National Household Survey on Drug Abuse, 1999

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

Computer-Assisted Interview Specifications
## Content of 1999 NHSDA Instrument

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* CAPI (computer-assisted personal interviewing): FI reads questions and records responses.

** ACASI (audio computer-assisted self-interviewing): Respondent reads questions on screen or listens to questions through headphones and then records answers into computer.
1999 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 3.2

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 55 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

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 ENDAUDIO

FIXAGE  [IF CONFIRM = 2] INTERVIEWER: USE THE [F9] KEY TO BACKUP TO THE SCREEN LABELED AGE1 AND CORRECT THE RESPONDENT'S DATE OF BIRTH.

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 ENDAUDIO

1
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 ENDAUDIO

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

FIPE1  INTERVIEWER: WERE 2 PERSONS SELECTED FOR AN INTERVIEW AT THIS SDU?
   1  YES
   2  NO

FIPE2  [IF FIPE1 = 1 AND CURNTAGE = 18 OR OLDER] INTERVIEWER: WAS A 12 - 17 YEAR OLD CHILD SELECTED FOR AN INTERVIEW AT THIS SDU?
   1  YES
   2  NO

FIPE3  [IF FIPE2 = 1 OR (FIPE1 = 1 AND CURNTAGE = 12 - 17)] INTERVIEWER: IS THIS RESPONDENT THE PARENT OR LEGAL GUARDIAN OF THE 17 - 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.
   1  MALE
   2  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 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

QD04OTH  [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.
SELECT.

1 WHITE
2 BLACK / AFRICAN AMERICAN
3 AMERICAN INDIAN OR ALASKA NATIVE
4 NATIVE HAWAIIAN
5 OTHER PACIFIC ISLANDER
6 CHINESE
7 FILIPINO
8 JAPANESE
9 ASIAN INDIAN
10 KOREAN
11 VIETNAMESE
12 OTHER ASIAN
13 OTHER (SPECIFY)
DK/REF

QD05OTH [IF QD05 = 13] SPECIFY OTHER RACIAL GROUP

DK/REF

DEFINE RACEFILL:
RACEFILL = RESPONSES GIVEN IN QD05 AND TEXT FROM QD05OTH 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, 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
4 NATIVE HAWAIIAN
5 OTHER PACIFIC ISLANDER
6 CHINESE
7 FILIPINO
8 JAPANESE
9 ASIAN INDIAN
10 KOREAN
11 VIETNAMESE
12 OTHER ASIAN
13 IF QD05 = 13, FILL TEXT FROM QD05OTH
   IF QD05 NE 13 FILL WITH “OTHER (SPECIFY)”
DK/REF

[NOTE: ONLY CODES FOR RESPONSE CATEGORIES ENTERED IN QD05 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] Which of the following best describes your current marital status? Are you 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 ENDAUDIO]

QD11  HAND R SHOWCARD 3. 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?
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<tr>
<td>1</td>
<td>EXCELLENT</td>
</tr>
<tr>
<td>2</td>
<td>VERY GOOD</td>
</tr>
<tr>
<td>3</td>
<td>GOOD</td>
</tr>
<tr>
<td>4</td>
<td>FAIR</td>
</tr>
<tr>
<td>5</td>
<td>POOR</td>
</tr>
<tr>
<td></td>
<td>DK/REF</td>
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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

Caution respondent about on/off switch.

Adjust headphones for respondent and demonstrate volume control.

When respondent is ready, press “1” to continue.
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.

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.

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 take the headphones off.

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

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

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.)

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

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

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

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

Press [ENTER] to continue.

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

If you try to enter some other number as your answer, a small box labelled *Input Invalid* will appear on the screen. To correct your answer, you must press the [ENTER] key to make the box disappear and 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

**NOTSURE**
If you do not know the answer to a question, you can use the [F3] key to tell us that. Practice this now, but don’t press the [ENTER] key.

How many miles of paved roads are there in the United States?

1 2,012,323 miles
2 2,335,680 miles
3 2,735,297 miles
4 3,072,834 miles

**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.

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 (CG04)
2 No
DK/REF (LEADCHEW)

CG02 [IF CURNTAGE = 12 - 17] 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] At any time during the next 12 months do you think you will smoke a cigarette?

1 Definitely yes (LEADCHEW)
2 Probably yes (LEADCHEW)
3 Probably not (LEADCHEW)
4 Definitely not (LEADCHEW)
DK/REF (LEADCHEW)

CG04 How old were you the first time you smoked part or all of a cigarette?

____ years old (RANGE: 1 - 110)
DK/REF (CG5)

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 (CGCC04)
DK/REF (CG05)

CGCC02 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 (CG05)

CGCC03 [IF CGCC02 = 2 OR CGCC02 = 3] Please answer this question again. What is your current age?

AGE: _______ [RANGE 1 - 110]
DK/REF (CG05)

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 (CG05)

IF CGCC04 NOT(BLANK OR DK/REF) THEN CIGAGE = CGCC04

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 (CG04a)
2 No
DK/REF (CG05)

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 (CG05)

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 (CG04d)
2 CURRENT YEAR (CG04d)
DK/REF (CG05)

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 (CG04d)
2 CURRENT YEAR - 1 (CG04d)
DK/REF (CG05)

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 (CG05)

SKIP TO (CG05)

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

CG04d 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
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 cigarette?

1. Yes (CG07)
2. No

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 (CG15)
2. More than 12 months ago but within the past 3 years (CG15)
3. More than 3 years ago (CG15)

[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)

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

On the CG07 OR CG07a FILL days 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)

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)
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? (ALTERNATE WORDING FOR 2ND AND 3RD PASS THRU: 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

(CG11)

(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? (ALTERNATE WORDING FOR 2ND AND 3RD PASS THRU: 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)

(CG11a)

(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 (CG14)

(CG12)

(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

(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

(CG15)

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

1. Yes
2. No (CG16a)
DK/REF (CG16a)

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

_____ years old (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 (CGCC10)
DK/REF (CG16a)

CGCC08 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 (CG16a)

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?

_____ years old (RANGE: 1-110)
DK/REF (CG16a)

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?

_____ years old (RANGE: 1-110)
DK/REF (CG16a)

IF CGCC09 NOT (BLANK OR DK/REF) THEN CIGAGE = XGCC09

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

CG16a Have you smoked at least 100 cigarettes in your entire life?

1. Yes
2. No
DK/REF
LEADCHEW The next questions are about chewing tobacco and snuff.

**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.

**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.

CG17 The next questions are only about **chewing tobacco**. Have you **ever** used chewing tobacco, even once?

1 Yes
2 No (CG25b)
DK/REF (CG25b)

CG18 How old were you the **first time** you used chewing tobacco?

_____ years old (RANGE: 1 - 110)
DK/REF (CG19)

**DEFINCE 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 (CGCH04)
DK/REF (CG19)

*CGCH02 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 (CG19)

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

AGE: _____ [RANGE 1 - 110]
DK/REF (CG19)

**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 (CG19)

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

IF CGCH03 NOT(BLANK OR DK/REF) THEN CURNTAGE = CGCH04

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 (CG18a)
CGCH06 [IF CGCH05 = 2] Please answer this question again. How old were you the first time you used chewing tobacco?

AGE: [RANGE 1 - 110]

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 (CG18d)
2 CURRENT YEAR (CG18d)

DK/REF (CG19)

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 (CG18d)
2 CURRENT YEAR - 1 (CG18d)

DK/REF (CG19)

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 (CG19)

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

CG18d 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)

CG19. Now think about the past 30 days -- that is, from DATEFILL up to and including today. During the past 30 days,
have you used chewing tobacco, even once?

1 Yes (CG21)
2 No
DK/REF (CG25a)

CG20. How long has it been since you last used chewing tobacco?

1 More than 30 days ago but within the past 12 months (CG25a)
2 More than 12 months ago but within the past 3 years (CG25a)
3 More than 3 years ago (CG25a)
DK/REF (CG25a)

CG21. 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 (CG22)

CG22. During the past 30 days, what brand of chewing tobacco did you use most often? (ALTERNATE WORDING FOR 2nd AND 3rd PASS THRU: 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 (CG25a)

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 (CG25a)
DK/REF (CG25a)

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 (Respondent will be cycled through the CG22, 23, 24 series a maximum of three times using the alternate wording for CG22 and the same wording for CG23 and CG24)

DK/REF (CG25a)

CG25a [IF CG17 = 1] 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 (CG34)
2 No
DK/REF (CG34)

CG25b [IF CG17 = 2 OR DK/REF] These next questions are about your use of snuff, sometimes called dip. Have you ever used snuff, even once?

1 Yes (CG34)
2 No
DK/REF (CG34)
CG26  [IF CG25a OR CG25b = 1] How old were you the first time you used snuff?

_________ years old  (RANGE: 1 - 110)

DK/REF (CG27)

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  (CGSN04)

DK/REF (CG27)

CGSN02 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 (CG27)

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

AGE: _______ [RANGE 1 - 110]

DK/REF (CG27)

CGSN03a [IF CGSN03 < 12] Since you have indicated that you are CGSN03 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 - 90]

DK/REF (CG27)

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

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  (CG26a)
2  No  (CG27)

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 (CG27)

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  (CG26d)
2  CURRENT YEAR  (CG26d)

DK/REF (CG27)

CG26b [IF SNUFFAGE = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use snuff in [CURRENT YEAR - 2] or [CURRENT YEAR - 1]?
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 (CG27)

SKIP TO (CG27)

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

CG26d  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)

CG27  Now think about the past 30 days -- that is, from DATEFILL up to and including today. During the past 30 days, have you used snuff, even once?

1. Yes (CG29)
2. No

DK/REF (CG34)

CG28  How long has it been since you last used snuff?

1. More than 30 days ago but within the past 12 months (CG34)
2. More than 12 months ago but within the past 3 years (CG34)
3. More than 3 years ago (CG34)

DK/REF (CG34)

CG29  During the past 30 days, that is since DATEFILL, on how many days did you use snuff?

# of days  (RANGE: 1 - 30)

DK/REF (CG30)

CG30  During the past 30 days, what brand of snuff did you use most often? (ALTERNATE WORDING FOR 2nd AND 3rd PASS THRU: Please review this list again. During the past 30 days, what brand of snuff did you use most often?)

1. Copenhagen
2. Gold River
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 (CG34)

DK/REF (CG34)

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 (Respondent will be cycled through the CG30, 31, 32 series a maximum of 3 times using the alternate wording in CG30 and the same wording in CG31 and CG32.)

DK/REF (CG34)

CG33a [IF CG22 = 1-11 AND CG30 = 1-9] The computer recorded that the chewing tobacco you used most often during the past 30 days was **CG22 FILL** and that the snuff you used most often during the past 30 days was **CG30 FILL**. Which of these two brands did you use **most often** during the past 30 days?

1. The CG22 FILL brand of chewing tobacco
2. The CG30 FILL brand of snuff

DK/REF

CG33b [IF cg23 NOT(BLANK OR DK/REF) AND cg30 = 1 - 9] You typed in the following name as the brand of chewing tobacco you used most often during the past 30 days: **cg23 FILL**. The computer also recorded that the snuff you used most often during the past 30 days was **cg30 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 FILL
2. The cg30 brand of snuff

DK/REF

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

1. The Q22 brand of chewing tobacco
2. The brand of snuff you typed into the computer yourself — Q31 FILL

DK/REF

CG33d [IF CG23 NOT(BLANK OR DK/REF) AND CG31 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 FILL**. You also typed the name of the snuff you used most often during the past 30 days as: **CG31 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 — CG23 FILL
2. The brand of snuff you typed into the computer yourself — CG31 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
CG35  How old were you the first time you smoked part or all of any type of cigar?

______ years old  (RANGE: 1 - 110)

DEFINE CIGARAGE:  
CIGARAGE = CG35

IF CURNTAGE < CIGARAGE
   CGCG01 The computer recorded that you were CIGARAGE when you first smoked part or all of a cigar. Is this correct?
   1  Yes  
   2  No  (CGCG04)

CGCG02 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

CGCG03.  [IF CGCG02 = 2 OR CGCG02 = 3] Please answer this question again. What is your current age?

AGE: _______  [RANGE 1 - 110]

CGCG03a  [IF CGCG03 < 12] Since you have indicated that you are CGCG03 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.

CGCG04.  [IF CGCG02 = 1 OR CGCG02 = 3 OR CGCG01 = 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]

IF CGCG04 NOT(BLANK OR DK/REF) THEN CIGARAGE = CGCG04

IF CGCG03 NOT(BLANK OR DK/REF) THEN CURNTAGE = CGCG03

IF CIGARAGE = CURNTAGE OR CIGARAGE < 10:
   CGCG05 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  (CG36)
      2  No  (CG36)

CGCG06.  [IF CGCG05 = 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]

IF CGCG06 NOT(BLANK OR DK/REF) THEN CIGARAGE = CGCG06

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 (CG35d)
2 CURRENT YEAR (CG35d)
DK/REF (CG36)

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 (CG35d)
2 CURRENT YEAR - 1 (CG35d)
DK/REF (CG36)

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 (CG36)

SKIP TO (CG36)

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

CG35d 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)

CG36. 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 any type of cigar?

1 Yes (CG38)
2 No
DK/REF (CG42)

CG37. 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 (CG42)
2 More than 12 months ago but within the past 3 years (CG42)
3 More than 3 years ago (CG42)
DK/REF (CG42)
### CG38
During the past 30 days, that is since **DATEFILL**, on how many **days** did you smoke part or all of a cigar?

<table>
<thead>
<tr>
<th># of days (RANGE 1-30)</th>
<th>DK/REF (CG39)</th>
</tr>
</thead>
</table>

### CG38a
**[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.
During the past 30 days, what brand of cigars did you smoke **most often**? (ALTERNATE WORDING FOR 2nd AND 3rd PASS THRU: Please review this list again. During the past 30 days, what brand of cigars did you smoke **most often**?)

<table>
<thead>
<tr>
<th>Brand Name</th>
<th>CG39</th>
</tr>
</thead>
<tbody>
<tr>
<td>Antonio y Cleopatra</td>
<td>1</td>
</tr>
<tr>
<td>Backwoods</td>
<td>2</td>
</tr>
<tr>
<td>Bering</td>
<td>3</td>
</tr>
<tr>
<td>Black &amp; Mild</td>
<td>4</td>
</tr>
<tr>
<td>Captain Black</td>
<td>5</td>
</tr>
<tr>
<td>Casa Silva</td>
<td>6</td>
</tr>
<tr>
<td>Cuesta-Rey</td>
<td>7</td>
</tr>
<tr>
<td>Dutch Masters</td>
<td>8</td>
</tr>
<tr>
<td>El Producto</td>
<td>9</td>
</tr>
<tr>
<td>Erik Filter</td>
<td>10</td>
</tr>
<tr>
<td>Garcia y Vega</td>
<td>11</td>
</tr>
<tr>
<td>Havatampa</td>
<td>12</td>
</tr>
<tr>
<td>King Edward</td>
<td>13</td>
</tr>
<tr>
<td>La Corona</td>
<td>14</td>
</tr>
<tr>
<td>Little Nippers</td>
<td>15</td>
</tr>
<tr>
<td>Macanudos</td>
<td>16</td>
</tr>
<tr>
<td>Muriel</td>
<td>17</td>
</tr>
<tr>
<td>Partagas</td>
<td>18</td>
</tr>
<tr>
<td>Phillies</td>
<td>19</td>
</tr>
<tr>
<td>Rigoletto</td>
<td>20</td>
</tr>
<tr>
<td>Robert Burns</td>
<td>21</td>
</tr>
<tr>
<td>Roi-Tan</td>
<td>22</td>
</tr>
<tr>
<td>Swisher Sweets</td>
<td>23</td>
</tr>
<tr>
<td>Tijuana Smalls</td>
<td>24</td>
</tr>
<tr>
<td>Universal</td>
<td>25</td>
</tr>
<tr>
<td>White Owl</td>
<td>26</td>
</tr>
<tr>
<td>William Penn</td>
<td>27</td>
</tr>
<tr>
<td>Winchester</td>
<td>28</td>
</tr>
<tr>
<td>A brand not on this list</td>
<td>29</td>
</tr>
</tbody>
</table>

DK/REF (CG42)

### 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.

### 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 (Respondent will be cycled through the CG39, 40, 41 series a maximum of 3 times using the alternate wording for CG39 and the same wording for CG40 and CG41)

DK/REF (CG42)

### 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 **(ALCINTR1)**

DK/REF

### CG43
During the past 30 days, that is since **DATEFILL**, have you smoked tobacco in a pipe, even once?

1. Yes
2. No

DK/REF
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
- Lite or light beer
- Low-alcohol (LA) beer
- Malt liquor
- Ale
- Stout
- Lager
- Sherry
- Homemade wines, such as muscadine, scuppernong, or fruit wines
- Fortified wines, such as Cisco

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

**Liquor**
- Bourbon
- Scotch
- Gin
- Tequila
- Rum
- Vodka
- 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.

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.

**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

**AL02.** 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 - 90]

DK/REF

DEFINE AGE1STAL:

AGE1STAL = AL02

IF CURNTAGE < AGE1STAL:

ALCC1 The computer recorded that you were [AGE1STAL] when you first drank an alcoholic beverage.
Is this correct?

1  Yes → ALCC4
2  No → ALLAST3

DK/REF → ALLAST3

ALCC2  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 → ALLAST3

ALCC3  [IF ALCC2=2 OR ALCC2=3] Please answer this question again. What is your current age?

AGE: ______

DK/REF → ALLAST3

ALCC3a  [IF ALCC3 < 12] Since you have indicated that you are [ALCC3] 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.

ALCC4  [IF ALCC2=1 OR ALCC2=3 OR ALCC1=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 - 90]

DK/REF → ALLAST3

IF ALCC4 NOT (BLANK OR DK/REF) THEN AGE1STAL = ALCC4

IF ALCC3 NOT (BLANK OR DK/REF) THEN CURNTAGE = ALCC3

IF AGE1STAL = CURNTAGE OR AGE1STAL < 10:

ALCC5  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 → AL02a
2  No

DK/REF → ALLAST3

ALCC6  [IF ALCC5=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 - 90]

DK/REF → ALLAST3

IF ALCC6 NOT (BLANK OR DK/REF) THEN AGE1STAL = ALCC6

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]?
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  AL02d  
2  CURRENT YEAR - 1  AL02d  
DK/REF ALLAST3  

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 ALLAST3  

SKIP TO ALLAST3  

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

AL02d  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  

ALLAST3  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  MJINTRO  
DK/REF MJINTRO  

ALFRAME3  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  ALWKAVE
2 Average number of **days per month** during the past 12 months

3 Total number of days during the past 12 months

**DK/REF** \(\rightarrow\) **ALYRAVE**

**ALYRAVE**

On how many days in the past 12 months did you drink an alcoholic beverage?

**TOTAL # OF DAYS:** _______ [**RANGE 1 - 366**] \(\rightarrow\) A

**DK/REF** \(\rightarrow\) **ALMONAVE**

**ALMONAVE**

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**] \(\rightarrow\) A

**DK/REF** \(\rightarrow\) **ALWKAVE**

**ALWKAVE**

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** \(\rightarrow\) A

A: **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** \(\rightarrow\) **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] Think specifically about the past 30 days — that is, since **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** \(\rightarrow\) **AL07**

**DEFINE 30DALC**

30DALC = AL06

**IF TOTDRINK NOT DK/REF AND 30DALC > TOTDRINK:**

**ALCC17** *For the last question, the computer recorded that you drank one or more alcoholic beverages on [30DALC FILL] of the past 30 days. Is this correct?*

1 Yes \(\rightarrow\) **ALCC18**

2 No \(\rightarrow\) **ALCC23**

**DK/REF** \(\rightarrow\) **AL07**
ALCC18 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] → ALCC23
2. I drank alcohol on [30DALC] days in the past 30 days
3. Neither answer is correct

DK/REF → AL07

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 → ALCC22
2. Average number of days per month during the past 12 months → ALCC21
3. Total number of days during the past 12 month

DK/REF → AL07

ALCC20 On how many days in the past 12 months did you drink an alcoholic beverage?

TOTAL # OF DAYS: _____ [RANGE 1 - 366] → ALCC22a

DK/REF → ALCC22a

ALCC21 On average, how many days did you drink an alcoholic beverage each month during the past 12 months?

# OF DAYS/MONTH: _____ [RANGE 1 - 31] → ALCC22a

DK/REF → ALCC22a

ALCC22 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 → ALCC22a

ALCC22a:
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

IF ALCC18=2 → AL07

ALCC23 [IF ALCC17=2 OR ALCC18 = 1 OR ALCC18 =3] Please answer this question again. Think specifically about the past 30 days — that is, since [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]

0 → NEXT SECTION

DK/REF → AL07
ALCC23
UPDATE 30DALC
IF ALCC23 NOT (BLANK OR DK/REF) THEN 30DALC = ALCC23

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

  1 Yes  → MRJINTRO
  2 No    → MRJINTRO
  DK/REF → MRJINTRO

ALCC26 During the past 30 days, that is since [DATE FILL], on how many days did you drink one or more drinks of an alcoholic beverage?

  # OF DAYS: _____ [RANGE 0 - 30]
  0 → NEXT SECTION
  DK/REF → AL07

ALCC26a
UPDATE 30DALC
IF ALCC26 NOT (BLANK OR DK/REF) THEN 30DALC = ALCC26

AL07 [IF ALLAST3 = 1 AND 30DALC NE DK/REF OR 1] On the [30DALC] 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 ALLAST3 = 1 AND 30DALC = 1] On the [30DALC] day 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 ALLAST3 = 1 AND 30DALC = 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

AL08 [IF ALLAST3 =1] 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 → MRJINTRO

IF AL08 > 30DALC:
  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  → ALCC30
  DK/REF → MRJINTRO

ALCC28 The answers for the last question and an earlier question disagree. Which answer is correct?

  1 I drank one or more alcoholic beverages on [30DALC] days in the past 30
2 I drank 5 or more alcoholic beverages on [AL08] days in the past 30 days

3 Neither answer is correct

ALCC29 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]

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]
Marijuana

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 → COCINTRO

DK/REF → COCINTRO

MJ02. How old were you the first time you used marijuana or hashish?

AGE: _____ [RANGE 1 - 90]

DK/REF → MJLAST3

DEFINE AGE1STMJ:
AGE1STMJ = MJ02

IF CURNTAGE < Age1STMJ:
MJCC1 The computer recorded that you were [AGE1STMJ] when you first used marijuana or hashish. Is this correct?

1. Yes
2. No → MJCC4

DK/REF → MJLAST3

MJCC2. The answers for the last question and an earlier question disagree. Which answer is correct?

1. I am currently [CURNTAGE] years old → MJCC4
2. I was [AGE1STMJ] years old the first time I used marijuana or hashish
3. Neither answer is correct

DK/REF → MJLAST3

MJCC3. IF MJCC2=2 OR MJCC2=3 Please answer this question again. What is your current age?

AGE: _____

DK/REF → MJLAST3

MJCC3a IF MJCC3 < 12 Since you have indicated that you are [MJCC3] 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.

MJCC4. IF MJCC2=1 OR MJCC2=3 OR MJCC1=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 - 90]

DK/REF → MJLAST3

IF MJCC NOT(BLANK OR DK/REF) THEN AGE1STMJ = MJCC4

IF MJCC3 NOT(BLANK OR DK/REF) THEN CURNTAGE = MJCC3
IF AGE1STMJ = CURNTAGE OR AGE1STMJ < 10:

MJCC5. The computer recorded that you were [AGE1STMJ] years old the first time you used marijuana or hashish. Is this correct?

1 Yes → MJ03a
2 No

DK/REF → MJLAST3

MJCC6. [IF MJCC5=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 - 90]

DK/REF → MJLAST3

IF MJCC6 NOT(BLANK OR DK/REF) THEN AGE1STMJ = MJCC6

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 (MJ03d)
2 CURRENT YEAR (MJ03d)

DK/REF (MJLAST3)

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 (MJ03d)
2 CURRENT YEAR - 1 (MJ03d)

DK/REF (MJLAST3)

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 (MJLAST3)

SKIP TO (MJLAST3)

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

MJ03d 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
MJLAST3. 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 → COCINTRO

DK/REF → COCINTRO

MJFRAME3. 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 → MJWKAVE
2. Average number of days per month during the past 12 months → MJMONAVE
3. Total number of days during the past 12 months

DK/REF → MJYRAVE

MJYRAVE On how many days in the past 12 months did you use marijuana or hashish?

TOTAL # OF DAYS:_______ [RANGE 1 - 366] → MJ06

DK/REF → MJMONAVE

MJMONAVE 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] → MJ06

DK/REF → MJWKAVE

MJWKAVE. 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

MJ06 [IF MJLAST3=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 → COCINTRO

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 > TOTMJ:

MJCC7 For the last question, the computer recorded that you used marijuana or hashish on [MJ06 FILL]
of the past 30 days. Is this correct?

1 Yes
2 No → MJCC13

DK/REF → COCINTRO

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 TOTMJ days”
ELSE FILLMJA = BLANK

MJCC8 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] days in the past 30 days
3 Neither answer is correct

DK/REF → COCINTRO

MJCC9 [IF MJCC8 = 2 OR MJCC8 = 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 → SKIP TO MJCC12
2 Average number of days per month during the past 12 months → SKIP TO MJCC11
3 Total number of days during the past 12 months

DK/REF → COCINTRO

MJCC10 On how many days in the past 12 months did you use marijuana or hashish?

TOTAL # OF DAYS: _____ [RANGE 1 - 366] → MJCC12a

DK/REF → MJCC12a

MJCC11 On average, how many days did you use marijuana or hashish each month during the past 12 months?

# OF DAYS/MONTH: _____ [RANGE 1 - 31] → MJCC12a

DK/REF → MJCC12a

MJCC12 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 → MjcC12a
MJCC12a:

\[
\begin{align*}
&\text{IF MJCC10 NOT(BLANK OR DK/REF) THEN TOTMJ = MJCC10} \\
&\text{ELSE IF MJCC11 NOT(BLANK OR DK/REF) THEN TOTMJ = MJCC11*12} \\
&\text{ELSE IF MJCC12 NOT(BLANK OR DK/REF) THEN TOTMJ = MJCC12*52} \\
&\text{ELSE TOTMJ = DK/REF}
\end{align*}
\]

**IF MJCC8 = 2 SKIP TO COCINTRO**

**MJCC13** [IF MJCC7=2 OR MJCC8 = 1 OR MJCC8 = 3] Please answer this question again. Think specifically about the past 30 days — that is, since [FILL DATE], up to and including today. During the past 30 days, on how many days did you use marijuana or hashish?

\[
\begin{align*}
\text{# OF DAYS: } &\quad \text{[RANGE 0 - 30]} \\
0 &\quad \rightarrow \text{COCINTRO} \\
\text{DK/REF} &\quad \rightarrow \text{COCINTRO}
\end{align*}
\]

**IF MJ06 = 0:**

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

\[
\begin{align*}
1 &\quad \text{Yes} \quad \rightarrow \text{COCINTRO} \\
2 &\quad \text{No} \quad \rightarrow \text{MJCC16} \\
\text{DK/REF} &\quad \rightarrow \text{COCINTRO}
\end{align*}
\]

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

\[
\begin{align*}
\text{# OF DAYS: } &\quad \text{[RANGE 0 - 30]} \\
0 &\quad \rightarrow \text{COCINTRO} \\
\text{DK/REF} &\quad \rightarrow \text{COCINTRO}
\end{align*}
\]
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

HEINTRO

CC02. How old were you the first time you used cocaine, in any form?

AGE: [RANGE 1 - 90]

DK/REF

CCLASS3

DEFINE AGE1STCN:

AGE1STCN = CC02

IF CURNTAGE < AGE1STCN:

CCCC01 The computer recorded that you were [AGE1STCN] when you first used cocaine. Is this correct?

1 Yes
2 No

DK/REF

CCCC04

CCCC02 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 [AGE1STCN] years old the first time I used cocaine
3 Neither answer is correct

DK/REF

CC04

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

AGE:

DK/REF

CCCC03a [IF CCCC3 < 12] Since you have indicated that you are [CCCC3 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 - 90]

DK/REF

CC04

IF CCCC04 NOT(BLANK OR DK/REF) THEN AGE1STCN = CCCC04

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

IF AGE1STCN=CURNTAGE OR AGE1STCN < 10:

CCCC05 The computer recorded that you were [AGE1STCN] years old the first time you used cocaine. Is
CCCC06 [IF CCCC5=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 - 90] 

IF CCCC06 NOT (BLANK OR DK/REF) THEN AGE1STCN = CCCC06

CC03a [IF AGE1STCN = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STCN = 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 (CC03d)
2 CURRENT YEAR (CC03d)
DK/REF (CCLAST3)

CC03b [IF AGE1STCN = 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 (CC03d)
2 CURRENT YEAR - 1 (CC03d)
DK/REF (CCLAST3)

CC03c IF AGE1STCN = 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 (CCLAST3)

SKIP TO (CCLAST3)

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

CC03d 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)

CCLAST3. 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 → CKINTRO

CCFRAME3

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 → CC08
2. Average number of days per month during the past 12 months → CCMONAVE
3. Total number of days during the past 12 months

DK/REF → CCYRAVE

CCYRAVE

On how many days in the past 12 months did you use cocaine?

TOTAL # OF DAYS:_______ [RANGE 1 - 366] → CC06

DK/REF → CCMONAVE

CCMONAVE

On average, how many days did you use cocaine each month during the past 12 months?

AVERAGE # OF DAYS PER MONTH:_______ [RANGE 1 - 31] → CC06

DK/REF → CCWKAVE

CCWKAVE

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

CC06. [IF CCLAST3 =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 → CKINTRO

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

IF TOTCOKE = DK/REF → NEXT SECTION

IF TOTCOKE NOT DK/REF AND CC06 > TOTCOKE:

CCC07 For the last question, the computer recorded that you used cocaine on [CC06 FILL] of the past 30 days. Is this correct?

1 Yes
No → CCCC13

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
FILCNA = “for a total of [TOTCOKE] days”
ELSE FILCNA = BLANK

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] days in the past 30 days
3. Neither answer is correct

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 months

On how many days in the past 12 months did you use cocaine?

TOTAL # OF DAYS: ______ [RANGE 1 - 366] → CCCC12a

On average, how many days did you use cocaine each month during the past 12 months?

# OF DAYS/MONTH: ______ [RANGE 1 - 31] → CCCC12a

On average, how many days did you use cocaine each week during the past 12 months?

# OF DAYS PER WEEK: ______ [RANGE 1 - 7] → CCCC12a

DK/REF → CKINTRO

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 \rightarrow CKINTRO

IF CCCC08 = 2 \rightarrow CKINTRO

CCCC13 [IF CCCC7=2 OR CCCC8 = 1 OR CCCC8 = 3] Please answer this question again. Think specifically about the past 30 days — that is, since [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]
0 \rightarrow CKINTRO
DK/REF \rightarrow CKINTRO

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 \rightarrow CKINTRO
2 No \rightarrow CCCC16
DK/REF \rightarrow CKINTRO

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

# OF DAYS: _______ [RANGE 0 - 30]
0 \rightarrow CKINTRO
DK/REF \rightarrow CKINTRO
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 → HEINTRO
DK/REF → HEINTRO

CK02. How old were you the first time you used “crack?”

AGE: ______ [RANGE 1 - 90]
DK/REF → KLAST3

DEFINE AGE1STCR:
AGE1STCR = CK02

IF CURNTAGE < AGE1STCR:
CKCC01 The computer recorded that you were [AGE1STCR] when you first used “crack.” Is this correct?

1 Yes
2 No → CKCC04
DK/REF → KLAST3

CKCC02 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 [AGE1STCR] years old the first time I used “crack”
3 Neither answer is correct
DK/REF → KLAST3

CKCC03 [IF CKCC02=2 OR CKCC02=3] Please answer this question again. What is your current age?

AGE: ______
DK/REF → KLAST3

CKCC03a [IF CKCC03 < 12] Since you have indicated that you are [CKCC03 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 - 90]
DK/REF → KLAST3

IF CKCC04 NOT(BLANK OR DK/REF) THEN AGE1STCR = CKCC04

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

IF AGE1STCR=CURNTAGE OR AGE1STCR < 10:
CKCC05 The computer recorded that you were [AGE1STCR] years old the first time you used “crack.” Is this correct?
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 - 90]

IF CKCC06 NOT(BLANK OR DK/REF) THEN AGE1STCR = 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 (CK03d)
2 CURRENT YEAR (CK03d)
DK/REF (CKLAST3)

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 (CK03d)
2 CURRENT YEAR - 1 (CK03d)
DK/REF (CKLAST3)

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 (CKLAST3)

SKIP TO (CKLAST3)

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

CK03d 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)

CKLAST3
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 → HEINTRO

DK/REF → HEINTRO

CKFRAME3
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 → CKWKAVE
2. Average number of days per month during the past 12 months → CKMONAVE
3. Total number of days during the past 12 months

DK/REF → CKYRAVE

CKYRAVE
On how many days in the past 12 months did you use “crack”?

TOTAL # OF DAYS:________[RANGE 1 - 366] → CK06

DK/REF → CKMONAVE

CKMONAVE
On average, how many days did you use “crack” each month during the past 12 months?

AVERAGE # OF DAYS PER MONTH:________[RANGE 1 - 31] → CK06

DK/REF → CKWKAVE

CKWKAVE
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

CK06.
[IF CKLAST3=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 → HEINTRO

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 > TOTCRACK:
CKCC07 For the last question, the computer recorded that you used “crack” on [CK06 FILL] of the past 30 days. Is this correct?

1. Yes
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 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] days in the past 30 days
3 Neither answer is correct

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 SKIP TO CKCC12
2 Average number of days per month during the past 12 months SKIP TO CKCC11
3 Total number of days during the past 12 month

CKCC10 On how many days in the past 12 months did you use “crack?”

TOTAL # OF DAYS: _____ [RANGE 1 - 366] CKCC12a

DK/REF CKCC12a

CKCC11 On average, how many days did you use “crack” each month during the past 12 months?

# OF DAYS/MONTH: _____ [RANGE 1 - 31] CKCC12a

DK/REF CKCC12a

CKCC12 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 CKCC12a

CKCC12a:
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
During the past 30 days, on how many days did you use “crack?”

# OF DAYS: _______ [RANGE 0 - 30]

0 → HEINTRO

DK/REF → HEINTRO

IF CKCC08 = 2 → HEINTRO

IF CK06 = 0:

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

1 Yes → HEINTRO

2 No → CKCC16

DK/REF → HEINTRO

CKCC16 During the past 30 days, that is since [DATE FILL], on how many days did you use “crack?”

# OF DAYS: _______ [RANGE 0 - 30]

0 → HEINTRO

DK/REF → HEINTRO
Heroin

HEINTRO These next questions are about heroin.

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

1 Yes 
2 No → HALINTRO

DK/REF → HALINTRO

HE02. How old were you the first time you used heroin?

AGE: ______ [RANGE 1 - 90]

DK/REF → HELAST3

DEFINE AGE1STHE:
AGE1STHE = HE02

IF CURNTAGE < AGE1STHE:

HECC1 The computer recorded that you were [AGE1STHE] when you first used heroin. Is this correct?

1 Yes
2 No → HECC4

DK/REF → HELAST3

HECC2 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 [AGE1STHE] years old the first time I used heroin
3 Neither answer is correct

DK/REF → HELAST3

HECC3 [IF HECC2=2 OR HECC2=3] Please answer this question again. What is your current age?

AGE: ______

DK/REF → HELAST3

HECC3a [IF HECC3 < 12] Since you have indicated that you are [HECC3 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.

HECC4 [IF HECC2=1 OR HECC2=3 OR HECC1=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 - 90]

DK/REF → HELAST3

IF HECC4 NOT(BLANK OR DK/REF) THEN AGE1STHE = HECC4

IF HECC3 NOT(BLANK OR DK/REF) THEN CURNTAGE = HECC3

IF AGE1STHE = CURNTAGE OR AGE1STHE<10:

HECC5 The computer recorded that you were [AGE1STHE] years old the first time you used heroin. Is this correct?
If HECC6 NOT(BLANK OR DK/REF) THEN AGE1STHE = HECC6

HE03a [IF AGE1STHE = CURNTAGE AND DATE OF INTERVIEW < DOB OR IF AGE1STHE = CURNTAGE - 1 AND DATE OF INTERVIEW ≥ DOB] Did you first use heroin in [CURRENT YEAR - 1] or [CURRENT YEAR]?

1 CURRENT YEAR - 1 (HE03d)
2 CURRENT YEAR (HE03d)
DK/REF (HELAST3)

HE03b [IF AGE1STHE = CURNTAGE - 1 AND DATE OF INTERVIEW < DOB] Did you first use heroin in [CURRENT YEAR - 2] OR [CURRENT YEAR - 1]?

1 CURRENT YEAR - 2 (HE03d)
2 CURRENT YEAR - 1 (HE03d)
DK/REF (HELAST3)

HE03c IF AGE1STHE = 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 (HELAST3)

SKIP TO (HELAST3)

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

HE03d 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 (HE-4)
HELAST3. 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 → HALINTRO

HEFRAME3. 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 → HEWKAVE
2. Average number of days per month during the past 12 months → HEMONAVE
3. Total number of days during the past 12 months

DK/REF → HEYRAVE

HEYRAVE. On how many days in the past 12 months did you use heroin?

TOTAL # OF DAYS: [RANGE 1 - 366] → HE06

DK/REF → HEMONAVE

HEMONAVE. On average, how many days did you use heroin each month during the past 12 months?

AVERAGE # OF DAYS PER MONTH: [RANGE 1 - 31] → HE06

DK/REF → HEWKAVE

HEWKAVE. 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

HE06. [IF HELAST3=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 → HALINTRO

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 > TOTHERO:

HECC7 For the last question, the computer recorded that you used heroin on [HE06 FILL] of the past 30 days. Is this correct?

1. Yes
2. No → HECC13

DK/REF → HALINTRO
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

HECC8 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] days in the past 30 days
3 Neither answer is correct

DK/REF → HALINTRO

HECC9 [IF HECC8 = 2 OR HECC8 = 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 → HECC12
2 Average number of days per month during the past 12 months → HECC11
3 Total number of days during the past 12 months

DK/REF → HALINTRO

HECC10 On how many days in the past 12 months did you use heroin?

TOTAL # OF DAYS: _____ [RANGE 1 - 366] → HECC12a

DK/REF → HECC12a

HECC11 On average, how many days did you use heroin each month during the past 12 months?

# OF DAYS/MONTH: _____ [RANGE 1 - 31] → HECC12a

DK/REF → HECC12a

HECC12 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 → HECC12a

HECC12a:
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/REF) THEN TOTHERO = HECC12*52
ELSE TOTHERO = DK/REF

IF HECC8 = 2 SKIP TO HALINTRO

HECC13 [IF HECC7=2 OR HECC8 = 1 OR HECC8 = 3] Please answer this question again. Think specifically about the past 30 days — that is, since [FILL DATE], up to and including today. During the past 30 days, on how many days did you use heroin?
HECC14 The computer recorded that you used heroin on 0 days during the past 30 days. Is this correct?

1 Yes → HALINTRO
2 No → HECC16

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

# OF DAYS: _______ [RANGE 0 - 30]
0 → HALINTRO

DK/REF → HALINTRO
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

LS01b 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

LSOTHS1 [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.

LSOTHS2  [IF LSOTHS1 NE BLANK] 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.

LSOTHS3  [IF LSOTHS2 NE BLANK] 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.

LSOTHS4  [IF LSOTHS3 NE BLANK] 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.

LSOTHS5  [IF LSOTHS4 NE BLANK] 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.

IF ANY IN LS01a TO LS01g =1: CONTINUE. OTHERWISE SKIP TO INHLINTRO.

CREATE LSFILL:
IF LS01a = 1 AND ALL OTHER LS01 ITEMS = 2 OR DK/REF, LSFILL = “LSD or any other hallucinogen”
IF LS01a = 1 AND LS01b = 1 AND ALL OTHER LS01 ITEMS = 2 OR DK/REF, LSFILL = “LSD, PCP, or any other hallucinogen”
IF LS01b = 1 AND ALL OTHER LS01 ITEMS = 2 OR DK/REF, LSFILL = “PCP or any other hallucinogen”
IF LS01a = 2 OR DK/REF AND LS01b =2 OR DK/REF AND AT LEAST ONE OTHER LS01 ITEM = 1, LSFILL = “any hallucinogen”

LS02. How old were you the first time you used [LSFILL]?

AGE:_____ [RANGE 1 - 90]

DK/REF → LSLAST

DEFINE AGE1STHA:
AGE1STHA = LS02

IF CURNTAGE < AGE1STHA:

LSCC1  The computer recorded that you were [AGE1STHA] when you first used [LSFILL]. Is this correct?

1  Yes
2  No   → LSCC4

DK/REF → LSLAST

LSCC2  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]
Neither answer is correct

**LSCC3** [IF LSCC2=2 OR LSCC2=3] Please answer this question again. What is your current age?

AGE: ________

**LSCC3a** [IF LSCC3 < 12] Since you have indicated that you are [LSCC3] 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.

**LSCC4** [IF LSCC2=1 OR LSCC2=3 OR LSCC1=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 - 90]

**LS03a** [IF AGE1STHA = CURNTAGE OR AGE1STHA <10:]

LSCC5 The computer recorded that you were [AGE1STHA] years old the first time you used [LSFILL]. Is this correct?

1 Yes → LS03a
2 No

**LS03b** [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 (LS03d)
2 CURRENT YEAR (LS03d)
DK/REF (LSLAST)

**LS03c** [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 (LS03d)
2 CURRENT YEAR - 1 (LS03d)
DK/REF (LSLAST)

**LS03e** If AGE1STHA = CURNTAGE AND DATE OF INTERVIEW ≥ DOB] In what month in [CURRENT YEAR] did you first use [LSFILL]?

1 January
2 February
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

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

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

On how many days in the past 12 months did you use [LSFILL]?

TOTAL # OF DAYS:________ [RANGE 1 - 366]

On average, how many days did you use [LSFILL] each month during the past 12 months?

AVERAGE # OF DAYS PER MONTH:________ [RANGE 1 - 31]
On average, how many days did you use [LSFILL] each week during the past 12 months?

AVERAGE # OF DAYS PER WEEK: ________ [RANGE 1 - 7]

[IF LSLAST=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]

For the last question, the computer recorded that you used [LSFILL] on [LS06 FILL] of the past 30 days. Is this correct?

1  Yes
2  No  → LSCC13

The answers for the last question and an earlier question disagree. Which answer is correct?

1  I used [LSFILL] on [FILLHAL] in the past 12 months [FILLHALA]
2  I used [LSFILL] on [LS06] days in the past 30 days
3  Neither answer is correct

[IF LSCC8 = 2 OR LSCC8 = 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  → SKIP TO LSCC22
2  Average number of days per month during the past 12 months  → SKIP TO LSCC21
3  Total number of days during the past 12 months

→ LOGIC1
LSCC10 On how many days in the past 12 months did you use [LSFILL]? 

TOTAL # OF DAYS: _____ [RANGE 1 - 366] → LSCC12a

DK/REF → LSCC12a

LSCC11 On average, how many days did you use [LSFILL] each month during the past 12 months?

# OF DAYS/MONTH: _____ [RANGE 1 - 31] → LSCC12a

DK/REF → LSCC12a

LSCC12 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 → LSCC12a

LSCC12a:

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) THEN TOTHALL=LSCC12*52
ELSE TOTHALL = DK/REF

IF LSCC8 = 2 SKIP TO LOGIC1

LSCC13 [IF LSCC8 = 1 OR LSCC8 = 3] Please answer this question again. Think specifically about the past 30 days — that is, since [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]

0 → LOGIC1

DK/REF → LOGIC1

IF LS06 = 0:

LSCC14 The computer recorded that you used [LSFILL] on 0 days during the past 30 days. Is this correct?

1 Yes → LOGIC1
2 No → LSCC16

DK/REF → LOGIC1

LSCC16 During the past 30 days, that is since [DATE FILL], on how many days did you use [LSFILL]?

# OF DAYS: _____ [RANGE 0 - 30]

0 → LOGIC1

DK/REF → LOGIC1

LOGIC1: IF LS01A=1 AND LS01B THRU LS01H ALL = 2 GOTO NEXT SECTION

LS07 [IF LS01a=1] Now 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 → LOGIC2
IF LS07 < LSLAST:

LSCC17 The computer recorded that you last used LSD [LS07 FILL]. Is this correct?

1 

Yes → LSCC18

2 

No → LSCC20

DK/REF → LOGIC2

LSCC18 The answers for the last question and an earlier question disagree. Which answer is correct?

1 

I last used a hallucinogen [LSLAST FILL]

2 

I last used LSD [LS07 FILL]

3 

Neither answer is correct

DK/REF → LOGIC2

LSCC19 [IF LSCC18 = 2 OR LSCC18 = 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 → LOGIC2

LSCC20 [IF LSCC17 = 2 OR LSCC18 = 1 OR LSCC18 = 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 → LOGIC2

LOGIC2: IF LS01b=1 AND LS01a=2 AND LS01c THRU LS01g ALL = 2 GO TO INHLINTRO

LS08 [IF LS01b=1] Now 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 → INHLINTRO

IF LS08 < LSLAST:

LSCC21 The computer recorded that you last used PCP [LS08 FILL]. Is this correct?

1 

Yes → LSCC22

2 

No → LSCC24

DK/REF → INHLINTRO

LSCC22 The answers for the last question and an earlier question disagree. Which answer is correct?

1 

I last used a hallucinogen [LSLAST FILL]

2 

I last used PCP [LS08 FILL]

3 

Neither answer is correct

DK/REF → INHLINTRO
LSCC23 [IF LSCC22 = 2 OR LSCC22 = 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 → INHLINTRO

LSCC24 [IF LSCC21 = 2 OR LSCC22 = 1 OR LSCC22 = 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 → INHLINTRO
Inhalants

INHLINTRO 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

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?
Have you **ever**, even once, inhaled spray paints for kicks or to get high?

1. Yes
2. No

Have you **ever**, even once, inhaled some other aerosol spray for kicks or to get high?

1. Yes
2. No

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

If IN01 = 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.

___

[IF IN01OTH1 NE BLANK] 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.

___

[IF IN01OTH2 NE BLANK] 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.

___

[IF IN01OTH3 NE BLANK] 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.

___

[IF IN01OTH4 NE BLANK] 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.

___

[IF IN01OTH5 NE BLANK] 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.

___

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 - 90]

DK/REF → INLAST
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 → INCC4
DK/REF → INCC4

INCC02 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 → INLAST

INCC03 [IF INCC02=2 OR INCC02=3] Please answer this question again. What is your current age?

AGE: ______ [RANGE 1 - 90]
DK/REF → INLAST

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 → INLAST

IF INCC4 NOT(BLANK OR DK/REF) THEN AGE1STIN = INCC4

IF INCC3 NOT(BLANK OR DK/REF) THEN CURNTAGE = INCC3

IF AGE1STIN = CURNTAGE OR AGE1STIN < 10:
INCC5 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 → IN03a
2 No
DK/REF → INLAST

INCC6 [IF INCC5=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: ______
DK/REF → INLAST

IF INCC6 NOT(BLANK OR DK/REF) THEN AGE1STIN = INCC6
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 (IN03d)
2 CURRENT YEAR (IN03d)
DK/REF (INLAST)

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 (IN03d)
2 CURRENT YEAR - 1 (IN03d)
DK/REF (INLAST)

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 (INLAST)

SKIP TO (INLAST)

[Note: Insert range check if IN03c > current month].

IN03d. 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)

INLAST 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 → INTOAN1

INFRAME3 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?
Average number of **days per week** during the past 12 months → INWKAVE

Average number of **days per month** during the past 12 months → INMONAVE

Total number of days during the past 12 months

DK/REF → INYRAVE

**INYRAVE.** 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] → IN06

DK/REF → INMONAVE

**INMONAVE** 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] → IN06

DK/REF → INWKAVE

**INWKAVE** 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] → IN06

DK/REF → IN06

**IN06.** If INLAST=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 → INTROAN1

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 > TOTINHAL:
        INCC7 For the last question, the computer recorded that you used an inhalant for kicks or to get high on [IN06 FILL] of the past 30 days. Is this correct?

1 Yes

2 No → INCC13

DK/REF → INTROAN1

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
INCC8 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 [FILLINHIA]
2 I used an inhalant for kicks or to get high on [IN06] days in the past 30 days
3 Neither answer is correct

DK/REF → INTROAN1

INCC9 [IF INCC8 = 2 OR INCC8 = 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 → SKIP TO INCC12
2 Average number of days per month during the past 12 months → SKIP TO INCC11
3 Total number of days during the past 12 months

DK/REF → INTROAN1

INCC10 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] → INCC12a

DK/REF → INCC12a

INCC11 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] → INCC12a

DK/REF → INCC12a

INCC12 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] → INCC12a

DK/REF → INCC12a

INCC12a:

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

IF INCC8 = 2 SKIP TO INTROAN1

INCC13 [IF INCC7 = 2 OR INCC8 = 1 OR INCC8 = 3] Please answer this question again. Think specifically about the past 30 days — that is, since [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 → INTROAN1

DK/REF → INTROAN1
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  INTROAN1

2      No   INCC16

DK/REF  INTROAN1

INCC16  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]

0   INTROAN1

DK/REF  INTROAN1
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.
Pain Relievers

INTROAN2 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, and Advil that can be bought in drug stores or grocery stores without a doctor’s prescription.

Ask your interviewer to show you Card A.

INTROAN3 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.

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
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

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.

--------------

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.

--------------

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.

--------------

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.

--------------

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.

--------------

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]

DEFINE AGE1STPR:
   AGE1STPR = PR06
IF CURNTAGE < AGE1STPR

PRCC1 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 → PRCC4

DK/REF → PR09

PRCC2 The answers for the last question and an earlier question disagree. Which answer is correct?

1 I am currently [CURNTAGE] years old → PRCC4

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 → PR09

PRCC3 [IF PRCC2=2 OR PRCC2=3] Please answer this question again. What is your current age?

AGE: _____

DK/REF → PR09

PRCC3a [IF PRCC3 < 12] Since you have indicated that you are [PRCC3] 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.

PRCC4 [IF PRCC2=1 OR PRCC2=3 OR PRCC1=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 → PR09

IF PRCC4 NOT(BLANK OR DK/REF) THEN AGE1STPR = PRCC4

IF PRCC3 NOT(BLANK OR DK/REF) THEN CURNTAGE = PRCC3

IF AGE1STPR = CURNTAGE OR AGE1STPR <10:

PRCC5. 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 → PR07a

2 No

DK/REF → PR09

PRCC6 [IF PRCC5=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 → PR09
IF PRCC6 NOT(BLANK OR DK/REF) THEN AGE1STPR = PRCC6

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 (PR08b)
2    CURRENT YEAR (PR08b)
DK/REF (PR09)

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 (PR08b)
2    CURRENT YEAR - 1 (PR08b)
DK/REF (PR09)

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 (PR09)

SKIP TO (PR09)

[Note: Insert range check if PR08a > current month].

PR08b  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)

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

INTROTR1
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 → PR13
2. Average number of days per month during the past 12 months → PR12
3. Total number of days during the past 12 months → PR11

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] → INTROTR1

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] → INTROTR1

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]
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.

INTROTR3 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.

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.

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.

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.

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.

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.

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 TR09

DEFINE AGE1STTR:
AGE1STTR = TR06

IF CURNTAGE < AGE1STTR

TRCC1 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?
TRCC2  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

TRCC3  [IF TRCC2=2 OR TRCC2=3] Please answer this question again. What is your current age?

AGE: _____

TRCC3a  [IF TRCC3 < 12] Since you have indicated that you are [TRCC3] 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.

TRCC4.  [IF TRCC2=1 OR TRCC2=3 OR TRCC1=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]

TRCC5  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

TRCC6  [IF TRC5=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]

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 (TR08b)
2 CURRENT YEAR (TR08b)
DK/REF (TR09)

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 (TR08b)
2 CURRENT YEAR - 1 (TR08b)
DK/REF (TR09)

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 (TR09)

SKIP TO (TR09)

[Note: Insert range check if TR08A > current month].

TR08b  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)

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

INTROST1

DK/REF INTROST1

TR10.  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 → TR13

2. Average number of **days per month** during the past 12 months → TR12

3. Total number of days during the past 12 months

DK/REF → TR11

**TR11.** 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] → INTROST1

DK/REF → TR12

**TR12.** 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] → INTROST1

DK/REF → TR13

**TR13.** 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 → INTROST1
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.

INTROST3	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.

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
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

[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.

[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.

[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.

[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.

[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.

[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.

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]

[IF (ST01 = 1 AND (ST02 = 1 OR ST03 = 1 OR ST04 = 1 OR ST05 = 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]

DEFINE AGE1STST:

AGE1STST = ST06
IF CURNTAGE < AGE1STST

STCC1 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 → STCC4
2  No → STCC4

DK/REF → ST09

STCC2 The answers for the last question and an earlier question disagree. Which answer is correct?

1  I am currently [CURNTAGE] years old → STCC4
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 → ST09

STCC3 [IF STCC2=2 OR STCC2=3] Please answer this question again. What is your current age?

AGE: _______

DK/REF → ST09

STCC3a [IF STCC3 < 12] Since you have indicated that you are [STCC3] 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.

STCC4. [IF STCC2=1 OR STCC2=3 OR STCC1=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 → ST09

IF STCC4 NOT(BLANK OR DK/REF) THEN AGE1STST = STCC4

IF STCC3 NOT(BLANK OR DK/REF) THEN CURNTAGE = STCC3

IF AGE1STST = CURNTAGE OR AGE1STST <10:

STCC5 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 → ST07a
2  No

DK/REF → ST09

STCC6 [IF STCC5=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 → ST09
IF SCTC6 NOT(BLANK OR DK/REF) THEN AGE1STST = STCC6

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 (ST08b)
2  CURRENT YEAR  (ST08b)
DK/REF (ST09)

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 (ST08b)
2  CURRENT YEAR - 1 (ST08b)
DK/REF (ST09)

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 (ST09)

SKIP TO (ST09)

[Note: Insert range check if ST08a > current month].

ST08b  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)

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 → ST14
ST10. 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 → ST13
2 Average number of days per month during the past 12 months → ST12
3 Total number of days during the past 12 months

ST11. 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] → ST14

ST12. 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] → ST14

ST13. 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] → ST14

ST14 [IF ST01 = 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] → ST15

ST14a [IF ST14 = CURRENrage AND DATE OF INTERVIEW < DOB OR IF ST14 = CURRENrage - 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 (ST14d)
2 CURRENT YEAR (ST14d)

ST14b [IF ST14 = CURRENrage - 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 (ST14d)
2 CURRENT YEAR - 1 (ST14d)

ST14c [IF ST14 = CURRENrage 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?
ST14d In what **month** in [YEAR FROM ST14a or ST14b] 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?

ST15. [IF ST01 = 1] How long has it been since you last used Methamphetamine, Desoxyn, or Methedrine?

IF ST15 < ST09:

STCC7 The computer recorded that you last used Methamphetamine, Desoxyn, or Methedrine [ST15 FILL]. Is that correct?

1 Yes  \(\rightarrow\) STCC8
2 No  \(\rightarrow\) STCC10

STCC8 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 FILL]
2 I last used Methamphetamine, Desoxyn, or Methedrine [ST15 FILL]
3 Neither answer is correct

STCC9 [IF STCC8 = 2 OR STCC8 = 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?
STCC10 [IF STCC7 =2 OR STCC8 = 1 OR STCC8 = 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 LEADSED
Sedatives

LEADSED 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.

LEADSED2 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.

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
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

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.

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.

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.

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.

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.

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]

DEFINE AGE1STSV:

AGE1STSV = SV06

IF CURNTAGE < AGE1STSV

SVCC1 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 → SVCC4
The answers for the last question and an earlier question disagree. Which answer is correct?

1 I am currently \text{CURNTAGE} years old → SVCC4
2 I was \text{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

SVCC3 \text{[IF SVCC2=2 OR SVCC2=3]} Please answer this question again. What is your current age?

\text{AGE: ______}

SVCC3a \text{[IF SVCC3 < 12]} Since you have indicated that you are \text{SVCC3} 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.

SVCC4 \text{[IF SVCC2=1 OR SVCC2=3 OR SVCC1=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?

\text{AGE: ______ \text{[RANGE 1 - 110]}}

SVCC7

IF \text{SVCC4 NOT(BLANK OR DK/REF)} THEN \text{AGE1STSV = SVCC4}

IF \text{SVCC3 NOT(BLANK OR DK/REF)} THEN \text{CURNTAGE = SVCC3}

IF \text{AGE1STSV = CURNTAGE OR AGE1STSV <10}:

SVCC5 The computer recorded that you were \text{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 → SV07a
2 No

SVCC6 \text{[IF SVCC5=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?

\text{AGE: ______ \text{[RANGE 1 - 110]}}

SV07a \text{[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 \text{[CURRENT YEAR - 1]} or \text{[CURRENT YEAR]}?

1 CURRENT YEAR - 1 (SV08b)
2 CURRENT YEAR (SV08b)
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  (SV08b)
2  CURRENT YEAR - 1  (SV08b)

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

SKIP TO (SV09)

[Note: Insert range check if SV08a > current month].

SV08b  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

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 → INTROSD

SV10. 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

**SV11.** 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]  

**SV12.** 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]

**SV13.** 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]
Special Drugs

INTROSD These next questions are about the different ways that certain drugs can be used.

Press [ENTER] to continue.

SD02 [IF HE01 = 1] Have you ever, even once, smoked heroin?

1 Yes
2 No
DK/REF

SD03 [IF SD02 = 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

SD04 [IF HE01 = 1] Have you ever, even once, sniffed or “snorted” heroin powder through your nose?

1 Yes
2 No
DK/REF

SD05 [IF SD04 = 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

SD06 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

SD07 [IF SD06 = 1 AND CN01 = 1] Have you ever, even once, used a needle to inject cocaine?

1 Yes
2 No
DK/REF

SD08 [IF SD07 = 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

SD09 [IF SD06 = 1 AND HE01 = 1] Have you ever, even once, used a needle to inject heroin?

1 Yes
2 No
DK/REF

SD10 [IF SD09 = 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
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

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

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

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

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

The last time you used a needle for injecting drugs, did someone else use the needle after you?

1 Yes
2 No
DK/REF

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

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.
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
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

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

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

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

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.

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

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
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

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

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

RK03  In the past 30 days, has anyone approached you to sell you an illegal drug?

1  Yes
2  No

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

RK04b  How often do you like to test yourself by doing something a little risky?

1  Never
2  Seldom
3  Sometimes
4  Always

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

RK04d  How often do you wear a seatbelt when you drive a car?

1  Never
2  Seldom
3  Sometimes
4  Always
I don’t drive
DK/REF
INTRODR  [IF RESPONDENT REPORTS 12 MONTH USE OF CIGARETTES, ALCOHOL, MJ, COCAINE, CRACK, HEROIN, HALLUCINOGENS, INHALANTS, PAIN RELIEVERS, TRANQUILIZERS, STIMULANTS, OR SEDATIVES] Now we’d like for you to tell us about your experiences with the drugs you’ve used during the past 12 months.

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

Press [ENTER] to continue.

DR01a  [IF CG05 = 1 OR CG06 = 1] Think about your use of cigarettes during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DR02a  [IF CG05 = 1 OR CG06 = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of cigarettes?

1 Yes
2 No
DK/REF

DR03a  [IF CG05 = 1 OR CG06 = 1] During the past 12 months, have you smoked cigarettes much more often or have you smoked more cigarettes than you intended to?

1 Yes
2 No
DK/REF

DR04a  [IF CG05 = 1 OR CG06 = 1] During the past 12 months, have you built up a tolerance for cigarettes so that the same number had less effect than before?

1 Yes
2 No
DK/REF

DR05a  [IF CG05 = 1 OR CG06 = 1] During the past 12 months, has smoking cigarettes often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1 Yes
2 No
DK/REF

DR06a  [IF CG05 = 1 OR CG06 = 1] During the past 12 months, has smoking cigarettes caused you to have any emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1 Yes
2 No
DK/REF

DR07a  [IF CG05 = 1 OR CG06 = 1] During the past 12 months, has smoking cigarettes caused you to have any health problems?

1 Yes
2 No
DK/REF

DR08a  [IF CG05 = 1 OR CG06 = 1] During the past 12 months, did you want to or try to stop or cut down on your cigarette smoking but found that you couldn’t?

1 Yes
2 No
DK/REF
Please look at the symptoms listed below. During the past 12 months, have you had any of these symptoms as the effect of the cigarettes you smoked were wearing off?

- 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

Please look at the symptoms listed below. During the past 12 months, which of these symptoms have you had as the effect of the cigarettes you smoked was wearing off?

Type the number of each symptom you had during the past 12 months. To select more than one symptom from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1 Feeling kind of blue, down, or depressed
2 Having trouble sleeping
3 Feeling irritable, frustrated, or angry
4 Feeling anxious
5 Having difficulty concentrating
6 Feeling hungry more often or gaining weight
7 Feeling restless
8 Having a slower heart rate

Think about your use of alcohol during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of alcohol?

1 Yes
2 No

During the past 12 months, have you used alcohol much more often or in larger amounts than you intended to?

1 Yes
2 No

During the past 12 months, have you built up a tolerance for alcohol so that the same amount had less effect than before?

1 Yes
2 No

During the past 12 months, has your use of alcohol often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1 Yes
2 No
[IF 12 MONTH ALCOHOL USE = 1] During the past 12 months, has your use of **alcohol** caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1  Yes
2  No
DK/REF

[IF 12 MONTH ALCOHOL USE = 1] During the past 12 months, has your use of **alcohol** caused you to have any health problems?

1  Yes
2  No
DK/REF

[IF 12 MONTH ALCOHOL USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of **alcohol** but found that you couldn’t?

1  Yes
2  No
DK/REF

[IF 12 MONTH ALCOHOL USE = 1] Please look at the symptoms listed below. During the past 12 months, have you had **any** of these symptoms as the effect of the **alcohol** you drank was wearing off?

- 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  (DR09g)
DK/REF  (DR09g)

[IF DR09d = 1] Please look at the symptoms listed below. During the past 12 months, **which** of these symptoms have you had as the effect of the **alcohol** you drank was wearing off?

Type the number of each symptom you had during the past 12 months. To select more than one symptom from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1  Sweating or feeling that your heart was beating fast
2  Having your hands tremble
3  Having trouble sleeping
4  Vomiting or feeling nauseous
5  Seeing, hearing, or feeling things that weren’t really there
6  Feeling like you couldn’t sit still
7  Feeling anxious
8  Having seizures or fits
DK/REF

[IF 12 MONTH ALCOHOL USE = 1] During the past 12 months, did you drink **more alcohol** to get over or avoid any of the bad after-effects of your drinking?

1  Yes
2  No
DK/REF

[IF 12 MONTH MJ USE = 1] Think about your use of **marijuana or hashish** during the past 12 months as you answer these next questions.
Press [ENTER] to continue.

**DR02c**  [IF 12 MONTH MJ USE = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of marijuana or hashish?

1  Yes  
2  No  
DK/REF

**DR03c**  [IF 12 MONTH MJ USE = 1] During the past 12 months, have you used marijuana or hashish much more often or in larger amounts than you intended to?

1  Yes  
2  No  
DK/REF

**DR04c**  [IF 12 MONTH MJ USE = 1] During the past 12 months, have you built up a tolerance for marijuana or hashish so that the same amount had less effect than before?

1  Yes  
2  No  
DK/REF

**DR05c**  [IF 12 MONTH MJ USE = 1] During the past 12 months, has your use of marijuana or hashish often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1  Yes  
2  No  
DK/REF

**DR06c**  [IF 12 MONTH MJ USE = 1] During the past 12 months, has your use of marijuana or hashish caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1  Yes  
2  No  
DK/REF

**DR07c**  [IF 12 MONTH MJ USE = 1] During the past 12 months, has your use of marijuana or hashish caused you to have any health problems?

1  Yes  
2  No  
DK/REF

**DR08d**  [IF 12 MONTH MJ USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of marijuana or hashish but found that you couldn’t?

1  Yes  
2  No  
DK/REF

**DR01d**  [IF 12 MONTH COCAINE OR CRACK USE = 1] Think about your use of cocaine, including “crack” during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

**DR02d**  [IF 12 MONTH COCAINE OR CRACK USE = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of cocaine, including “crack”?

1  Yes  
2  No  
DK/REF

**DR03d**  [IF 12 MONTH COCAINE OR CRACK USE = 1] During the past 12 months, have you used cocaine, including
“crack” much more often or in larger amounts than you intended to?

1  Yes
2  No
DK/REF

**DR04d** [IF 12 MONTH COCAINE OR CRACK USE = 1] During the past 12 months, have you built up a tolerance for cocaine, including “crack” so that the same amount had less effect than before?

1  Yes
2  No
DK/REF

**DR05d** [IF 12 MONTH COCAINE OR CRACK USE = 1] During the past 12 months, has your use of cocaine, including “crack” often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1  Yes
2  No
DK/REF

**DR06d** [IF 12 MONTH COCAINE OR CRACK USE = 1] During the past 12 months, has your use of cocaine, including “crack” caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1  Yes
2  No
DK/REF

**DR07d** [IF 12 MONTH COCAINE OR CRACK USE = 1] During the past 12 months, has your use of cocaine, including “crack” caused you to have any health problems?

1  Yes
2  No
DK/REF

**DR08d** [IF 12 MONTH COCAINE OR CRACK USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of cocaine, including “crack” but found that you couldn’t?

1  Yes
2  No
DK/REF

**DR09h** [IF DR09h = 1] During the past 12 months, have you felt kind of blue or down when the effect of the cocaine or “crack” you used was wearing off?

1  Yes
2  No  (DR09k)
DK/REF  (DR09k)

**DR09i** [IF DR09i = 1] Please look at the symptoms listed below. During the past 12 months, have you had any of these symptoms as the effect of the cocaine or “crack” you used was wearing off?

- 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

**DR09j** [IF DR09j = 1] Please look at the symptoms listed below. During the past 12 months, which of these symptoms have you had as the effect of the cocaine or “crack” you used was wearing off?
Type the number of each symptom you had during the past 12 months. To select more than one symptom from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1 Feeling tired or exhausted
2 Having bad dreams
3 Having trouble sleeping or sleeping more than you normally do
4 Feeling hungry more often
5 Feeling either very slowed down or like you couldn’t sit still

DK/REF

DR09k [IF 12 MONTH COCAINE OR CRACK USE = 1] During the past 12 months, did you use more cocaine or “crack” to get over or avoid any of the bad after-effects of your cocaine or “crack” use?

1 Yes
2 No

DK/REF

DR01e [IF 12 MONTH HEROIN USE = 1] Think about your use of heroin during the past 12 months as you answer these next questions.

Press [ENTER] to continue.

DR02e [IF 12 MONTH HEROIN USE = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of heroin?

1 Yes
2 No

DK/REF

DR03e [IF 12 MONTH HEROIN USE = 1] During the past 12 months, have you used heroin much more often or in larger amounts than you intended to?

1 Yes
2 No

DK/REF

DR04e [IF 12 MONTH HEROIN USE = 1] During the past 12 months, have you built up a tolerance for heroin so that the same amount had less effect than before?

1 Yes
2 No

DK/REF

DR05e [IF 12 MONTH HEROIN USE = 1] During the past 12 months, has your use of heroin often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1 Yes
2 No

DK/REF

DR06e [IF 12 MONTH HEROIN USE = 1] During the past 12 months, has your use of heroin caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1 Yes
2 No

DK/REF

DR07e [IF 12 MONTH HEROIN USE = 1] During the past 12 months, has your use of heroin caused you to have any health problems?

1 Yes
2 No

DK/REF
[IF DR08e = 1] During the past 12 months, did you want to or try to stop or cut down on your use of heroin but found that you couldn’t?

1. Yes
2. No
DK/REF

[IF DR09l = 1] Please look at the symptoms listed below. During the past 12 months, have you had any of these symptoms as the effect of the heroin you used was wearing off?

- 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

[IF DR09m = 1] Please look at the symptoms listed below. During the past 12 months, which of these symptoms have you had as the effect of the heroin you used was wearing off?

Type the number of each symptom you had during the past 12 months. To select more than one symptom from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1. Feeling kind of blue or down
2. Vomiting or feeling nauseous
3. Having cramps or muscle aches
4. Having teary eyes or a runny nose
5. Feeling sweaty, having enlarged eye pupils, or having body hair standing up on your skin
6. Having diarrhea
7. Yawning
8. Having a fever
9. Having trouble sleeping
DK/REF

[IF DR09n = 1] During the past 12 months, did you use more heroin to get over or avoid any of the bad after-effects of your heroin use?

1. Yes
2. No
DK/REF

[IF DR01f = 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.

[IF DR02f = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of hallucinogens?

1. Yes
2. No
DK/REF

[IF DR03f = 1] During the past 12 months, have you used hallucinogens much more often or in larger amounts than you intended to?

1. Yes
[IF 12 MONTH HALLUCINOGENS USE = 1] During the past 12 months, have you built up a tolerance for hallucinogens so that the same amount had less effect than before?

1  Yes
2  No

[IF 12 MONTH HALLUCINOGENS USE = 1] During the past 12 months, has your use of hallucinogens often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1  Yes
2  No

[IF 12 MONTH HALLUCINOGENS USE = 1] During the past 12 months, has your use of hallucinogens caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1  Yes
2  No

[IF 12 MONTH HALLUCINOGENS USE = 1] During the past 12 months, has your use of hallucinogens caused you to have any health problems?

1  Yes
2  No

[IF 12 MONTH HALLUCINOGENS USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of hallucinogens but found that you couldn’t?

1  Yes
2  No

[IF 12 MONTH INHALANTS USE = 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.

[IF 12 MONTH INHALANTS USE = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of inhalants?

1  Yes
2  No

[IF 12 MONTH INHALANTS USE = 1] During the past 12 months, have you used inhalants much more often or in larger amounts than you intended to?

1  Yes
2  No

[IF 12 MONTH INHALANTS USE = 1] During the past 12 months, have you built up a tolerance for inhalants so that the same amount had less effect than before?

1  Yes
2  No
DR05g [IF 12 MONTH INHALANTS USE = 1] During the past 12 months, has your use of **inhalants** often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1. Yes
2. No
DK/REF

DR06g [IF 12 MONTH INHALANTS USE = 1] During the past 12 months, has your use of **inhalants** caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1. Yes
2. No
DK/REF

DR07g [IF 12 MONTH INHALANTS USE = 1] During the past 12 months, has your use of **inhalants** caused you to have any health problems?

1. Yes
2. No
DK/REF

DR08g [IF 12 MONTH INHALANTS USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of **inhalants** but found that you couldn’t?

1. Yes
2. No
DK/REF

DR01h [IF 12 MONTH PAIN RELIEVERS USE = 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.

DR02h [IF 12 MONTH PAIN RELIEVERS USE = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of **prescription pain relievers**?

1. Yes
2. No
DK/REF

DR03h [IF 12 MONTH PAIN RELIEVERS USE = 1] During the past 12 months, have you used **prescription pain relievers** much more often or in larger amounts than you intended to?

1. Yes
2. No
DK/REF

DR04h [IF 12 MONTH PAIN RELIEVERS USE = 1] During the past 12 months, have you built up a tolerance for **prescription pain relievers** so that the same amount had less effect than before?

1. Yes
2. No
DK/REF

DR05h [IF 12 MONTH PAIN RELIEVERS USE = 1] During the past 12 months, has your use of **prescription pain relievers** often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1. Yes
2. No
DK/REF

DR06h [IF 12 MONTH PAIN RELIEVERS USE = 1] During the past 12 months, has your use of **prescription pain relievers** caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed,
feeling suspicious of people, feeling paranoid, or having strange ideas?

1 Yes
2 No
DK/REF

DR07h  [IF 12 MONTH PAIN RELIEVERS USE = 1] During the past 12 months, has your use of **prescription pain relievers** caused you to have any health problems?

1 Yes
2 No
DK/REF

DR08h  [IF 12 MONTH PAIN RELIEVERS USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of **prescription pain relievers** but found that you couldn’t?

1 Yes
2 No
DK/REF

DR09o  [IF 12 MONTH PAIN RELIEVERS = 1] Please look at the symptoms listed below. During the past 12 months, have you had **any** of these symptoms as the effect of the **prescription pain relievers** you used was wearing off?

* 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 (DR09q)
DK/REF (DR09q)

DR09p  [IF DR9o = 1] Please look at the symptoms listed below. During the past 12 months, **which** of these symptoms have you had as the effect of the **prescription pain relievers** you used was wearing off?

Type the number of each symptom you had during the past 12 months. To select more than one symptom from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1 Feeling kind of blue or down
2 Vomiting or feeling nauseous
3 Having cramps or muscle aches
4 Having teary eyes or a runny nose
5 Feeling sweaty, having enlarged eye pupils, or having body hair standing up on your skin
6 Having diarrhea
7 Yawning
8 Having a fever
9 Having trouble sleeping
DK/REF

DR09q  [IF 12 MONTH PAIN RELIEVERS USE = 1] During the past 12 months, did you use **more prescription pain relievers** to get over or avoid any of the bad after-effects of your use of prescription pain relievers?

1 Yes
2 No
DK/REF

DR01i  [IF 12 MONTH TRANQUILIZERS USE = 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.

DR02
[IF 12 MONTH TRANQUILIZERS USE = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of **prescription tranquilizers**?

1  Yes
2  No
DK/REF

DR03
[IF 12 MONTH TRANQUILIZERS USE = 1] During the past 12 months, have you used **prescription tranquilizers** much more often or in larger amounts than you intended to?

1  Yes
2  No
DK/REF

DR04
[IF 12 MONTH TRANQUILIZERS USE = 1] During the past 12 months, have you built up a tolerance for **prescription tranquilizers** so that the same amount had less effect than before?

1  Yes
2  No
DK/REF

DR05
[IF 12 MONTH TRANQUILIZERS USE = 1] During the past 12 months, has your use of **prescription tranquilizers** often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1  Yes
2  No
DK/REF

DR06
[IF 12 MONTH TRANQUILIZERS USE = 1] During the past 12 months, has your use of **prescription tranquilizers** caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1  Yes
2  No
DK/REF

DR07
[IF 12 MONTH TRANQUILIZERS USE = 1] During the past 12 months, has your use of **prescription tranquilizers** caused you to have any health problems?

1  Yes
2  No
DK/REF

DR08
[IF 12 MONTH TRANQUILIZERS USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of **prescription tranquilizers** but found that you couldn’t?

1  Yes
2  No
DK/REF

DR10
[IF 12 MONTH STIMULANTS USE = 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 use only for the experience or feeling they caused.

Press [ENTER] to continue.

DR02j
[IF 12 MONTH STIMULANTS USE = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of **prescription stimulants**?

1  Yes
[IF 12 MONTH STIMULANTS USE = 1] During the past 12 months, have you used **prescription stimulants** much more often or in larger amounts than you intended to?

1. Yes
2. No

[IF 12 MONTH STIMULANTS USE = 1] During the past 12 months, have you built up a tolerance for **prescription stimulants** so that the same amount had less effect than before?

1. Yes
2. No

[IF 12 MONTH STIMULANTS USE = 1] During the past 12 months, has your use of **prescription stimulants** often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1. Yes
2. No

[IF 12 MONTH STIMULANTS USE = 1] During the past 12 months, has your use of **prescription stimulants** caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1. Yes
2. No

[IF 12 MONTH STIMULANTS USE = 1] During the past 12 months, has your use of **prescription stimulants** caused you to have any health problems?

1. Yes
2. No

[IF 12 MONTH STIMULANTS USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of **prescription stimulants** but found that you couldn’t?

1. Yes
2. No

[IF 12 MONTH STIMULANTS USE = 1] During the past 12 months, have you felt kind of blue or down when the effect of the prescription stimulants you used was wearing off?

1. Yes
2. No (DR09u)

[IF DR09r = 1] Please look at the symptoms listed below. During the past 12 months, have you had **any** of these symptoms as the effect of the **prescription stimulants** you used was wearing off?

- 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 (DR09u)
[IF DR09s = 1] Please look at the symptoms listed below. During the past 12 months, which of these symptoms have you had as the effect of the prescription stimulants you used was wearing off?

Type the number of each symptom you had during the past 12 months. To select more than one symptom from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1 Feeling tired or exhausted
2 Having bad dreams
3 Having trouble sleeping or sleeping more than you normally do
4 Feeling hungry more often
5 Feeling either very slowed down or like you couldn’t sit still

DK/REF

[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, did you use more prescription stimulants to get over or avoid any of the bad after-effects of your use of prescription stimulants?

1 Yes
2 No

DK/REF

[IF 12 MONTH SEDATIVES USE = 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.

[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of prescription sedatives?

1 Yes
2 No

DK/REF

[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, have you used prescription sedatives much more often or in larger amounts than you intended to?

1 Yes
2 No

DK/REF

[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, have you built up a tolerance for prescription sedatives so that the same amount had less effect than before?

1 Yes
2 No

DK/REF

[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, has your use of prescription sedatives often kept you from working, going to school, taking care of children, or taking part in recreational activities?

1 Yes
2 No

DK/REF

[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, has your use of prescription sedatives caused you to have emotional or psychological problems — such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

1 Yes
2 No

DK/REF

[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, has your use of prescription sedatives caused you to have any health problems?
[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, did you want to or try to stop or cut down on your use of prescription sedatives but found that you couldn’t?

1 Yes
2 No
DK/REF

[IF 12 MONTH SEDATIVES USE = 1] Please look at the symptoms listed below. During the past 12 months, have you had any of these symptoms as the effect of the prescription sedatives you used was wearing off?

- 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

[IF DR09v = 1] Please look at the symptoms listed below. During the past 12 months, which of these symptoms had you had as the effect of the prescription sedatives you used was wearing off?

Type the number of each symptom you had during the past 12 months. To select more than one symptom from the list, press the space bar between each number you type. When you have finished, press [ENTER].

1 Sweating or feeling that your heart was beating fast
2 Having your hands tremble
3 Having trouble sleeping or sleeping more than you normally do
4 Vomiting or feeling nauseous
5 Seeing, hearing, or feeling things that weren’t really there
6 Feeling like you couldn’t sit still
7 Feeling anxious
8 Having seizures or fits
DK/REF

[IF 12 MONTH SEDATIVES USE = 1] During the past 12 months, did you use more prescription sedatives to get over or avoid any of the bad after-effects of your use of prescription sedatives?

1 Yes
2 No
DK/REF
The next questions are about encounters with the police or someone connected with the courts.

Press [ENTER] to continue.

**SP06** 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

**SP07** [IF SP06 = 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: 1 - 99 ]

DK/REF

**introbk** [IF SP07 = 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.

**SP08a** In the **past 12 months**, were you arrested and booked for **larceny or theft**?

1  Yes
2  No
DK/REF

**SP08b** In the **past 12 months**, were you arrested and booked for **burglary or breaking and entering**?

1  Yes
2  No
DK/REF

**SP08c** In the **past 12 months**, were you arrested and booked for **aggravated assault**?

1  Yes
2  No
DK/REF

**SP08d** 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

**SP08e** In the **past 12 months**, were you arrested and booked for **motor vehicle theft**?

1  Yes
2  No
DK/REF

**SP08f** In the **past 12 months**, were you arrested and booked for **robbery**?

1  Yes
2  No
DK/REF

**SP08g** In the **past 12 months**, were you arrested and booked for **forcible rape**?

1  Yes
In the past 12 months, were you arrested and booked for murder, homicide, or nonnegligent manslaughter?

1 Yes
2 No

In the past 12 months, were you arrested and booked for arson?

1 Yes
2 No

In the past 12 months, were you arrested and booked for driving under the influence?

1 Yes
2 No

In the past 12 months, were you arrested and booked for drunkenness or other liquor law violations?

1 Yes
2 No

In the past 12 months, were you arrested and booked for possession or sale of drugs?

1 Yes
2 No

In the past 12 months, were you arrested and booked for prostitution or commercialized sex?

1 Yes
2 No

In the past 12 months, were you arrested and booked for other property offenses, such as fraud, possessing stolen goods, or vandalism?

1 Yes
2 No

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

[IF SP08o = 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.

Were you on probation at any time during the past 12 months?

1 Yes
2 No
SP10 Were you on parole at any time during the past 12 months?

1 Yes
2 No
DK/REF

SP11a [IF ALLAST3=1 OR 2 AND R SAID YES TO HAVING USED AT LEAST 1 OF THE DRUGS (MJ, COCAINE, CRACK, HEROIN, HALLUCINOGENS, INHALANTS, PAIN RELIEVERS, TRANQUILIZERS, STIMULANTS, OR SEDATIVES) DURING THE PAST 12 MONTHS] 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

SP11b [IF ALLAST3 = 1 OR 2] During the past 12 months, have you driven a vehicle while you were under the influence of alcohol?

1 Yes
2 No
DK/REF

SP11c [IF R SAID YES TO HAVING USED AT LEAST 1 OF THE DRUGS (MJ, COCAINE, CRACK, HEROIN, HALLUCINOGENS, INHALANTS, PAIN RELIEVERS, TRANQUILIZERS, STIMULANTS, OR SEDATIVES) DURING THE PAST 12 MONTHS] During the past 12 months, have you driven a vehicle while you were under the influence of illegal drugs?

1 Yes
2 No
DK/REF
Treatment

Introtx [IF AL01 =1 OR MJ01 =1 OR CC01 = 1 OR CK01 = 1 OR HE01 = 1 OR LS01a =1 OR LS01b = 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 =1 OR IN01f =1 OR IN01g = 1 OR IN01h = 1 OR IN01i = 1 OR IN01j = 1 OR IN01l = 1 OR PR01 = 1 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. For these questions we are interested in treatment designed to help you reduce or stop your alcohol or drug use. We are also interested in treatment for medical problems associated with your alcohol or drug use.

Press [ENTER] to continue.

TX01 [IF AL01 =1 OR MJ01 =1 OR CC01 = 1 OR CK01 = 1 OR HE01 = 1 OR LS01a =1 OR LS01b = 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 =1 OR IN01f =1 OR IN01g = 1 OR IN01h = 1 OR IN01i = 1 OR IN01j = 1 OR IN01l = 1 OR PR01 = 1 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

TX02a [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 TX02a = 1, TXFILL1 = alcohol use
  IF TX02a = 2, TXFILL1 = drug use
  IF TX02a = 3, TXFILL1 = alcohol and drug use
  IF TX02a = DK/REF, TXFILL1 = alcohol or drug use
ELSE, TXFILL1 = BLANK

TX03a [IF TX02a NOT 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

TX03b [IF TX02a NOT 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

TX03c [IF TX02a NOT BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a drug or alcohol rehabilitation facility as an outpatient?
TX03d [IF TX02a NOT 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

TX03e [IF TX02a NOT BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in an emergency room?

1 Yes
2 No
DK/REF

TX03f [IF TX02a NOT 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

TX03g [IF TX02a NOT BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a prison or jail?

1 Yes
2 No
DK/REF

TX03h [IF TX02a NOT BLANK] During the past 12 months, have you received treatment for your [TXFILL1] in a self-help group?

1 Yes
2 No
DK/REF

TX03i [IF TX02a NOT 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

TX03i1 [IF TX03i = 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.

TX08a [IF TX02a = 2 OR 3 AND (MJ01 =1 OR CC01 = 1 OR CK01 = 1 OR HE01 = 1 OR LS01a =1 OR LS01b = 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

TX08b [IF TX08a = 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 - 90]
During the past 12 months, did you need treatment or counseling for your alcohol or drug use?

1. Yes
2. No

During the past 12 months did you need treatment or counseling for your use of alcohol?

1. Yes
2. No

During the past 12 months, did you need treatment or counseling for your use of marijuana or hashish?

1. Yes
2. No

During the past 12 months, did you need treatment or counseling for your use of cocaine or ‘crack’?

1. Yes
2. No

During the past 12 months, did you need treatment or counseling for your use of heroin?

1. Yes
2. No

During the past 12 months, did you need treatment or counseling for your use of hallucinogens?

1. Yes
2. No

During the past 12 months, did you need treatment or counseling for your use of inhalants?

1. Yes
2. No

During the past 12 months, did you need treatment or counseling for your use of prescription pain relievers?

1. Yes
2. No

During the past 12 months, did you need treatment or counseling for your use of prescription tranquilizers?

1. Yes
2. No
During the past 12 months, did you need treatment or counseling for your use of prescription stimulants?

1 Yes
2 No
DK/REF

During the past 12 months, did you need treatment or counseling for your use of prescription sedatives?

1 Yes
2 No
DK/REF

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

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.

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.

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.

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.

During the past 12 months, did you make an effort to get treatment or counseling for your use of [TXFILL2]?

1 Yes
2 No
TX16  [IF TX01 = 1] How long has it been since you last received 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

TX17  [IF TX01 = 1] 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?

1. A hospital overnight as an inpatient
2. A residential drug or alcohol rehabilitation facility where you stayed overnight
3. A drug or alcohol rehabilitation facility as an outpatient
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

TX17a  [IF TX17=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.

TX18a  [IF AL01 = 1 AND TX01 =1] The last time you entered treatment, did you receive treatment or counseling for your use of alcohol?

1. Yes
2. No
DK/REF

TX18b  [IF MJ01 =1 AND TX01 =1] The last time you entered treatment, did you receive treatment or counseling for your use of marijuana or hashish?

1. Yes
2. No
DK/REF

TX18c  [IF (CC01 =1 OR CK01 =1) AND TX01 =1] The last time you entered treatment, did you receive treatment or counseling for your use of cocaine or ‘crack’?

1. Yes
2. No
DK/REF

TX18d  [IF HE01 =1 AND TX01 =1] The last time you entered treatment, did you receive treatment or counseling for your use of heroin?

1. Yes
2. No
DK/REF

TX18e  [IF (LS01a =1 OR LS01b =1 OR LS01c =1 OR LS01d =1 OR LS01e =1 OR LS01f = 1 OR LS01h =1) AND (TX01 =1)] The last time you entered treatment, did you receive treatment or counseling for your use of hallucinogens?

1. Yes
2. No
DK/REF
TX18f [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)] The last time you entered treatment, did you receive treatment or counseling for your use of **inhalants**?

1 Yes
2 No
DK/REF

TX18g [IF PR01 =1 OR PR02 =1 OR PR03 =1 OR PR04 = 1 OR PR05 = 1 AND (TX01 =1)] The last time you entered treatment, did you receive treatment or counseling for your use of **prescription pain relievers**?

1 Yes
2 No
DK/REF

TX18h [IF TR01 =1 OR TR02 =1 OR TR03 =1 OR TR04 = 1 OR TR05 = 1 AND (TX01 =1)] The last time you entered treatment, did you receive treatment or counseling for your use of **prescription tranquilizers**?

1 Yes
2 No
DK/REF

TX18i [IF ST01 =1 OR ST02 =1 OR ST03 =1 OR ST04 = 1 OR ST05 = 1 AND (TX01 =1)] The last time you entered treatment, did you receive treatment or counseling for your use of **prescription stimulants**?

1 Yes
2 No
DK/REF

TX18j [IF SV01 =1 OR SV02 =1 OR SV03 =1 OR SV04 = 1 OR SV05 = 1 AND (TX01 =1)] The last time you entered treatment, did you receive treatment or counseling for your use of **prescription sedatives**?

1 Yes
2 No
DK/REF

TX18k [IF TX01 = 1] The last time you entered treatment, did you receive treatment or counseling for your use of **any other drug**?

1 Yes
2 No
DK/REF

TX18k1 [IF TX18k = 1] 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.

TX18k2 [IF TX18k1 NE 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.

TX18k3 [IF TX18k2 NE 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.

TX18k4 [IF TX18k3 NE 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.
TX18k5  [IF TX18k4 NE 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.

TX19  [IF MORE THAN 1 ITEM IN THE TX18a - k SERIES = 1 OR DK/REF] What was the main drug you entered treatment for the last time you were treated?

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

TX20  [IF TX17 = 1 - 8] What was the outcome of the treatment or counseling you last received at [FILL IN ANSWER FROM TX17]?

[IF TX17 = DK/REF OR TX17 = 9] 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

TX20a  [IF TX20 = 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.

TX21  [IF TX17 = 1 - 8 AND TX20 = 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 TX17]?

[IF TX17 = 1 - 8 AND TX20 = 1] How long have you been in treatment for your alcohol or drug use at [FILL IN ANSWER FROM TX17] so far?

[IF TX17 = 9 OR DK/REF AND TX20 = 2 - 7 OR DK/REF] How long did you stay in treatment for your alcohol or drug use during your last treatment?

[IF TX17 = 9 OR DK/REF AND TX20 = 1] 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

TX21day1  [IF TX20 = 1 AND TX21 = 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

TX21day2 [IF TX20 = 2 - 7 OR DK/REF AND TX21 = 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

TX21mon1 [IF TX20 = 1 AND TX21 = 2] How many months have you been in treatment for your alcohol or drug use so far?

# OF MONTHS: _______ [RANGE: 1 - 900]
DK/REF

TX21mon2 [IF TX20 = 2 - 7 OR DK/REF AND TX21 = 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

TX22a [IF TX01 = 1] Did private health insurance pay for the last treatment you received, even if it paid only part of the cost?

1 Yes
2 No
DK/REF

TX22b [IF TX01 = 1] Did Medicare pay for the last treatment you received, even if it paid only part of the cost?

1 Yes
2 No
DK/REF

TX22c [IF TX01 = 1] Did Medicaid pay for the last treatment you received, even if it paid only part of the cost?

1 Yes
2 No
DK/REF

TX22d [IF TX01 = 1] Did a public assistance program other than Medicaid pay for the last treatment you received, even if it paid only part of the cost?

1 Yes
2 No
DK/REF

TX22e [IF TX01 = 1] 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?

1 Yes
2 No
DK/REF

TX22f [IF TX01 = 1] Did family members pay for the last treatment you received, even if they paid only part of the cost?

1 Yes
2 No
DK/REF

TX22g [IF TX01 = 1] Did the courts pay for the last treatment you received, even if it paid only part of the cost?

1 Yes
2 No
DK/REF
**TX22h**  [IF TX01 = 1] 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?

1  Yes  
2  No  
DK/REF

**TX22i**  [IF TX01 = 1] Did **your employer** pay for the last treatment you received, even if it paid only part of the cost?

1  Yes  
2  No  
DK/REF

**TX22k**  [IF TX01 = 1] Was your last treatment paid for by **some other source** besides those that have been listed?

1  Yes  
2  No  
DK/REF

**TX22k1**  [IF TX22k = 1] 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.

_________

**TX22j**  [IF TX22a-i = 2 AND TX22k = 2] Was the last treatment you received free?

1  Yes  
2  No  
DK/REF

**TX23**  [IF TX01 = 1] Were you enrolled in a treatment program for your alcohol or drug use on October 1, 1998?

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

LEADSEN The next questions are about the neighborhood where you currently live.

Press [ENTER] to continue.

SEN01 How long have you lived in this neighborhood?

1 Less than one year
2 At least 1 year but less than 3 years
3 At least 3 years but less than 5 years
4 At least 5 years but less than 10 years
5 10 or more years
DK/REF

SEN02a 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 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 People in your neighborhood share the same values.

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

SEN02d There are lots of street fights in your neighborhood.

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

SEN02e 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 People in your neighborhood often help each other out.

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

People in your neighborhood often visit in each other’s homes.

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

People move in and out of your neighborhood often.

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

How do you think most people in your neighborhood would feel about adults smoking one or more packs of cigarettes per day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove

How do you think most people in your neighborhood would feel about adults trying marijuana or hashish once or twice?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove

How do you think most people in your neighborhood would feel about adults having one or two drinks of an alcoholic beverage nearly every day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove

How do you think most people in your neighborhood would feel about adults driving a car after having 1 or 2 drinks of an alcoholic beverage?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove

How many times have you moved in the past 5 years?

# TIMES MOVED: _________ [RANGE: 0 - 90]

Do one or more other people live here with you in this household?
SEN06a  [IF SEN05 = 1] For each of the next statements, please indicate how much you agree or disagree.

People in your household often insult or yell at each other.

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

SEN06b  [IF SEN05 = 1] People in your household have serious arguments.

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

SEN06c  [IF SEN05 = 1] People in your household argue about the same things over and over.

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

SEN07  [IF SEN05 = 1] Are you currently living with a spouse or partner?

1  Yes
2  No
DK/REF

SEN08a  [IF SEN07 = 1] How many times during the past 12 months have you and your spouse or partner spent an hour or more together doing an activity that you both enjoyed?

1  0 times
2  1 to 2 times
3  A Few times
4  Many times
DK/REF

SEN08b  [IF SEN07 = 1] How many times during the past 12 months were you and your spouse or partner angry with each other?

1  0 times
2  1 to 2 times
3  A Few times
4  Many times
DK/REF

SEN08c  [IF SEN07 = 1] How many times during the past 12 months did your spouse or partner hit or threaten to hit you?

1  0 times
2  1 to 2 times
3  A Few times
4  Many times
DK/REF

SEN08d  [IF SEN07 = 1] How many times during the past 12 months did you hit or threaten to hit your spouse or partner?

1  0 times
SEN09   [IF SEN07 = 1] How often is your spouse or partner critical of you?

1. Always
2. Sometimes
3. Seldom
4. Never

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

SEN11a   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

SEN11b   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

SEN11c   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

SEN12a   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

SEN12b   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
SEN12c 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

SEN13a 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

SEN13b How do you feel about adults trying marijuana or hashish once or twice?

1. Neither approve nor disapprove
2. Somewhat disapprove
3. Strongly disapprove

SEN13c 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

SEN13d 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

SEN14a How many of your friends would you say smoke cigarettes?

1. None of them
2. A few of them
3. Most of them
4. All of them

SEN14b How many of your friends would you say use marijuana or hashish?

1. None of them
2. A few of them
3. Most of them
4. All of them

SEN14c How many of your friends would you say drink alcoholic beverages?

1. None of them
2. A few of them
3. Most of them
4. All of them

SEN14d How many of your friends would you say get drunk at least once a week?
1  None of them
2  A few of them
3  Most of them
4  All of them

DK/REF
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.

Press [ENTER] to continue.

PE01 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: __________

DK/REF

PE02 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 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 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 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 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 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 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
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?

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<th></th>
<th>Less than 10 minutes</th>
<th>10 to 30 minutes</th>
<th>31 to 60 minutes</th>
<th>More than 60 minutes</th>
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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.

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<th></th>
<th>Strongly agree</th>
<th>Agree</th>
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What I say will have little influence on whether my child uses drugs.

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<th>Strongly agree</th>
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<th>Disagree</th>
<th>Strongly disagree</th>
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Drug education is best handled by the schools, not by parents.

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<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly disagree</th>
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There are places in my community where I can learn more about how to help prevent my child from using drugs.

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<th>Strongly agree</th>
<th>Agree</th>
<th>Disagree</th>
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Youth Experiences
(Section Administered to 12 - 17 Year Olds Only; Respondents 18 or Older Skip to QD13)

LEADSEN
The next questions are about the neighborhood where you currently live.
Press [Enter] to continue.

YE01
How long have you lived in this neighborhood?
1 Less than one year
2 At least 1 year but less than 3 years
3 At least 3 years but less than 5 years
4 At least 5 years but less than 10 years
5 10 or more years
DK/REF

YE02a
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
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
People in your neighborhood often help each other out.
1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02d
There are lots of street fights in your neighborhood.
1 Strongly agree
2 Somewhat agree
3 Somewhat disagree
4 Strongly disagree
DK/REF

YE02e
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
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
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

People move in and out of your neighborhood often.

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

How do you think most adults in your neighborhood would feel about you smoking one or more packs of cigarettes per day?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove

How do you think most adults in your neighborhood would feel about you trying marijuana or hashish once or twice?

1 Neither approve nor disapprove
2 Somewhat disapprove
3 Strongly disapprove

How do you think most adults in your neighborhood 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

How many times have you moved in the past 5 years?

# TIMES MOVED: ________ [RANGE: 0 - 90]

How many of the adults that you know personally would you say smoke cigarettes?

1 None of them
2 A few of them
3 Most of them
4 All of them

How many of the adults that you know personally would you say use marijuana or hashish?

1 None of them
2 A few of them
3 Most of them
4 All of them

How many of the adults that you know personally would you say drink alcoholic beverages?

1 None of them
### YE05d

**How many of the adults that you know personally would you say get drunk at least once a week?**

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<th>None of them</th>
<th>A few of them</th>
<th>Most of them</th>
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DK/REF

### YE09

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

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<th>Yes</th>
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DK/REF

### YE10

**[IF YE09 = 1] Which of the statements below best describes how you felt overall about going to school during the past 12 months?**

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<thead>
<tr>
<th></th>
<th>I liked going to school a lot</th>
<th>I kind of liked going to school</th>
<th>I didn’t like going to school very much</th>
<th>I hated going to school</th>
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DK/REF

### YE11

**[IF YE09 = 1] During the past 12 months, how often did you feel that the school work you were assigned to do was meaningful and important?**

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<th>Always</th>
<th>Sometimes</th>
<th>Seldom</th>
<th>Never</th>
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DK/REF

### YE12

**[IF YE09 = 1] How important do you think the things you have learned in school during the past 12 months are going to be to you later in life?**

<table>
<thead>
<tr>
<th></th>
<th>Very important</th>
<th>Somewhat important</th>
<th>Somewhat unimportant</th>
<th>Very unimportant</th>
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DK/REF

### YE13

**[IF YE09 = 1] How interesting do you think most of your courses at school during the past 12 months have been?**

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<tr>
<th></th>
<th>Very interesting</th>
<th>Somewhat interesting</th>
<th>Somewhat boring</th>
<th>Very boring</th>
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DK/REF

### YE14

**[IF YE09 = 1] During the past 12 months, how often did your teachers at school let you know when you were doing a good job with you school work?**

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<tr>
<th></th>
<th>Always</th>
<th>Sometimes</th>
<th>Seldom</th>
<th>Never</th>
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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

YE16a  [IF YE09 = 1] How many of the students in your grade at school would you say smoke cigarettes?
1 None of them
2 A few of them
3 Most of them
4 All of them

YE16b  [IF YE09 = 1] How many of the students in your grade at school would you say use marijuana or hashish?
1 None of them
2 A few of them
3 Most of them
4 All of them

YE16c  [IF YE09 = 1] How many of the students in your grade at school would you say drink alcoholic beverages?
1 None of them
2 A few of them
3 Most of them
4 All of them

YE16d  [IF YE09 = 1] How many of the students in your grade at school would you say get drunk at least once a week?
1 None of them
2 A few of them
3 Most of them
4 All of them

YE17a  [IF YE09 = 1] How much trouble do you think a student in your grade would be in if he or she got caught at school smoking a cigarette?
1 A lot of trouble
2 A little trouble
3 No trouble at all

YE17b  [IF YE09 = 1] How much trouble do you think a student in your grade would be in if he or she got caught at school possessing or drinking an alcoholic beverage?
1 A lot of trouble
2 A little trouble
3 No trouble at all

YE17c  [IF YE09 = 1] How much trouble do you think a student in your grade would be in if he or she got caught at school possessing or using an illegal drug?
1 A lot of trouble
2 A little trouble
3 No trouble at all

YE06a  [IF YE09 = 1] The next questions ask about your parents. By parents, we mean either your biological parents,
adoptive parents, stepparents, or adult guardians who live in your household.

During the past 12 months, how often did your parents check on whether you had done your homework?

1 Always
2 Sometimes
3 Seldom
4 Never
DK/REF

YE06b [IF YE09 = 1] During the past 12 months, how often did your parents provide help with your homework when you needed it?

1 Always
2 Sometimes
3 Seldom
4 Never
DK/REF

YE06c [IF YE09 =2 OR DK/REF ADD: The next questions ask about your parents. By parents, we mean either your biological parents, adoptive parents, stepparents, or adult guardians who live in your household. OTHERWISE SIMPLY SHOW QUESTION AS IS.] During the past 12 months, how often did your parents make you do chores around the house?

1 Always
2 Sometimes
3 Seldom
4 Never
DK/REF

YE06d During the past 12 months, how often did your parents limit the amount of time you watched TV?

1 Always
2 Sometimes
3 Seldom
4 Never
DK/REF

YE06e [IF YE09=1] During the past 12 months, how often did your parents limit the amount of time you went out with friends on school nights?

1 Always
2 Sometimes
3 Seldom
4 Never
DK/REF

YE06f During the past 12 months, how often did your parents let you know when you’d done a good job?

1 Always
2 Sometimes
3 Seldom
4 Never
DK/REF

YE06g During the past 12 months, how often did your parents tell you they were proud of you for something you had done?

1 Always
2 Sometimes
3 Seldom
4 Never
DK/REF

YE18a During the past 12 months, how many times have you argued or had a fight with at least one of your parents?
YE18b 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

YE18c 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

YE18d 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

YE18e 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

YE18f 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

YE18g 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

YE07a How do you think your parents would feel about you smoking one or more packs of cigarettes per day?
YE07b  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  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  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  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  How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?

1  Neither approve nor disapprove  
2  Somewhat disapprove  
3  Strongly disapprove  
DK/REF  

YE20a  How do you think your close friends would feel about **you** smoking one or more packs of cigarettes a day?

1  Neither approve nor disapprove  
2  Somewhat disapprove  
3  Strongly disapprove  
DK/REF  

YE20b  How do you think your close friends would feel about **you** trying marijuana or hashish once or twice?

1  Neither approve nor disapprove  
2  Somewhat disapprove  
3  Strongly disapprove  
DK/REF  

YE20c  How do you think your close friends would feel about **you** having one or two drinks of an alcoholic beverage nearly every day?

1  Neither approve nor disapprove  
2  Somewhat disapprove  
3  Strongly disapprove  
DK/REF  

YE21a  How many of your friends would you say smoke cigarettes?
How many of your friends would you say use marijuana or hashish?

1 None of them
2 A few of them
3 Most of them
4 All of them

How many of your friends would you say drink alcoholic beverages?

1 None of them
2 A few of them
3 Most of them
4 All of them

How many of your friends would you say get drunk at least once a week?

1 None of them
2 A few of them
3 Most of them
4 All of them

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
3 My father
4 My grandmother or grandfather
5 My boyfriend or girlfriend
6 My brother or sister
7 Some other relative
8 A friend
9 A neighbor
10 A teacher, principal, coach or school counselor
11 A therapist, psychiatrist, or other private counselor
12 A pastor, clergy or church group
13 Some other person

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?

1 Yes
2 No

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

During the past 12 months have you participated in a problem solving, communication skills or self-esteem group?
YE23c  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  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  During the past 12 months have you participated in Boy Scouts or Girl Scouts?

1  Yes
2  No
DK/REF

YE23f  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  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  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  During the past 12 months have you participated in a 4-H Club?

1  Yes
2  No
DK/REF

YE23j  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  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  During the past 12 months have you participated in pregnancy or sexually transmitted disease prevention programs?
1  Yes
2  No
DK/REF

YE23p  During the past 12 months have you participated in a job skills or job training program?
1  Yes
2  No
DK/REF

YE23q  During the past 12 months have you participated in a church choir?
1  Yes
2  No
DK/REF

YE24a  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] 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] 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
<table>
<thead>
<tr>
<th>No</th>
<th>DK/REF</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>No</td>
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</table>
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 FEXIT. 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.

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 4. 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
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 an 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 OR DK/REF] 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  (QD26)
2  NO
DK/REF (QD23)

QD23 [IF QD22 = 2 OR DK/REF] Have you received a GED certificate of high school completion?

1  YES
2  NO
DK/REF

QD24a [IF QD23 = 1 OR 2 OR DK/REF] HAND R SHOWCARD 5. 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
2  I GOT PREGNANT
3 I GOT EXPELLED FOR SELLING DRUGS
4 I GOT EXPELLED FOR USING DRUGS
5 I GOT EXPELLED FOR SOME OTHER REASON
6 I HAD TO GET A JOB (OR WORK MORE HOURS)
7 I WAS GETTING BAD GRADES
8 I WASN’T LEARNING ANYTHING
9 I GOT MARRIED OR MOVED IN WITH MY BOY/GIRLFRIEND
10 I MOVED HERE FROM ANOTHER COUNTRY AND DIDN’T ENROLL IN SCHOOL (OR DROPPED OUT OF SCHOOL) BECAUSE OF LANGUAGE OR OTHER PROBLEMS
11 I WAS TREATED BADLY AT SCHOOL
12 I BECAME ILL OR INJURED
13 I WENT TO JAIL/PRISON
14 OTHER REASON

DK/REF (QD25)

QD24b [IF QD24a = 14] TYPE IN THE OTHER REASON WHY THE RESPONDENT LEFT SCHOOL BEFORE RECEIVING A HIGH SCHOOL DIPLOMA.

________________________ OTHER REASON
DK/REF (QD25)

QD25 [IF QD24a = 1 - 14 OR DK/REF] How old were you when you stopped attending school?

_________ R’s AGE WHEN STOPPED ATTENDING SCHOOL
DK/REF (QD26)

DEFINE STARTDATE:
IF INTERVIEW DAY = SUNDAY, STARTDATE = INTERVIEW DATE - 7
IF INTERVIEW DAY = MONDAY, STARTDATE = INTERVIEW DATE - 8
IF INTERVIEW DAY = TUESDAY, STARTDATE = INTERVIEW 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 (QD28)
2 NO
DK/REF (QD33)

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  (QD29)
2  NO  (QD31a)
DK/REF (QD31a)

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)

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

QD30  [IF QD27 = 1] HAND R SHOWCARD 6. 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 (QD33)

QD30a  [IF QD30 = 7] TYPE IN THE OTHER REASON WHY THE RESPONDENT DID NOT WORK LAST WEEK.

____________ OTHER REASON
DK/REF (QD33)

QD31a  [IF QD27 = 2 OR DK/REF] HAND R SHOWCARD 7. 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 (QD33)

QD31b  [IF QD31a = 7] TYPE IN THE OTHER REASON WHY THE RESPONDENT DID NOT HAVE A JOB OR BUSINESS LAST WEEK.

____________ OTHER REASON
DK/REF (QD33)

QD32  [IF QD31a = 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)
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       (QD38)
DK/REF    (QD38)

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       (QD35b)
DK/REF    (QD35b)

QD35a [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)

QD35b [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    (QD36)

QD36  [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       (QD38)
DK/REF    (QD38)

QD37  [IF QD36 = 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    (QD38)

INTERVIEWER NOTE:
If the respondent did not have at least one job or business for less than one week, enter “1”.

QD38  [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

NQ1  [IF QD-26 = 1 OR QD-27 = 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.

NQ2  [IF QD-26 = 1 OR QD-27 = 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.

QD39 [IF QD26 = 1 OR QD27 = 1] HAND R SHOWCARD 8. 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

QD40 [IF QD39 = 1 - 5 OR DK/REF] At your workplace, is there a written policy about employee use of alcohol or drugs?
1 YES
2 NO (QD42)
DK/REF (QD42)

QD41 [IF QD40 = 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 (QD42)

QD42 [IF QD41 = 1 - 3 OR DK/REF OR QD40 = 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 (QD43)

QD43 [IF QD42 = 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 (QD44a)

QD44a [IF QD43 = 1 - 2 OR DK/REF] Does your workplace ever test its employees for alcohol use?
1 YES
2 NO
DK/REF (QD44b)

QD44b [IF QD44a = 1 - 2 OR DK/REF] Does your workplace ever test its employees for drug use?
1 YES
2 NO
DK/REF (QD45a)

QD45a [IF QD44a = 1 OR QD44b = 1] Does your workplace test its employees for drug or alcohol use as part of the hiring process?
1 YES
2 NO
DK/REF (QD45b)
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.

QD45b [IF Q45a = 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.

QD46 [IF Q44a = 1 OR Q44b = 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

QD47 [IF QD39 = 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

QD48 [IF QD47 = 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, christenings, 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

RELBELFI 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

QD49. 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 QD49 = 1 OR DK/REF SKIP TO FIRST QUESTION FOLLOWING HH ROSTER, OTHERWISE CONTINUE.

DEFINE GRID WITH ROWS EQUAL TO QD49. EACH COLUMN OF THE GRID IS A QUESTION AS SPEC’D BELOW.

perageyr [IF D49 = 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 (peryrsex)

chagemon [IF PERAGEYR = 1 OR 2] ENTER THE AGE IN WHOLE MONTHS FOR THIS HOUSEHOLD MEMBER:

AGE IN MONTHS: ________ [RANGE 1 - 48]
DK/REF (Chyrsex)

chmonsex [IF CHAGEMON = 1 - 48] Is the [CHAGEMON FILL]-month old child a male or a female?

1 MALE
2 FEMALE
DK/REF (mbrselct)

chyrsex [IF CHAGEMON = DK/REF] Is this child a male or a female?

1 MALE
peryrsex  [IF CHAGEMON = 3 - 110 ] Is the [PERAGEYR FILL]-year old person a male or a female?

1  MALE
2  FEMALE
DK/REF (mbrselct)

persex  [IF perageyr = DK/REF] Is this person a male or a female?

1  MALE
2  FEMALE
DK/REF (mbrselct)

mrelaton  [IF CHMONSEX OR CHYRSEX OR PERYRSEX OR PERSEX = 1] HAND R SHOWCARD 9. 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

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?
frelaton  [IF CHMONSEX OR CHYRSEX OR PERYRSEX OR PERSEX = 2] HAND R SHOWCARD 10. 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

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

daus TYPE  [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.)
QD72  [IF QD01=2 AND CURNTAGE = 12 - 44] The next questions are about your health. Are you currently pregnant?

1  YES  
2  NO  
DK/REF

QD73  [IF QD72=1] How many months pregnant are you?

# OF MONTHS: ___________ [RANGE: 1 - 9]  
DK/REF

QHC01  Now we have some questions about any medical treatment you may have had in a hospital or emergency room.

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 (QHC02)

QHC02  During the past 12 months, how many different times have you stayed overnight or longer as a patient in a hospital?

#OF TIMES: ___________ [RANGE: 0 - 90]  
DK/REF (QHC03)

QHC03  [IF QHC02 >0] During the past 12 months, how many different times have you stayed overnight or longer in a hospital to receive treatment for psychological or emotional problems?

# OF TIMES: ___________ [RANGE: 0 - 90]  
DK/REF (QHC04)

QHC04  Have you received treatment for psychological or emotional problems at a mental health clinic or by a mental health professional on an outpatient basis in the past 12 months?

1  YES (proxyint)  
2  NO (proxyint)  
DK/REF (proxyint)

INTERVIEWER NOTE:
By “outpatient” we mean that the respondent did not stay overnight at the facility and did not receive meals there.

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.

family  IF D49 = 1 SKIP TO QHI01
IF D49 > 1 BUT RESPONDENT IS ONLY FAMILY MEMBER 18 OR OLDER, 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] 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:

<table>
<thead>
<tr>
<th>PERSON #</th>
<th>RELATIONSHIP TO R</th>
<th>AGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>SELF</td>
<td>44</td>
</tr>
<tr>
<td>2</td>
<td>HUSBAND</td>
<td>42</td>
</tr>
<tr>
<td>3</td>
<td>SON</td>
<td>16</td>
</tr>
<tr>
<td>4</td>
<td>BOARDER/ROOMER</td>
<td>16</td>
</tr>
</tbody>
</table>

THE GRID SHOULD LOOK LIKE THIS:

FAMILY MEMBERS:
42 year old Husband
16 year old Son

QP01  [IF GRID HAS MORE THAN 1 PERSON LISTED] [SHOW GRID ON SCREEN.] I have listed as 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 PERSON LISTED] [SHOW GRID ON SCREEN.] 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 (QP02)
2 NO (QHI01) [ACTIVATE PROXYFILL AS “YOU/YOUR” FOR REMAINING QS]
DK/REF (QHI01) [ACTIVATE PROXYFILL AS “YOU/YOUR” FOR REMAINING QUESTIONS]

QP02  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.

__________ (QP03) [ACTIVATE QP02 FILL]
DK/REF (QHI01)

QP03  Is your [QP02 FILL] here at home now?

1 YES (QP04)
2 NO (QHI01) [ACTIVATE PROXYFILL AS “YOU/YOUR” FOR REMAINING QUESTIONS]
DK/REF (QHI01) [ACTIVATE PROXYFILL AS “YOU/YOUR” FOR REMAINING QUESTIONS]

QP04  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]
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]

toproy [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 11.

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 (QHI03)
2 NO (QHI03)

DK/REF (QHI03)

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 (QHI04)
2 NO (QHI04)

DK/REF (QHI04)

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 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 (QHI05)
2 NO (QI01)
DK/REF (QI01)

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.

QHI05 (Was your/SAMPLE MEMBER’S) private health insurance obtained through work, such as through an employer, union, or professional association?

1 YES (QHI06a)
2 NO (QHI06a)
DK/REF (QHI06a)

INTERVIEWER NOTE:
This health insurance could be obtained through any family member’s employment, not just the respondent’s employment.

QHI06a Does (your/SAMPLE MEMBER’S) private health insurance include coverage for treatment for any of the following conditions?

Alcohol abuse or alcoholism?

1 YES (QHI06b)
2 NO (QHI06b)
DK/REF (QHI06b)

QHI06b Drug abuse?

1 YES (QHI06c)
2 NO (QHI06c)
DK/REF (QHI06c)

QHI06c Mental or emotional problems?

1 YES
2 NO
DK/REF

QHI07 [IF QHI01 =1 OR QHI02 =1 OR QHI03=1 OR QHI04=1. ELSE SKIP TO QHI09] 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 (QHI08)
2 NO (QI01)
QHI08 During the past 12 months, about how many months were (you/SAMPLE MEMBER) without any kind of health insurance or coverage?

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

QHI09 [IF QHI01 AND QHI02 AND QHI03 AND QHI04 = 2. ELSE SKIP TO QI01] About how long has it been since (you/SAMPLE MEMBER) last had any kind of health coverage?

1 WITHIN THE PAST 6 MONTHS (QHI10)
2 MORE THAN 6 MONTHS AGO, BUT WITHIN THE PAST YEAR (QHI10)
3 MORE THAN 1 YEAR AGO, BUT WITHIN THE PAST 3 YEARS (QHI10)
4 MORE THAN 3 YEARS AGO (QHI10)
5 NEVER HAD COVERAGE (QHI11b)

QHI10 [IF QHI09 = 1-4 OR DK/REF] HAND R SHOWCARD 12. 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 (QHI11)
2 MEDICAID OR MEDICAL ASSISTANCE (QHI11)
3 MILITARY HEALTH CARE (CHAMPUS, TRICARE, CHAMPVA, THE VA) (QHI11)
4 MEDICARE (QHI11)
5 SOME OTHER GOVERNMENT PROGRAM (QHI11)
6 SOME OTHER KIND OF COVERAGE

QHI10SP [IF QHI10 = 6] SPECIFY OTHER KIND OF COVERAGE:

QHI11a [IF QHI09 = 1 - 4 OR DK/REF] HAND R SHOWCARD 13. 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

QHI11ASP [IF QHI11a = 11] SPECIFY OTHER REASON WHY (R/SAMPLE MEMBER) STOPPED BEING COVERED BY HEALTH INSURANCE
DK/REF

HI11b  [IF QHI09 = 5] HAND R SHOWCARD 14. 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

QHI11BSP  [IF HI11b = 5] SPECIFY OTHER REASON WHY (R/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 and your 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    (QI03)
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 AND 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 (QI03)
2 NO (QI03)
DK/REF (QI03)

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 (QI05)
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 AND 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 (QI05)
2 NO (QI05)
DK/REF (QI05a)

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 AND 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 (QI05)
2 NO (QI05)
DK/REF (QI05)

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.
Q105a  [IF FAMLY=GRID] In [CURRENT YEAR - 1], did (you/SAMPLE MEMBER) or anyone in (your/SAMPLE MEMBER’S) family living here receive food stamps?

<table>
<thead>
<tr>
<th></th>
<th>YES (QI06)</th>
<th></th>
<th>NO (QI06)</th>
<th>DK/REF  (QI06)</th>
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<tbody>
<tr>
<td>1</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Q105b  [IF NO OTHER FAMILY IN HOUSEHOLD] In [CURRENT YEAR - 1], did you receive food stamps?

<table>
<thead>
<tr>
<th></th>
<th>YES (QI06)</th>
<th></th>
<th>NO (QI06)</th>
<th>DK/REF  (QI06)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.

Q106  At any time during [CURRENT YEAR - 1], even for one month, did (you/SAMPLE MEMBER) receive any government payments because (your/SAMPLE MEMBER’S) income was low, such as temporary assistance for needy families, welfare, or public assistance?

<table>
<thead>
<tr>
<th></th>
<th>YES (QI08)</th>
<th></th>
<th>NO</th>
<th>DK/REF  (QI08)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td>2</td>
<td></td>
<td></td>
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</tbody>
</table>

Q107a  [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1]. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRID AND QP04=1] At any time during [CURRENT YEAR - 1], even for one month, did you receive any government payments 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 AND QP04 NE 1]] At any time during [CURRENT YEAR - 1], even for one month, did your READ RELATIONSHIP SHOWN BELOW receive any government payments 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 government payments because his/her income was low, such as temporary assistance for needy families, welfare, or public assistance? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.

<table>
<thead>
<tr>
<th>1</th>
<th>YES (QI08)</th>
<th>2</th>
<th>NO (QI08)</th>
<th>DK/REF (QI08)</th>
</tr>
</thead>
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</table>

Q107b  [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 any government payments 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 AND QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive any government payments 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 government payments because his/her income was low, such as temporary assistance for needy families, welfare, or public assistance?

<table>
<thead>
<tr>
<th>1</th>
<th>YES (QI08)</th>
<th>2</th>
<th>NO (QI08)</th>
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</table>
**QI08**

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 (QI10)
2. NO (QI09)

**INTERVIEWER NOTE:**

Only non-monetary types of assistance should be included for this question.

**QI09a**

**IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI06 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 AND 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

**QI09b**

**IF FAMLY=GRID AND QI01=1 AND QI03=1 AND QI06=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 AND 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

**QI10a**

**IF QI06=1 OR QI07=1 OR QI08=1 OR QI09=1 AND (QI05a=2 OR QI05b=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 (QI11)**

**INTERVIEWER NOTE:**

Only non-monetary types of assistance should be included for this question.

**QI11**

**NUMBER OF MONTHS RECEIVED ASSISTANCE (QI11)**

**DK/REF (QI11)**
QI10b  [IF QI06=1 OR QI07=1 OR QI08=1 OR QI09=1 AND (QI05a = 1 OR QI05b=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 (QI11)

DK/REF (QI11)

QI11  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 (QI13)
2 NO (QI12)
DK/REF (QI12)

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.

QI12a  [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI06 NE 1 OR QI08 NE1]]. 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 AND 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 (QI13)
2 NO (QI13)
DK/REF (QI13)

QI12b  [IF FAMLY=GRID AND [QI01=1 AND QI03=1 AND QI06=1 AND QI08=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 AND 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 (QI13)
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.

QI13 In [CURRENT YEAR - 1], did (you/SAMPLE MEMBER) receive any child support payments?
1 YES (QI15)
2 NO (QI14)
DK/REF (QI14)

INTERVIEWER NOTE:
Child support is money received from parents for the support of their children. 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.

QI14a [IF FAMILY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI06 NE 1 OR QI08 NE 1 OR QI11 NE 1]. SHOW GRID ON SCREEN.]

[IF ONLY 1 PERSON IN GRID AND QP04=1] In [CURRENT YEAR - 1], did you receive any child support payments?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 AND QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive any child support payments?

[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 any child support payments? READ RELATIONSHIPS SHOWN BELOW AS NECESSARY.
1 YES (QI15)
2 NO (QI15)
DK/REF (QI15)

QI14b [IF FAMILY=GRID AND [QI01=1 AND QI03=1 AND QI06=1 AND QI08=1 AND QI11=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?

[IF ONLY 1 PERSON IN GRID AND [QP01 NE 1 AND QP04 NE 1]] In [CURRENT YEAR - 1], did your READ RELATIONSHIP SHOWN BELOW receive any child support payments?

[IF MORE THAN 1 PERSON IN GRID] In [CURRENT YEAR - 1], did any of these family members receive any child support payments?
1 YES (QI15)
2 NO (QI15)
DK/REF (QI15)

INTERVIEWER NOTE:
Child support is money received from parents for the support of their children. 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.

**QI15**  In [CURRENT YEAR - 1], did (you/SAMPLE MEMBER) receive income from wages or pay earned while working at a job or business?

1  YES  (QI17)
2  NO   (QI16)
DK/REF (QI16)

**QI16a**  [IF FAMLY=GRID AND [QI01 NE 1 OR QI03 NE 1 OR QI06 NE 1 OR QI08 NE1 OR QI11 NE 1 OR QI13 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 AND 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  (QI17)
2  NO   (QI17)
DK/REF (QI17)

**QI16b**  [IF FAMLY=GRID AND [QI01=1 AND QI03=1 AND QI06=1 AND QI08=1 AND QI11=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) 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 AND 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  (QI17)
2  NO   (QI17)
DK/REF (QI17)

**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  (INTROTIN)
2  NO   (QI18)
DK/REF (QI18)

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 QI06 NE 1 OR QI08 NE1 OR QI11 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 AND 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 (Intro tin)
2 NO (Intro tin)
DK/REF (intro tin)

QI18b

[IF FAMILY=GRID AND [QI01=1 AND QI03=1 AND QI06=1 AND QI08=1 AND QI11=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 AND 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 (Intro tin)
2 NO (Intro tin)
DK/REF (intro tin)

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 QI06 = 1, INCFILLP3= public assistance.
ELSE INCFILLP3=BLANK.

IF QI11 = 1, INCFILLP4= savings or dividend income.
ELSE INCFILLP4=BLANK.
IF Q13 = 1, INCFILLP5 = child support.
ELSE INCFILLP5 = BLANK.

IF Q15 = 1, INCFILLP6 = wages from employment.
ELSE INCFILLP6 = BLANK.

IF Q17 = 1, INCFILLP7 = other income.
ELSE INCFILLP7 = BLANK.

**Intro**
The next two questions are about (your/SAMPLE MEMBER’S) total personal income during [CURRENT YEAR - 1] before deductions and from all sources.

Please include money from INCFILLP1, INCFILLP2, INCFILLP3, and INCFILLP UNTIL ALL INCFILLPS INSERTED that we just talked about.

PRESS [ENTER] TO CONTINUE.

**Q120** Before deductions, was your 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 (Hand16a)
2 LESS THAN $20,000 (hand17a)
DK (Introfi1)
REF (Introfi1)

INTERVIEWER NOTE:
Do not include money received from loans or tax refunds.

hand15a HAND R SHOWCARD 15.

PRESS [ENTER] TO CONTINUE.

**INTRO** 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.)

(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.

**Q121a** [IF Q120=2 OR DK] ENTER NUMBER THAT BEST REPRESENTS R’S/SAMPLE MEMBER’S TOTAL PERSONAL INCOME DURING THE PAST 12 MONTHS.

1 LESS THAN $1,000 (INCLUDING LOSS) (introfi1)
2 $1,000 - $1,999 (introfi1)
3 $2,000 - $2,999 (introfi1)
4 $3,000 - $3,999 (introfi1)
5 $4,000 - $4,999 (introfi1)
6 $5,000 - $5,999 (introfi1)
7 $6,000 - $6,999 (introfi1)
8 $7,000 - $7,999 (introfi1)
9 $8,000 - $8,999 (introfi1)
10 $9,000 - $9,999 (introfi1)
11 $10,000 - $10,999 (introfi1)
12 $11,000 - $11,999 (introfi1)
13 $12,000 - $12,999 (introfi1)
14 $13,000 - $13,999 (introfi1)
15 $14,000 - $14,999 (introfi1)
16 $15,000 - $15,999 (introfi1)
17 $16,000 - $16,999 (introfi1)
18 $17,000 - $17,999 (introfi1)
19 $18,000 - $18,999 (introfi1)
20 $19,000 - $19,999 (introfi1)
DK/REF (introfi1)

hand16a [IF QI20=1 OR QI21a=21] HAND R SHOWCARD 16.

PRESS [ENTER] TO CONTINUE. (Qi21b)

qi21b ENTER NUMBER THAT BEST REPRESENTS (R'S/SAMPLE MEMBER’S) TOTAL PERSONAL INCOME DURING [CURRENT YEAR - 1].

22 $20,000 - $24,999 (introfi1)
23 $25,000 - $29,999 (introfi1)
24 $30,000 - $34,999 (introfi1)
25 $35,000 - $39,999 (introfi1)
26 $40,000 - $44,999 (introfi1)
27 $45,000 - $49,999(introfi1)
28 $50,000 - $74,999 (introfi1)
29 $75,000 OR MORE
DK/REF (introfi1)

CREATE INC FILLF:

CREATE INC FILLF:
IF QI01 = 1 OR QI02=1, INC FILLF1= Social Security.
ELSE INC FILLF1=BLANK.

IF QI03 = 1 OR QI04=1, INC FILLF2= SSI.
ELSE INC FILLF2=BLANK.

IF QI06 = 1 OR QI07=1, INC FILLF3= public assistance.
ELSE INC FILLF4=BLANK.

IF QI11 = 1 OR QI12=1, INC FILLF4= savings or dividend income.
ELSE INC FILLF6=BLANK.

IF QI13 = 1 OR QI14=1, INC FILLF5= child support.
ELSE INC FILLF7=BLANK.

IF QI15 = 1 OR QI16 = 1, INC FILLF6= wages from employment.
ELSE INC FILLF8=BLANK.

IF QI17 = 1 OR QI18 =1, INC FILLF7= other income.
ELSE INC FILLF9=BLANK

[introfi1] [SHOW GRID ON SCREEN] The next two questions are about the total family income during [CURRENT YEAR - 1] before deductions and from all sources. 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 INC FILLF1, INC FILLF2, INC FILLF3, and INC FILLF UNTIL ALL INC FILLF INSERTED that we just talked about.

Q122 Before deductions, was the total combined family income during [CURRENT YEAR - 1] more or less than 20,000 dollars?

(Inc ome 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 (Hand16b)
2 LESS THAN $20,000 (hand17b)
DK (QI24)
REF (QI24)

INTERVIEWER NOTE:
Do not include money received from loans or tax refunds.

**hand17b HAND R SHOWCARD 15.**

PRESS [ENTER] TO CONTINUE.

**INTROFI2** [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.

**Q123a** [IF QI22=2 OR DK] ENTER NUMBER THAT BEST REPRESENTS THE TOTAL COMBINED FAMILY INCOME IN [CURRENT YEAR - 1].

1. LESS THAN $1,000 (INCLUDING LOSS) (QI24)
2. $1,000 - $1,999 (QI24)
3. $2,000 - $2,999 (QI24)
4. $3,000 - $3,999 (QI24)
5. $4,000 - $4,999 (QI24)
6. $5,000 - $5,999 (QI24)
7. $6,000 - $6,999 (QI24)
8. $7,000 - $7,999 (QI24)
9. $8,000 - $8,999 (QI24)
10. $9,000 - $9,999 (QI24)
11. $10,000 - $10,999 (QI24)
12. $11,000 - $11,999 (QI24)
13. $12,000 - $12,999 (QI24)
14. $13,000 - $13,999 (QI24)
15. $14,000 - $14,999 (QI24)
16. $15,000 - $15,999 (QI24)
17. $16,000 - $16,999 (QI24)
18. $17,000 - $17,999 (QI24)
19. $18,000 - $18,999 (QI24)
20. $19,000 - $19,999 (QI24)
21. DK/REF (QI24)

**hand16b HAND R SHOWCARD 16. (QI23B)**

**qi23b** [IF QI22=1 OR QI23A = 21 OR DK] ENTER NUMBER THAT BEST REPRESENTS TOTAL COMBINED FAMILY INCOME DURING [CURRENT YEAR - 1].

22. $20,000 - $24,999 (QI24)
23. $25,000 - $29,999 (QI24)
24. $30,000 - $34,999 (QI24)
25. $35,000 - $39,999 (QI24)
26. $40,000 - $44,999 (QI24)
27. $45,000 - $49,999 (QI24)
28. $50,000 - $54,999 (QI24)
29. $55,000 OR MORE (QI24)
30. DK/REF (QI24)

**Q124** The last question is: 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]

THANKER

BE SURE YOU HAVE YOUR SHOWCARD BOOKLET.

PRESS [ENTER] TO CONTINUE.

VERID

ENTER THE VERIFICATION ID FROM THE VERIFICATION FORM FOR THIS INTERVIEW.

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.

FIDBF00

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

FIDBF00A

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

FIDBF01

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

FIDBF02

How cooperative has the respondent been?

1 VERY COOPERATIVE
2 FAIRLY COOPERATIVE
3 NOT VERY COOPERATIVE
4 OPENLY HOSTILE

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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)

Other people present or listening to the interview were . . . (Enter codes for all that apply.)

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

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.

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

How much difficulty did the respondent have using the computer to answer the questions about tobacco products?

1 NO DIFFICULTY
2 SOME DIFFICULTY
3 A LOT OF DIFFICULTY

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

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.

_________________________ [Field Width = 250 characters]

**FIEXIT**  End of interview reached.

PRESS 1 TO EXIT.