



***National Household Survey on Drug Abuse, 1996***

## **Bibliographic Description**

Title: National Household Survey on Drug Abuse, 1996

Alternate Title: NHSDA 1996

Principal Investigator(s): United States Department of Health and Human Services. Substance Abuse and Mental Health Services Administration. Office of Applied Studies

Funding Agency: United States Department of Health and Human Services. Substance Abuse and Mental Health Services Administration. Office of Applied Studies

Grant Number: 283-95-0002

Bibliographic Citation: United States Department of Health and Human Services. Substance Abuse and Mental Health Services Administration. Office of Applied Studies. National Household Survey on Drug Abuse, 1996. ICPSR02391-v2. Ann Arbor, MI: Inter-university Consortium for Political and Social Research [distributor], 2013-05-06. <http://doi.org/10.3886/ICPSR02391.v2>

## **Scope of Study**

Summary: This series measures the prevalence and correlates of drug use in the United States. The surveys are designed to provide quarterly, as well as annual, estimates. Information is provided on the use of illicit drugs, alcohol, and tobacco among members of United States households aged 12 and older. Questions include age at first use as well as lifetime, annual, and past-month usage for the following drug classes: marijuana, cocaine (and crack), hallucinogens, heroin, inhalants, alcohol, tobacco, and nonmedical use of prescription drugs, including psychotherapeutics. Respondents were also asked about substance abuse treatment history, illegal activities, problems resulting from the use of drugs, personal and family income sources and amounts, need for treatment for drug or alcohol use, criminal record, and needle-sharing. Questions on mental health and access to care, which were introduced in the 1994-B questionnaire (see NATIONAL HOUSEHOLD SURVEY ON DRUG ABUSE, 1994), were retained in this administration of the survey. In 1996, the section on risk/availability of drugs was reintroduced, and sections on driving behavior and personal behavior were added. Demographic data include gender, race, age, ethnicity, marital status, educational level, job status, income level, veteran status, and current household composition.

Subject Term(s): alcohol abuse, alcohol consumption, amphetamines, barbiturates, cocaine, crime, demographic characteristics, drug abuse, drug use, drugs, hallucinogens, health care, health insurance, heroin, HIV, households, inhalants, marijuana, mental health, mental health services, methamphetamine, prescription drugs, smoking, stimulants, substance abuse, substance abuse treatment, tranquilizers, youths

Geographic Coverage: United States

Time Period: 1996

Date(s) of Collection: 1996

Unit of Observation: individual

Universe: The civilian, noninstitutionalized population of the United States aged 12 and older, including residents of noninstitutional group quarters, such as college dormitories, group homes, shelters, rooming houses, and civilians dwelling on military installations.

Data Type: survey data

Data Collection Notes: Data were collected by Research Triangle Institute, Research Triangle Park, NC, and prepared for release by National Opinion Research Center, Chicago, IL.

The National Household Survey on Drug Abuse questionnaire and estimation methodology changed with the implementation of the 1994-B survey. Therefore, estimates produced from the 1996 survey are not comparable to those produced from the 1994-A and earlier surveys.

For selected variables, statistical imputation was performed following logical imputation to replace missing responses. These variables are identified in the codebook as "...LOGICALLY IMPUTED" and "...imputed" for the logical procedure or by the designation "IMPUTATION-REVISED" in the variable label when the statistical procedure was also performed. The names of statistically imputed variables begin with the letters "IR". For each imputation-revised variable there is a corresponding imputation indicator variable that indicates whether a case's value on the variable resulted from an interview response or was imputed by the hot-deck technique. Hot-deck imputation is described in the codebook.

The "basic sampling weights" are equal to the inverse of the probabilities of selection of sample respondents. To obtain "final NHSDA weights," the basic weights were adjusted to take into account dwelling unit-level and individual-level nonresponse and then further adjusted to ensure consistency with intercensal population projections from the United States Bureau of the Census.

To protect the anonymity of respondents, all variables that could be used to identify individuals have been encrypted or collapsed in the public use file. These modifications should not affect analytic uses of the public use file.

Users who wish to replicate results published in the NHSDA Main Findings Report or other SAMHSA reports should use the 1996 NHSDA imputed data for prevalence estimates rather than raw data from the questionnaire or drug answer sheets.

Family and personal income range variables were constructed from two imputation-revised variables that were deleted from the public use dataset and codebook due to confidentiality issues. Users are advised that the recoded income range variables cannot be replicated from the imputation-revised variables (IRFINC1 and IRPINC1) contained in the public use file.

For some drugs that have multiple names, questions regarding the use of that drug may be asked for each distinct name. For example, even though methamphetamine, methedrine and desoxyn are the same drug, their use was measured in three separate variables.

## **Methodology**

**Sample:** Multistage area probability sample design involving five selection stages: (1) primary sampling units areas (e.g., counties), (2) subareas within primary areas (e.g., blocks or block groups), (3) listing units within subareas, (4) domains within sampled listing units, and (5) eligible individuals within sampled domains. A total of 115 Primary Sampling Units (PSUs), including areas of high Hispanic concentration, were selected to represent the total United States population. These PSUs were defined as metropolitan areas, counties, groups of counties, and independent cities. Of the 115 PSUs, 43 were selected with certainty and 72 were randomly selected with probability proportional to size. Unlike the previous NHSDAs, the 1996 NHSDA did not oversample cigarette smokers aged 18-34. A design feature of the 1996 NHSDA is the overlap with segments previously surveyed in the 1995 NHSDA. About 95 percent of 1995 sample segments were screened again in 1996 to identify and sample occupied dwelling units in these segments that had not previously been interviewed in the 1995 NHSDA. The reuse of 1995 NHSDA segments reduced the overall costs of counting and listing dwelling units in the 1996 NHSDA and also modestly increased the precision of comparisons between the 1995 and 1996 NHSDAs. The five age groups were: ages 12-17, 18-25, 26-34, 35-49, and 50 and older. The three race/ethnic groups were: Whites/others, Blacks, and Hispanics. Blacks and Hispanics were oversampled. The study yielded an 84.9 percent eligibility rate for sample households and a 92.7 percent completion rate for screening eligible households.

**Mode of Data collection:** -

**Extent of Processing:** Performed consistency checks. Standardized missing values. Created online analysis version with question text. Checked for undocumented or out-of-range codes.

## **Access and Availability**

Note: Some instruments administered as part of this study may contain contents from copyrighted instruments. Reproductions of the instruments are provided solely as documentation for the analysis of the data associated with this collection. Please contact the data producers for information on permissions to use the instruments for other purposes.

Restrictions: Users are reminded by the United States Department of Health and Human Services that these data are to be used solely for statistical analysis and reporting of aggregated information and not for the investigation of specific individuals or treatment facilities.

Original Release: 1998-06-11

Version History: The last update of this study occurred on 2013-05-06.

2013-05-06 - Data collection instrument released.

2008-10-23 - New files were added. These files included one or more of the following: Stata setup, SAS transport (CPORT), SPSS system, Stata system, SAS supplemental syntax, and Stata supplemental syntax files, and tab-delimited ASCII data file. Modified value labels and missing values for variable GQTYPE to correct previous errors. The variable CASEID was also added to the dataset.

Dataset(s): DS1: National Household Survey on Drug Abuse, 1996