Content of 2000 NHSDA Instrument

Module	Mode of Administration	Required Aids
Core Demographics	CAPI*	Showcards 1-4
Overall Health Question	CAPI	None
Calendar (30-day and 12-month reference dates)	FI reads instructions and identifies reference dates.	Reference Date Calendar
Computer Practice	Respondent completes computer practice session with FI help.	None
Tobacco	ACASI**	None
Alcohol	ACASI	None
Marijuana	ACASI	None
Cocaine	ACASI	None
"Crack"	ACASI	None
Heroin	ACASI	None
Hallucinogens	ACASI	None
Inhalants	ACASI	None
Pain Relievers	ACASI	Pillcard A
Tranquilizers	ACASI	Pillcard B
Stimulants	ACASI	Pillcard C
Sedatives	ACASI	Pillcard D
Special Drugs	ACASI	None
Risk/Availability	ACASI	None
Drug Dependence and Withdrawal	ACASI	None
Special Topics	ACASI	None
Drug Treatment	ACASI	None
Health Care	ACASI	None
Adult Mental Health Service Utilization	ACASI	None
Social Environment	ACASI: 18+ year-olds only	None
Parenting Experiences	ACASI: parents of 12-17-year-olds	None
Youth Experiences	ACASI: 12-17-year-olds only	None
Adolescent Mental Health	ACASI: 12-17-year-olds only	None
Youth Mental Health Service Utilization	ACASI: 12-17-year-olds only	None
Back-End Demographics:	CAPI	None
Education	CAPI	Showcards 5 & 6
Employment	CAPI	Showcards 7-11
Household Roster	CAPI	Showcards 12 & 13
Proxy Information	CAPI	None
Health Insurance	CAPI (Proxy allowed)	Showcards 14-17
Income	CAPI (Proxy allowed)	Showcards 18 & 19
Verification	FI & respondent complete form.	Verification Form
FI Observation Questions	FI records own responses.	None

* **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.

2000 National Household Survey on Drug Abuse
Specifications for Programming

Core Demographics

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

1 ENGLISH
2 SPANISH
3 MULTIMEDIA LANGUAGE

NHSDA CAI Instrument Version 4.12
OMB Number: 0930-0110
Expiration Date: 1/31/01

NOTE1 INTERVIEWER: DO NOT READ ALOUD UNLESS RESPONDENT QUESTIONS THE BURDEN ASSOCIATED WITH THIS INTERVIEW.

NOTICE: Public reporting 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.

REMINDFI INTERVIEWER: IF YOU HAVE NOT FULLY INFORMED THIS RESPONDENT ABOUT WHAT PARTICIPATION IN THIS STUDY ENTAILS, REFER TO THE INFORMATION IN YOUR SHOWCARD BOOKLET. WHEN RESPONDENT IS FULLY INFORMED, CONTINUE WITH THE INTERVIEW.

PRESS [ENTER] TO CONTINUE.

AGE1 What is your date of birth?

ENTER MM-DD-YYYY

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

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 FIEXIT

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 OR (FIPE1 = 1 AND CURNTAGE = 12 - 17)] 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.

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

_____
DK/REF

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: _____
DK/REF

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.

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 OTHER ASIAN
13 IF QD05 = 7, FILL TEXT FROM QD05OTHR
IF QD05 NE 7 FILL WITH "OTHER (SPECIFY)"
14 IF QD05ASIA = 7, FILL TEXT FROM QD05OTHA
IF QD05ASIA = BLANK, FILL WITH "NOT APPLICABLE"
DK/REF

[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.]

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: 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 FIEXIT]

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

CALND1 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

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?

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.

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 CIGAGE:
CIGAGE = CG04

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

1 Yes
2 No
DK/REF

CGCC02 [IF CGCC01 = 1] 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 **[CIGAGE]** 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 = 2] 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 CIGAGE = CGCC04

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

IF CIGAGE = CURNTAGE OR CIGAGE < 10:

*CGCC05 The computer recorded that you were **[CIGAGE]** years old the first time you smoked part or all of a cigarette. Is this correct?*

1 Yes
2 No
DK/REF

*CGCC06 [IF CGCC05 = 2] 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 CIGAGE = CGCC06

CG04a [IF CIGAGE = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF CIGAGE = 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 CIGAGE = 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 CIGAGE = 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 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

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
2 Benson & Hedges
3 Cambridge
4 Camel
5 Capri
6 Carlton
7 Doral
8 Forsyth
9 GPC
10 Kent
11 Kool
12 Marlboro
13 Merit
14 Misty
15 Monarch
16 Montclair
17 More
18 Newport
19 Pall Mall
20 Parliament
21 Private Label
22 Salem
23 Vantage
24 Viceroy
25 Virginia Slims
26 Winston
27 A brand not on this list
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
2 Barclay
3 Belair
4 Best Value
5 Bristol
6 Bugler (roll-your-own)
7 Century
8 Chesterfield
9 Commander
10 Covington
11 Eve
12 Harley Davidson
13 Jasmine
14 Lark
15 L & M
16 Lucky Strike
17 Magna
18 Maverick
19 Max
20 Now
21 Old Gold
22 Players
23 Pyramid
24 Raleigh
25 Richland
26 Saratoga
27 Satin
28 State Express
29 Sterling
30 Style
31 Tareyton
32 Top (roll-your-own)
33 Triumph
34 True
35 A brand not on this list
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
14 Misty
27 A brand not on this list
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 < CIGAGE

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

1 Yes
2 No
DK/REF

CGCC08 [IF CGCC07 = 1] 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 **CIGAGE** 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 = 2] 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 CIGAGE = 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?*

1 Yes
2 No
DK/REF

CGCC12 [IF CGCC11 = 1] 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 = 2 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

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:
CHEWAGE = CG18

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

1 Yes
2 No
DK/REF

CGCH02 [IF CGCH01 = 1] 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 = 2] 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?*

1 Yes
2 No

DK/REF

*CGCH06 [IF CGCH05 = 2] 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, 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

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 or 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:
SNUFFAGE = CG26

IF CURNTAGE < SNUFFAGE

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

1 Yes
2 No
DK/REF

CGSN02 [IF CGSN01 = 1] 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 = 2] 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?*

1 Yes
2 No
DK/REF

*CGSN06 [IF CGSN05 = 2] 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, 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

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:
CIGARAGE = CG35

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

1 Yes
2 No
DK/REF

CGCR02 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 = 2] 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?*

1 Yes
2 No
DK/REF

*CGCR06 [IF CGCR05 = 2] 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

R**CG41** [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

R**RCG41** [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 These 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 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, such as muscadine, scuppernong, or fruit wines	
Champagne		

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
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:
AGE1STAL = AL02

IF CURNTAGE < AGE1STAL:
ALCC01 The computer recorded that you were [AGE1STAL] when you first drank an alcoholic beverage.

Is this correct?

1 Yes
2 No
DK/REF

ALCC02 [IF ALCC01 = 1] 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=2] 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?

1 Yes
2 No
DK/REF

*ALCC6 [IF ALCC05=2] 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 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 = 2
IF ALCEST3O = 2, THEN ESTIALC = 5
IF ALCEST3O = 3, THEN ESTIALC = 9
IF ALCEST3O = 4, THEN ESTIALC = 19
IF ALCEST3O = 5, THEN ESTIALC = 29
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?*

1 Yes
2 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?*

1 Yes
2 No
DK/REF

ALCC18 *[IF ALCC17a = 1 OR ALCC17b = 1] 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 =2 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 =2 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?*

1 Yes
2 No
DK/REF

*ALCC26 [IF ALCC24 = 2] 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? 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? 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?*

1 Yes
2 No
DK/REF

ALCC28 [IF ALCC27 = 1] 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 = 2 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.

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:
AGE1STMJ = MJ02

IF CURNTAGE < AGE1STMJ:

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

1 Yes
2 No
DK/REF

MJCC02 [IF MJCC01 = 1] 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=2] 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?

1 Yes
2 No
DK/REF

*MJCC06 [IF MJCC05=2] 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 = 2
IF MJ06DKRE = 2, THEN ESTIMJ = 5
IF MJ06DKRE = 3, THEN ESTIMJ = 9
IF MJ06DKRE = 4, THEN ESTIMJ = 19
IF MJ06DKRE = 5, THEN ESTIMJ = 29
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?*

1 Yes
2 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?*

1 Yes
2 No
DK/REF

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 = 1 OR MJCC07b = 1] 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=2 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

*MJCC13b [IF MJCC07b = 2 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?*

1 Yes

2 No
DK/REF

*MJCC16 [IF MJCC14 = 2] 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.

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:
AGE1STCC = CC02

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

1 Yes
2 No
DK/REF

CCCC02 [IF CCCC01 = 1] 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=2] 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?

1 Yes
2 No
DK/REF

*CCCC06 [IF CCCC05=2] 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 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 = 2
IF CC06DKRE = 2, THEN ESTICC = 5
IF CC06DKRE = 3, THEN ESTICC = 9

IF CC06DKRE = 4, THEN ESTICC = 19
IF CC06DKRE = 5, THEN ESTICC = 29
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?*

1 Yes
2 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?*

1 Yes
2 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 = 1 OR CCCC07b = 1] 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 OR DK/REF] 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 OR CCCC10 = DK/REF] 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 OR CCCC11 = DK/REF] 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=2 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 = 2 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?*

1 Yes
2 No
DK/REF

CCCC16 [IF CCCC14 = 2] 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.

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:
AGE1STCK = CK02

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

1 Yes
2 No
DK/REF

CKCC02 [IF CKCC01 = 1] 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=2] 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?

1 Yes
2 No
DK/REF

*CKCC06 [IF CKCC05=2] 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 = 2
IF CK06DKRE = 2 THEN ESTICK = 5
IF CK06DKRE = 3 THEN ESTICK = 9
IF CK06DKRE = 4 THEN ESTICK = 19
IF CK06DKRE = 5 THEN ESTICK = 29
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?*

1 Yes
2 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?*

1 Yes
2 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 = 1 OR CKCC07b = 1] 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 OR DK/REF] 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 OR CKCC10 = DK/REF] 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 OR CKCC11 = DK/REF] 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 = 2 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]
0
DK/REF

*CKCC13b [IF CKCC07b = 2 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
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?*

1 Yes
2 No
DK/REF

CKCC16 [IF CKCC14 = 2] 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.

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 → HELAST3

DEFINE AGE1STHR:
AGE1STHR = HE02

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

1 Yes
2 No
DK/REF

HECC02 [IF HECC01 = 1] 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=2] 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?

1 Yes
2 No
DK/REF

*HECC06 [IF HECC05=2] 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
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 = 2
IF HE06DKRE = 2 THEN ESTIHE = 5
IF HE06DKRE = 3 THEN ESTIHE = 9
IF HE06DKRE = 4 THEN ESTIHE = 19
IF HE06DKRE = 5 THEN ESTIHE = 29
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?*

1 Yes
2 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?*

1 Yes
2 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 = 1 OR HECC07b = 1] 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 OR DK/REF] 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 OR HECC10 = DK/REF] 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 OR HECC11 = DK/REF] 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 = 2 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?*

1 Yes
2 No
DK/REF

HECC16 [IF HECC14 = 2] 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

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

IF ANY IN LS01a TO LS01f =1 OR LS01h = 1 OR LSREF1 = 1 OR LSREF2 = 1: CONTINUE. OTHERWISE SKIP TO INHLINTRO.

DEFINE LSFILL:
IF LS01a = 1 OR LSREF1 = 1, LSFILL = "LSD or any other hallucinogen"
IF (LS01a = 1 OR LSREF1 = 1) AND (LS01b OR LSREF2 = 1), LSFILL = "LSD, PCP, or any other hallucinogen"
IF LS01b = 1 OR LSREF2 = 1, LSFILL = "PCP or any other hallucinogen"
IF LS01a = 2 OR DK/REF AND LS01b =2 OR DK/REF AND LSREF1 = 2 OR DK/REF AND LSREF2 = 2 OR DK/REF AND AT LEAST ONE OTHER LS01 ITEM = 1, LSFILL = "any hallucinogen"

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

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

DEFINE AGE1STHA:
AGE1STHA = LS02

IF CURNTAGE < AGE1STHA:

LSCC01 The computer recorded that you were [AGE1STHA] when you first used [LSFILL]. Is this correct?

1 Yes
2 No
DK/REF

LSCC02 [IF LSCC01 = 1] 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=2] 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

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?

1 Yes
2 No
DK/REF

*LSCC06 [IF LSCC05=2] 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 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 = 2
IF LS04DKRE = 2 ESTILS = 5
IF LS04DKRE = 3 ESTILS = 9
IFLS04DKRE = 4 ESTILS = 19
IF LS04DKRE =5 ESTILS = 29
IF LS04DKRE = 6 ESTILS = 30
ELSE ESTILS = BLANK

DEFINE HAL30DAY
IF LS06DKRE = 1 HAL30DAY = "1 or 2"
IF LS06DKRE = 2 HAL30DAY = "3 to 5"
IF LS06DKRE = 3 HAL30DAY = "6 to 9"
IF LS06DKRE = 4 HAL30DAY = "10 to 19"
IF LS06DKRE = 5 HAL30DAY = "20 to 29"
IF LS06DKRE = 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?

1 Yes
2 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?*

1 Yes
2 No
DK/REF

DEFINE FILLHAL:
IF LSYRAVE NOT (BLANK OR DK/REF), THEN FILLHAL = "[LSYRAVE] days"
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 = 1 OR LSCC07b = 1] 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 OR DK/REF] 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 OR LSCC10 = DK/REF] 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 OR LSCC11 = DK/REF] 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 = 2 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 = 2 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?*

1 Yes
2 No
DK/REF

LSCC16 [IF LSCC14 = 2] 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] Now think only about LSD. How old were you the **first time** you used LSD?

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

DEFINE AGE1STLS:
AGE1STLS = LS05

IF CURNTAGE < AGE1STLS:

LSCC17 The computer recorded that you were [AGE1STLS] when you first used LSD. Is this correct?

1 Yes
2 No
DK/REF

LSCC18 [IF LSCC17 = 1] 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=2] 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?

1 Yes
2 No
DK/REF

*LSCC22 [IF LSCC21 =2] 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 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
LSDREC = LS10

IF LSDREC < HALLREC:

LSCC26 The computer recorded that you last used LSD [LSDREC FILL]. Is this correct?

1 Yes
2 No
DK/REF

LSCC27 [IF LSCC26 = 1] 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 =2 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] Now think only about PCP. How old were you the **first time** you used PCP?

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

DEFINE AGE1ST PC
AGE1STPC = LS11

IF CURNTAGE < AGE1STPC:

LSCC30 The computer recorded that you were [AGE1STPC] when you first used PCP. Is this correct?

1 Yes
2 No
DK/REF

LSCC31 [IF LSCC30 = 1] 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 =2 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?

1 Yes
2 No
DK/REF

*LSCC35 [IF LSCC34 =2] 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 LSREF1=1 OR LS01c = 1 OR LS01d = 1 OR LS01e = 1 OR LS01f = 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:
PCPREC = LS16

IF PCPREC < HALLREC:
LSCC39 The computer recorded that you last used PCP [PCPREC FILL]. Is this correct?

1 Yes
2 No
DK/REF

LSCC40 [IF LSCC39 = 1] 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 =2 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

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 term "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.

_____
DK/REF

IN01OTH2 [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.

_____
DK/REF

IN01OTH3 [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.

_____
DK/REF

IN01OTH4 [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.

_____
DK/REF

IN01OTH5 [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.

_____
DK/REF

IF ANY IN IN01a to IN01L = 1: CONTINUE. OTHERWISE SKIP TO NEXT SECTION.

IN02 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:
AGE1STIN = IN02

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?

1 Yes
2 No
DK/REF

INCC02 [IF INCC01 = 1] 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=2] 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?

1 Yes
2 No
DK/REF

INCC06 [IF INCC05=2] 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] 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 = 2
IF IN06DKRE = 2 THEN ESTIIN = 5
IF IN06DKRE = 3 THEN ESTIIN = 9
IF IN06DKRE = 4 THEN ESTIIN = 19
IF IN06DKRE = 5 THEN ESTIIN = 29
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?

1 Yes
2 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?*

1 Yes
2 No
DK/REF

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 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

*INCC11 [IF INCC09 = 2 OR INCC10 = 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?*

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

*INCC12 [IF INCC09 = 1 OR INCC11 = 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?*

 # 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 = 2 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]
0
DK/REF

*INCC13b [IF INCC07b = 2 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 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?*

1 Yes
2 No
DK/REF

INCC16 [IF INCC14 = 2] 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

IF PR01 = 2 OR DK/REF AND PR02 = 2 OR DK/REF AND PR03 = 2 OR DK/REF AND PR04 = 2 OR DK/REF AND PR05 = 2 OR DK/REF THEN SKIP TO INTROTR1, ELSE CONTINUE.

PR06 [IF PR01 = 1 OR PR02 = 1 OR PR03 = 1 OR PR04 = 1 OR PR05 = 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:
AGE1STPR = PR06

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?*

1 Yes
2 No
DK/REF

PRCC02 [IF PRCC01 = 1] 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=2] 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?*

1 Yes
2 No
DK/REF

*PRCC06 [IF PRCC05=2] 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 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 and lists the names of some others. 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
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

IF TR01 = 2 OR DK/REF AND TR02 = 2 OR DK/REF AND TR03 = 2 OR DK/REF AND TR04 = 2 OR DK/REF AND TR05 = 2 OR DK/REF THEN SKIP TO INTROST1, ELSE CONTINUE.

TR06 [IF TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 = 1 OR TR05 = 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:
AGE1STTR = TR06

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?*

1 Yes
2 No
DK/REF

TRCC02 [IF TRCC01 = 1] 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=2] 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?*

1 Yes
2 No
DK/REF

*TRCC06 [IF TRCC05=2] 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 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 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

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 was **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

IF ST01 = 2 OR DK/REF AND ST02 = 2 OR DK/REF AND ST03 = 2 OR DK/REF AND ST04 = 2 OR DK/REF AND ST05 = 2 OR DK/REF THEN SKIP TO LEADSED.

IF ST01 =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 THEN SKIP TO ST14, ELSE CONTINUE.

ST06 [IF (ST01 = 1 OR ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 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:
AGE1STST = ST06

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?*

1 Yes
2 No
DK/REF

STCC02 [IF STCC01 = 1] 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=2] 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?*

1 Yes
2 No
DK/REF

*STCC06 [IF STCC05=2] 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 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 AND (ST02 = 1 OR ST03 =1 OR ST04 = 1 OR ST05 = 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?

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

DEFINE AGE1STME:
AGE1STME = ST14

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?*

1 Yes
2 No
DK/REF

STCC08 *[IF STCC07 = 1] 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=2] 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?*

1 Yes
2 No
DK/REF

STCC12 *[IF STCC11=2] 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 ST01 = 1 AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1)] 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 [ST19 FILL]. Is that correct?

1 Yes
2 No
DK/REF

STCC17 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 **[ST19 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 =2 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

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

IF SV01 = 2 OR DK/REF AND SV02 = 2 OR DK/REF AND SV03 = 2 OR DK/REF AND SV04 = 2 OR DK/REF AND SV05 = 2 OR DK/REF THEN SKIP TO INTROSD, ELSE CONTINUE.

SV06 [IF SV01 = 1 OR SV02 = 1 OR SV03 = 1 OR SV04 = 1 OR SV05 = 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:
AGE1STSV = SV06

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?*

1 Yes
2 No
DK/REF

SVCC02 [IF SVCC01 = 1] 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=2] 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 feeling it caused. Is this correct?*

1 Yes
2 No
DK/REF

*SVCC06 [IF SVCC05=2] 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 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] 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] 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

SD05 Have you **ever**, even once, used a needle to inject a drug that was **not** prescribed for you or that you took only for the experience it caused?

1 Yes
2 No
DK/REF

SD06 [IF SD05 = 1 AND CN01 = 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

SD08 [IF SD05 = 1 AND HE01 = 1] Have you **ever**, even once, used a needle to inject **heroin**?

1 Yes
2 No
DK/REF

SD09 [IF SD08 = 1] 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

SD10 [IF ST01 = 1 OR ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 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 SD10 = 1] How long has it been since you **last** used a needle to inject 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

SD12 [IF SD05 = 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 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 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 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 SD05 = 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
DK/REF

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

Definitions for Use in the Drugs Module

DEFINE CIG12MON:
IF CG05 = 1 OR CG06 = 1 OR CG06DK = 1 OR CG06RE = 1, THEN CIG12MON = 1
ELSE CIG12MON = 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 = 1) 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 = 1) OR (MJ06DKRE
= 3 - 6 AND MJCC07b = 1), 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, 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 CIG12MON = 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

[CIG12MON = 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.

[CIG12MON = 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.

[CIG12MON = 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.

[CIG12MON = 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.

[CIG12MON = 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.

[CIG12MON = 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.

[CIG12MON = 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.

All the questions refer to the past 12 months—that is, since **DATEFILL**.

Press [ENTER] to continue.

DRCIG [IF CIG12MON = 1] Think about your use of **cigarettes** during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DRCIG01 [IF CIG12MON = 1] During the past 12 months, was there a month or more when you spent a lot of your time getting or smoking **cigarettes**?

1 Yes
2 No
DK/REF

DRCIG04 [IF CIG12MON = 1] During the past 12 months, did you try to set limits on how often or how many **cigarettes** you would smoke?

1 Yes
2 No

DRCIG05 [IF DRCIG04 = 1] Were you able to keep to the limits you set, or did you often smoke more than you intended to?

1 Usually kept to the limits set
2 Often smoked more than intended

DRCIG06 [IF CIG12MON = 1] During the past 12 months, did you need to smoke more **cigarettes** than you used to in order to get the effect you wanted?

1 Yes
2 No

DRCIG07 [IF DRCIG06=2 OR DK/REF] During the past 12 months, did you notice that smoking the same number of

cigarettes had less effect on you than it used to?

1 Yes
2 No
DK/REF

DRCIG08 [IF CIG12MON = 1] During the past 12 months, did you **want to** or **try to** cut down or stop smoking **cigarettes**?

1 Yes
2 No
DK/REF

DRCIG09 [IF DRCIG08 = 1] During the past 12 months, were you **able to** cut down or stop smoking **cigarettes every time** you wanted to or tried to?

1 Yes
2 No
DK/REF

DRCIG10 [IF DRCIG8 = 2 OR DRCIG9 = 2 OR DK/REF] During the past 12 months, **did you** cut down or stop smoking **at least one time**?

1 Yes
2 No
DK/REF

DRCIG11 [IF DRCIG09=1 OR DRCIG10 = 1] Please look at the symptoms listed below. During the past 12 months, did you have **4 or more** of these symptoms after you cut back or stopped smoking **cigarettes**?

- Feeling kind of blue, down, or depressed
- Having trouble sleeping
- Feeling irritable, frustrated, or angry
- Feeling anxious
- Having difficulty concentrating
- Feeling hungry more often or gaining weight
- Feeling restless
- Having a slower heart rate

1 Yes
2 No
DK/REF

DRCIG12 [IF DRCIG11 = 1] Please look at the symptoms listed below. During the past 12 months, did you have **4 or more of these symptoms at the same time** that lasted for longer than a day after you cut back or stopped smoking **cigarettes**?

- Feeling kind of blue, down, or depressed
- Having trouble sleeping
- Feeling irritable, frustrated, or angry
- Feeling anxious
- Having difficulty concentrating
- Feeling hungry more often or gaining weight
- Feeling restless
- Having a slower heart rate

1 Yes
2 No
DK/REF

DRCIG13 [IF CIG12MON = 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 **cigarette** smoking?

1 Yes
2 No
DK/REF

DRCIG14 [IF DRCIG13 = 1] Did you continue to smoke **cigarettes** even though you thought smoking was causing you to have problems with your emotions, nerves, or mental health?

1 Yes
2 No
DK/REF

DRCIG15 [IF DRCIG13 = 2 OR DK/REF OR DRCIG14 = 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 **cigarette** smoking?

1 Yes
2 No
DK/REF

DRCIG16 [IF DRCIG15 = 1] Did you continue to smoke **cigarettes** even though you thought smoking was causing you to have physical problems?

1 Yes
2 No
DK/REF

DRCIG17 [IF CIG12MON = 1] During the past 12 months, did smoking **cigarettes** cause you to give up or spend less time doing important things such as:
- working
- going to school
- taking care of children
- doing fun things such as hobbies, sports, or spending time with friends or family

1 Yes
2 No
DK/REF

DRCIG18 [IF CIG12MON = 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 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
DK/REF

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 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 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
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 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 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 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. 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

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 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 PR01 = 1 OR OR PR02 = 1 OR PR03 = 1 OR PR04 = 1 OR PR05 = 1 OR TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 = 1 OR TR05 = 1 OR ST01 = 1 OR ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR SV01 = 1 OR SV02 = 1 OR SV03 = 1 OR SV04 = 1 OR SV05 = 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 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 PR01 = 1 OR OR PR02 = 1 OR PR03 = 1 OR PR04 = 1 OR PR05 = 1 OR TR01 = 1 OR TR02 = 1 OR TR03 = 1 OR TR04 = 1 OR TR05 = 1 OR ST01 = 1 OR ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 1 OR SV01 = 1 OR SV02 = 1 OR SV03 = 1 OR SV04 = 1 OR SV05 = 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 TXO4b = 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 TXO4c = 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 TXO4d = 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 TXO4e = 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 TXO4f = 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 TXO4g = 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?

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)] 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 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) 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) 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) 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 ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 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) 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 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 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) 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)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) 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) 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 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) 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 ST02 =1 OR ST03 =1 OR ST04 = 1 OR ST05 = 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 ST02 = 1 OR ST03 =1 OR ST04 =1 OR ST05 =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 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) 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

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 or months.

1 Days
2 Months
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 - 900]
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 - 900]
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 - 900]
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 - 900]
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.

_____
DK/REF

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, 1999?

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]
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.

ADMENT01 [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

ADMENT02 [IF ADMENT01 = 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

ADMENT03 [IF ADMENT02 = 6] You have indicated that during the past 12 months you stayed **overnight or longer** to receive mental health treatment or counseling at a facility 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

ADMENT04 [IF ADMENT02 = 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

ADMENT05 [IF ADMENT02 = 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

ADMENT06 [IF ADMENT02 = 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

ADMENT07 [IF ADMENT02 = 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

ADMENT08 [IF ADMENT02 = 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

ADMENT09 [IF ADMENT02 = 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

ADMENT10 [[IF ADMENT02 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

ADMENT11 [IF MORE THAN 1 RESPONSE SELECTED IN ADMENT10 AND ADMENT02 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 ADMENT10 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

ADMENT12 [IF ADMENT10 = 1 AND ADMENT02 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 ADMENT10 = 2 AND NE 1 AND ADMENT02 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

ADMENT13 [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

ADMENT14 [IF ADMENT13 = 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

ADMENT15 [IF ADMENT14 = 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

ADMENT16 [IF ADMENT14 = 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

ADMENT17 [IF ADMENT14 = 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

ADMENT18 [IF ADMENT14 = 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

ADMENT19 [IF ADMENT14 = 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

ADMENT20 [IF ADMENT14 = 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

ADMENT21 [IF ADMENT14 = 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

ADMENT22 [IF ADMENT14 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

ADMENT23 [IF MORE THAN 1 RESPONSE SELECTED IN ADMENT22 AND ADMENT14 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 ADMENT22 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

ADMENT24 [IF ADMENT22 = 1 AND ADMENT14 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 ADMENT22 = 2 AND NE 1 AND ADMENT14 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

ADMENT25 [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

ADMENT26 [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

ADMENT27 [IF ADMENT26 = 1] Was this because you couldn't afford mental health treatment or counseling, or was there some other reason you didn't get the care you needed?

1 Couldn't afford it
2 Some other reason
DK/REF

Social Environment (Section Administered to 18 + Year Olds Only)

LEADSEN [IF CURNTAGE = 18 OR OLDER] The next questions are about the neighborhood where you currently live.

Press [ENTER] to continue.

SEN02a [IF CURNTAGE = 18 OR OLDER] For each of the next statements, please indicate how much you agree or disagree.

There is a lot of crime in your neighborhood.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN02b [IF CURNTAGE = 18 OR OLDER] A lot of drug selling goes on in your neighborhood.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN02c [IF CURNTAGE = 18 OR OLDER] People in your neighborhood share the same values.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN02d [IF CURNTAGE = 18 OR OLDER] There are lots of street fights in your neighborhood.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN02e [IF CURNTAGE = 18 OR OLDER] There are many empty or abandoned buildings in your neighborhood.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN02f [IF CURNTAGE = 18 OR OLDER] People in your neighborhood often help each other out.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN02g [IF CURNTAGE = 18 OR OLDER] There is a lot of graffiti in your neighborhood. By "graffiti" we mean words or pictures that are written or drawn on buildings, fences, walls, or rocks, often with spray paint.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN02h [IF CURNTAGE = 18 OR OLDER] People in your neighborhood often visit in each other's homes.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

SEN02i [IF CURNTAGE = 18 OR OLDER] People move in and out of your neighborhood often.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
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

SEN07 [IF CURNTAGE = 18 OR OLDER] 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

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

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 the neighborhood where you currently live.

Press [Enter] to continue.

YE02a [IF CURNTAGE = 12 - 17] For each of the next statements, please indicate how much you agree or disagree.

There is a lot of crime in your neighborhood.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02b [IF CURNTAGE = 12 - 17] A lot of drug selling goes on in your neighborhood.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02c [IF CURNTAGE = 12 - 17] People in your neighborhood often help each other out.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02d [IF CURNTAGE = 12 - 17] There are lots of street fights in your neighborhood.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02e [IF CURNTAGE = 12 - 17] There are many empty or abandoned buildings in your neighborhood.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02f [IF CURNTAGE = 12 - 17] People in your neighborhood often visit in each other's homes.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02g [IF CURNTAGE = 12 - 17] There is a lot of graffiti in your neighborhood. By "graffiti" we mean words or pictures that are written or drawn on buildings, fences, walls, or rocks, often with spray paint.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02h [IF CURNTAGE = 12 - 17] P eople move in and out of your neighborhood often.

1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

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 been enrolled in any type of school at any time **during the past 12 months**?

1 Yes
2 No
DK/REF

YE15 [IF YE09 = 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

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

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

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

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

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 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

YE23a [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in a Big Brother/Big Sister/Big Buddy program or peer mentoring or tutoring program?

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

YE23d [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in youth center activities, at the YMCA, YWCA, or other similar community centers?

1 Yes
2 No
DK/REF

YE23e [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in Boy Scouts or Girl Scouts?

1 Yes
2 No
DK/REF

YE23f [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in private lessons such as piano, dance, tennis, karate or horseback riding?

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

YE23h [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in team sports such as football, basketball, swimming or gymnastics?

1 Yes
2 No
DK/REF

YE23i [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in a 4-H Club?

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

YE23k [IF YE09 = 1] **During the past 12 months** have you participated in a school band, orchestra, or choir?

1 Yes
2 No
DK/REF

YE23l [IF YE09 = 1] **During the past 12 months** have you participated in school-related clubs?

1 Yes
2 No
DK/REF

YE23m [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in volunteer or community work, such as recycling or clean-up projects?

1 Yes
2 No
DK/REF

YE23n [IF YE09 = 1] **During the past 12 months** have you participated in student government?

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** have you participated in a job skills or job training program?

1 Yes
2 No
DK/REF

YE23q [IF CURNTAGE = 12 - 17] **During the past 12 months** have you participated in a church choir?

1 Yes
2 No
DK/REF

YE24a [IF YE09 = 1, DK OR REF] **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, DK OR REF] **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, DK OR REF] **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] **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] **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

YE26 [IF CG05 = 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] 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] 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] 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] 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] 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] 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] 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] 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] 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

Adolescent Mental Health

(Section Administered to 12 - 17 Year Olds Only; Respondents 18 or Older Skip to QD13)

DPSINTRO [IF CURNTAGE = 12 - 17] These next questions are about feelings that people sometimes have and things that may have happened to you during the past 12 months, that is since **DATEFILL**. Some of the questions mention your "parents." Remember that by parents, we mean either your biological parents, adoptive parents, stepparents, or adult guardians -- whether or not they live with you.

Press [ENTER] to continue.

DPS01 [IF CURNTAGE = 12 - 17] **During the past 12 months**, have you **often** felt very nervous or uncomfortable when you have been with a group of children or young people — say, like in the lunchroom at school or at a party?

1 Yes
2 No
DK/REF

DPS02 [IF CURNTAGE = 12 - 17] **During the past 12 months**, have you **often** felt very nervous when you've had to do things in front of people?

1 Yes
2 No
DK/REF

DPS03 [IF CURNTAGE = 12 - 17] **During the past 12 months**, has there been a time when you **often** wanted to stay at home and not go to school or other places without your mother or father?

1 Yes
2 No
DK/REF

DPS04 [IF CURNTAGE = 12 - 17] **During the past 12 months**, have you **often** had headaches or stomachaches or felt like you would throw up when you couldn't be with your mother or father?

1 Yes
2 No
DK/REF

DPS05 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you had a lot of bad dreams or nightmares?

1 Yes
2 No
DK/REF

DPS06 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you **often** wanted to have your mother or father near you before you could fall asleep?

1 Yes
2 No
DK/REF

DPS07 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you kept worrying that your mother or father might go away and never come back?

1 Yes
2 No
DK/REF

DPS08 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

if your mother or father has to go out some place without you do you **often** get very upset or beg him or her not to leave?

1 Yes
2 No
DK/REF

DPS09 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

if you were away from home without your mother or father for several days in a row --like staying with friends or relatives or going to camp, did you get very upset or very homesick because you missed your mother or father?

1 Yes
2 No
DK/REF

DPS10 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you **often** been afraid to go out of the house by yourself?

1 Yes
2 No
DK/REF

DPS11 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you **often** felt afraid of being in crowded places?

1 Yes
2 No
DK/REF

DPS12 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you **often** been afraid of traveling in cars or on buses or trains?

1 Yes
2 No
DK/REF

DPS13 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you **often** felt afraid of being on bridges or in tunnels?

1 Yes
2 No
DK/REF

DPS14 [IF CURNTAGE = 12 - 17] This question is about sudden attacks of feeling very afraid. In this kind of attack, someone becomes very afraid even though there is nothing around them to frighten them. Sometimes they feel they can't breathe and sometimes their heart beats very fast. The attacks come on very suddenly and then go away, but they get afraid that the attacks might come back.

During the past 12 months, that is since **DATEFILL**, have you had an attack when all of a sudden you felt very afraid or strange?

1 Yes
2 No
DK/REF

DPS15 [IF DPS14 = 1] **During the past 12 months**, ...

have you had a time when you suddenly felt that you were suffocating or you couldn't breathe?

1 Yes
2 No
DK/REF

DPS16 [IF CURNTAGE = 12 - 17] **During the past 12 months**, that is since **DATEFILL**, have you **often** worried a lot **before** you were going to play a sport or game or do some other activity?

1 Yes
2 No
DK/REF

DPS17 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you had a lot of headaches?

1 Yes
2 No
DK/REF

DPS18 [IF DPS16 = 1 OR DPS17 =1] **During the past 12 months**, ...

have you had a lot of other aches and pains?

1 Yes
2 No
DK/REF

DPS19 [IF DPS16 =1 OR DPS17 =1] **During the past 12 months**, ...

have you **often** been very tense, or found it hard to relax?

1 Yes
2 No
DK/REF

DPS20 [IF CURNTAGE = 12 - 17] **During the past 12 months**, that is since **DATEFILL**, have you been very afraid of dogs, birds, snakes, insects, or any other animals?

1 Yes
2 No
DK/REF

DPS21 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you been very afraid of being high up or in a high place?

1 Yes
2 No
DK/REF

DPS22 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you been very afraid of being in the dark?

1 Yes
2 No
DK/REF

DPS23 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

has seeing a needle or getting a shot made you much more afraid than other people?

1 Yes
2 No
DK/REF

DPS24 [IF DPS20 = 1 OR DPS21 = 1 OR DPS22 = 1 OR DPS23 = 1] **During the past 12 months**, ...

has the sight of blood or cuts made you very afraid?

1 Yes
2 No
DK/REF

DPS25 [IF DPS20 =1 OR DPS21 =1 OR DPS22 =1 OR DPS23 =1] **During the past 12 months**, ...

have you been very afraid of being on a bridge or in a tunnel or on a highway?

1 Yes
2 No
DK/REF

DPS26 [IF DPS20 =1 OR DPS21 =1 OR DPS22 =1 OR DPS23 = 1] **During the past 12 months**, ...

have you been very afraid of being in an elevator or on an escalator?

1 Yes
2 No
DK/REF

DPS27 [IF CURNTAGE = 12 - 17] Some young people have times when one thought or idea comes into their mind **over and over again**. When people have these thoughts they usually get **upset**, because the thoughts are strange. **No matter how hard they try**, the thoughts keep coming back.

During the past 12 months, that is since **DATEFILL**,have you **had** to count things over and over again, or make yourself do things a certain number of times?

1 Yes
2 No
DK/REF

DPS28 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

was there a time when you washed your hands or body over and over again or changed your clothes many times each day because you thought they were dirty?

1 Yes
2 No
DK/REF

DPS29 [IF DPS27 = 1 OR DPS28 = 1] **During the past 12 months**, ...

have you **often** felt you should check on things over and over again? For example, checking that the front door is locked, that the stove is turned off, or that something else was done even though you knew it had been done?

1 Yes
2 No
DK/REF

DPS30 [IF DPS27 =1 OR DPS28 =1] **During the past 12 months**, ...

have you **often** worried over and over again that things you touch are dirty or have germs?

1 Yes
2 No
DK/REF

DPS31 [IF DPS27 =1 OR DPS28 =1] **During the past 12 months**, ...

have you had any other thoughts that kept coming back into your mind over and over again that you couldn't get rid of?

1 Yes
2 No
DK/REF

DPS32 [IF CURNTAGE = 12 - 17] **During the past 12 months**, that is since **DATEFILL**,has anyone worried that you were much too thin?

1 Yes
2 No
DK/REF

DPS33 [IF DPS32 = 1] **During the past 12 months**, ...

have you **often** felt bad about yourself because you thought you were fat or overweight?

1 Yes
2 No
DK/REF

DPS34 [IF DPS32 = 1] **During the past 12 months**, ...

have there been times when you thought about food or about eating **almost all the time**?

1 Yes
2 No
DK/REF

DPS35 [IF DPS32 = 1] An eating binge is when someone stuffs themselves with a whole lot of food in a short time — like several whole pizzas or a whole chocolate cake or several containers of ice cream — and they **don't seem to be able to control how much they eat**.

During the past 12 months, have you had an eating binge like this?

1 Yes
2 No
DK/REF

DPS36 [IF CURNTAGE = 12 - 17] **During the past 12 months**, that is since **DATEFILL**, have you wet the bed at night?

1 Yes
2 No
DK/REF

DPS37 [IF DPS36 = 1] **During the past 12 months**, ...

have you wet your pants during the day?

1 Yes
2 No
DK/REF

DPS38 [IF DPS36 = 1] **During the past 12 months**, ...

have you soiled yourself? By "soiled," we mean you had a bowel movement and pooped in your pants, or on the floor, or somewhere **not in the toilet**.

1 Yes
2 No
DK/REF

DPS39 [IF CURNTAGE = 12 - 17] **During the past 12 months**, that is since **DATEFILL**, has there been a time when nothing was fun for you and you just weren't interested in anything?

1 Yes
2 No
DK/REF

DPS40 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

has there been a time when you had less energy than you usually do?

1 Yes
2 No
DK/REF

DPS41 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

has there been a time when you felt you couldn't do anything well or that you weren't as good-looking or as smart as other people?

1 Yes
2 No
DK/REF

DPS42 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

has there been a time when you thought seriously about killing yourself?

1 Yes
2 No
DK/REF

DPS43 [IF DPS39=1 OR DPS40=1 OR DPS41=1 OR DPS42=1] **During the past 12 months**, ...

have you tried to kill yourself?

1 Yes
2 No
DK/REF

DPS44 [IF DPS39=1 OR DPS40=1 OR DPS41=1 OR DPS42=1] **During the past 12 months**, ...

has there been a time when doing even little things made you feel really tired?

1 Yes
2 No
DK/REF

DPS45 [IF DPS39=1 OR DPS40=1 OR DPS41=1 OR DPS42=1] **During the past 12 months**, ...

has there been a time when you couldn't think as clearly or as fast as usual?

1 Yes
2 No
DK/REF

DPS46 [IF CURNTAGE = 12 - 17] Everyone gets in a bad mood sometimes. But some people feel grouchy or angry or irritable most of the time for several days in a row. They get **really** annoyed when other people interrupt them or don't agree with everything they say.

During the past 12 months, that is since **DATEFILL**, have you had a time when you were grouchy or angry like this?

1 Yes
2 No
DK/REF

DPS47 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

has there been a time when you felt **very restless,** so that you had to keep walking around or be on the move all the time?

1 Yes
2 No
DK/REF

DPS48 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

has there been a time when you **talked too much or too quickly?**

1 Yes
2 No
DK/REF

DPS49 [IF DPS46=1 OR DPS47=1 OR DPS48=1] **During the past 12 months**, ...

has there been a time when you thought you had special abilities or powers which made you stronger, smarter, or better than most other people?

1 Yes
2 No
DK/REF

DPS50 [IF DPS46=1 OR DPS47=1 OR DPS48=1] **During the past 12 months**, ...

has there been a time when you **often** felt like your **mind was racing too quickly** from one thought to another?

1 Yes
2 No
DK/REF

DPS51 [IF CURNTAGE = 12 - 17] Everyone has times when they have trouble concentrating or keeping their mind on what they are doing. This question asks about whether you have had difficulty concentrating, or keeping your mind on what you are doing, **most of the time.**

During the past 12 months, that is since **DATEFILL**, have you **often** had trouble keeping your mind on what you are doing for more than a short time?

1 Yes
2 No
DK/REF

DPS52 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you **often** forgotten what you are supposed to be doing or what you had planned to do?

1 Yes
2 No
DK/REF

DPS53 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you **often** found it hard to keep your mind on what you are doing when other things are going on?

1 Yes
2 No
DK/REF

DPS54 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you taken medication for being overactive, being hyperactive, or having trouble paying attention?

1 Yes
2 No
DK/REF

DPS55 [IF DPS51=1 OR DPS52=1 OR DPS53=1 OR DPS54=1] **During the past 12 months**, ...

have you **often tried not** to do things where you would need to pay attention for a long time?

1 Yes
2 No
DK/REF

DPS56 [IF DPS51=1 OR DPS52=1 OR DPS53=1 OR DPS54=1] **During the past 12 months**, ...

have you **often** made a lot of mistakes because it's hard for you to do things carefully?

1 Yes
2 No
DK/REF

DPS57 [IF CURNTAGE = 12 - 17] **During the past 12 months**, that is since **DATEFILL**, have you gotten even with people by doing things like hurting them, messing up their things, or telling lies about them?

1 Yes
2 No
DK/REF

DPS58 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you refused to do what your parents or teachers told you to do?

1 Yes
2 No
DK/REF

DPS59 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you been grouchy or easily annoyed?

1 Yes
2 No
DK/REF

DPS60 [IF DPS57=1 OR DPS58=1 OR DPS59=1] **During the past 12 months**, ...

have you done mean things to people on purpose?

1 Yes
2 No
DK/REF

DPS61 [IF DPS57=1 OR DPS58=1 OR DPS59=1] **During the past 12 months**, ...

have you blamed someone else for your mistakes or for things you did that you shouldn't have done?

1 Yes
2 No
DK/REF

DPS62 [IF DPS57=1 OR DPS58=1 OR DPS59=1] **During the past 12 months**, ...

have you done things just to annoy people or make them mad?

1 Yes
2 No
DK/REF

DPS63 [IF DPS57=1 OR DPS58=1 OR DPS59=1] **During the past 12 months**, ...

have people complained because you swore or used dirty language?

1 Yes
2 No
DK/REF

DPS64 [IF CURNTAGE = 12 - 17] **During the past 12 months**, that is since **DATEFILL**, have you been expelled from school for misbehavior -- that is, have you been told you could never go back to that school at all?

1 Yes
2 No
DK/REF

DPS65 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you shoplifted -- that is, stolen something from a store when you thought no one was looking?

1 Yes
2 No
DK/REF

DPS66 [IF CURNTAGE = 12 - 17] **During the past 12 months**, ...

have you lied to get money or something else you wanted?

1 Yes
2 No
DK/REF

DPS67 [IF DPS64=1 OR DPS65=1 OR DPS66=1] **During the past 12 months**, ...

have you snatched someone's purse or jewelry?

1 Yes
2 No
DK/REF

DPS68 [IF DPS64=1 OR DPS65=1 OR DPS66=1] **During the past 12 months**, ...

have you broken something or messed up some place on purpose, such as breaking windows, writing on a building, or slashing tires?

1 Yes
2 No
DK/REF

DPS69 [IF DPS64=1 OR DPS65=1 OR DPS66=1] **During the past 12 months**, ...

have you stolen from anyone else when they weren't around or weren't looking?

1 Yes
2 No
DK/REF

DPS70 [IF DPS64=1 OR DPS65=1 OR DPS66=1] **During the past 12 months**, ...

have you been physically cruel to an animal and hurt it on purpose?

1 Yes
2 No
DK/REF

DPS71 [IF DPS64=1 OR DPS65=1 OR DPS66=1] **During the past 12 months**, ...

have you broken into a house, a building, or a car?

1 Yes
2 No
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 CNCC03a, 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.

QD18 [IF QD17 = 1] HAND R SHOWCARD 5. In what grade or year of school are you **now** enrolled? 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.

QD19 [IF QD17 = 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 QD17 = 2 OR DK/REF] 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.

_____ OTHER REASON
DK/REF

QD25 [IF QD24 = 1 - 16 OR DK/REF] How old were you when you stopped attending school?

_____ R's 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?

_____ NUMBER 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] What kind of business or industry do you work in? That is, what is the main activity at the place where you work?

_____ [ALLOW 100 CHARACTERS]
DK/REF

INTERVIEWER NOTE:
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 you work in?

1 MANUFACTURING
2 WHOLESALE TRADE
3 RETAIL TRADE
4 AGRICULTURE
5 CONSTRUCTION
6 SERVICE
7 GOVERNMENT
8 OTHER

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 job title?

_____ [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 throughly!

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 throughly!

INOC06 [IF QD26 =1 OR QD27 = 1 AND INOC01 NE DK/REF] HAND R SHOWCARD 8. Which of these categories best describes the business you work in?

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

QD30SP [IF QD30 = 7] TYPE IN THE OTHER REASON WHY THE RESPONDENT DID NOT WORK LAST WEEK.

_____ 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 UNEMPLOYED OR ON LAYOFF AND LOOKING FOR WORK
2 ON LAYOFF AND **NOT** LOOKING FOR WORK
3 KEEPING HOUSE FULL TIME
4 GOING TO SCHOOL/TRAINING
5 RETIRED
6 DISABLED FOR WORK
7 SOME OTHER REASON
DK/REF

QD31SP [IF QD31 = 7] TYPE IN THE OTHER REASON WHY THE RESPONDENT DID NOT HAVE A JOB OR BUSINESS LAST WEEK.

_____ 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?

_____ NUMBER OF EMPLOYERS IN PAST 12 MONTHS
DK/REF

QD36 [IF QD34 = 2 OR DK/REF] How many different employers have you had in the past 12 months?

_____ NUMBER OF EMPLOYERS IN PAST 12 MONTHS
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?

_____ NUMBER 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".

QD39 [IF (QD26 NE 1 OR NE BLANK)] In what month and year did you last work at a job or business?

ENTER RESPONSE IN THE FOLLOWING FORMAT: MM/YYYY.

IF THE RESPONDENT NEVER WORKED FOR PAY, ENTER 99/9999.

_____ MONTH AND YEAR LAST WORKED

DK/REF

INOC07 [IF QD33 = 1] What kind of business or industry did you work in? That is, what was the main activity at the place where you worked?

_____ [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 you worked in?

1 MANUFACTURING
2 WHOLESALE TRADE
3 RETAIL TRADE
4 AGRICULTURE
5 CONSTRUCTION
6 SERVICE
7 GOVERNMENT
8 OTHER

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 job title?

_____ [ALLOW 100 CHARACTERS]
DK/REF

FI 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 throughly!

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

FI 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 throughly!

INOC12 [IF QD33 =1 AND INOC07 NE DK/REF] HAND R SHOWCARD 8. Which of these categories best describes the business you work in?

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?

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.

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?

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.

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

INTERVIEWER NOTE:
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 (QD46)

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

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

RELATTEN **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. Would you say 0 times, 1 to 2 times, 3 to 5 times, 6 to 24 times, 25 to 52 times, or more than 52 times?

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

RELBELF1 Now I am going to read some statements about the role that religious beliefs may play in your life. Please tell me if you strongly disagree, disagree, agree, or strongly agree with each statement.

My religious beliefs are a very important part of my life.

1 STRONGLY DISAGREE
2 DISAGREE
3 AGREE
4 STRONGLY AGREE
DK/REF

RELBELF2 My religious beliefs influence how I make decisions in my life.

1 STRONGLY DISAGREE
2 DISAGREE
3 AGREE
4 STRONGLY AGREE
DK/REF

RELBELF3 It is important that my friends share my religious beliefs.

1 STRONGLY DISAGREE
2 DISAGREE
3 AGREE
4 STRONGLY AGREE
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).

NUMBER 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.

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 RESPONDENTS, 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.

HAND R SHOWCARD 14.

People covered by Medicare have a card that looks like this. (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

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. (In this state, Medicaid is also known as MEDICAID STATE NAME(S); Medical Assistance may be known as MEDICAL ASSISTANCE STATE NAME(S).)

1 YES
2 NO
DK/REF

INTERVIEWER NOTE:
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. However, in some states, it may be known by other names. Refer to your showcard booklet for the various state names used to describe this program.

QHI03 (Are you/Is **SAMPLE MEMBER**) currently covered by CHAMPUS or TRICARE, 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

INTERVIEWER NOTE:
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.

QHI04 (Are you/Is **SAMPLE MEMBER**) currently covered by any other government-sponsored program that provides or pays for medical care?

1 YES
2 NO
DK/REF

QHI05 [IF QHI04 = 1] SPECIFY THE NAME OF THIS OTHER GOVERNMENT-SPONSORED HEALTH CARE PROGRAM:

_____
DK/REF

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

INTERVIEWER NOTE:
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 (Are you/Is **SAMPLE MEMBER**) currently covered by any other type of health insurance or coverage besides the ones I just asked about?

1 YES
2 NO
DK/REF

QHI12 [IF QHI11=1] SPECIFY THIS OTHER TYPE OF HEALTH INSURANCE COVERAGE:

_____
DK/REF

QHI13 [IF QHI01 =1 OR QHI02 =1 OR QHI03=1 OR QHI04=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

INTERVIEWER NOTE:
If the respondent reports less than one month, enter a "1".

QHI15 [IF QHI01 AND QHI02 AND QHI03 AND QHI04 = 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

QHI16 [IF QHI15 =1-4 OR DK/REF] HAND R SHOWCARD 15. When (you were/**SAMPLE MEMBER** was) last covered, what kind of health care coverage did (you/**SAMPLE MEMBER**) have?

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

1 PRIVATE HEALTH INSURANCE
2 MEDICAID OR MEDICAL ASSISTANCE
3 MILITARY HEALTH CARE (CHAMPUS, TRICARE, CHAMPVA, THE VA)
4 MEDICARE
5 SOME OTHER GOVERNMENT PROGRAM
6 SOME OTHER KIND OF COVERAGE
DK/REF

QHI16SP [IF QHI16 = 6] SPECIFY OTHER KIND OF COVERAGE:

_____
DK/REF

QHI17 [IF QHI15 = 1 - 4 OR DK/REF] HAND R SHOWCARD 16. Which of the reasons on this card describe why (you/**SAMPLE MEMBER**) stopped being covered by health insurance?

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

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 SOME OTHER REASON
DK/REF

QHI17SP [IF QHI17 = 11] SPECIFY OTHER REASON WHY (RESPONDENT/SAMPLE MEMBER) STOPPED BEING COVERED BY HEALTH INSURANCE:

_____
DK/REF

QHI18 [IF QHI15 = 5] HAND R SHOWCARD 17. 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

QHI18SP [IF QHI18 = 5] SPECIFY OTHER REASON WHY (RESPONDENT/SAMPLE MEMBER) NEVER HAD HEALTH INSURANCE:

_____
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

INTERVIEWER NOTE:
Social Security or Railroad Retirement payments are paid by the U.S. Government to persons who are retired, severely disabled, or are dependents or survivors of workers.

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

INTERVIEWER NOTE:
Social Security or Railroad Retirement payments are paid by the U.S. Government to persons who are retired, severely disabled, or are dependents or survivors of workers.

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

INTERVIEWER NOTE:
Supplemental Security Income or SSI is a program administered by the Social Security Administration that makes assistance payments to low income, aged, blind, and disabled persons. Some states also have their own SSI programs. Include these also if reported.

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

INTERVIEWER NOTE:
Supplemental Security Income or SSI is a program administered by the Social Security Administration that makes assistance payments to low income, aged, blind, and disabled persons. Some states also have their own SSI programs. Include these also if reported.

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

INTERVIEWER NOTE:
Supplemental Security Income or SSI is a program administered by the Social Security Administration that makes assistance payments to low income, aged, blind, and disabled persons. Some states also have their own SSI programs. Include these also if reported.

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.

QI08 At any time during [CURRENT YEAR - 1], even for one month, did (**you**/**SAMPLE MEMBER**) receive any cash assistance because (your/**SAMPLE MEMBER'S**) income was low, such as temporary assistance for needy families, welfare, or public assistance?

1 YES
2 NO
DK/REF

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 because your income was low, such as temporary assistance for needy families, welfare, or public assistance?

[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 because his/her income was low, such as temporary assistance for needy families, welfare, or public assistance?

[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 because his/her income was low, such as temporary assistance for needy families, welfare, or public assistance? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

1 YES
2 NO
DK/REF

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 because your income was low, such as temporary assistance for needy families, welfare, or public assistance?

[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 because his/her income was low, such as temporary assistance for needy families, welfare, or public assistance?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of **these** family members receive any cash assistance because his/her income was low, such as temporary assistance for needy families, welfare, or public assistance?

1 YES
2 NO
DK/REF

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?

_____ NUMBER OF MONTHS RECEIVED ASSISTANCE
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?

_____ NUMBER OF MONTHS RECEIVED ASSISTANCE
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

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.

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 18.

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 19.

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.

HAND18b [IF QI22=2] HAND R SHOWCARD 18.

PRESS [ENTER] TO CONTINUE.

HAND19b [IF QI22=1] HAND R SHOWCARD 19.

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 questions have to do with telephones in your household. How many different telephone numbers do you have in this household? Don't count business numbers or extensions with the same number.

INTERVIEWER NOTE:
The respondent should not include cellular phones (mobile phones, car phones, etc.) in his or her answer.

OF TELEPHONE NUMBERS: _____ [RANGE: 0 - 20]
DK/REF

QI25 [IF QI24 NE 0] Do any of the telephones in your household have touchtone dialing?

1 YES
2 NO
DK/REF

INTERVIEWER NOTE:
The respondent should not include cellular phones (mobile phones, car phones, etc.) in his or her answer.

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 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 address and home telephone number 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.

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.

FIDBF01 Did you conduct this interview at the respondent's home — either inside or outside?

1 YES
2 NO
DK/REF

FIDBF02 [IF FIDBF01 = 2 OR DK/REF] 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
DK/REF

FIDBF03 In the **ACASI module** of this interview, was it necessary for you to read the questions aloud and enter the answers for the respondent?

NOTE: Record a "YES" for this question even if you administered only a portion of the ACASI module in this way.

1 YES
2 NO

FIDBF04 [IF FIDBF03 =1] Please explain why you read the questions aloud and entered the respondent's answers for some or all of the ACASI module. In addition, please estimate how much of the ACASI module you administered in this way.

_____ [Field Width = 255 characters]
DK/REF

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
DK/REF

FIDBF06 How cooperative has the respondent been?

1 VERY COOPERATIVE
2 FAIRLY COOPERATIVE
3 NOT VERY COOPERATIVE
4 OPENLY HOSTILE
DK/REF

FIDBF07 Indicate on this scale of 1 through 9 how private the interview was

1 COMPLETELY PRIVATE — NO ONE WAS IN THE ROOM OR COULD OVERHEAR ANY PART OF THE INTERVIEW
2 . . .
3 MINOR DISTRACTIONS
4 . . .
5 PERSON(S) IN THE ROOM OR LISTENING ABOUT 1/3 OF THE TIME
6 . . .
7 SERIOUS INTERRUPTIONS OF PRIVACY MORE THAN HALF THE TIME
8 . . .
9 CONSTANT PRESENCE OF OTHER PERSON(S)
DK/REF

FIDBF08 [IF FIDBF07 NE 1 OR DK/REF] 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.

_____
DK/REF

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/REF

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
DK/REF

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]
DK/REF

FIEXIT End of interview reached.

PRESS 1 TO EXIT.