerves, or mental health?

[IF SEEDR=1 AND HOSPTL NE 1] During the past 12 months, how many **outpatient** visits did you make to any doctor or mental health professional for problems with your emotions, nerves, or mental health?

NUMBER OF VISITS: _____   [RANGE: 0 - 365]
DK/REF

DRVISDK   [IF DRVISITS=DK] What is your best estimate of the number of outpatient visits you made to any doctor or mental health professional for problems with your emotions, nerves, or mental health in the past 12 months?

NUMBER OF VISITS: _____ [RANGE: 0 - 365]
DK/REF

MEDS [IF SEEDR=1] During the past 12 months, were you prescribed any medicine for problems with your emotions, nerves, or mental health?

1   Yes
2   No
DK/REF

MEDWEEK   [IF MEDS = 1] During the past 12 months, about how many weeks did you take medicine that was prescribed for mental health problems?

OF WEEKS: _____ [RANGE: 0 - 52]
DK/REF

DSNERV1   [IF CURNTAGE = 18 OR OLDER] Most people have periods when they are not at their best emotionally. Think of one month in the past 12 months when you were the most depressed, anxious, or emotionally stressed. If there was no month like this, think of a typical month.

During that month, how often did you feel nervous?

1   All of the time
2   Most of the time
3   Some of the time
4   A little of the time
5   None of the time
DK/REF

DSNERV2   [IF DSNERV1 =1-4] During that same month when you were at your worst emotionally . . .

how often did you feel so nervous that nothing could calm you down?

1   All of the time
2   Most of the time
3   Some of the time
4   A little of the time
5   None of the time
DK/REF

DSTIRED   [IF CURNTAGE = 18 OR OLDER] During that same month when you were at your worst emotionally . . .

how often did you feel tired out for no good reason?

1   All of the time
2   Most of the time
3   Some of the time
4   A little of the time
5   None of the time
DK/REF

DSHOPE   [IF CURNTAGE = 18 OR OLDER] During that same month when you were at your worst emotionally . . .

how often did you feel hopeless?

1   All of the time
2   Most of the time
3   Some of the time

4 A little of the time
5 None of the time
DK/REF

DSFIDG [IF CURNTAGE = 18 OR OLDER] During that same month when you were at your worst emotionally . . .

how often did you feel restless or fidgety?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DK/REF

DSSITSTL [IF DSFIDG = 1-4] During that same month when you were at your worst emotionally . . .

how often did you feel so restless or fidgety that you could not sit still?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DK/REF

DSDEPR[IF CURNTAGE = 18 OR OLDER] During that same month when you were at your worst emotionally . . .

how often did you feel sad or depressed?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DK/REF

DSNOCHR [IF DSDEPR=1-4] During that same month when you were at your worst emotionally . . .

how often did you feel so sad or depressed that nothing could cheer you up?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DK/REF

DSEFFORT [IF CURNTAGE = 18 OR OLDER] During that same month when you were at your worst emotionally . . .

how often did you feel that everything was an effort?

1 All of the time
2 Most of the time
3 Some of the time
4 A little of the time
5 None of the time
DK/REF

DSDOWN [IF CURNTAGE = 18 OR OLDER] During that same month when you were at your worst emotionally . . .

how often did you feel down on yourself, no good, or worthless?

1   All of the time
2   Most of the time
3   Some of the time
4   A little of the time
5   None of the time

DEFINE DISORDER:
IF PNATKNUM>3 OR DEFEELPR=1 OR DELOSTPR=1 OR MASLEEP=1 OR MAPWRS=1 OR PHUPSET1=3
OR PHVOID1=1 OR PHLIFE1=4 OR PHFEAR=3 OR PHAVD=1 OR PHINT=4 OR GAPROB=1 OR PTWEEK1>3
OR NPVOICE=1 OR NPFORCE=1 OR NPXRAY=1 OR NPTHGHTS=1 OR NPCOMM=1 OR NPPLOT=1 OR
NPVISION=1 THEN DISORDER=1
ELSE, DISORDER=2

DEFINE DISTRESS:
IF DSNERV1 = 1,2, OR 3 **OR** DSNERV2 = 1, 2, OR 3 0R DSTIRED = 1, 2, OR 3 **0R** DSHOPE = 1, 2, OR 3 **0R**
DSFIDG = 1, 2, OR 3 **0R** DSSITSTL = 1, 2, OR 3 0R DSDEPR = 1, 2, OR 3 **0R** DSNOCHR =1, 2, OR 3 **0R**
DSEFFORT = 1, 2, OR 3 **0R** DSDOWN = 1, 2, OR 3 THEN DISTRESS=1
ELSE DISTRESS=2

DEFINE DISDSTRT:
IF DISORDER=1 OR MAMED=1 OR SEEDR=1 OR DISTRESS=1 OR ADMT01 = 1 OR ADMT13 = 1 OR
ADMT25 = 1 THEN DISDSTRT=1
ELSE, DISDSTRT=2

LIKERT   [IF DISDSTRT=1] The next questions are about how much your emotions, nerves, or mental health caused you to have **difficulties in daily activities** over the past 12 months.

Press [ENTER] to continue.

LITHINK   [IF DISDSTRT=1] In answering, think of **one month** in the past 12 months when your emotions, nerves, or mental health interfered **most** with your daily activities. If you had several months like this, please think of the most recent month.

During that month, how much difficulty did you have in **thinking clearly**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
DK/REF

LIUNDRST   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **understanding what was going on around you**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
DK/REF

LIREMEM   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **remembering to do things you needed to do**?

> 1   No difficulty
> 2   Mild difficulty
> 3   Moderate difficulty
> 4   Severe difficulty
> DK/REF

LICONCEN   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **concentrating on doing something important when other things were going on around you**?

> 1   No difficulty
> 2   Mild difficulty
> 3   Moderate difficulty
> 4   Severe difficulty
> DK/REF

LIMONEY1   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **managing money on your own, such as keeping track of expenses or remembering to pay bills**?

> 1   No difficulty
> 2   Mild difficulty
> 3   Moderate difficulty
> 4   Severe difficulty
> 5   You didn't manage money on your own
> DK/REF

LIMONEY2   [IF LIMONEY1=5] Did problems with your emotions, nerves, or mental health keep you from managing your own money?

> 1   Yes
> 2   No
> DK/REF

LILEARN1   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **learning a new task?**

> 1   No difficulty
> 2   Mild difficulty
> 3   Moderate difficulty
> 4   Severe difficulty
> 5   You didn't try to learn a new task
> DK/REF

LILEARN2   [IF LILEARN1=5] Did problems with your emotions, nerves, or mental health keep you from learning a new task?

> 1   Yes
> 2   No
> DK/REF

LIWASH1   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **washing, dressing, and feeding yourself on your own**?

    1   No difficulty
    2   Mild difficulty
    3   Moderate difficulty
    4   Severe difficulty
    5   You didn't wash, dress, or feed yourself on your own
    DK/REF

LIWASH2   [IF LIWASH1=5] Did problems with your emotions, nerves, or mental health keep you from washing, dressing, or feeding yourself on your own?

    1   Yes
    2   No
    DK/REF

LIGOOUT1   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

        how much difficulty did you have **going out of the house and getting around on your own**?

    1   No difficulty
    2   Mild difficulty
    3   Moderate difficulty
    4   Severe difficulty
    5   You didn't leave the house on your own
    DK/REF

LIGOOUT2   [IF LIGOOUT1 = 5] Did problems with your emotions, nerves, or mental health keep you from leaving the house on your own?

    1   Yes
    2   No
    DK/REF

LISTRAN1   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

        how much difficulty did you have **dealing with people you did not know well**?

    1   No difficulty
    2   Mild difficulty
    3   Moderate difficulty
    4   Severe difficulty
    5   You didn't deal with people you did not know well
    DK/REF

LISTRAN2   [IF LISTRAN1 = 5] Did problems with your emotions, nerves, or mental health keep you from dealing with people you did not know well?

    1   Yes
    2   No
    DK/REF

LISOC1 [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

    how much difficulty did you have **participating in social activities, like visiting friends or going to parties**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
5   You didn't participate in social activities
DK/REF

LISOC2 [IF LISOC1=5] Did problems with your emotions, nerves, or mental health keep you from participating in social activities?

1   Yes
2   No
DK/REF

LIPRSNL   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **getting along with people in your personal life**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
DK/REF

LIEMOTNS   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **controlling your emotions when you were around people**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
DK/REF

LIRELAX   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **doing things to relax at home**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
DK/REF

LIHHRES1   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **taking care of household responsibilities**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
5   You didn't take care of household responsibilities
DK/REF

LIHHRES2   [IF LIHHRES1=5] Did problems with your emotions, nerves, or mental health keep you from taking care of household responsibilities?

LIWKRES1   [IF DISDSTRT=1] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **taking care of your daily responsibilities at work or school**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
5   You didn't work or go to school
DK/REF

LIWKQUIC   [IF DISDSTRT=1 AND LIWKRES1 NE 5] During that one month when your emotions, nerves or mental health interfered **most** with your daily activities . . .

how much difficulty did you have **getting your daily work done as quickly as needed**?

1   No difficulty
2   Mild difficulty
3   Moderate difficulty
4   Severe difficulty
DK/REF

IMWEEK1   [IF LITHINK = 3 - 4 OR LIUNDRST= 3-4 OR LIREMEM = 3- 4 OR LICONCEN = 3-4 OR LIMONEY1 = 3 - 4 OR LIMONEY2 = 1 OR LILEARN = 3-4 OR LILEARN2 = 1 OR LIWASH = 3 - 4 OR LIWASH2 = 1 OR LIGOOUT1 = 3 -4 OR LIGOOUT2 = 1 OR LISTRAN1 = 3 - 4 OR LISTRAN2 = 1 OR LISOC1 = 3 - 4 OR LISOC2 = 1 OR LIPRSNL = 3 - 4 OR LIEMOTNS = 3 - 4 OR LIRELAX = 3 - 4 OR LIHHRES1 = 3 - 4 OR LIHHRES2 = 1 OR LIWKRES1 = 3 - 4 OR LIWKRES2 = 1 OR LIWKQUIC = 3 - 4] You mentioned having difficulty with or being unable to do such things as [FILL WITH BOLDED TEXT FROM UP TO ALL ITEMS WHERE LITHINK = 3 - 4 OR LIUNDRST= 3-4 OR INREMEM = 3- 4 OR LICONCEN = 3-4 OR LIMONEY1 = 3 - 4 OR LILEARN = 3-4 OR LIWASH = 3 - 4 OR LIGOOUT1 = 3 -4 OR LIPEOPLE = 3 - 4 OR LISOC1 = 3 - 4 OR LIPRSNL = 3 - 4 OR LIEMOTNS = 3 - 4 OR LIRELAX = 3 - 4 OR LIHHRESP = 3 - 4 OR LIWRKRES = 3 - 4 OR LIWKQUIC = 3 - 4].

[**Note to Programmers:** Bolded text fills should appear in bold lower case and be separated by semicolons. The last fill should be preceded by the word "and."

Further IMWEEK1 Fill Specifications:
        IF LIMONEY2 =1 USE FILL FOR LIMONEY1.
        IF LILEARN2 =1 USE FILL FOR LILEARN1.
        IF LIWASH2=1 USE FILL FOR LIWASH1.
        IF LIGOOUT2=1 USE FILL FOR LIGOOUT1.
        IF LISTRAN2=1 USE FILL FOR LISTRAN1.
        IF LISOC2=1 USE FILL FOR LISOC1.
        IF LIHHRES2=1 USE FILL FOR LIHHRES1.

During the past 12 months, about how many weeks did you have any of these difficulties because of your emotions, nerves, or mental health? If you can't remember the exact number, just give your best estimate.

OF WEEKS: _____ [RANGE: 1 - 52]
DK/REF

CREATE IMWEEK1 FILL.

IMDAYS   [IF IMWEEK1 =1-52] During (that [IMWEEK1FILL] week/those [IMWEEK1 FILL] weeks), did you have

these kinds of difficulties every day, most days, or only one or two days a week?

1   Every day
2   Most days
3   Only one or two days a week
DK/REF

IMHELP   [IF MAMED=1 OR SEEDR=1 OR ADMT01 = 1 OR ADMT13 = 1 OR ADMT25 = 1] You mentioned earlier in the interview that you saw a professional or received prescription medications for your emotional problems in the past 12 months. How much did the counseling or medicine improve your ability to manage daily activities like those asked about in the previous questions?

1   None
2   A little
3   Some
4   A lot
5   A great deal
DK/REF

Youth Mental Health Service Utilization
  (Section Administered to 12 - 17 Year Old Respondents Only)

INTROYSU   [IF CURNTAGE = 12 - 17] These next questions are about treatment and counseling for problems with your behaviors or emotions that were **not** caused by alcohol or drugs.

                Press [ENTER] to continue.

YSU01   [IF CURNTAGE = 12 - 17] During the past 12 months, have you stayed **overnight or longer in any type of hospital** to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs?

        1   Yes
        2   No
        DK/REF

YSU02   [IF YSU01 = 1] During the past 12 months, how many **nights** altogether did you stay in a **hospital** to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs?

        # OF NIGHTS: _____ [RANGE: 1 - 365]
        DK/REF

YSU03   [IF YSU01 = 1] Think about the **last time** you stayed **overnight or longer** in a **hospital** to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. What was the reason you were admitted there?

        To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

        1   You thought about killing yourself or tried to kill yourself
        2   You felt depressed
        3   You felt very afraid or tense
        4   You were breaking rules or "acting out"
        5   You had eating problems
        6   Some other reason
        DK/REF

YSU03SP   [IF YSU03 = 6] Please use the keyboard to type in the reason for your last overnight stay in a hospital to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

                _____
                DK/REF

YSU04   [IF CURNTAGE = 12 - 17] During the past 12 months, did you stay **overnight or longer** in a **residential treatment center** to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs?

        1   Yes
        2   No
        DK/REF

YSU05   [IF YS04=1] During the past 12 months, how many **nights** altogether did you stay in a **residential treatment center** to receive treatment for emotional or behavioral problems that were **not** caused by alcohol or drugs?

        # OF NIGHTS: _____ [RANGE: 1 - 365]
        DK/REF

YSU06   [IF YSU04=1] Think about the **last time** you stayed **overnight or longer** in a **residential treatment center** to receive treatment for emotional or behavioral problems that were **not** caused by alcohol or drugs. What was the reason you were admitted there?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   You thought about killing yourself or tried to kill yourself.
2   You felt depressed
3   You felt very afraid or tense
4   You were breaking rules or "acting out"
5   You had eating problems
6   Other
DK/REF

YSU06SP   [IF YSU06=6] Please use the keyboard to type in the reason for your last overnight stay in a residential treatment center to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

YSU07   [IF CURNTAGE = 12 - 17] During the past 12 months, did you stay **overnight or longer** in **foster care or in a therapeutic foster care home** because you had emotional or behavioral problems that were **not** caused by alcohol or drugs?

1   Yes
2   No
DK/REF

YSU08   [IF YSU07 = 1] During the past 12 months, how many **nights** altogether did you stay in **foster care or in a therapeutic foster care home** because you had emotional or behavioral problems that were **not** caused by alcohol or drugs?

OF NIGHTS: _____   [RANGE: 1 - 365]
DK/REF

YSU09   [IF YSU07=1] Think about the **last time** you stayed **overnight or longer** in **foster care or in a therapeutic foster care home** because you had emotional or behavioral problems that were **not** caused by alcohol or drugs. What was the reason you were placed there?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   You thought about killing yourself or tried to kill yourself.
2   You felt depressed
3   You felt very afraid or tense
4   You were breaking rules or "acting out"
5   You had eating problems
6   Other
DK/REF

YSU09SP   [IF YSU09 =6] Please use the keyboard to type in the reason for your last overnight stay in foster care or in a therapeutic foster care home to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

YSU10   [IF CURNTAGE = 12 - 17] During the past 12 months, did you receive treatment or counseling at a **partial day hospital or day treatment program** because you had problems with your behavior or emotions that were **not** caused by alcohol or drugs?

1   Yes
2   No
DK/REF

YSU11   [IF YSU10 = 1] During the past 12 months, how many times did you visit a **partial day hospital or day treatment program** because you had emotional or behavioral problems that were **not** caused by alcohol or drugs?

OF TIMES: _____   [RANGE: 1 - 365]
DK/REF

YSU12   [IF YSU10 =1] Think about the **last time** you visited a **partial day hospital or day treatment program** because you had emotional or behavioral problems that were **not** caused by alcohol or drugs. What was the reason for your visit?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   You thought about killing yourself or tried to kill yourself.
2   You felt depressed
3   You felt very afraid or tense
4   You were breaking rules or "acting out"
5   You had eating problems
6   Other
DK/REF

YSU12SP   [IF YSU12 =6] Please use the keyboard to type in the reason for your last visit to a partial day hospital or day treatment program to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

YSU13   [IF CURNTAGE = 12 - 17] During the past 12 months, did you receive treatment or counseling at a **mental health clinic or center** because you had problems with your behavior or emotions that were **not** caused by alcohol or drugs?

1   Yes
2   No
DK/REF

YSU14   [IF YSU13 = 1] During the past 12 months, how many times did you visit a **mental health clinic or center to receive treatment or counseling** because you had emotional or behavioral problems that were **not** caused by alcohol or drugs?

OF TIMES: _____   [RANGE: 1 - 365]
DK/REF

YSU15   [IF YSU13 =1] Think about the **last time** you visited a **mental health clinic or center** to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. What was the reason for your visit?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   You thought about killing yourself or tried to kill yourself.
2   You felt depressed
3   You felt very afraid or tense
4   You were breaking rules or "acting out"
5   You had eating problems
6   Other
DK/REF

YSU15SP [IF YSU15 =6] Please use the keyboard to type in the reason for your last visit to a mental health clinic or center to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

YSU16 [IF CURNTAGE = 12 - 17] During the past 12 months, did you receive treatment or counseling from a **private therapist, psychologist, psychiatrist, social worker, or counselor** for emotional or behavioral problems that were **not** caused by alcohol or drugs?

1   Yes
2   No
DK/REF

YSU17 [IF YSU16 = 1] During the past 12 months, how many times did you receive treatment or counseling from a **private therapist, psychologist, psychiatrist, social worker, or counselor** for emotional or behavioral problems that were **not** caused by alcohol or drugs?

OF TIMES: _____ [RANGE: 1 - 365]
DK/REF

YSU18 [IF YSU16 = 1] Think about the **last time** you visited a **private therapist, psychologist, psychiatrist, social worker, or counselor** to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. What was the reason for your visit?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   You thought about killing yourself or tried to kill yourself.
2   You felt depressed
3   You felt very afraid or tense
4   You were breaking rules or "acting out"
5   You had eating problems
6   Other
DK/REF

YSU18SP [IF YSU15 =6] Please use the keyboard to type in the reason for your last visit to a private therapist, psychologist, psychiatrist, social worker, or counselor for emotional or behavioral problems that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

YSU19 [IF CURNTAGE = 12 -17] During the past 12 months, did you receive treatment or counseling from an **in-home therapist, counselor, or family preservation worker** for emotional or behavioral problems that were **not** caused by alcohol or drugs?

1   Yes
2   No
DK/REF

YSU20 [IF YSU19 = 1] During the past 12 months, how many times did you receive treatment or counseling from **an in-home therapist, counselor, or family preservation worker** for emotional or behavioral problems that were **not** caused by alcohol or drugs?

OF TIMES: _____ [RANGE: 1 - 365]
DK/REF

YSU21 [IF YSU19 = 1] Think about the **last time** you saw an **in-home therapist, counselor, or family preservation worker** to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. What was the reason for this visit?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1 You thought about killing yourself or tried to kill yourself.
2 You felt depressed
3 You felt very afraid or tense
4 You were breaking rules or "acting out"
5 You had eating problems
6 Other
DK/REF

YSU21SP [IF YSU21 =6] Please use the keyboard to type in the reason you last saw an in-home therapist, counselor, or family preservation worker for emotional or behavioral problems that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

YSU22 [IF CURNTAGE = 12 -17] During the past 12 months, did you receive treatment or counseling from a **pediatrician or other family doctor** for emotional or behavioral problems that were **not** caused by alcohol or drugs?

1 Yes
2 No
DK/REF

YSU23 [IF YSU22 = 1] During the past 12 months, how many times did you receive treatment or counseling from a **pediatrician or other family doctor** for emotional or behavioral problems that were **not** caused by alcohol or drugs?

OF TIMES: _____ [RANGE: 1 - 365]
DK/REF

YSU24 [IF YSU22 = 1] Think about the **last time** you visited a **pediatrician or other family doctor** to receive treatment or counseling for emotional or behavioral problems that were **not** caused by alcohol or drugs. What was the reason for your visit?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1 You thought about killing yourself or tried to kill yourself.
2 You felt depressed
3 You felt very afraid or tense
4 You were breaking rules or "acting out"
5 You had eating problems
6 Other
DK/REF

YSU24SP [IF YSU24 =6] Please use the keyboard to type in the reason for your last visit to a pediatrician or other family doctor for emotional or behavioral problems that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

YSU25 [IF YE09 = 1] During the past 12 months, did you receive **special education services while in your regular classroom** or have you been placed in a **special classroom, a special program, or a special school** because you had emotional or behavioral problems that were **not** caused by alcohol or drugs?

1   Yes
2   No
DK/REF

YSU26   [IF YE09 = 1] During the past 12 months, did you talk to **school counselors, school psychologists, or had regular meetings with your teachers** about problems with your emotions or behaviors that were **not** caused by alcohol or drugs?

1   Yes
2   No
DK/REF

YSU27   [IF YSU26 = 1] Think about the **last time** you talked to school counselors, school psychologists, or had regular meetings with your teachers about problems with your emotions or behaviors that were **not** caused by alcohol or drugs. What was the reason for your talk?

To select more than one reason from the list, press the space bar between each number you type. When you have finished, press the [ENTER] key to go to the next question.

1   You thought about killing yourself or tried to kill yourself.
2   You felt depressed
3   You felt very afraid or tense
4   You were breaking rules or "acting out"
5   You had eating problems
6   Other
DK/REF

YSU27SP   [IF YSU27 =6] Please use the keyboard to type in the reason for your last talk with a school counselor, school psychologist, or one of your regular teachers about problems with your emotions or behaviors that were **not** caused by alcohol or drugs. You do not need to give a detailed description — just a few words will be okay. When you have finished typing your answer, press the [ENTER] key to go to the next question.

_____
DK/REF

YSU28   [IF CURNTAGE = 12 - 17] Have you ever been in jail or in a detention center?

1   Yes
2   No
DK/REF

YSU29   [IF YSU07 = 2 OR DK/REF] Have you ever been in foster care?

1   Yes
2   No
DK/REF

ENDAUDIO   Thank you for your help with this part of the interview. Please tell your interviewer that you are finished.

INTERVIEWER: ENTER THE 3-LETTER CODE TO MOVE TO THE NEXT SECTION.

[Note: If the respondent reaches this screen because he/she has indicated he/she is younger than 12 at CONFIRM, or CGCC03a or ALCC03a or MJCC03a or CCCC03a, or CKCC03a, or HECC03a, or LSCC03a, or INCC03a, or PRCC03a, or TRCC03a, or STCC03a, or SVCC03a then after the interviewer enters the 3-letter code, the program routes directly to FIEXIT. Otherwise, the program continues with INTRODM2]

Back-End Demographics

INTRODM2   For the remaining questions, I will read the question out loud, you can tell me your answer, and I will enter it into the computer.

PRESS [ENTER] TO CONTINUE.

QD13   How many times in the past 12 months have you moved?

NUMBER OF TIMES: _____ [RANGE: 0 - 99]
DK/REF

INTERVIEWER NOTE:
The respondent should include moves from one residence to another within the same city/town as well as those from one city/town to another.

QD14   Were you born in the United States?

1   YES
2   NO
DK/REF

QD15   [IF QD14 = 2] In what country or U.S. territory were you born?

COUNTRY OR US TERRITORY: _____
DK/REF

QD16   [IF QD14 = 2] About how long have you lived in the United States?

1   6 MONTHS OR LESS
2   MORE THAN 6 MONTHS BUT LESS THAN 1 YEAR
3   AT LEAST 1 YEAR BUT LESS THAN 5 YEARS
4   AT LEAST 5 YEARS BUT LESS THAN 10 YEARS
5   AT LEAST 10 YEARS BUT LESS THAN 15 YEARS
6   15 YEARS OR MORE
DK/REF

INTERVIEWER NOTE:
Respondents should estimate the total amount of time they have lived in the United States even if the time was not continuous.

QD17   The next questions are about school. Are you now attending or are you currently enrolled in school? By "school," we mean an elementary school, a junior high or middle school, a high school, or a college or university. Please include home schooling as well.

1   YES
2   NO
DK/REF

INTERVIEWER NOTE:
If the respondent is on a holiday or summer break from school, but plans to return when the break is over, then he/she should be coded as currently enrolled in school.
Do not include vocational or technical schools.

QD17a   [IF CURNTAGE=12-25 AND (QD17=2 OR DK/REF) AND QD11 = 0 - 15] Are you currently on a holiday or vacation break from school?

1   YES
2   NO
DK/REF

QD17b [IF QD17a = 1] Do you plan to return to school when your holiday or vacation is over?

       1   Yes
       2   No
       DK/REF

QD18 [IF QD17 = 1] HAND R SHOWCARD 5. What grade or year of school are you **now** attending? Please tell me the number from the card.

[IF QD17b = 1] HAND R SHOWCARD 5. What grade or year of school will you be attending when your vacation is over? Please tell me the number from the card.

       1   1ST GRADE
       2   2ND GRADE
       3   3RD GRADE
       4   4TH GRADE
       5   5TH GRADE
       6   6TH GRADE
       7   7TH GRADE
       8   8TH GRADE
       9   9TH GRADE
       10   10TH GRADE
       11   11TH GRADE
       12   12TH GRADE
       13   COLLEGE OR UNIVERSITY/1ST YEAR
       14   COLLEGE OR UNIVERSITY/2ND YEAR
       15   COLLEGE OR UNIVERSITY/3RD YEAR
       16   COLLEGE OR UNIVERSITY/4TH YEAR
       17   COLLEGE OR UNIVERSITY/5TH OR HIGHER YEAR
       DK/REF (QD19)

> INTERVIEWER NOTE:
> If the respondent is on a holiday or summer break, select the category for the year or grade he/she will enter when he/she returns to school.
> If home schooled or other alternative, ask for grade equivalent.

HARD ERROR: IF THE ABSOLUTE DIFFERENCE BETWEEN QD11 AND QD18 = 2 OR MORE DISPLAY THE FOLLOWING ERROR BOX:
> INTERVIEWER: THE ANSWERS YOU HAVE ENTERED FOR THE RESPONDENT'S LAST GRADE COMPLETED (QD11) AND HIS/HER CURRENT GRADE (QD18) ARE UNUSUAL. PLEASE VERIFY THEM WITH THE RESPONDENT. IF YOU NEED TO CORRECT AN ENTRY, HI-LIGHT THAT QUESTION NUMBER AND PRESS [ENTER]. IF THE ANSWERS ARE CORRECT AS IS, HI-LIGHT "SUPPRESS" AND PRESS [ENTER].

SUPPRESS [IF FI CHOOSES TO SUPPRESS THE HARD ERROR ABOVE] INTERVIEWER: PLEASE PROVIDE A BRIEF EXPLANATION FOR WHY THE ANSWERS YOU HAVE ENTERED FOR THE RESPONDENT'S LAST GRADE COMPLETED AND HIS/HER CURRENT GRADE OR CORRECT.

            ALLOW 200 CHARACTERS.

QD19 [IF QD17 = 1 OR QD17b = 1] Are you a full-time student or a part-time student?

       1   FULL-TIME
       2   PART-TIME
       DK/REF

QD20 [IF QD19 = 1] During the past 30 days, that is, from DATEFILL up to and including today, how many **whole** days of school did you miss because you were sick or injured?

IF SCHOOL WAS NOT IN SESSION DURING THE PAST 30 DAYS, ENTER 90.

NUMBER OF DAYS: _____ [RANGE: 0 - 90]
DK/REF

> INTERVIEWER NOTE:
> Days missed because the respondent stayed home with a sick child or other family member should not be included.

QD21 [IF QD19 = 1 AND QD20 NE 90] During the past 30 days, that is, since DATEFILL, how many **whole** days did you miss because you skipped or "cut" or just didn't want to be there?

NUMBER OF DAYS: _____ [RANGE: 0 - 30]
DK/REF

> INTERVIEWER NOTE:
> Days missed because the respondent stayed home with a sick child or other family member should not be included.

QD22 [IF (QD11 = 1 - 12 OR DK/REF) AND CURNTAGE = 12 - 25 AND (QD17a = 2 OR DK/REF OR QD17b = 2)] Have you received a high school diploma?

1 YES
2 NO
DK/REF

QD23 [IF QD22 = 2 OR DK/REF] Have you received a GED certificate of high school completion?

1 YES
2 NO
DK/REF

QD24 [IF QD23 = 1 OR 2 OR DK/REF] HAND R SHOWCARD 6. Please look at this card and tell me which one of these reasons **best** describes why you left school before receiving a high school diploma. Just give me the number.

1   SCHOOL WAS BORING OR I DIDN'T WANT TO BE THERE
2   I GOT PREGNANT
3   I GOT IN TROUBLE OR EXPELLED FOR **SELLING** DRUGS
4   I GOT IN TROUBLE OR EXPELLED FOR **USING** DRUGS
5   I GOT IN TROUBLE OR EXPELLED FOR SOME OTHER REASON
6   I OFTEN GOT INTO TROUBLE
7   I HAD TO GET A JOB (OR WORK MORE HOURS)
8   I WAS GETTING BAD GRADES
9   I WASN'T LEARNING ANYTHING
10 I GOT MARRIED OR MOVED IN WITH MY BOY/GIRLFRIEND
11 I MOVED HERE FROM ANOTHER COUNTRY AND DIDN'T ENROLL IN SCHOOL (OR DROPPED OUT OF SCHOOL) BECAUSE OF LANGUAGE OR OTHER PROBLEMS
12 I WAS TREATED BADLY AT SCHOOL
13 I BECAME ILL OR INJURED
14 I WENT TO JAIL/PRISON
15 I HAD RESPONSIBILITIES AT HOME OR PERSONAL PROBLEMS
16 OTHER REASON
DK/REF

QD24SP [IF QD24 = 16] TYPE IN THE OTHER REASON WHY THE RESPONDENT LEFT SCHOOL BEFORE RECEIVING A HIGH SCHOOL DIPLOMA.

_____
DK/REF

QD25 [IF QD24 = 1 - 16 OR DK/REF] How old were you when you stopped attending school?

AGE WHEN STOPPED ATTENDING SCHOOL: _____
DK/REF

DEFINE STARTDATE:
        IF INTERVIEW DAY = SUNDAY, STARTDATE = INTERVIEW DATE - 7
        IF INTERVIEW DAY = MONDAY, STARTDATE = INTERVIEW DATE - 8
        IF INTERVIEW DAY = TUESDAY, STARTDATE = INTEVIEW DATE - 9
        IF INTERVIEW DAY = WEDNESDAY, STARTDATE = INTERVIEW DATE - 10
        IF INTERVIEW DAY = THURSDAY, STARTDATE = INTERVIEW DATE - 11
        IF INTERVIEW DAY = FRIDAY, STARTDATE = INTERVIEW DATE - 12
        IF INTERVIEW DAY = SATURDAY, STARTDATE = INTERVIEW DATE - 13

DEFINE ENDDATE:
        IF INTERVIEW DAY = SUNDAY, ENDDATE = INTERVIEW DATE - 1
        IF INTERVIEW DAY = MONDAY, ENDDATE = INTERVIEW DATE - 2
        IF INTERVIEW DAY = TUESDAY, ENDDATE = INTERVIEW DATE - 3
        IF INTERVIEW DAY = WEDNESDAY, ENDDATE = INTERVIEW DATE - 4
        IF INTERVIEW DAY = THURSDAY, ENDDATE = INTERVIEW DATE - 5
        IF INTERVIEW DAY = FRIDAY, ENDDATE = INTERVIEW DATE - 6
        IF INTERVIEW DAY = SATURDAY, ENNDATE = INTERVIEW DATE -7

QD26   [IF CURNTAGE = 15 OR OLDER] The next questions are about working. Did you work at a job or business at any time **last week**? By last week, I mean the week beginning on Sunday, [STARTDATE] and ending on Saturday, [ENDDATE].

1   YES
2   NO
DK/REF

                  INTERVIEWER NOTE:
                  If the respondent asks about unpaid work, tell him/her to include unpaid work in a family farm or business if he/she worked more than 15 hours last week.
                  A student who is given a stipend is **not** considered to be working.
                  Someone doing volunteer work is **not** considered to be working.
                  A person who provides personal labor in exchange for work done for them, rather than for pay, is considered to be working.

QD27   [IF QD26 = 2] Even though you did not work at any time last week, did you **have** a job or business?

1   YES
2   NO
DK/REF

QD28   [IF QD26 =1] How many hours did you work **last week** at all jobs or businesses?

 # OF HOURS WORKED: _____   [RANGE: 1 - 120]
DK/REF

QD29   [IF (QD28 = 1 - 120 OR DK/REF) OR QD27 = 1] Do you **usually** work 35 hours or more per week at **all** jobs or businesses?

1   YES
2   NO
DK/REF

INOC01 [IF QD26 = 1 OR QD27 = 1] In what kind of business or industry do you work? That is, what product is made or what service is offered?

_____ [ALLOW 100 CHARACTERS]
DK/REF

If the respondent has more than 1 job, he/she should tell you about only one of the jobs. In these situations, the choice of which job to report is left to the respondent.

In order to accurately code a respondent's occupation, our coders need complete information. Examples include: Hospital, newspaper publishing, mail order house, auto engine manufacturing, breakfast cereal manufacturing. Please probe thoroughly!

INOC02 [IF QD26 =1 OR QD27=1 AND INOC01 NE DK/REF] HAND R SHOWCARD 7. Which of these categories best describes the business or industry in which you work?

1   MANUFACTURING
2   WHOLESALE TRADE
3   RETAIL TRADE
4   AGRICULTURE
5   CONSTRUCTION
6   SERVICE
7   GOVERNMENT
8   OTHER

INOC02M   [IF INOC02 = 1] What do they make?

_____ [ALLOW 100 CHARACTERS]
DK/REF

INOC02T   [IF INOC02 = 2 OR 3] What do they sell?

_____ [ALLOW 100 CHARACTERS]
DK/REF

INOC03 [IF INOC02 = 8] PLEASE SPECIFY THE TYPE OF INDUSTRY.

_____ [ALLOW 100 CHARACTERS]
DK/REF

INOC04 [IF QD26 =1 OR QD27=1 AND INOC01 NE DK/REF] What kind of work do you do? That is, what is your occupation?

_____ [ALLOW 100 CHARACTERS]
DK/REF

INTERVIEWER NOTE:
If the respondent has more than one job, he/she should tell you about only one of the jobs. In these situations, the choice of which job to report is left to the respondent.

In order to accurately code a respondent's occupation, our coders need complete information. Examples include: Registered nurse, personnel manager, supervisor of order department, gasoline engine assembler, grinder operator. Please probe thoroughly!

INOC05 [IF QD26 = 1 OR QD27 = 1 AND INOC01 NE DK/REF] What are your most important activities or duties in that job?

_____ [ALLOW 100 CHARACTERS]
DK/REF

INTERVIEWER NOTE:
If the respondent has more than one job, he/she should tell you about only one of the jobs. In these situations, the choice of which job to report is left to the respondent.

In order to accurately code a respondent's occupation, our coders need complete information. Examples include: patient care, directing hiring practices, supervising order clerks, assembling engines, operating grinding mill. Please probe thoroughly!

INOC06 [IF QD26 =1 OR QD27 = 1 AND INOC01 NE DK/REF] HAND R SHOWCARD 8. Which of these categories best describes the business in which you work?

  1   PRIVATE **FOR-PROFIT** COMPANY OR BUSINESS
  2   PRIVATE **NOT-FOR-PROFIT** COMPANY OR BUSINESS
  3   **LOCAL** GOVERNMENT (CITY, COUNTY, ETC.)
  4   **STATE** GOVERNMENT
  5   **FEDERAL** GOVERNMENT
  6   **INTERNATIONAL OR FOREIGN** GOVERNMENT
  7   SELF-EMPLOYED IN AN **INCORPORATED** BUSINESS
  8   SELF-EMPLOYED IN AN **UNINCORPORATED** BUSINESS
  9   WORKING **WITHOUT PAY** IN A FAMILY BUSINESS OR FARM
  DK/REF

QD30 [IF QD27 = 1] HAND R SHOWCARD 9. Please look at this card and tell me which one of these reasons **best** describes why you did not work last week. Just give me the number.

  1   ON VACATION/SICK/FURLOUGH/STRIKE/OTHER TEMPORARY ABSENCE
  2   ON LAYOFF AND **NOT** LOOKING FOR WORK
  3   ON LAYOFF AND LOOKING FOR WORK
  4   WAITING TO REPORT TO A NEW JOB
  5   SELF-EMPLOYED AND DID NOT HAVE ANY BUSINESS LAST WEEK
  6   GOING TO SCHOOL/TRAINING
  7   SOME OTHER REASON
  DK/REF

QD31 [IF QD27 = 2 OR DK/REF] HAND R SHOWCARD 10. Please look at this card and tell me which one of these reasons **best** describes why you did not have a job or business last week. Just give me the number.

  1   LOOKING FOR WORK
  2   ON LAYOFF AND **NOT** LOOKING FOR WORK
  3   KEEPING HOUSE OR CARING FOR CHILDREN FULL TIME
  4   GOING TO SCHOOL/TRAINING
  5   RETIRED
  6   DISABLED FOR WORK
  7   DIDN'T WANT A JOB
  8   SOME OTHER REASON
  DK/REF

QD32 [IF QD31 = 1] During the past 30 days, did you make **specific efforts** to find work? Include any contacts you made with anyone about a job, sending out resumes or applications, placing or answering ads. Do not include only reading job ads.

  1   YES
  2   NO
  DK/REF

QD33 [IF QD26 = DK/REF OR QD27 = 2 OR DK/REF] Now, think about the past 12 months, from DATEFILL through today. Did you work at a job or business at any time during the past 12 months?

    1   YES
    2   NO
    DK/REF

QD34 [IF QD26 = 1 OR QD33 = 1 OR (QD27 = 1 AND QD30 NE 5)] Have you been self-employed at any time during the past 12 months?

    1   YES
    2   NO
    DK/REF

QD35 [IF QD34 = 1 OR QD30 = 5] How many different employers, including yourself, have you had in the past 12 months?

    # OF EMPLOYERS IN PAST 12 MONTHS: _____ [RANGE: 1 - 52]
    DK/REF

QD36 [IF QD34 = 2 OR DK/REF] How many different employers have you had in the past 12 months?

    # OF EMPLOYERS IN PAST 12 MONTHS: _____ [RANGE: 1 - 52]
    DK/REF

QD37 [IF QD26 = 1 OR QD27 = 1] During the past 12 months, was there ever a time when you did **not** have at least one job or business?

    1   YES
    2   NO
    DK/REF

QD38 [IF QD37 = 1] In how many weeks during the past 12 months did you **not** have at least one job or business?

    # OF WEEKS WITHOUT A JOB OR BUSINESS: _____ [RANGE: 1 - 52]
    DK/REF

> INTERVIEWER NOTE:
> If the respondent did not have at least one job or business for less than one week, enter "1".

QD39a [IF QD27 = 2 OR DK/REF] In what year did you last work at a job or business?

ENTER THE FOUR-DIGIT YEAR IN THE FOLLOWING FORMAT: YYYY.

IF THE RESPONDENT NEVER WORKED FOR PAY, ENTER 9999.

    _____ YEAR LAST WORKED
    DK/REF

[IF QD39a > SYSTEM YEAR] D**HARD ERROR:** The year that the computer recorded is [YEAR FROM QD39a]. Press [ENTER] to close this box and then enter the correct year.

[IF QD39a < (SYSTEM YEAR - CURRENT AGE)] **Hard Error:** The year the computer recorded is earlier than the respondent's birthdate. Press [ENTER] to close this box and then double-check the year with the respondent.

QD39b [IF QD39a NE 9999 OR DK/REF OR BLANK] In what month in [YEAR FROM QD39a] did you last work at a job or business?

    1   JANUARY
    2   FEBRUARY

3	MARCH
4	APRIL
5	MAY
6	JUNE
7	JULY
8	AUGUST
9	SEPTEMBER
10	OCTOBER
11	NOVEMBER
12	DECEMBER
DK/REF	

HARD ERROR: [IF YEAR IN QD39A = CURRENT YEAR AND MONTH IN QD39B > CURRENT MONTH] The month the computer recorded is later than the current month. Press [ENTER] to close this box and then enter the correct month.

INOC07 [IF QD33 = 1] In what kind of business or industry did you work? That is, what product was made or what service was offered?

_____ [ALLOW 100 CHARACTERS]
DK/REF

> INTERVIEWER NOTE:
> If the respondent had more than 1 job, he/she should tell you about only one of the jobs. In these situations, the choice of which job to report is left to the respondent.
>
> In order to accurately code a respondent's occupation, our coders need complete information. Examples include: Hospital, newspaper publishing, mail order house, auto engine manufacturing, breakfast cereal manufacturing. Please probe thoroughly!

INOC08 [IF QD33 =1 AND INOC07 NE DK/REF] HAND R SHOWCARD 7. Which of these categories best describes the business or industry in which you worked?

1	MANUFACTURING
2	WHOLESALE TRADE
3	RETAIL TRADE
4	AGRICULTURE
5	CONSTRUCTION
6	SERVICE
7	GOVERNMENT
8	OTHER

INOC08M   [IF INOC08 = 1] What did they make?

_____ [ALLOW 100 CHARACTERS]
DK/REF

INOC08T   [IF INOC08 = 2 OR 3] What did they sell?

_____ [ALLOW 100 CHARACTERS]
DK/REF

INOC09 [IF INOC08 = 8] PLEASE SPECIFY THE TYPE OF INDUSTRY.

_____ [ALLOW 100 CHARACTERS]
DK/REF

INOC10 [IF QD33 =1 AND INOC07 NE DK/REF] What kind of work did you do? That is, what was your occupation?

_____ [ALLOW 100 CHARACTERS]
DK/REF

> INTERVIEWER NOTE:
> If the respondent had more than one job, he/she should tell you about only one of the jobs. In these situations, the choice of which job to report is left to the respondent.
>
> In order to accurately code a respondent's occupation, our coders need complete information.   Examples include: Registered nurse, personnel manager, supervisor of order department, gasoline engine assembler, grinder operator. Please probe thoroughly!

INOC11 [IF QD33 = 1 AND INOC07 NE DK/REF] What were your most important activities or duties in that job?

_____ [ALLOW 100 CHARACTERS]
DK/REF

> INTERVIEWER NOTE:
> If the respondent had more than one job, he/she should tell you about only one of the jobs. In these situations, the choice of which job to report is left to the respondent.
>
> In order to accurately code a respondent's occupation, our coders need complete information. Examples include: patient care, directing hiring practices, supervising order clerks, assembling engines, operating grinding mill. Please probe thoroughly!

INOC12 [IF QD33 =1 AND INOC07 NE DK/REF] HAND R SHOWCARD 8. Which of these categories best describes the business in which you worked?

1   PRIVATE **FOR-PROFIT** COMPANY OR BUSINESS
2   PRIVATE **NOT-FOR-PROFIT** COMPANY OR BUSINESS
3   **LOCAL** GOVERNMENT (CITY, COUNTY, ETC.)
4   **STATE** GOVERNMENT
5   **FEDERAL** GOVERNMENT
6   **INTERNATIONAL OR FOREIGN** GOVERNMENT
7   SELF-EMPLOYED IN AN **INCORPORATED** BUSINESS
8   SELF-EMPLOYED IN AN **UNINCORPORATED** BUSINESS
9   WORKING **WITHOUT PAY** IN A FAMILY BUSINESS OR FARM
DK/REF

QD40   [IF QD26 = 1 OR QD27 = 1] During the past 30 days, that is, from [DATEFILL] up to and including today, how many **whole** days of work did you miss because you were sick or injured?

OF DAYS: _____   [RANGE: 0 - 30]
DK/REF

> INTERVIEWER NOTE:
> Days missed because the respondent stayed home with a sick child or other family member should not be included.

QD41   [IF QD26 = 1 OR QD27 = 1] During the past 30 days, that is, from [DATEFILL] up to and including today, how many **whole** days of work did you miss because you just didn't want to be there?

OF DAYS: _____   [RANGE: 0 - 30]
DK/REF

INTERVIEWER NOTE:
Days missed because the respondent stayed home with a sick child or other family
member should not be included.

QD42   [IF QD26 = 1 OR QD27 = 1]   HAND R SHOWCARD 11. Thinking about the location where **you** work, how many people work for your employer out of this office, store, etc.?

1   LESS THAN 10 PEOPLE
2   10-24 PEOPLE
3   25-99 PEOPLE
4   100-499 PEOPLE
5   500 PEOPLE OR MORE
DK/REF

QD43   [IF QD42 = 1 - 5 OR DK/REF] At your workplace, is there a written policy about employee use of alcohol or drugs?

1   YES
2   NO
DK/REF

QD44   [IF QD43 = 1] Does this policy cover only alcohol, only drugs, or both alcohol and drugs?

1   ONLY ALCOHOL
2   ONLY DRUGS
3   BOTH ALCOHOL AND DRUGS
DK/REF

QD45   [IF QD44 = 1 - 3 OR DK/REF OR QD43 = 2 OR DK/REF] At your workplace, have you ever been given any educational information regarding the use of alcohol or drugs?

1   YES
2   NO
3   DON'T REMEMBER
DK/REF

QD46   [IF QD45 = 1 - 3 OR DK/REF] Through your workplace, is there access to any type of employee assistance program or other type of counseling program for employees who have alcohol or drug-related problems?

1   YES
2   NO
DK/REF

QD47   [IF QD46 = 1 - 2 OR DK/REF] Does your workplace ever test its employees for alcohol use?

1   YES
2   NO
DK/REF

QD48   [IF QD47 = 1 - 2 OR DK/REF] Does your workplace ever test its employees for drug use?

1   YES
2   NO
DK/REF

QD49   [IF Q47 = 1 OR Q48 = 1] Does your workplace test its employees for drug or alcohol use as part of the hiring process?

1   YES
2   NO
DK/REF

Testing as part of the hiring process refers to a test that must be conducted, and show no presence of drugs in order for an applicant to be hired.

QD50 [IF Q49 = 1 OR 2 OR DK/REF] Does your workplace test its employees for drug or alcohol use on a random basis?

1   YES
2   NO
DK/REF

INTERVIEWER NOTE:
Testing on a random basis refers to a test conducted at unscheduled times with a random group of a company's employees.

QD51 [IF Q47 = 1 OR Q48 = 1] According to the policy at your workplace, what happens to an employee the **first** time he or she tests positive for illicit drugs?

1   HANDLED ON AN INDIVIDUAL BASIS / POLICY DOES NOT SPECIFY WHAT HAPPENS
2   EMPLOYEE IS FIRED
3   EMPLOYEE IS REFERRED FOR TREATMENT OR COUNSELING
4   NOTHING HAPPENS
5   SOMETHING ELSE HAPPENS
DK/REF

QD52 [IF QD42 = 1 - 5 OR DK/REF] Would you be more or less likely to want to work for an employer that tests its employees for drug use as part of the hiring process? Would you say more likely, less likely, or would it make no difference to you?

1   MORE LIKELY
2   LESS LIKELY
3   MAKES NO DIFFERENCE
DK/REF

QD53 [IF QD52 = 1 - 3 OR DK/REF] Would you be more or less likely to want to work for an employer that tests its employees for drug or alcohol use on a random basis? Would you say more likely, less likely, or would it make no difference to you?

1   MORE LIKELY
2   LESS LIKELY
3   MAKES NO DIFFERENCE
DK/REF

QD54 Altogether, how many people live here now, **including yourself**? Please include anyone who (has lived/will live) here for most of (January, February, and March / April, May, and June / July, August, and September / October, November, and December).

IN HOUSEHOLD: _____ [RANGE: 1 - 25]
DK/REF

INTERVIEWER NOTE:
If you are interviewing in a transient shelter, enter "1".
If you are interviewing in a group quarters unit that was listed by room, enter the number of people living in the room.

IF QD54 = 1 OR DK/REF SKIP TO FIRST QUESTION FOLLOWING HH ROSTER, OTHERWISE CONTINUE.

DEFINE GRID WITH ROWS EQUAL TO QD54. EACH COLUMN OF THE GRID IS A QUESTION AS SPEC'D BELOW.

PERAGEYR   [IF QD54 = 2 - 25] Now I need some additional information about each person who lives here. Let's start with the oldest. How old was he or she on his or her **last** birthday? (WORDING FOR ADDITIONAL CYCLES: How old was the next oldest person on his or her last birthday?)

INTERVIEWER: FOR CHILDREN LESS THAN 24 MONTHS (2 YEARS), ENTER '1.' YOU WILL PROMPTED FOR THE AGE IN MONTHS ON THE NEXT SCREEN.

AGE IN WHOLE YEARS: _____ [RANGE: 1 - 110]
DK/REF

CHAGEMON   [IF PERAGEYR = 1] ENTER THE AGE **IN WHOLE MONTHS** FOR THIS HOUSEHOLD MEMBER:

AGE IN MONTHS: _____ [RANGE: 1 - 23]
DK/REF

CHMONSEX   [IF CHAGEMON = 1 - 23] Is the [CHAGEMON FILL]-month old child a male or a female?

5   MALE
9   FEMALE
DK/REF

CHYRSEX   [IF CHAGEMON = DK/REF] Is this child a male or a female?

5   MALE
9   FEMALE
DK/REF

PERYRSEX   [IF CHAGEMON = 3 - 110] Is the [PERAGEYR FILL]-year old person a male or a female?

5   MALE
9   FEMALE
DK/REF

PERSEX[IF PERAGEYR = DK/REF] Is this person a male or a female?

5   MALE
9   FEMALE
DK/REF

MRELATON   [IF CHMONSEX OR RHYRSEX OR PERYRSEX OR PERSEX = 5] HAND R SHOWCARD 12. Please look at this card and tell me which category best describes his relationship to you.

1   SELF
2   FATHER
3   SON
4   BROTHER
5   HUSBAND
6   UNMARRIED PARTNER (LIVING TOGETHER AS THOUGH   MARRIED)
7   HOUSEMATE OR ROOMMATE
8   SON-IN-LAW
9   GRANDSON
10   FATHER-IN-LAW
11   GRANDFATHER
12   BOARDER OR ROOMER
13   OTHER RELATIVE

14 OTHER NON-RELATIVE
DK/REF

IF MRELATON=1 AND QD01=2 DISPLAY ERROR BOX THAT SAYS: INTERVIEWER: YOU HAVE RECORDED THAT THE RESPONDENT IS MALE. EARLIER, YOU RECORDED THE RESPONDENT'S SEX AS FEMALE. CONFIRM THE RESPONDENT'S SEX AND CORRECT THE ANSWER THAT WAS ENTERED INCORRECTLY.

CREATE ERROR BOX SO IT ALLOWS R TO GO TO EITHER ANSWER TO FIX IT.

FTHRTYPE [IF MRELATON = 2] Is this your biological, step-, adoptive, or foster father?

   1 BIOLOGICAL FATHER
   2 STEP-FATHER
   3 ADOPTIVE FATHER
   4 FOSTER FATHER
   DK/REF

SONTYPE [IF MRELATON = 3] Is this your biological, step-, adoptive, or foster son?

   1 BIOLOGICAL SON
   2 STEP-SON
   3 ADOPTIVE SON
   4 FOSTER SON
   DK/REF

BTHRTYPE [IF MRELATON = 4] Is this your full, half, step-, adoptive, or foster brother?

   1 FULL BROTHER
   2 HALF BROTHER
   3 STEP-BROTHER
   4 ADOPTIVE BROTHER
   5 FOSTER BROTHER
   DK/REF

BTWNTYPE [IF AGE1 = AGE OF THIS HOUSEHOLD MEMBER AND BTHRTYPE = 1] Is this your identical twin, your fraternal twin or neither?

   1 IDENTICAL TWIN
   2 FRATERNAL TWIN
   3 NEITHER
   DK/REF

FRELATON [IF CHMONSEX OR CHYRSEX OR PERYRSEX OR PERSEX = 9] HAND R SHOWCARD 13. Please look at this card and tell me which category best describes her relationship to you.

   1 SELF
   2 MOTHER
   3 DAUGHTER
   4 SISTER
   5 WIFE
   6 UNMARRIED PARTNER (LIVING TOGETHER AS THOUGH MARRIED)
   7 HOUSEMATE OR ROOMMATE
   8 DAUGHTER-IN-LAW
   9 GRANDDAUGHTER
   10 MOTHER-IN-LAW
   11 GRANDMOTHER
   12 BOARDER OR ROOMER
   13 OTHER RELATIVE

14   OTHER NON-RELATIVE
          DK/REF

IF FRELATON=1 AND QD01=1 DISPLAY ERROR BOX THAT SAYS: INTERVIEWER: YOU HAVE RECORDED
THAT THE RESPONDENT IS FEMALE. EARLIER, YOU RECORDED THE RESPONDENT'S SEX AS MALE.
CONFIRM THE RESPONDENT'S SEX AND CORRECT THE ANSWER THAT WAS ENTERED INCORRECTLY.

CREATE ERROR BOX SO IT ALLOWS R TO GO TO EITHER ANSWER TO FIX IT.

NOTE TO PROGRAMMERS: Once MRELATON OR FRELATON = 1, please implement a hard-error to occur if the FI
attempts to enter a "1" for either of these variables for subsequent household members. The message box should read:
INTERVIEWER: YOU HAVE ALREADY RECORDED "SELF" AS THE RELATIONSHIP FOR ANOTHER MEMBER OF
THIS HOUSEHOLD. "SELF" CAN ONLY BE CODED FOR **ONE** MEMBER OF THIS HOUSEHOLD. REVIEW YOUR
ENTRIES AND CORRECT THE APPROPRIATE RELATIONSHIPS AS NECESSARY.

MTHRTYPE   [IF FRELATON = 2] Is this your biological, step-, adoptive, or foster mother?

          1   BIOLOGICAL MOTHER
          2   STEP-MOTHER
          3   ADOPTIVE MOTHER
          4   FOSTER MOTHER
          DK/REF

DAUTYPE   [IF FRELATON = 3] Is this your biological, step-, adoptive, or foster daughter?

          1   BIOLOGICAL DAUGHTER
          2   STEP-DAUGHTER
          3   ADOPTIVE DAUGHTER
          4   FOSTER DAUGHTER
          DK/REF

SISTYPE   [IF FRELATON = 4] Is this your full, half, step-, adoptive, or foster sister?

          1   FULL SISTER
          2   HALF SISTER
          3   STEP-SISTER
          4   ADOPTIVE SISTER
          5   FOSTER SISTER
          DK/REF

FTWNTYPE   [IF AGE1 = AGE OF THIS HOUSEHOLD MEMBER AND SISTYPE = 1] Is this your identical twin, your
          fraternal twin or neither?

          1   IDENTICAL TWIN
          2   FRATERNAL TWIN
          3   NEITHER
          DK/REF

MBRSELCT   [IF FIPE1 = 1 AND MRELATON NE 1 AND FRELATON NE 1 AND PERAGEYR = 12 OR OLDER]
          WAS THIS HOUSEHOLD MEMBER ALSO SELECTED TO BE INTERVIEWED? (IF YOU ARE
          UNSURE, ATTEMPT TO VERIFY WITH THIS RESPONDENT.)

          1   YES
          2   NO
          DK/REF

RETURN TO PERAGEYR AND CYCLE THROUGH THE QUESTIONS FOR THE NEXT HOUSEHOLD MEMBER.
CONTINUE CYCLES UNTIL THE NUMBER OF CYCLES = THE NUMBER REPORTED IN QD54.

IF FIPE1=1 AND MBRSELCT = 2 FOR ALL HOUSEHOLD MEMBERS, DISPLAY ERROR BOX:

> INTERVIEWER: EARLIER, YOU RECORDED THAT 2 PEOPLE WERE SELECTED AT THIS HOUSEHOLD. THE HOUSEHOLD ROSTER DOES NOT SHOW ANYONE LISTED AS THE SECOND RESPONDENT. PLEASE VERIFY THE NUMBER OF PEOPLE SELECTED AT THIS HOUSEHOLD AND FIX THE APPROPRIATE ANSWER.

PROXYINT   PROXY INFORMATION
The next questions are about your health insurance coverage and the kinds and amounts of income that you receive.

(This information will help in planning health care services and finding ways to lower costs of care.)

PRESS [ENTER] TO CONTINUE.

FAMLY IF QD54 = 1 SKIP TO QHI01

IF MRELATON=7 OR MRELATON=12 OR MRELATON=14 OR FRELATON=7 OR FRELATON=12 OR FRELATON=14 FOR ALL PERSONS IN HOUSEHOLD SKIP TO QHI01.

CREATE GRID:
[IF MRELATON/FRELATON FOR PERSON 1 NE 1 AND CALCAGE FOR PERSON 1 > 17] INSERT MRELATON/FRELATON VALUE NAME (DESCRIPTOR SUCH AS WIFE, SON, OR UNMARRIED PARTNER) IN LEFT COLUMN. INSERT PERAGEYR IN RIGHT COLUMN. CONTINUE CYCLING THROUGH UNTIL NUMBER OF CYCLES = NUMBER REPORTED IN D49 MINUS THE INELIGIBLE PERSONS MARKED BY A MRELATON/FRELATON=7 OR MRELATON/FRELATON=12 OR MRELATON/FRELATON=14.

FAMILY MEMBERS:
PERAGEYR year old MRELATON/FRELATON
(Continue until all HH members have either been listed or excluded)

SO, IF HOUSEHOLD ROSTER LOOKS LIKE THIS:

PERSON #	RELATIONSHIP TO R	AGE
1	SELF	44
2	HUSBAND	42
3	SON	16
4	BOARDER/ROOMER	16

THE GRID SHOULD LOOK LIKE THIS:

FAMILY MEMBERS:
42 year old   Husband
16 year old biological Son

QP01   [IF QD54 > 1 BUT RESPONDENT IS ONLY FAMILY MEMBER 18 OR OLDER, SKIP TO QHI01]

[IF GRID HAS MORE THAN 1 ADULT PERSON LISTED.] {SHOW GRID ON SCREEN. SHOW ONLY ADULT FAMILY MEMBERS (CURNTAGE > 17) IN THIS GRID} I have listed as adult family members who live here your READ RELATIONSHIPS SHOWN BELOW. Do you think one of these people would be better able to give me the correct information about your health insurance coverage and the kinds of income you receive?

[IF GRID HAS ONLY 1 ADULT PERSON LISTED] {SHOW GRID ON SCREEN. SHOW ONLY ADULT FAMILY MEMBERS (CURNTAGE > 17) IN THIS GRID} Do you think your READ RELATIONSHIP SHOWN BELOW would be better able to give me the correct information about your health insurance coverage and the kinds of income you receive?

1   YES
2   NO   [ACTIVATE PROXYFILL AS "YOU/YOUR" FOR REMAINING QUESTIONS]
DK/REF [ACTIVATE PROXYFILL AS "YOU/YOUR" FOR REMAINING QUESTIONS]

QP02   [IF QP01=1] Who is the person you think can help us get the correct information for these questions? ENTER RELATIONSHIP OF PERSON WHO CAN BETTER ANSWER THESE QUESTIONS.

      _____   [ACTIVATE QP02 FILL]
DK/REF

QP03   [IF QP02 NE DK/REF OR BLANK] Is your [QP02 FILL] here at home now?

1   YES
2   NO   [ACTIVATE PROXYFILL AS "YOU/YOUR" FOR REMAINING QUESTIONS]
DK/REF   [ACTIVATE PROXYFILL AS "YOU/YOUR" FOR REMAINING QUESTIONS]

QP04   [IF QP03=1] Would you ask your [QP02 FILL] to join us to help with these last questions about health insurance and income?

1   YES
2   NO   [ACTIVATE PROXYFILL AS "YOU/YOUR" FOR REMAINING QUESTIONS]
DK/REF [ACTIVATE PROXYFILL AS "YOU/YOUR" FOR REMAINING QUESTIONS]

HASJOIN   [IF QP04 = 1] HAS THE PERSON'S [QP02 FILL] JOINED R?

1   YES   [ACTIVATE PROXYFILL AS "SAMPLE MEMBER/SAMPLE MEMBER'S" FOR REMAINING QUESTIONS]
2   NO   [ACTIVATE PROXYFILL AS "YOU/YOUR" FOR REMAINING QUESTIONS]
DK/REF [ACTIVATE PROXYFILL AS "YOU/YOUR" FOR REMAINING QUESTIONS]

TOPROXY   [IF HASJOIN = 1] WHEN [QP02 FILL] HAS JOINED YOU. The next questions are about **SAMPLE MEMBER'S** health insurance coverage and the kinds and amounts of income that **SAMPLE MEMBER** and other people in your family receive.

(This information will help in planning health care services and finding ways to lower costs of care.)

PRESS [ENTER] TO CONTINUE.

QHI01 [IF QP03 = 2 OR DK/REF OR QP04 = 2 OR DK/REF OR HASJOIN = 2 OR DK/REF ADD THIS TEXT PRIOR TO THE QUESTION: Since your QP02 FILL is not available, I'd like you to answer these next questions the best you can.] Several government programs provide medical care or help pay medical bills.

(Are you/Is **SAMPLE MEMBER**) covered by Medicare? Medicare is a health insurance program for persons 65 and older and for certain disabled persons.

1   YES
2   NO
DK/REF

DEFINE MEDIFILL:
     IF FIPE4 =1 THEN MEDIFILL = Patient 1st, BAY Health Plan, BAY Program, or SOBRA
     IF FIPE4 =2 THEN MEDIFILL = NONE
     IF FIPE4 =3 THEN MEDIFILL = AHCCCS
     IF FIPE4 =4 THEN MEDIFILL = ConnectCare
     IF FIPE4 =5 THEN MEDIFILL = Medi-Cal, Medi-Cal Managed Care, or The Two-Plan Model
     IF FIPE4 =6 THEN MEDIFILL = Primary Care Physician Program, PCPP, or PACE
     IF FIPE4 =7 THEN MEDIFILL = Connecticut Access

IF FIPE4 =8 THEN MEDIFILL = Diamond State Health Plan
IF FIPE4 =9 THEN MEDIFILL = HSCSN
IF FIPE4 =10 THEN MEDIFILL = MediPass or Medicaid HMO Program
IF FIPE4 =11 THEN MEDIFILL = Better Health Care or Georgia Behavioral Health Plan
IF FIPE4 =12 THEN MEDIFILL = Hawaii-QUEST
IF FIPE4 =13 THEN MEDIFILL = Healthy Connections
IF FIPE4 =14 THEN MEDIFILL = MediPlan Plus
IF FIPE4 =15 THEN MEDIFILL = Hoosier Healthwise
IF FIPE4 =16 THEN MEDIFILL = Health Insurance Premium Payment, HIPP, or MediPass
IF FIPE4 =17 THEN MEDIFILL = Community Care of Kansas, CCK, HealthConnect, or PrimeCare Kansas
IF FIPE4 =18 THEN MEDIFILL = Kentucky Patient Access and Care System, KenPAC, Health Care Partnership Plan
or the Partnership Program
IF FIPE4 =19 THEN MEDIFILL = Louisiana Health Access, LHA, or CommunityCARE
IF FIPE4 =20 THEN MEDIFILL = PrimeCare
IF FIPE4 =21 THEN MEDIFILL = Maryland Access to Care or MAC
IF FIPE4 =22 THEN MEDIFILL = MassHealth, Elder Service Plans, or PACE
IF FIPE4 =23 THEN MEDIFILL = Comprehensive Health Care Plan, CHCP, Physician Sponsor Plan, or the Clinic Plan
IF FIPE4 =24 THEN MEDIFILL = Prepaid Medical Assistance Program, PMAP or PMAP+
IF FIPE4 =25 THEN MEDIFILL = HealthMACS
IF FIPE4 =26 THEN MEDIFILL = Missouri Managed Care Plus, or MCPlus
IF FIPE4 =27 THEN MEDIFILL = Montana Mental Health Access Plan, or Passport to Health
IF FIPE4 =28 THEN MEDIFILL = Nebraska Health Connection, NHC, or Primary Care +
IF FIPE4 =29 THEN MEDIFILL = NONE
IF FIPE4 =30 THEN MEDIFILL = Community Care Systems or Capitated Medicaid Managed Care
IF FIPE4 =31 THEN MEDIFILL = New Jersey Care 2000, Managed Charity Care Demonstration, or MCCD
IF FIPE4 =32 THEN MEDIFILL = The SALUD! Program, Primary Care Network Program, or PCN
IF FIPE4 =33 THEN MEDIFILL = The Partnership Plan, MAX, PACE, or Elderplan
IF FIPE4 =34 THEN MEDIFILL = Carolina Access, Carolina Alternatives, Baby Love, Community Alternatives, Health
Check, Nursing Home Reform, Drug Use Review, or DUR
IF FIPE4 =35 THEN MEDIFILL = Medical Services, North Dakota Access and Care Program, or NoDAC
IF FIPE4 =36 THEN MEDIFILL = OhioCare, Ohio Medicaid-Managed Care Program, or ABC Program
IF FIPE4 =37 THEN MEDIFILL = SoonerCare
IF FIPE4 =38 THEN MEDIFILL = Oregon Health Plan, or OHP
IF FIPE4 =39 THEN MEDIFILL = Family Care Network, HealthChoices, or HealthPass
IF FIPE4 =40 THEN MEDIFILL = Rite Care
IF FIPE4 =41 THEN MEDIFILL = South Carolina Palmetto Health Initiative, PHI, SCHAP, or PACE
IF FIPE4 =42 THEN MEDIFILL = Medicaid Managed Care Program, Prime, Title 19, or Primary Care Provider
Program
IF FIPE4 =43 THEN MEDIFILL = TennCare
IF FIPE4 =44 THEN MEDIFILL = State of Texas Access Reform, or STAR, Star Plus, or Lonestar Select
IF FIPE4 =45 THEN MEDIFILL = Family, Pregnant Womens' Program, Newborn, Newborn Plus, Child, Nursing Home
Program, Emergency Medicaid, or Refugee Medicaid
IF FIPE4 =46 THEN MEDIFILL = Vermont Health Access Plan or VHAP
IF FIPE4 =47 THEN MEDIFILL = Virginia Medallion
IF FIPE4 =48 THEN MEDIFILL = Healthy Options, or Basic Health Plus
IF FIPE4 =49 THEN MEDIFILL = NONE
IF FIPE4 =50 THEN MEDIFILL = Wisconsin Medicaid/HMO Program, or PACE
IF FIPE4 =51 THEN MEDIFILL = NONE
ELSE MEDIFILL = BLANK

QHI02   (Are you / Is **SAMPLE MEMBER**) currently covered by Medicaid or Medical Assistance? Medicaid or
Medical Assistance is a public assistance program that pays for medical care. The FIPE4 FILL Medicaid or
Medical Assistance program is also called: MEDIFILL.

```
1        YES
2        NO
DK/REF
```

Medicaid refers to a medical assistance program that provides health care coverage to low income and disabled persons. Most states refer to Medicaid as Medical Assistance.

DEFINE CHIPFILL:
 IF FIPE4 = 1 THEN CHIPFILL =AL-Kids, AL-Kids Plus, or ALL KIDS
 IF FIPE4 = 2 THEN CHIPFILL = Denali KidCare or AKChip
 IF FIPE4 = 3 THEN CHIPFILL = KidsCare
 IF FIPE4 = 4 THEN CHIPFILL = ARKids First or Child Health Insurance Program
 IF FIPE4 = 5 THEN CHIPFILL = Healthy Families Program or HFP
 IF FIPE4 = 6 THEN CHIPFILL = Child Health Plan Plus, CHP+, or Children's Basic Health Plan
 IF FIPE4 = 7 THEN CHIPFILL = The HUSKY Plan, HUSKY PLUS, Husky Part A, or Husky Part B
 IF FIPE4 = 8 THEN CHIPFILL = The Delaware Healthy Children Program or DHCP
 IF FIPE4 = 9 THEN CHIPFILL = DC Healthy Families
 IF FIPE4 = 10 THEN CHIPFILL = KidCare
 IF FIPE4 = 11 THEN CHIPFILL = PeachCare for Kids
 IF FIPE4 = 12 THEN CHIPFILL = Hawaii Children's Health Insurance Program
 IF FIPE4 = 13 THEN CHIPFILL = Children's Health Insurance Program
 IF FIPE4 = 14 THEN CHIPFILL = KidCare
 IF FIPE4 = 15 THEN CHIPFILL = Hoosier Healthwise
 IF FIPE4 = 16 THEN CHIPFILL = Health and Well Kids in Iowa or HAWK - I
 IF FIPE4 = 17 THEN CHIPFILL = HealthWave
 IF FIPE4 = 18 THEN CHIPFILL = KCHIP or Kentucky Children's Health Insurance Program
 IF FIPE4 = 19 THEN CHIPFILL = LACHIP
 IF FIPE4 = 20 THEN CHIPFILL = Cub Care
 IF FIPE4 = 21 THEN CHIPFILL = HealthChoice or Maryland Children's Health Program
 IF FIPE4 = 22 THEN CHIPFILL =MassHealth
 IF FIPE4 = 23 THEN CHIPFILL = MIChild Program
 IF FIPE4 = 24 THEN CHIPFILL = Minnesota Care
 IF FIPE4 = 25 THEN CHIPFILL =Mississippi Children's Health Insurance Program or CHIP
 IF FIPE4 = 26 THEN CHIPFILL = MC+ for Kids
 IF FIPE4 = 27 THEN CHIPFILL = Montana's CHIP
 IF FIPE4 = 28 THEN CHIPFILL = Kids Connection
 IF FIPE4 = 29 THEN CHIPFILL = Nevada Check Up
 IF FIPE4 = 30 THEN CHIPFILL = Healthy Kids Gold or Healthy Kids Silver
 IF FIPE4 = 31 THEN CHIPFILL = New Jersey KidCare or NJ KidCare Plan
 IF FIPE4 = 32 THEN CHIPFILL = New MexiKids
 IF FIPE4 = 33 THEN CHIPFILL = Child Health Plus or CHPlus
 IF FIPE4 = 34 THEN CHIPFILL = NC Health Choice for Children
 IF FIPE4 = 35 THEN CHIPFILL = Healthy Steps Program
 IF FIPE4 = 36 THEN CHIPFILL = Healthy Start
 IF FIPE4 = 37 THEN CHIPFILL = SoonerCare
 IF FIPE4 = 38 THEN CHIPFILL = Medicaid Expansion
 IF FIPE4 = 39 THEN CHIPFILL = PA CHIP
 IF FIPE4 = 40 THEN CHIPFILL = Medicaid Rite Care Program Expansion
 IF FIPE4 = 41 THEN CHIPFILL = Partners for Healthy Children
 IF FIPE4 = 42 THEN CHIPFILL = Children's Special Health Services
 IF FIPE4 = 43 THEN CHIPFILL = TennCare
 IF FIPE4 = 44 THEN CHIPFILL = TexCare
 IF FIPE4 =45 THEN CHIPFILL = Children's Health Insurance Program
 IF FIPE4 = 46 THEN CHIPFILL = Dr. Dynasaur
 IF FIPE4 = 47 THEN CHIPFILL = Children's Medical Security Insurance Plan or CMSIP
 IF FIPE4 = 48 THEN CHIPFILL = Children's Health Insurance Program

IF FIPE4 = 49 THEN CHIPFILL = Children's Health Insurance Program or CHIP
IF FIPE4 = 50 THEN CHIPFILL = BadgerCare for Working Families or Children's Health Insurance Program
IF FIPE4 = 51 THEN CHIPFILL = Wyoming KidCare
ELSE CHIPFILL = BLANK

QHI02A [IF CURNTAGE = 12-19] (Are you/Is SAMPLE MEMBER) currently covered by [CHIPFILL]?

1   Yes
2   No
DK/REF

<div style="text-align:center">INTERVIEWER NOTE:</div>
These programs cover children from low-income families who do not have
private health insurance and who do not qualify for Medicaid.

QHI03   (Are you/Is **SAMPLE MEMBER**) currently covered by TRICARE, or CHAMPUS, CHAMPVA, the VA, or military
health care?

These programs cover active duty and retired career military personnel and their dependents and survivors and also
disabled veterans and their dependents and survivors.

1   YES
2   NO
DK/REF

<div style="text-align:center">INTERVIEWER NOTE:</div>
CHAMPUS stands for Comprehensive Health and Medical Plan for the
Uniformed Services. It provides health care in private facilities for dependents
of military personnel on active duty or retired for reasons other than disability.
In some areas, this may be known as TRICARE.
CHAMPVA stands for Comprehensive Health and Medical Plan of the
Veterans Administration. It provides health care for the spouse, dependents, or
survivors of a veteran who has a total, permanent service-connected disability.
Military health care refers to health care available to active duty personnel and
their dependents; in addition, the VA provides medical assistance to veterans of
the Armed Forces, particularly those with service-connected ailments.

QHI06   Private health insurance can be obtained through work, such as through an employer, union, or professional association
or by paying premiums directly to a health insurance company.

(Are you/Is **SAMPLE MEMBER**) currently covered by private health insurance?

1   YES
2   NO
DK/REF

<div style="text-align:center">INTERVIEWER NOTE:</div>
Private health insurance refers to any type of health insurance other than
Medicare, Medicaid and coverage provided to military personnel and their
dependents. It includes coverage by a health maintenance organization (HMO),
fee for service plans and single service plans.

QHI07   [IF QHI06 = 1] (Was your/**SAMPLE MEMBER'S**) private health insurance obtained through work, such as through
an employer, union, or professional association?

1   YES
2   NO
DK/REF

INTERVIEWER NOTE:
This health insurance could be obtained through any family member's
employment, not just the respondent's employment.

QHI08 [IF QHI06 = 1] Does (your/**SAMPLE MEMBER'S**) private health insurance include coverage for treatment for any of the following conditions?

Alcohol abuse or alcoholism?

1   YES
2   NO
DK/REF

QHI09 [IF QHI06 = 1] Drug abuse?

         1   YES
         2   NO
         DK/REF

QHI10 [IF QHI06 = 1] Mental or emotional problems?

         1   YES
         2   NO
         DK/REF

QHI11 [IF QHI01 = 2 AND QHI02 = 2 AND QHI03 = 2 AND QHI06 = 2 AND (IF CURNTAGE = 12 - 17: QHI02a = 2)] (Are you/Is **SAMPLE MEMBER**) currently covered by any kind of health insurance, that is any policy or program that provides or pays for medical care?

1   YES
2   NO
DK/REF

QHI13 [IF QHI01 =1 OR QHI02 =1 OR QHI02a = 1 OR QHI03=1 OR QH106 = 1 OR QHI11 = 1] During the past 12 months, was there any time when (you/**SAMPLE MEMBER**) did **not** have **any** kind of health insurance or coverage?

1   YES
2   NO
DK/REF

QHI14 [IF QHI13 = 1] During the past 12 months, about how many months were (you/**SAMPLE MEMBER**) **without any** kind of health insurance or coverage?

OF MONTHS: _____ [RANGE: 1 - 12]
DK/REF

QHI15 [IF QHI01 AND QHI02 AND QHI03 = 2 AND QHI06 = 2 AND QHI11 = 2] About how long has it been since (you/**SAMPLE MEMBER**) last had **any** kind of health care coverage?

1   WITHIN THE PAST 6 MONTHS
2   MORE THAN 6 MONTHS AGO, BUT WITHIN THE PAST YEAR
3   MORE THAN 1 YEAR AGO, BUT WITHIN THE PAST 3 YEARS
4   MORE THAN 3 YEARS AGO
5   NEVER HAD COVERAGE
DK/REF

QHI17 [IF QHI15 = 1 - 4 OR DK/REF] HAND R SHOWCARD 14. Which of the reasons on this card is the **main** reason why (you/**SAMPLE MEMBER**) stopped being covered by health insurance?

    1   PERSON IN FAMILY WITH HEALTH INSURANCE LOST JOB OR CHANGED EMPLOYERS
    2   LOST MEDICAID OR MEDICAL ASSISTANCE COVERAGE BECAUSE OF NEW JOB OR INCREASE IN INCOME
    3   LOST MEDICAID OR MEDICAL ASSISTANCE COVERAGE FOR SOME OTHER REASON
    4   COST IS TOO HIGH/CAN'T AFFORD PREMIUMS
    5   BECAME INELIGIBLE BECAUSE OF AGE OR LEAVING SCHOOL
    6   EMPLOYER DOES NOT OFFER COVERAGE, OR NOT ELIGIBLE FOR COVERAGE
    7   GOT DIVORCED OR SEPARATED FROM PERSON WITH INSURANCE
    8   DEATH OF SPOUSE OR PARENT
    9   INSURANCE COMPANY REFUSED COVERAGE
    10   DON'T NEED IT
    11   RECEIVED MEDICAID OR MEDICAL INSURANCE ONLY WHILE PREGNANT
    12   SOME OTHER REASON
    DK/REF

QHI18 [IF QHI15 = 5] HAND R SHOWCARD 15. Which of the reasons on this card describe why (you/**SAMPLE MEMBER**) have never had health insurance coverage?

TO SELECT MORE THAN ONE CATEGORY, PRESS THE SPACE BAR BETWEEN EACH CATEGORY YOU SELECT.

    1   COST IS TOO HIGH/CAN'T AFFORD PREMIUMS
    2   EMPLOYER DOES NOT OFFER COVERAGE, OR NOT ELIGIBLE FOR COVERAGE
    3   INSURANCE COMPANY REFUSED COVERAGE
    4   DON'T NEED IT
    5   SOME OTHER REASON
    DK/REF

INTROINC [IF QD49 = 1] These next questions are about the kinds and amounts of income that you receive.

These questions refer to the calendar year [CURRENT YEAR - 1] rather than to the past 12 months that were referred to in some earlier questions. The calendar year [CURRENT YEAR - 1] would be from January 1st, [CURRENT YEAR - 1], through December 31st, [CURRENT YEAR - 1]

[IF FAMLY = GRID] These next questions are about the kinds and amounts of income that (you/**SAMPLE MEMBER**) and (your/**SAMPLE MEMBER'S**) READ RELATIONSHIP(S) SHOWN BELOW receive.

These questions refer to the calendar year [CURRENT YEAR - 1] rather than to the past 12 months that were referred to in some earlier questions. The calendar year [CURRENT YEAR - 1] would be from January 1st, [CURRENT YEAR - 1], through December 31st, [CURRENT YEAR - 1]

FAMILY MEMBERS:
(shown here)

QI01 In [CURRENT YEAR - 1], did (**you**/**SAMPLE MEMBER**) receive Social Security or Railroad Retirement payments? (Social Security checks are either automatically deposited in the bank or mailed to arrive on about the 3rd of every month. If mailed, they are sent in a gold envelope.)

    1   YES
    2   NO
    DK/REF

QI02   [IF FAMLY=GRID SHOW GRID ON SCREEN.] The next question is about the members of (your/**SAMPLE MEMBER'S**) family who live here — that is, (your/**SAMPLE MEMBER'S**) READ RELATIONSHIP(S) SHOWN BELOW.

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1] In [CURRENT YEAR - 1], did **you** receive Social Security or Railroad retirement payments?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1] In [CURRENT YEAR - 1], did your READ RELATIONSHIP FROM GRID receive Social Security or Railroad retirement payments?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of **these** family members receive Social Security or Railroad retirement payments?

1   YES
2   NO
DK/REF

QI03   In [CURRENT YEAR - 1], did (**you**/**SAMPLE MEMBER**) receive Supplemental Security Income or SSI?

(Federal SSI checks are either automatically deposited in the bank or mailed to arrive on the first of every month. If mailed, they are sent in a blue envelope.)

1   YES
2   NO
DK/REF

QI04A   [IF FAMLY=GRID AND QI01 NE 1. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** receive Supplemental Security Income or SSI?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your (READ RELATIONSHIP SHOWN BELOW) receive Supplemental Security Income or SSI?

[IF MORE THAN ONE PERSON IN GRID] In [CURRENT YEAR - 1], did any of these same [# OF PEOPLE IN GRID] family members receive Supplemental Security Income or SSI? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

1   YES
2   NO
DK/REF

QI04B [IF FAMLY=GRID AND QI01=1. SHOW GRID ON SCREEN.]The next question is about the members of (your/**SAMPLE MEMBER'S**) family who live here — that is, (your/**SAMPLE MEMBER'S**) READ RELATIONSHIP(S) SHOWN BELOW.

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** receive Supplemental Security Income or SSI?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive Supplemental Security Income or SSI?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of **these** family members receive Supplemental Security Income or SSI?

```
1       YES
2       NO
DK/REF
```

QI05 In [CURRENT YEAR - 1], did (**you**/**SAMPLE MEMBER**) receive income from wages or pay earned while working at a job or business?

```
1       YES
2       NO
DK/REF
```

QI06A [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1]. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** receive income from wages or pay earned while working at a job or business?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive income from wages or pay earned while working at a job or business?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of these same [# OF PEOPLE IN GRID] family members receive income from wages or pay earned while working at a job or business? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

```
1       YES
2       NO
DK/REF
```

QI06B [IF FAMLY=GRID AND [QI01=1 AND QI03=1]. SHOW GRID ON SCREEN. The next question is about the members of (your/**SAMPLE MEMBER'S**) family who live here — that is, (your/**SAMPLE MEMBER'S**) READ RELATIONSHIP(S) SHOWN BELOW.

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** receive income from wages or pay earned while working at a job or business?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP FROM GRID receive income from wages or pay earned while working at a job or business?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of **these** family members receive income from wages or pay earned while working at a job or business?

```
1       YES
2       NO
DK/REF
```

QI07A   [IF FAMLY=GRID] In [CURRENT YEAR - 1], did (**you**/**SAMPLE MEMBER**) or anyone in (**your**/**SAMPLE MEMBER'S**) family living here receive food stamps?

```
1       YES
2       NO
DK/REF
```

QI07B   [IF NO OTHER FAMILY IN HOUSEHOLD] In [CURRENT YEAR - 1], did **you** receive food stamps?

```
1       YES
2       NO
DK/REF
```

INTERVIEWER NOTE:
Food stamps are government-issued coupons that can be used to purchase food. Instead of coupons, some states issue a special card that can be used like a credit card to purchase food in grocery stores. The food stamp program is a joint federal-state program which is administered by State and Local governments.

DEFINE TANFFILL:
    IF FIPE4 = 1 THEN TANFFILL =the Family Assistance Program (FA)
    IF FIPE4 = 2 THEN TANFFILL = the Alaska Temporary Assistance Program (ATAP)
    IF FIPE4 = 3 THEN TANFFILL = Employing and Moving People Off Welfare and Encouraging Responsibility (EMPOWER)
    IF FIPE4 = 4 THEN TANFFILL = the Transitional Employment Assistance Program (TEA)
    IF FIPE4 = 5 THEN TANFFILL = California Work Opportunity and Responsibility to Kids (CalWorks)
    IF FIPE4 = 6 THEN TANFFILL = Colorado Works
    IF FIPE4 = 7 THEN TANFFILL = Jobs First
    IF FIPE4 = 8 THEN TANFFILL = A Better Chance (ABC)
    IF FIPE4 = 9 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
    IF FIPE4 = 10 THEN TANFFILL = Work and Gain Economic Self-Sufficiency (WAGES)
    IF FIPE4 = 11 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
    IF FIPE4 = 12 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
    IF FIPE4 = 13 THEN TANFFILL = Temporary Assistance for Families in Idaho (TAFI)
    IF FIPE4 = 14 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
    IF FIPE4 = 15 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
    IF FIPE4 = 16 THEN TANFFILL = the Family Investment Program (FIP)
    IF FIPE4 = 17 THEN TANFFILL = Kansas Works
    IF FIPE4 = 18 THEN TANFFILL = the Kentucky Transitional Assistance Program (K-TAP)
    IF FIPE4 = 19 THEN TANFFILL = the Family Independence Temporary Assistance Program (FITAP)
    IF FIPE4 = 20 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
    IF FIPE4 = 21 THEN TANFFILL = the Family Independence Program
    IF FIPE4 = 22 THEN TANFFILL = Transitional Aid to Families with Dependent Children (TAFDC)
    IF FIPE4 = 23 THEN TANFFILL = the Family Independence Program (FIP)
    IF FIPE4 = 24 THEN TANFFILL = the Minnesota Family Investment Program (MFIP)
    IF FIPE4 = 25 THEN TANFFILL = Temporary Assistance to Needy Families (TANF)
    IF FIPE4 = 26 THEN TANFFILL = Beyond Welfare
    IF FIPE4 = 27 THEN TANFFILL = Families Achieving Independence in Montana (FAIM)

IF FIPE4 = 28 THEN TANFFILL = Employment First
IF FIPE4 = 29 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
IF FIPE4 = 30 THEN TANFFILL = the Family Assistance Program (FAP) or the New Hampshire Employment Program (NHEP)
IF FIPE4 = 31 THEN TANFFILL = Work First New Jersey (WFNJ)
IF FIPE4 = 32 THEN TANFFILL = New Mexico Works
IF FIPE4 = 33 THEN TANFFILL = Family Assistance (FA)
IF FIPE4 = 34 THEN TANFFILL = Work First
IF FIPE4 = 35 THEN TANFFILL = Training, Education, Employment, and Management (TEEM)
IF FIPE4 = 36 THEN TANFFILL = Ohio Works First (OWF)
IF FIPE4 = 37 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
IF FIPE4 = 38 THEN TANFFILL =Job Opportunities and Basic Skills Program
IF FIPE4 = 39 THEN TANFFILL = Pennsylvania Temporary Assistance for Needy Families (Pennsylvania TANF)
IF FIPE4 = 40 THEN TANFFILL = the Family Independence Program (FIP)
IF FIPE4 = 41 THEN TANFFILL = the Family Independence Program
IF FIPE4 = 42 THEN TANFFILL = Temporary Assistance for Needy Families (TANF)
IF FIPE4 = 43 THEN TANFFILL = Families First
IF FIPE4 = 44 THEN TANFFILL = Texas Works
IF FIPE4 =45 THEN TANFFILL = the Family Employment Program (FEP)
IF FIPE4 = 46 THEN TANFFILL = Aid to Needy Families with Children (ANFC)
IF FIPE4 = 47 THEN TANFFILL = the Virginia Initiative for Employment Not Welfare (VIEW)
IF FIPE4 = 48 THEN TANFFILL = Work First
IF FIPE4 = 49 THEN TANFFILL = West Virginia Works (WV Works)
IF FIPE4 = 50 THEN TANFFILL = Wisconsin Works (W-2)
IF FIPE4 = 51 THEN TANFFILL = Personal Opportunities with Employment Responsibility (POWER)
ELSE TANFFILL = BLANK

QI08   At any time during [CURRENT YEAR - 1], even for one month, did (**you**/**SAMPLE MEMBER**) receive any cash assistance from a state or county welfare program such as [TANFFILL]?

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> If the respondent volunteers receiving welfare payments from a program other than the one mentioned, or from another state, record a "yes" response. Do not probe for this information.

QI09A   [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI05 NE 1]. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRIDAND QP04=1] At any time during [CURRENT YEAR - 1], even for one month, did **you** receive any cash assistance from a state or county welfare program such as [TANFFILL]?

[IF ONLY 1 PERSON IN GRIDAND [QP01 NE 1 OR QP04 NE 1]] At any time during [CURRENT YEAR - 1], even for one month, did your READ RELATIONSHIP SHOWN BELOW receive any cash assistance from a state or county welfare program such as [TANFFILL]?

[IF MORE THAN 1 PERSON IN GRID] At any time during [CURRENT YEAR - 1], even for one month, did any of these same [# OF PEOPLE IN GRID] family members receive any cash assistance from a state or county welfare program such as [TANFFILL]? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> If the respondent volunteers receiving welfare payments from a program other than the one mentioned, or from another state, record a "yes" response. Do not probe for this information.

QI09B [IF FAMLY=GRID AND QI01=1 AND QI03=1 AND QI05 = 1. SHOW GRID ON SCREEN.]The next question is about the members of (your/**SAMPLE MEMBER'S**) family who live here — that is, (your/**SAMPLE MEMBER'S**) READ RELATIONSHIP(S) SHOWN BELOW.

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** receive any cash assistance from a state or county welfare program such as [TANFFILL]?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive any cash assistance from a state or county welfare program such as [TANFFILL]?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of **these** family members receive any cash assistance from a state or county welfare program such as [TANFFILL]?

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> If the respondent volunteers receiving welfare payments from a program other than the one mentioned, or from another state, record a "yes" response. Do not probe for this information.

QI10 In [CURRENT YEAR - 1], because of low income, did (**you**/**SAMPLE MEMBER**) receive any **other** kind of welfare or public assistance, such as help with getting a job, placement in education or job training programs, or help with transportation, child care, or housing?

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> Only non-monetary types of assistance should be included for this question.

QI11A [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI05 NE 1 OR QI08 NE 1]. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], because of low income, did **you** receive any other kind of welfare or public assistance, such as help with getting a job, placement in education or job training programs, or help with transportation, child care, or housing?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], because of low income, did your READ RELATIONSHIP SHOWN BELOW receive any other kind of welfare or public assistance, such as help with getting a job, placement in education or job training programs, or help with transportation, child care, or housing?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], because of low income, did any of these same [# OF PEOPLE IN GRID] family members receive any other kind of welfare or public assistance, such as help with getting a job, placement in education or job training programs, or help with transportation, child care, or housing? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> Only non-monetary types of assistance should be included for this question.

QI11B [IF FAMLY=GRID AND QI01=1 AND QI03=1 AND QI05=1 AND QI08 = 1. SHOW GRID ON SCREEN.] The next question is about the members of your family who live here — that is, (your/**SAMPLE MEMBER'S**) READ RELATIONSHIP(S) SHOWN BELOW.

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], because of low income, did **you** receive any other kind of welfare or public assistance, such as help with getting a job, placement in education or job training programs, or help with transportation, child care, or housing?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], because of low income, did your READ RELATIONSHIP SHOWN BELOW receive any other kind of welfare or public assistance, such as help with getting a job, placement in education or job training programs, or help with transportation, child care, or housing?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], because of low income, did any of **these** family members receive any other kind of welfare or public assistance, such as help with getting a job, placement in education or job training programs, or help with transportation, child care, or housing?

1   YES
2   NO
DK/REF

INTERVIEWER NOTE:
Only non-monetary types of assistance should be included for this question.

QI12A [IF QI08=1 OR QI09A=1 OR QI09B=1=1 OR QI10=1 OR QI11a =1 OR QI11b = 1 AND (QI07a=2 OR QI07b=2)] For how many months in [CURRENT YEAR - 1] did (**you**/**SAMPLE MEMBER**) or any **other** family member living here receive **any** type of welfare or public assistance?

OF MONTHS RECEIVED ASSISTANCE: _____ [RANGE: 1 - 12]
DK/REF

QI12B [IF QI08=1 OR QI09A=1 OR QI09B=1 OR QI10=1 OR QI11a =1 OR QI11b = 1 AND (QI07A = 1 OR QI07B=1)]. For how many months in [CURRENT YEAR - 1] did (**you**/**SAMPLE MEMBER**) or any **other** family member living here receive **any** type of welfare or public assistance, **not** including food stamps?

OF MONTHS RECEIVED ASSISTANCE: _____ [RANGE: 1 - 12]
DK/REF

QI13 In [CURRENT YEAR - 1], did (**you**/**SAMPLE MEMBER**) have money in any kind of savings or other bank account that earned interest or did (**you**/**SAMPLE MEMBER**) receive dividend income from stocks or mutual funds or income from rental property, royalties, estates, or trusts?

(Include money market funds, treasury notes, IRAs or certificates of deposit, interest earning checking accounts, bonds, or any other investments that earn interest.)

1   YES
2   NO
DK/REF

INTERVIEWER NOTE:
Dividends: Some people make investments by purchasing shares of stock in corporations. The corporation then distributes some of the profits to shareholders in the form of dividends. Mutual funds consist of investors who pool their money to purchase shares of stock. Rental Income: Income received from the rental of land, buildings, real estate, or from boarders after rental expenses are deducted. Royalties: The total cash from royalties less expenses. This income could come from mineral rights, patents, copyrights, or trademarks. Estates or Trusts: Include periodic payments from an estate or trust. Exclude lump-sum, one-time payments from these sources.

QI14A [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI05 NE 1 OR QI08 NE 1 OR QI10 NE 1]. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** have money in any kind of savings or other bank account that earned interest or did you receive dividend income from stocks or mutual fund or income from rental property, royalties, estates, or trusts?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW have money in any kind of savings or other bank account that earned interest or did he/she receive dividend income from stocks or mutual fund or income from rental property, royalties, estates, or trusts?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of these same [# OF PEOPLE IN GRID] family members have money in any kind of savings or other bank account that earned interest or did he/she receive dividend income from stocks or mutual fund or income from rental property, royalties, estates, or trusts? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> Dividends: Some people make investments by purchasing shares of stock in corporations. The corporation then distributes some of the profits to shareholders in the form of dividends. Mutual funds consist of investors who pool their money to purchase shares of stock. Rental Income: Income received from the rental of land, buildings, real estate, or from boarders after rental expenses are deducted. Royalties: The total cash from royalties less expenses. This income could come from mineral rights, patents, copyrights, or trademarks. Estates or Trusts: Include periodic payments from an estate or trust. Exclude lump-sum, one-time payments from these sources.

QI14B [IF FAMLY=GRID AND [QI01=1 AND QI03=1 AND QI05=1 AND QI08=1 AND QI10 = 1]. SHOW GRID ON SCREEN.] The next question is about the members of (your/(**SAMPLE MEMBER'S**)) family who live here — that is, (your/(**SAMPLE MEMBER'S**)) READ RELATIONSHIP(S) SHOWN BELOW.

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** have money in any kind of savings or other bank account that earned interest or did he/she receive dividend income from stocks or mutual fund or income from rental property, royalties, estates, or trusts?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP FROM BELOW have money in any kind of savings or other bank account that earned interest or did he/she receive dividend income from stocks or mutual fund or income from rental property, royalties, estates, or trusts?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of **these** family members have money in any kind of savings or other bank account that earned interest or did they receive dividend income from stocks or mutual fund or income from rental property, royalties, estates, or trusts?

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> Dividends: Some people make investments by purchasing shares of stock in corporations. The corporation then distributes some of the profits to shareholders in the form of dividends. Mutual funds consist of investors who pool their money to purchase shares of stock. Rental Income: Income received from the rental of land, buildings, real estate, or from boarders after rental expenses are deducted. Royalties: The total cash from royalties less expenses. This income could come from mineral rights, patents, copyrights, or trademarks. Estates or Trusts: Include periodic payments from an estate or trust. Exclude lump-sum, one-time payments from these sources.

QI15   Child support is money paid by one parent to the other parent for the support of their child. In [CURRENT YEAR - 1], did (**you**/**SAMPLE MEMBER**) receive any child support payments for a child (**you are**/**SAMPLE MEMBER is**) raising?

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> In some cases, child support may be paid through a welfare agency or a court. We are only interested in whether the respondent received child support payments. We are not collecting information about any child support payments the respondent pays out to other individuals.

QI16A   [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI05 NE 1 OR QI08 NE1 OR QI10 NE 1 OR QI13 NE 1]. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRID AND QP04=1] Child support is money paid by one parent to the other parent for the support of their child. In [CURRENT YEAR - 1], did **you** receive any child support payments for a child you are raising?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] Child support is money paid by one parent to the other parent for the support of their child. In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive any child support payments for a child (he/she) is raising?

[IF MORE THAN 1 PERSON IN GRID] Child support is money paid by one parent to the other parent for the support of their child. In [CURRENT YEAR - 1], did any of these same [# OF PEOPLE IN GRID] family members living here that I referred to earlier receive any child support payments for a child they are raising? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> In some cases, child support may be paid through a welfare agency or a court. We are only interested in whether the respondent received child support payments. We are not collecting information about any child support payments the respondent pays out to other individuals.

QI16B   [IF FAMLY=GRID AND [QI01=1 AND QI03=1 AND QI05=1 AND QI08=1 AND QI10=1 AND QI13 = 1]. SHOW GRID ON SCREEN.] The next question is about the members of (your/**SAMPLE MEMBER'S**) family who live here — that is, (your/**SAMPLE MEMBER'S**) READ RELATIONSHIP(S) FROM BELOW.

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** receive any child support payments for a child you are raising?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive any child support payments for a child (he/she) is raising?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of **these** family members receive any child support payments for a child they are raising?

1   YES
2   NO
DK/REF

In some cases, child support may be paid through a welfare agency or a court. We are only interested in whether the respondent received child support payments. We are not collecting information about any child support payments the respondent pays out to other individuals.

QI17 In [CURRENT YEAR - 1] did (**you**/**SAMPLE MEMBER**) receive income from any other sources, such as Veterans Administration payments, worker's or unemployment compensation, alimony, other disability, retirement or survivor pension (other than Social security or Railroad Retirement)?

Do not include lump sum payments, such as money from an inheritance or the sale of a home.

1   YES
2   NO
DK/REF

INTERVIEWER NOTE:
Alimony: Money received periodically from a former spouse following a divorce or separation.

QI18A [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI05 NE 1 OR QI08 NE1 OR QI10 NE 1 OR QI13 NE 1 OR QI15 NE1]. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRID AND QP04 = 1] In [CURRENT YEAR - 1], did **you** receive income from any other sources, such as Veterans Administration payments, worker's or unemployment compensation, alimony, other disability, retirement or survivor pension (other than Social security or Railroad Retirement)?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP FROM BELOW receive income from any other sources, such as Veterans Administration payments, worker's or unemployment compensation, alimony, other disability, retirement or survivor pension (other than Social security or Railroad Retirement)?

[IF MORE THAN 1 PERSON IN GRID]   In [CURRENT YEAR - 1], did any of these same [# OF PEOPLE IN GRID] family members living here that I referred to earlier receive income from any other sources, such as Veterans Administration payments, worker's or unemployment compensation, alimony, other disability, retirement or survivor pension (other than Social security or Railroad Retirement)? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

Do not include lump sum payments, such as money from an inheritance or the sale of a home.

1   YES
2   NO
DK/REF

INTERVIEWER NOTE:
Alimony: Money received periodically from a former spouse following a divorce or separation.

QI18B [IF FAMLY=GRID AND [QI01=1 AND QI03=1 AND QI05=1 AND QI08=1 AND QI10=1 AND QI13=1 AND QI15=1]. [SHOW GRID ON SCREEN.] The next question is about the members of (your/**SAMPLE MEMBER'S**) family who live here — that is, (your/**SAMPLE MEMBER'S**) READ RELATIONSHIP(S) SHOWN BELOW.

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did **you** receive income from any other sources, such as Veterans Administration payments, worker's or unemployment compensation, alimony, other disability, retirement or survivor pension (other than Social security or Railroad Retirement)?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 OR QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive income from any other sources, such as Veterans Administration payments, worker's or unemployment compensation, alimony, other disability, retirement or survivor pension (other than Social security or Railroad Retirement)?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of **these** family members receive income from any other sources, such as Veterans Administration payments, worker's or unemployment compensation, alimony, other disability, retirement or survivor pension (other than Social security or Railroad Retirement)?

Do not include lump sum payments, such as money from an inheritance or the sale of a home.

1   YES
2   NO
DK/REF

> INTERVIEWER NOTE:
> Alimony: Money received periodically from a former spouse following a divorce or separation.

CREATE INCFILLP:
> IF QI01 = 1, INCFILLP1= Social Security.
> > ELSE INCFILLP1=BLANK.
>
> IF QI03 = 1, INCFILLP2= SSI.
> > ELSE INCFILLP2=BLANK.
>
> IF QI05 = 1, INCFILLP3= wages from employment.
> > ELSE INCFILLP3=BLANK.
>
> IF QI08 = 1, INCFILLP4= public assistance.
> > ELSE INCFILLP4=BLANK.
>
> IF QI13 = 1, INCFILLP5= savings or dividend income.
> > ELSE INCFILLP5=BLANK.
>
> IF QI15 = 1, INCFILLP6= child support.
> > ELSE INCFILLP6=BLANK.
>
> IF QI17 = 1, INCFILLP7= other income.
> > ELSE INCFILLP7 =BLANK.

INTROTIN   The next two questions are about (your/**SAMPLE MEMBER'S**) **total personal** income from all sources **during [CURRENT YEAR - 1]** before taxes and other deductions.

Please include money from INCFILLP1, INCFILLP2, INCFILLP3, and INCFILLP UNTIL ALL INCFILLPS INSERTED that we just talked about.

PRESS [ENTER] TO CONTINUE.

QI20   **Before taxes and other deductions**, was (your/**SAMPLE MEMBER'S) total personal** income during [CURRENT YEAR - 1] more or less than 20,000 dollars?

(Income data are important in analyzing the health information we collect. For example, the information helps us to learn whether persons in one income group use certain types of medical care services or have conditions more or less often than those in another group.)

1    $20,000 OR MORE
2   LESS THAN $20,000
DK/REF
> INTERVIEWER NOTE:
> Do not include money received from loans or tax refunds.

HAND18a   [IF QI20=2] HAND R SHOWCARD 16.

PRESS [ENTER] TO CONTINUE.

INTROTPI   [IF QI20 NE DK/REF] Of these income groups, which category best represents (your/**SAMPLE MEMBER'S**) **total personal** income during [CURRENT YEAR - 1]?

(Include the INCFILLP1, INCFILLP2, INCFILLP3, and INCFILLP UNTIL ALL INCFILLPS INSERTED that we just talked about.)

(Income data are important in analyzing the health information we collect. For example, the information helps us to learn whether persons in one income group use certain types of medical care services or have conditions more or less often than those in another group.)

PRESS [ENTER] TO CONTINUE.

QI21A   [IF QI20=2] ENTER NUMBER THAT BEST REPRESENTS (R'S/**SAMPLE MEMBER'S** TOTAL PERSONAL INCOME DURING [CURRENT YEAR - 1].

1	LESS THAN $1,000 (INCLUDING LOSS)
2	$1,000 - $1,999
3	$2,000 - $2,999
4	$3,000 - $3,999
5	$4,000 - $4,999
6	$5,000 - $5,999
7	$6,000 - $6,999
8	$7,000 - $7,999
9	$8,000 - $8,999
10	$9,000 - $9,999
11	$10,000 - $10,999
12	$11,000 - $11,999
13	$12,000 - $12,999
14	$13,000 - $13,999
15	$14,000 - $14,999
16	$15,000 - $15,999
17	$16,000 - $16,999
18	$17,000 - $17,999
19	$18,000 - $18,999
20	$19,000 - $19,999
DK/REF	

HAND18b   [IF QI20=1] HAND R SHOWCARD 17.

PRESS [ENTER] TO CONTINUE.

QI21B   [IF QI20=1] ENTER NUMBER THAT BEST REPRESENTS (R'S/**SAMPLE MEMBER'S**) TOTAL PERSONAL INCOME DURING [CURRENT YEAR - 1].

21	$20,000 - $24,999
22	$25,000 - $29,999
23	$30,000 - $34,999
24	$35,000 - $39,999
25	$40,000 - $44,999
26	$45,000 - $49,999
27	$50,000 - $74,999
28	$75,000 OR MORE
DK/REF	

CREATE INCFILLF:
IF QI01 = 1 OR QI02A =1 OR QI02B=1, INCFILLF1= Social Security.
ELSE INCFILLF1=BLANK.

IF QI03 = 1 OR QI04A=1 OR QI04B=1, INCFILLF2= SSI.
      ELSE INCFILLF2=BLANK.

IF QI05 = 1 OR QI06A = 1 OR QI06B=1, INCFILLF3= wages from employment.
      ELSE INCFILLF3=BLANK.

IF QI08 = 1 OR QI09A=1 OR QI09B =1, INCFILLF4= public assistance.
      ELSE INCFILLF4=BLANK.

IF QI13 = 1 OR QI14A=1 OR QI14B=1, INCFILLF5= savings or dividend income.
      ELSE INCFILLF5=BLANK.

IF QI15 = 1 OR QI16A=1 OR QI16B=1, INCFILLF6= child support.
      ELSE INCFILLF6=BLANK.

IF QI17 = 1 OR QI18A=1 OR QI18B =1, INCFILLF7= other income.
      ELSE INCFILLF9=BLANK

INTROFI1   [SHOW GRID ON SCREEN] The next two questions are about the **total family** income from all sources **during [CURRENT YEAR - 1]** before taxes and other deductions. We would like you to combine everyone's income — that is, (yours and your READ RELATIONSHIPS FROM BELOW/**SAMPLE MEMBER**'S AND **SAMPLE MEMBER'S** READ RELATIONSHIPS IN GRID). Please include the INCFILLF1, INCFILLF2, INCFILLF3, and INCFILLF UNTIL ALL INCFILLPF INSERTED that we just talked about.

QI22   **Before taxes and other deductions,** was the **total combined family** income during [CURRENT YEAR - 1] more or less than 20,000 dollars?

(Income data are important in analyzing the health information we collect. For example, the information helps us to learn whether persons in one income group use certain types of medical care services or have conditions more or less often than those in another group.)

1      $20,000 OR MORE
2   LESS THAN $20,000
DK/REF

INTERVIEWER NOTE:
Do not include money received from loans or tax refunds.

HAND19a   [IF QI22=2] HAND R SHOWCARD 16.

PRESS [ENTER] TO CONTINUE.

HAND19b   [IF QI22=1] HAND R SHOWCARD 17.

PRESS [ENTER] TO CONTINUE.

INTROFI2   [IF QI22 = 2. SHOW GRID ON SCREEN] Of these income groups, which category best represents (your/**SAMPLE MEMBER'S**) **total combined family** income during [CURRENT YEAR - 1]-- that is, (yours and your READ RELATIONSHIPS SHOWN BELOW/**SAMPLE MEMBER'S** AND **SAMPLE MEMBER'S** READ RELATIONSHIPS SHOWN BELOW)?

(Include the INCFILLF1, INCFILLF2, INCFILLF3, and INCFILLF UNTIL ALL INCFILLFS INSERTED that we just talked about.)

(Income data are important in analyzing the health information we collect. For example, the information helps us to learn whether persons in one income group use certain types of medical care services or have conditions more or less often than those in another group.)

PRESS [ENTER] TO CONTINUE.

INTROFI3   [IF QI22 = 1. SHOW GRID ON SCREEN] Of these income groups, which category best represents (your/**SAMPLE MEMBER'S**) **total combined family** income during [CURRENT YEAR - 1]-- that is, (yours and your READ RELATIONSHIPS SHOWN BELOW/**SAMPLE MEMBER'S** AND **SAMPLE MEMBER'S** READ RELATIONSHIPS SHOWN BELOW)?

(Include the INCFILLF1, INCFILLF2, INCFILLF3, and INCFILLF UNTIL ALL INCFILLFS INSERTED that we just talked about.)

(Income data are important in analyzing the health information we collect. For example, the information helps us to learn whether persons in one income group use certain types of medical care services or have conditions more or less often than those in another group.)

PRESS [ENTER] TO CONTINUE.

QI23A   [IF QI22=2]ENTER NUMBER THAT BEST REPRESENTS **THE TOTAL COMBINED FAMILY** INCOME IN [CURRENT YEAR - 1].

1	LESS THAN $1,000 (INCLUDING LOSS)
2	$1,000 - $1,999
3	$2,000 - $2,999
4	$3,000 - $3,999
5	$4,000 - $4,999
6	$5,000 - $5,999
7	$6,000 - $6,999
8	$7,000 - $7,999
9	$8,000 - $8,999
10	$9,000 - $9,999
11	$10,000 - $10,999
12	$11,000 - $11,999
13	$12,000 - $12,999
14	$13,000 - $13,999
15	$14,000 - $14,999
16	$15,000 - $15,999
17	$16,000 - $16,999
18	$17,000 - $17,999
19	$18,000 - $18,999
20	$19,000 - $19,999
DK/REF	

QI23B   [IF QI22=1] ENTER NUMBER THAT BEST REPRESENTS THE **TOTAL COMBINED FAMILY INCOME** IN [CURRENT YEAR - 1].

21	$20,000 - $24,999
22	$25,000 - $29,999
23	$30,000 - $34,999
24	$35,000 - $39,999
25	$40,000 - $44,999
26	$45,000 - $49,999
27	$50,000 - $74,999
28	$75,000 OR MORE
DK/REF	

QI24   The last question has to do with telephones in your household. How many different telephone numbers do you have in this household? Please don't include cellular phones in your answer. Also, don't count business numbers or extensions with the same number.

OF TELEPHONE NUMBERS: _____ [RANGE: 0 - 20]
DK/REF

THANKR   THANK R.

BE SURE YOU HAVE YOUR SHOWCARD BOOKLET.

PRESS [ENTER] TO CONTINUE.

VERID   ENTER THE VERIFICATION ID FROM THE VERIFICATION FORM FOR THIS INTERVIEW.

CASEID ENTER THE CASE ID FOR THIS INTERVIEW.

BE SURE TO INCLUDE A OR B AT THE END OF THE CASE ID.

TOALLR3   [IF INCENTIVE TREATMENT = $0 OR CASE IS NOT PART OF THE INCENTIVE EXPERIMENT] It is important that I do my job correctly; therefore, my supervisors will be checking on my work. Would you help me by printing your home telephone number and address as well as the current date and time on this form? Then place it in the postage-paid envelope so that my supervisor can write or call you in several weeks to confirm that I did my job. As you can see, this is kept separate from your answers so they will still be completely private. While you are completing the verification form, I will be finishing some questions to show that I did the interview. Let me know when you are finished.

Thank you very much for your help.

PRESS [ENTER] TO CONTINUE.

TOALLR3I   [IF INCENTIVE TREATMENT = $20 OR $40] It is important that I do my job correctly; therefore, my supervisors will be checking on my work. Would you help me by printing your home telephone number and address as well as the current date and time on this form? Then place it in the postage-paid envelope so that my supervisor can write or call you in several weeks to confirm that I did my job. As you can see, this is kept separate from your answers so they will still be completely private.

PRESS [ENTER] TO CONTINUE.

INCENT01   [IF INCENTIVE TREATMENT = $20 OR $40] While you are completing the verification form, I will be finishing some questions to show that I did the interview. [SHOW RESPONDENT INTERVIEW PAYMENT RECEIPT FORM.] I will also sign this form to indicate that I have paid you the [$20/$40] for this interview.

INTERVIEWER: 1) SHOW INTERVIEW PAYMENT RECEIPT FORM TO RESPONDENT.
2) PAY RESPONDENT [$20/$40] CASH.
3) SIGN YOUR NAME TO DOCUMENT THAT YOU HAVE PAID THE RESPONDENT. [IF THE RESPONDENT WILL NOT ACCEPT THE CASH INCENTIVE, MARK THE APPROPRIATE BOX ON THE INTERVIEW PAYMENT RECEIPT FORM AND SIGN IT.]

Let me know when you are finished completing the form.

Thank you very much for your help.

PRESS [ENTER] TO CONTINUE.

FIDBFINTR   DO NOT READ THIS TO R.

These questions are for you to answer without input from the respondent. DO NOT READ ANY OF THESE QUESTIONS OUT LOUD. Use your own impressions of the interview to answer these questions — not the respondent's.

PRESS [ENTER] TO CONTINUE.

INCENT02   [IF INCENTIVE TREATMENT = $20 OR $40] Did this respondent accept the [$20/$40] incentive payment?

1   YES
2   NO

INCENT03   [IF INCENT02 = 2] Why **didn't** this respondent accept the incentive payment?

TO SELECT MORE THAN ONE CATEGORY, PRESS THE SPACE BAR BETWEEN EACH CATEGORY YOU SELECT.

1   DIDN'T FEEL IT WAS NECESSARY
2   DIDN'T WANT TO ACCEPT MONEY FROM THE GOVERNMENT
3   DIDN'T NEED THE MONEY
4   FELT IT WAS INAPPROPRIATE TO OFFER MONEY IN EXCHANGE FOR PARTICIPATION
5   SOME OTHER REASON
DK

INCENT04   [IF INCENT03 = 5] Why didn't this respondent accept the incentive payment?

_____ [ALLOW 200 CHARACTERS]
DK

INCENT05   [IF INCENT02 = 1] How much do you think the incentive payment influenced this respondent's decision to participate in the interview?

1   A LOT
2   A LITTLE
3   NOT AT ALL
DK

INCENT06   [IF INCENT05 = 1 OR 2] Do you think you would have been successful in convincing this respondent to participate if you had **not** been able to offer the incentive payment?

1   DEFINITELY YES
2   PROBABLY YES
3   PROBABLY NOT
4   DEFINITELY NOT
DK

INCENT07   Do you think the incentive payment allowed you to work this case more efficiently, that is, make fewer visits to the household or spend less time gaining cooperation than you would have?

1   YES
2   NO
DK

INCENT08   [IF INCENT02 = 1] Did this respondent make any comments that suggested [he/she] would have participated in the survey without the incentive?

1   YES
2   NO
DK

INCENT09   [IF INCENT02 = 1] Did this respondent make any comments that suggested [he/she] felt it was **inappropriate** to offer money in exchange for a person's participation in the NHSDA?

1   YES
2   NO
DK

INCENT10   [IF INCENT02 = 1 AND INCENT09 = 1] Did this respondent make any comments about what [he/she] planned to do with the incentive payment?

1   YES
2   NO
DK

INCENT11   [IF INCENT10 = 1] What does this respondent plan to do with the incentive payment?

_____ [ALLOW 200 CHARACTERS]
DK

INCENT12   [IF INCENT2 = 1] Did this respondent make any comments that indicated how [he/she] felt about the **amount** of the incentive payment?

1   YES
2   NO
DK/REF

INCENT13   [IF INCENT12 = 1] Did this respondent's comments suggest [he/she] thought the amount of the incentive payment was too high, about right, or too low?

1   TOO HIGH
2   ABOUT RIGHT
3   TOO LOW
DK/REF

INCENT14   Did the respondent already know about the incentive before you told [him/her]?

1   YES
2   NO
DK

INCENT15   [IF INCENT14 = 2] Did this respondent show any reluctance to participate in the interview before you mentioned the incentive payment to [him/her]?

1   YES
2   NO
DK

INCENT16   [IF INCENT14 = 1] How did this respondent find out about the incentive payment?

TO SELECT MORE THAN ONE CATEGORY, PRESS THE SPACE BAR BETWEEN EACH CATEGORY YOU SELECT.

1   FROM THE LEAD LETTER
2   FROM THE Q & A BROCHURE
3   FROM ANOTHER MEMBER OF THE HOUSEHOLD
4   FROM A NEIGHBOR/BUILDING MANAGER/ETC.
5   FROM ANOTHER INTERVIEWER
6   SOME OTHER WAY
DK

INCENT17   [IF INCENT16 = 6] From what source did this respondent find out about the incentive payment?

_____ [ALLOW 200 CHARACTERS]
DK

FIDBF01   Did you conduct this interview at the respondent's home — either inside or outside?

       1   YES
       2   NO

FIDBF02   [IF FIDBF01 = 2] Where did you conduct this interview?

       1   AT THE RESPONDENT'S WORKPLACE
       2   AT THE HOME OF THE RESPONDENT'S RELATIVE OR FRIEND
       3   AT A RESTAURANT
       4   AT A LIBRARY
       5   IN SOME TYPE OF COMMON AREA, SUCH AS A LOBBY, HALLWAY, STAIRWELL, OR LAUNDRY ROOM
       6   SOME OTHER PLACE

FIDBF02S   [IF FIDBF02=6] Where did the interview take place?

       _____ [ALLOW 75 CHARACTERS]

FIDBF03   Was it necessary for you to assist the respondent in completing the ACASI portion of this interview?

       1   YES
       2   NO

FIDBF03S   [IF FIDBF03 = 1] Please explain **why** you had to assist the respondent with the ACASI portion of the interview.

       _____ [ALLOW 200 CHARACTERS]

FIDBF03A   [IF FIDBF03 = 1] Please estimate for how much of the ACASI interview you had to provide this assistance.

       1   LESS THAN HALF OF THE ACASI QUESTIONS
       2   ABOUT HALF OF THE ACASI QUESTIONS
       3   MORE THAN HALF OF THE ACASI QUESTIONS
       4   ALL OF THE ACASI QUESTIONS

FIDBF04   [IF FIDBF03 =1] **How** did you assist the respondent in completing the ACASI portion of the interview?

       TO SELECT MORE THAN ONE CATEGORY, PRESS THE SPACE BAR BETWEEN EACH CATEGORY YOU SELECT.

       1   YOU ENTERED THE RESPONDENT'S ANSWERS AFTER [HE/SHE] READ THE QUESTION OR LISTENED TO THE QUESTION THROUGH THE HEADPHONES
       2   YOU ASSISTED THE RESPONDENT WITH THE ACASI PORTION OF THE INTERVIEW IN SOME OTHER WAY

FIDBF04S   [IF FIDBF04 = 2] Specify in what other way you assisted the respondent with the ACASI portion of the interview.

       _____ [ALLOW 200 CHARACTERS]

FIDBF05   Estimate the respondent's understanding of the interview.

       1   NO DIFFICULTY --- NO LANGUAGE OR READING PROBLEM
       2   JUST A LITTLE DIFFICULTY — ALMOST NO LANGUAGE OR READING PROBLEM
       3   A FAIR AMOUNT OF DIFFICULTY — SOME LANGUAGE OR READING PROBLEM
       4   A LOT OF DIFFICULTY — CONSIDERABLE LANGUAGE OR READING PROBLEM

FIDBF06   How cooperative has the respondent been?

    1   VERY COOPERATIVE
    2   FAIRLY COOPERATIVE
    3   NOT VERY COOPERATIVE
    4   OPENLY HOSTILE

FIDBF07   Indicate on this scale of 1 through 5 how private the interview was. Please do not count yourself as another person in the room.

    1   COMPLETELY PRIVATE — NO ONE WAS IN THE ROOM OR COULD OVERHEAR ANY PART OF THE INTERVIEW
    2   MINOR DISTRACTIONS
    3   PERSON(S) IN THE ROOM OR LISTENING ABOUT 1/3 OF THE TIME
    4   SERIOUS INTERRUPTIONS OF PRIVACY MORE THAN HALF THE TIME
    5   CONSTANT PRESENCE OF OTHER PERSON(S)

FIDBF08   [IF FIDBF07 NE 1] Not including yourself, other people present or listening to the interview were . . .

To select more than one category, press the space bar between each category you select.

    1   PARENT(S)
    2   SPOUSE
    3   LIVE-IN PARTNER/BOYFRIEND/GIRLFRIEND
    4   OTHER ADULT RELATIVE(S)
    5   OTHER ADULT(S)
    6   CHILD(REN) UNDER 15
    7   OTHER

FIDBF09   [IF FIDBF08 = 7] You have indicated that there was some other person present or listening to the interview. Please use the keyboard to type a description of the other person.

_____

FIDBF10   How much do you think that seeing or hearing about the laptop computer influenced this respondent's decision to participate in the interview?

    1   INFLUENCED IT A LOT IN A POSITIVE WAY
    2   INFLUENCED IT A LITTLE IN A POSITIVE WAY
    3   DID NOT INFLUENCE HIS/HER DECISION AT ALL
    4   INFLUENCED IT A LITTLE IN A NEGATIVE WAY
    DK

FIDBF11   How often did this respondent let you know what his or her answers were as he or she completed the ACASI portion of the interview?

    1   NONE OF THE TIME — I DO NOT KNOW WHAT ANY OF THE ANSWERS ARE
    2   A LITTLE OF THE TIME — I KNOW WHAT A FEW OF THE ANSWERS ARE
    3   SOME OF THE TIME — I KNOW WHAT SOME OF THE ANSWERS ARE
    4   A LOT OF THE TIME — I KNOW WHAT A LOT OF THE ANSWERS ARE
    5   ALL OF THE TIME — I KNOW WHAT ALL OF THE ANSWERS ARE

FIDBF12   Please note anything else you think would be helpful for the interpretation and understanding of this interview.

If there is nothing you wish to note, simply press [ENTER] to continue.

_____ [ALLOW 250 CHARACTERS]

FIEXIT End of interview reached.

PRESS 1 TO EXIT.