

Appendix: Survey Instrument

*** QUESTION # 1 ***

Hello, my name is [I]## and I am calling on behalf of the University of Kentucky. We are conducting a survey of adolescents in Kentucky sponsored by the Kentucky Cabinet for Health and Family Services. The study is mostly on health issues and includes questions about alcohol and drug use and should take approximately 10 to 25 minutes depending on the answers given. Your telephone number has been chosen at random and all participants in the study will remain anonymous. Are you the parent or legal guardian of any adolescents aged 12 through 17 who live in this household?

[IF NO: Are there adolescents age 12 through 17 who live in this household?

IF THERE ARE: May I speak to one of their parents or legal guardian?].

- <1> YES → GO TO Q#2
- <2> NO → TERMINATE INTERVIEW

*** QUESTION # 2 ***

How many adolescents age 12 through 17 live in your household?

- <1> open end → GO TO Q#3

*** QUESTION # 3 ***

I would like your permission to speak with the 12 to 17 year old in your household who had the most recent birthday (and is a Kentucky resident). Would you please tell me only his or her first name?

- <1> open end → GO TO Q#4

*** QUESTION # 4 ***

(I'm sorry, is that the name of a boy or a girl?)

- <1> MALE → GO TO Q#5
- <2> FEMALE → GO TO Q#5

*** QUESTION # 5 ***

Are you [Q3]'s parent? or legal guardian?

- <1> YES → GO TO Q#6
- <2> NO

If no, "May I speak with [Q3]'s parent or legal guardian?" then repeat

question. If no one is available → TERMINATE INTERVIEW

*** QUESTION # 6 ***

Are any of the children/Is the child a resident of Kentucky?

- <1> YES → GO TO Q#7
- <2> NO → TERMINATE INTERVIEW

*** QUESTION # 7 ***

If I have your permission to interview [Q3] it will be very important for my discussion with (him/her) to be private. It is important to the credibility of the project that [Q3] feels he/she can answer all the questions honestly, and so I need to ask if you would be willing to leave the room and not listen in on the conversation on another line. When the interview is complete we encourage you to speak with [Q3]

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about the survey. If this is acceptable to you, may I have your permission to interview [Q3]?

- <1> YES → GO TO Q#8
- <2> NO → TERMINATE INTERVIEW

*** QUESTION # 8 ***

[READ TO ADOLESCENT RESPONDENT]

Hello, my name is [I]## and I am calling on behalf of the University of Kentucky. We are conducting a survey of adolescents aged 12 through 17 on health issues including the use of alcohol and drugs. The interview should take from 10 to 25 minutes depending on your answers. You may stop the interview at any time or skip questions that make you feel uncomfortable. I have informed your parent that our conversation must be private, so they should have left the room. I assure you that all of your answers will be kept strictly confidential. To help protect your privacy I'm going to ask that you not repeat any of my questions out loud. If you don't understand something I've said you can ask me to repeat the question or just say "skip" to go to the next question.

Do you have any questions?

If I have your permission let me begin by asking, how old were you on your last birthday?

- <1> open end → GO TO Q#9

*** QUESTION # 9 ***

Including yourself, how many people under age 18 live in your home on a regular basis?

- <1> open end → GO TO Q#10

*** QUESTION # 10 ***

How many people 18 years or older live in your home on a regular basis?

- <1> open end → GO TO Q#11

*** QUESTION # 11 ***

Were you enrolled in school this past year?

- <1> YES → GO TO Q#12
- <2> NO → GO TO Q#13
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#15
- <9> *REFUSED* → GO TO Q#15

*** QUESTION # 12 ***

What grade did you just complete?

- <1> open end → GO TO Q#14

*** QUESTION #13 ***

Why were you not enrolled in school in the past year?

- <1> Home School → GO TO Q#15

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<2> Expelled/Suspended → GO TO Q#15
<3> Other → GO TO Q#15
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#15
<9> *REFUSED* → GO TO Q#15

*** QUESTION # 14 ***

What is your grade point average so far this year?

<1> open end → GO TO Q#15

*** QUESTION # 15 ***

Are you employed at a job outside your home?

<1> YES → GO TO Q#16
<2> NO → GO TO Q#16
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#16
<9> *REFUSED* → GO TO Q#16

*** QUESTION # 16 ***

Are you of Hispanic, Latino or Spanish origin?

<1> YES → GO TO Q#17
<2> NO → GO TO Q#19
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#19
<9> *REFUSED* → GO TO Q#19

*** QUESTION # 17 ***

Are you: (specify national origin)

<1> Mexican / Mexican American / Chicano(a) (USE "a" for female)
<2> Puerto Rican → GO TO Q#19
<3> Central or South American → GO TO Q#19
<4> Cuban / Cuban American → GO TO Q#19
<5> Other → GO TO Q#18
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#19
<9> *REFUSED* → GO TO Q#19

*** QUESTION # 18 ***

What other national origin?

<1> open end → GO TO Q#19

*** QUESTION # 19 ***

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Aside from your heritage or national origin, what race do you consider yourself?

- <1> Caucasian → GO TO Q#22
- <2> Black or African American → GO TO Q#22
- <3> Asian → GO TO Q#22
- <4> American Indian or Alaska Native → GO TO Q#21
- <5> Pacific Islander → GO TO Q#22
- <6> OTHER → GO TO Q#20
- <7> #
- <8> *DON'T KNOW* → GO TO Q#22
- <9> *REFUSED* → GO TO Q#22

*** QUESTION # 20 ***

What other race?

- <1> open end → GO TO Q#22

*** QUESTION # 21 ***

What tribe do you consider yourself to be?

- <1> open end → GO TO Q#22

CONDITIONAL: IF Q#8 < 16, THEN GO TO Q#23, ELSE GO TO Q#22

*** QUESTION # 22 ***

Do you have a driver's license?

- <1> YES → GO TO Q#23
- <2> NO → GO TO Q#23
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#23
- <9> *REFUSED* → GO TO Q#23

*** QUESTION # 23 ***

Do you personally have a cell phone? One that is not shared by anyone else in your family?

- <1> YES → GO TO Q#24
- <2> NO → GO TO Q#24
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#24
- <9> *REFUSED* → GO TO Q#24

*** QUESTION # 24 ***

During the past 12 months has your physical health been excellent, very good, good, fair, or poor?

- <1> EXCELLENT → GO TO Q#25
- <2> VERY GOOD → GO TO Q#25
- <3> GOOD → GO TO Q#25
- <4> FAIR → GO TO Q#25
- <5> POOR → GO TO Q#25
- <6> #
- <7> #

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<8> *DON'T KNOW* → GO TO Q#25
<9> *REFUSED* → GO TO Q#25

*** QUESTION # 25 ***

During the past 12 months has your emotional or psychological health been excellent, very good, good, fair, or poor?

<1> EXCELLENT → GO TO Q#26
<2> VERY GOOD → GO TO Q#26
<3> GOOD → GO TO Q#26
<4> FAIR → GO TO Q#26
<5> POOR → GO TO Q#26
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#26
<9> *REFUSED* → GO TO Q#26

*** QUESTION # 26 ***

In the past 12 months, how often have you felt nervous or stressed?
Would you say

<1> NEVER → GO TO Q#27
<2> ALMOST NEVER → GO TO Q#27
<3> SOMETIMES → GO TO Q#27
<4> FAIRLY OFTEN → GO TO Q#27
<5> VERY OFTEN → GO TO Q#27
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#27
<9> *REFUSED* → GO TO Q#27

*** QUESTION # 27 ***

Have you ever, in your entire life, been diagnosed by a health professional as having some sort of emotional or psychological problem that required treatment, like depression, anxiety attacks or schizophrenia?

<1> YES → GO TO Q#28
<2> NO → GO TO Q#28
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#28
<9> *REFUSED* → GO TO Q#28

*** QUESTION # 28 ***

Have you received treatment for any emotional or psychological problems within the past 12 months?

<1> YES → GO TO Q#29
<2> NO → GO TO Q#29
<3> #
<4> #

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<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#29
<9> *REFUSED* → GO TO Q#29

*** QUESTION # 29 ***

Have you ever smoked a cigarette in your life?

<1> YES → GO TO Q#30
<2> NO → GO TO Q#33
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#33
<9> *REFUSED* → GO TO Q#33

*** QUESTION # 30 ***

Have you smoked at least 100 cigarettes in your lifetime?

<1> YES → GO TO Q#31
<2> NO → GO TO Q#31
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#31
<9> *REFUSED* → GO TO Q#31

*** QUESTION # 31 ***

When was the last time you smoked a cigarette?

<1> WITHIN THE PAST 30 DAYS → GO TO Q#32
<2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#33
<3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#33
<4> OVER 1 YEAR AGO → GO TO Q#33
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#33
<9> *REFUSED* → GO TO Q#33

*** QUESTION # 32 ***

How many cigarettes have you smoked in the past 30 days?

<1> ABOUT 2 PACKS/DAY OR MORE → GO TO Q#33
<2> ABOUT 1½ PACKS/DAY → GO TO Q#33
<3> ABOUT 1 PACK/DAY → GO TO Q#33
<4> ABOUT ½ PACK/DAY → GO TO Q#33
<5> 2 TO 5 CIGARETTES/DAY → GO TO Q#33
<6> 1 CIGARETTE/DAY → GO TO Q#33
<7> LESS THAN 1 CIGARETTE/DAY → GO TO Q#33
<8> *DON'T KNOW* → GO TO Q#33
<9> *REFUSED* → GO TO Q#33

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*** QUESTION # 33 ***

Have you ever used chewing tobacco, snuff or any other type of smokeless tobacco?

- <1> YES → GO TO Q#34
- <2> NO → GO TO Q#35
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#35
- <9> *REFUSED* → GO TO Q#35

*** QUESTION # 34 ***

When was the most recent time you used smokeless tobacco?

- <1> WITHIN THE PAST 30 DAYS → GO TO Q#35
- <2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#35
- <3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#35
- <4> OVER 1 YEAR AGO → GO TO Q#35
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#35
- <9> *REFUSED* → GO TO Q#35

*** QUESTION # 35 ***

Now I will ask you questions about your use of alcohol and other drugs. For most of the questions you will only need to say "yes" or "no." Please remember that we will keep your answers confidential, so your name will never be associated with your answers.

I would like to know if you have ever had a drink of alcohol in your life. By drink, I don't mean just a sip. I mean a glass of wine or beer, a can of beer, a mixed drink, or a shot of hard liquor.

Have you ever had a drink of alcohol?

- <1> YES → GO TO Q#36
- <2> NO → GO TO Q#37
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#37
- <9> *REFUSED* → GO TO Q#37

*** QUESTION # 36 ***

When was the last time you had a drink of alcohol?

- <1> WITHIN THE PAST 30 DAYS → GO TO Q#37
- <2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#37
- <3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#37
- <4> OVER 1 YEAR AGO → GO TO Q#37
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#37
- <9> *REFUSED* → GO TO Q#37

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*** QUESTION # 37 ***

I am now going to ask about your non-medical use of drugs, not drugs you may be taking under a doctor's orders. By "non-medical use" I mean drugs you used to get high, for curiosity, or to go along with friends. Remember, all information on this survey is strictly confidential.

Have you ever used marijuana or hashish, even once in your entire life?

- <1> YES → GO TO Q#38
- <2> NO → GO TO Q#39
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#39
- <9> *REFUSED* → GO TO Q#39

*** QUESTION # 38 ***

When was the last time you used marijuana or hashish?

- <1> WITHIN THE PAST 30 DAYS → GO TO Q#39
- <2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#39
- <3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#39
- <4> OVER 1 YEAR AGO → GO TO Q#39
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#39
- <9> *REFUSED* → GO TO Q#39

*** QUESTION # 39 ***

Have you ever used hallucinogens such as LSD, "acid", PCP, or peyote even once in your entire life?

- <1> YES → GO TO Q#40
- <2> NO → GO TO Q#41
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#41
- <9> *REFUSED* → GO TO Q#41

*** QUESTION # 40 ***

When was the last time you used hallucinogens?

- <1> WITHIN THE PAST 30 DAYS → GO TO Q#41
- <2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#41
- <3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#41
- <4> OVER 1 YEAR AGO → GO TO Q#41
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#41
- <9> *REFUSED* → GO TO Q#41

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*** QUESTION # 41 ***

Have you ever used "club drugs" such as Ecstasy or GHB even once in your entire life?

- <1> YES → GO TO Q#42
- <2> NO → GO TO Q#43
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#43
- <9> *REFUSED* → GO TO Q#43

*** QUESTION # 42 ***

When was the last time you used "club drugs"?

- <1> WITHIN THE PAST 30 DAYS → GO TO Q#43
- <2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#43
- <3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#43
- <4> OVER 1 YEAR AGO → GO TO Q#43
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#43
- <9> *REFUSED* → GO TO Q#43

*** QUESTION # 43 ***

Have you ever used inhalants to get high even once in your entire life?

Inhalants are things like paint thinner, glue, laughing gas, and correction fluid.

- <1> YES → GO TO Q#44
- <2> NO → GO TO Q#45
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#45
- <9> *REFUSED* → GO TO Q#45

*** QUESTION # 44 ***

When was the last time you used inhalants?

- <1> WITHIN THE PAST 30 DAYS → GO TO Q#45
- <2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#45
- <3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#45
- <4> OVER 1 YEAR AGO → GO TO Q#45
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#45
- <9> *REFUSED* → GO TO Q#45

*** QUESTION # 45 ***

Have you ever used cocaine or crack even once in your entire life?

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- <1> YES → GO TO Q#46
- <2> NO → GO TO Q#47
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#47
- <9> *REFUSED* → GO TO Q#47

*** QUESTION # 46 ***

When was the last time you used cocaine or crack?

- <1> WITHIN THE PAST 30 DAYS → GO TO Q#47
- <2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#47
- <3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#47
- <4> OVER 1 YEAR AGO → GO TO Q#47
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#47
- <9> *REFUSED* → GO TO Q#47

*** QUESTION # 47 ***

Have you ever used amphetamines, methamphetamines, or other stimulants even once in your entire life?

- <1> YES → GO TO Q#48
- <2> NO → GO TO Q#49
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#49
- <9> *REFUSED* → GO TO Q#49

*** QUESTION # 48 ***

When was the last time you used amphetamines, methamphetamines, or stimulants?

- <1> WITHIN THE PAST 30 DAYS → GO TO Q#49
- <2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#49
- <3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#49
- <4> OVER 1 YEAR AGO → GO TO Q#49
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#49
- <9> *REFUSED* → GO TO Q#49

*** QUESTION # 49 ***

Have you ever used prescription medications even once in your entire life for non-medical reasons?

- <1> YES → GO TO Q#50
- <2> NO → GO TO Q#56
- <3> #

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<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#56
<9> *REFUSED* → GO TO Q#56

*** QUESTION # 50 ***

What type of prescription medication(s) did you take for non-medical reasons? Did you take opiates such as, Vicodin, Codeine, or Demerol? (But not including Oxycodone/Oxycontin/Percodan)

<1> YES → GO TO Q#51
<2> NO → GO TO Q#52
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#52
<9> *REFUSED* → GO TO Q#52

***QUESTION # 51 ***

When was the last time you used opiates other than Oxycodone/Oxycontin?

<1> WITHIN THE PAST 30 DAYS → GO TO Q#52
<2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#52
<3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#52
<4> OVER 1 YEAR AGO → GO TO Q#52
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#52
<9> *REFUSED* → GO TO Q#52

*** QUESTION # 52 ***

Did you ever take Oxycodone/Oxycontin for non medical reasons?

<1> YES → GO TO Q#53
<2> NO → GO TO Q#54
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#54
<9> *REFUSED* → GO TO Q#54

*** QUESTION # 53 ***

When was the last time you used Oxycodone/Oxycontin for non-medical reasons?

<1> WITHIN THE PAST 30 DAYS → GO TO Q#54
<2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#54
<3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#54
<4> OVER 1 YEAR AGO → GO TO Q#54
<5> #
<6> #
<7> #

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<8> DON'T KNOW → GO TO Q#54
<9> REFUSED → GO TO Q#54

*** QUESTION # 54 ***

Did you ever take sedatives like Valium, Librium, or Xanax for non-medical reasons?

<1> YES → GO TO Q#55
<2> NO → GO TO Q#56
<3> #
<4> #
<5> #
<6> #
<7> #
<8> DON'T KNOW → GO TO Q#56
<9> REFUSED → GO TO Q#56

*** QUESTION # 55 ***

When was the last time you used sedatives for non-medical reasons?

<1> WITHIN THE PAST 30 DAYS → GO TO Q#56
<2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#56
<3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#56
<4> OVER 1 YEAR AGO → GO TO Q#56
<5> #
<6> #
<7> #
<8> DON'T KNOW → GO TO Q#56
<9> REFUSED → GO TO Q#56

*** QUESTION # 56 ***

Have you ever used any other drugs or medicines, including Over-The-Counter medications, for non-medical reasons?

<1> YES → GO TO Q#57
<2> NO → GO TO Q#64
<3> #
<4> #
<5> #
<6> #
<7> #
<8> DON'T KNOW → GO TO Q#64
<9> REFUSED → GO TO Q#64

*** QUESTION # 57 ***

What was that drug? Before you answer, if you think that someone may overhear your answer or that someone may be listening on another extension in the house I suggest you skip this question.

<1> open end → GO TO Q#58

*** QUESTION # 58 ***

Which of the following most closely resembles the effects of [Q#57]?

<1> STIMULANTS (like cocaine or amphetamines) → GO TO Q#59
<2> OPIATES (like Oxy or heroin) → GO TO Q#59
<3> HALLUCINOGENS (like LSD or Ecstasy) → GO TO Q#59
<4> SEDATIVES (like Valium) → GO TO Q#59
<5> MARIJUANA → GO TO Q#59
<6> ALCOHOL → GO TO Q#59

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<7> #
<8> *DON'T KNOW* → GO TO Q#59
<9> *REFUSED* → GO TO Q#59

*** QUESTION # 59 ***

When was the last time you used [Q#57]?

<1> WITHIN THE PAST 30 DAYS → GO TO Q#60
<2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO Q#60
<3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO Q#60
<4> OVER 1 YEAR AGO → GO TO Q#60
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#60
<9> *REFUSED* → GO TO Q#60

*** QUESTION # 60 ***

And are there any other drugs that you have ever used for non-medical reasons?

<1> YES → GO TO Q#61
<2> NO → GO TO Q#64
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#64
<9> *REFUSED* → GO TO Q#64

*** QUESTION # 61 ***

What was that drug? Before you answer, if you think that someone may overhear your answer or that someone may be listening on another extension in the house I suggest you skip this question.

<1> open end → GO TO Q#62

*** QUESTION # 62 ***

Which of the following most closely resembles the effects of [Q#61]?

<1> STIMULANTS (like cocaine or amphetamines) → GO TO Q#63
<2> OPIATES (like Oxy or heroin) → GO TO Q#63
<3> HALLUCINOGENS (like LSD or Ecstasy) → GO TO Q#63
<4> SEDATIVES (like Valium) → GO TO Q#63
<5> MARIJUANA → GO TO Q#63
<6> ALCOHOL → GO TO Q#63
<7> #
<8> *DON'T KNOW* → GO TO Q#63
<9> *REFUSED* → GO TO Q#63

*** QUESTION # 63 ***

When was the last time you used [Q#61]?

<1> WITHIN THE PAST 30 DAYS → GO TO ASSENT REFRESH
<2> BETWEEN 30 DAYS AND 6 MONTHS → GO TO ASSENT REFRESH
<3> BETWEEN 6 MONTHS AND 1 YEAR → GO TO ASSENT REFRESH
<4> OVER 1 YEAR AGO → GO TO ASSENT REFRESH

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<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO ASSENT REFRESH
<9> *REFUSED* → GO TO ASSENT REFRESH

*** ASSENT REFRESH ***

Before we move on to the next section, I would like to make sure you are still comfortable participating in the survey. Are you still comfortable participating and confident that you are the only person in your household on the line?

<1> YES → GO TO Q#64
<2> NO → TERMINATE INTERVIEW

*** QUESTION # 64 ***

CONDITIONAL: IF Q#35 = 2, THEN GO TO Q#99, ELSE GO TO Q#64

I am now going to ask you some questions about your experience drinking alcoholic beverages.

In the past 12 months, how many days each month would you drink any alcohol? Again, by drink I mean a glass of wine or beer, a can of beer, a mixed drink, or a shot of hard liquor.

<1> open end → GO TO Q#65
<88> *DON'T KNOW* → GO TO Q#65
<99> *REFUSED* → GO TO Q#65

*** QUESTION # 65 ***

On days when you drank an alcoholic beverage in the past 12 months, on average about how many drinks would you have?

<1> open end → GO TO Q#66
IF MORE THAN 76, THEN CODE "77"
<88> *DON'T KNOW* → GO TO Q#66
<99> *REFUSED* → GO TO Q#66

CONDITIONAL: IF Q#4 = 2, THEN GO TO Q#67, ELSE GO TO Q#66

*** QUESTION # 66 ***

In the past 12 months, did you even once have five or more drinks in one day?

<1> YES → GO TO Q#68
<2> NO → GO TO Q#68
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#68
<9> *REFUSED* → GO TO Q#68

*** QUESTION # 67 ***

In the past 12 months, did you even once have four or more drinks in one day?

<1> YES → GO TO Q#68
<2> NO → GO TO Q#68

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<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#68
<9> *REFUSED* → GO TO Q#68

CONDITIONAL: IF Q#36 = 1, GO TO Q#68, ELSE GO TO Q#70

*** QUESTION # 68 ***

Earlier you indicated that you have used alcohol in the past 30 days.
How many days in the past month did you have a drink?

<1> open end → GO TO Q#69
<88> *DON'T KNOW* → GO TO Q#69
<99> *REFUSED* → GO TO Q#69

*** QUESTION # 69 ***

During the past month, on the days that you drank, about how many drinks would you have on the average?

<1> open end → GO TO Q#70
IF MORE THAN 76, THEN CODE "77"
<88> *DON'T KNOW* → GO TO Q#70
<99> *REFUSED* → GO TO Q#70

*** QUESTION # 70 ***

In your lifetime, have you ever gone on binges where you kept drinking for a couple of days or more without sobering up?

<1> YES → GO TO Q#71
<2> NO → GO TO Q#71
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#71
<9> *REFUSED* → GO TO Q#71

*** QUESTION # 71 ***

Did you neglect some of your usual responsibilities during times when you were drinking, like missing work or skipping school?

<1> YES → GO TO Q#72
<2> NO → GO TO Q#72
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#72
<9> *REFUSED* → GO TO Q#72

*** QUESTION # 72 ***

Has anyone ever objected to your drinking? Anyone includes family, friends, teachers, doctors, clergy, and co-workers.

<1> YES → GO TO Q#73
<2> NO → GO TO Q#73
<3> #

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<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#73
<9> *REFUSED* → GO TO Q#73

*** QUESTION # 73 ***

Have the police stopped or arrested you or contacted your parents because of your drinking?

<1> YES → GO TO Q#74
<2> NO → GO TO Q#74
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#74
<9> *REFUSED* → GO TO Q#74

*** QUESTION # 74 ***

Have you ever had a traffic accident because of drinking?

<1> YES → GO TO Q#75
<2> NO → GO TO Q#75
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#75
<9> *REFUSED* → GO TO Q#75

*** QUESTION # 75 ***

Have you ever been suspended from school because of your drinking?

<1> YES → GO TO Q#76
<2> NO → GO TO Q#76
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#76
<9> *REFUSED* → GO TO Q#76

CONDITIONAL: IF Q#70 = 2 AND Q#71 = 2 AND Q#72 = 2 AND Q#73 = 2 AND Q#74 = 2

AND Q#75 = 2, THEN GO TO Q#76, ELSE GO TO Q#77

*** QUESTION # 76 ***

Did you continue to drink after you realized drinking was causing any of the problems we just discussed?

<1> YES → GO TO Q#77
<2> NO → GO TO Q#77
<3> #
<4> #
<5> #
<6> #

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<7> #
<8> *DON'T KNOW* → GO TO Q#77
<9> *REFUSED* → GO TO Q#77

*** QUESTION # 77 ***

Have you ever accidentally injured yourself when you had been drinking, for example, had a bad fall or cut yourself badly?

<1> YES → GO TO Q#78
<2> NO → GO TO Q#78
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#78
<9> *REFUSED* → GO TO Q#78

*** QUESTION # 78 ***

Have you often been intoxicated in a situation where it increased your chances of getting hurt; for instance, when driving a car or boat, using knives, machinery, or guns, crossing against traffic, climbing or swimming?

<1> YES → GO TO Q#79
<2> NO → GO TO Q#79
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#79
<9> *REFUSED* → GO TO Q#79

*** QUESTION # 79 ***

Has there ever been a time when your drinking or being hung over frequently kept you from household chores or other responsibilities around the home?

<1> YES → GO TO Q#80
<2> NO → GO TO Q#80
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#80
<9> *REFUSED* → GO TO Q#80

*** QUESTION # 80 ***

Did your drinking or being hung over ever cause you to miss work frequently, lose a raise or promotion, or get fired?

<1> YES → GO TO Q#81
<2> NO → GO TO Q#81
<3> #
<4> #
<5> #
<6> #

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<7> #
<8> *DON'T KNOW* → GO TO Q#81
<9> *REFUSED* → GO TO Q#81

*** QUESTION # 81 ***

Did your drinking or being hung over ever cause you to miss school, be suspended from school, or do poorly on school work?

<1> YES → GO TO Q#82
<2> NO → GO TO Q#82
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#82
<9> *REFUSED* → GO TO Q#82

*** QUESTION # 82 ***

Have you often drunk more than you intended to?

<1> YES → GO TO Q#83
<2> NO → GO TO Q#83
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#83
<9> *REFUSED* → GO TO Q#83

*** QUESTION # 83 ***

Have you often drunk for a longer period of time than you intended to?

<1> YES → GO TO Q#84
<2> NO → GO TO Q#84
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#84
<9> *REFUSED* → GO TO Q#84

*** QUESTION # 84 ***

Have you ever drunk for a longer period of time than you intended repeatedly over a period longer than one month?

<1> YES → GO TO Q#85
<2> NO → GO TO Q#85
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#85
<9> *REFUSED* → GO TO Q#85

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*** QUESTION # 85 ***

Have you ever found that you had to drink more than you used to in order to get the same effect?

- <1> YES → GO TO Q#86
- <2> NO → GO TO Q#86
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#86
- <9> *REFUSED* → GO TO Q#86

*** QUESTION # 86 ***

Did you ever find that the same amount of alcohol had less effect on you than before?

- <1> YES → GO TO Q#87
- <2> NO → GO TO Q#87
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#87
- <9> *REFUSED* → GO TO Q#87

*** QUESTION # 87 ***

Have you often wanted to quit, cut down, or control your drinking?

- <1> YES → GO TO Q#88
- <2> NO → GO TO Q#88
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#88
- <9> *REFUSED* → GO TO Q#88

*** QUESTION # 88 ***

Were you ever unable to quit, cut down, or control your drinking?

- <1> YES → GO TO Q#89
- <2> NO → GO TO Q#89
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#89
- <9> *REFUSED* → GO TO Q#89

*** QUESTION # 89 ***

Has there ever been a period when you spent a great deal of time drinking alcohol or getting over its effects?

- <1> YES → GO TO Q#90
- <2> NO → GO TO Q#90
- <3> #

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<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#90
<9> *REFUSED* → GO TO Q#90

*** QUESTION # 90 ***

Have you ever given up or greatly reduced important activities in order to drink, like sports, work, or associating with friends or relatives?

<1> YES → GO TO Q#91
<2> NO → GO TO Q#91
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#91
<9> *REFUSED* → GO TO Q#91

*** QUESTION # 91 ***

Did you do that for at least a month, or do it more than twice?

<1> YES → GO TO Q#92
<2> NO → GO TO Q#92
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#92
<9> *REFUSED* → GO TO Q#92

*** QUESTION # 92 ***

People who cut down or stop drinking after drinking for a considerable time often have withdrawal symptoms. Common ones are the 'shakes' (hands tremble), being unable to sleep, feeling anxious or depressed, sweating, heart beating fast or the DTs or seeing or hearing things that aren't really there. Have you had any problems like that when you stopped or cut down on drinking?

<1> YES → GO TO Q#93
<2> NO → GO TO Q#93
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#93
<9> *REFUSED* → GO TO Q#93

*** QUESTION # 93 ***

Have you ever taken a drink to keep from having a hangover, the shakes, or any withdrawal symptoms, or taken a drink to make them go away?

<1> YES → GO TO Q#94
<2> NO → GO TO Q#94

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<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#94
<9> *REFUSED* → GO TO Q#94

*** QUESTION # 94 ***

There are several health problems that can result from drinking. Did drinking ever cause you to have liver disease, or yellow jaundice, give you stomach disease, or make you vomit blood, cause your feet to tingle or feel numb, give you memory problems even when you weren't drinking, or give you pancreatitis?

<1> YES → GO TO Q#95
<2> NO → GO TO Q#95
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#95
<9> *REFUSED* → GO TO Q#95

*** QUESTION # 95 ***

Did you continue to drink on more than one occasion knowing that drinking caused you to have a health problem?

<1> YES → GO TO Q#96
<2> NO → GO TO Q#96
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#96
<9> *REFUSED* → GO TO Q#96

*** QUESTION # 96 ***

Have you continued to drink when you knew you had any other serious physical illness that might be made worse by drinking?

<1> YES → GO TO Q#97
<2> NO → GO TO Q#97
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#97
<9> *REFUSED* → GO TO Q#97

*** QUESTION # 97 ***

Has alcohol ever caused you emotional or psychological problems, such as feeling uninterested in things, depressed, suspicious of others or paranoid, or caused you to have strange ideas?

<1> YES → GO TO Q#98
<2> NO → GO TO Q#98

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<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#98
<9> *REFUSED* → GO TO Q#98

*** QUESTION # 98 ***

Have you ever driven a car or other motor vehicle while intoxicated on alcohol?

<1> YES → GO TO Q#99
<2> NO → GO TO Q#99
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#99
<9> *REFUSED* → GO TO Q#99

CONDITIONAL: IF Q#37 = 1 OR
Q#39 = 1 OR
Q#41 = 1 OR
Q#43 = 1 OR
Q#45 = 1 OR
Q#47 = 1 OR
Q#49 = 1 OR
Q#56 = 1, THEN GO TO Q#99, ELSE GO TO Q#117

*** QUESTION # 99 ***

Earlier you indicated that you have used drugs other than alcohol. I would like to ask you a series of questions about the drugs you have used in your lifetime. Please remember that your answers are confidential and will never be associated with your name.

First, have you ever spent a great deal of time getting, using, or getting over the effects of drugs?

<1> YES → GO TO Q#100
<2> NO → GO TO Q#101
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#101
<9> *REFUSED* → GO TO Q#101

*** QUESTION #100 ***

Was that period ever as long as two weeks?

<1> YES → GO TO Q#101
<2> NO → GO TO Q#101
<3> #
<4> #
<5> #

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<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#101
<9> *REFUSED* → GO TO Q#101

*** QUESTION #101 ***

Have you often used drugs in larger amounts or used them for a longer period than you intended to?

<1> YES → GO TO Q#102
<2> NO → GO TO Q#102
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#102
<9> *REFUSED* → GO TO Q#102

*** QUESTION #102 ***

Have you often wanted to cut down on using drugs or ever tried to cut down but couldn't?

<1> YES → GO TO Q#103
<2> NO → GO TO Q#103
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#103
<9> *REFUSED* → GO TO Q#103

*** QUESTION #103 ***

Did you ever find you needed more drugs to get the same effect or find that the same amount had less effect than before?

<1> YES → GO TO Q#104
<2> NO → GO TO Q#104
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#104
<9> *REFUSED* → GO TO Q#104

*** QUESTION #104 ***

Did stopping or cutting down on drugs make you sick or give you withdrawal symptoms?

[READ LIST OF SYMPTOMS AS NEEDED:] Such as being depressed, anxious, having trouble concentrating, being tired, having trouble sleeping, trembling, sweating, being nauseated, having diarrhea, affecting your appetite, seeing or hearing things, having runny eyes, fits or seizures, muscle pains, or a fast heart rate?

<1> YES → GO TO Q#105
<2> NO → GO TO Q#105
<3> #

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<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#105
<9> *REFUSED* → GO TO Q#105

*** QUESTION #105 ***

Have you ever used drugs to make withdrawal symptoms go away or to keep from having them?

<1> YES → GO TO Q#106
<2> NO → GO TO Q#106
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#106
<9> *REFUSED* → GO TO Q#106

*** QUESTION #106 ***

Did drugs ever cause you physical health problems?

<1> YES → GO TO Q#107
<2> NO → GO TO Q#107
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#107
<9> *REFUSED* → GO TO Q#107

*** QUESTION #107 ***

Did you continue to use drugs after you knew it caused you these problems?

<1> YES → GO TO Q#108
<2> NO → GO TO Q#108
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#108
<9> *REFUSED* → GO TO Q#108

*** QUESTION #108 ***

Did your use of drugs cause you considerable problems with your family, friends, on the job, at school, or with the police?

<1> YES → GO TO Q#109
<2> NO → GO TO Q#110
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#110

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<9> *REFUSED* → GO TO Q#110

*** QUESTION #109 ***

Did you continue to use drugs after you realized it was causing any of these problems?

<1> YES → GO TO Q#110

<2> NO → GO TO Q#110

<3> #

<4> #

<5> #

<6> #

<7> #

<8> *DON'T KNOW* → GO TO Q#110

<9> *REFUSED* → GO TO Q#110

*** QUESTION #110 ***

Have you often been high on or suffering the after-effects of drugs while working or at school?

<1> YES → GO TO Q#111

<2> NO → GO TO Q#112

<3> #

<4> #

<5> #

<6> #

<7> #

<8> *DON'T KNOW* → GO TO Q#112

<9> *REFUSED* → GO TO Q#112

*** QUESTION #111 ***

Has that ever occurred repeatedly over a longer period of time?

<1> YES → GO TO Q#112

<2> NO → GO TO Q#112

<3> #

<4> #

<5> #

<6> #

<7> #

<8> *DON'T KNOW* → GO TO Q#112

<9> *REFUSED* → GO TO Q#112

*** QUESTION #112 ***

Have you often been high on drugs in a situation where it increased your chances of getting hurt?

<1> YES → GO TO Q#113

<2> NO → GO TO Q#113

<3> #

<4> #

<5> #

<6> #

<7> #

<8> *DON'T KNOW* → GO TO Q#113

<9> *REFUSED* → GO TO Q#113

*** QUESTION #113 ***

Did your drug use give you emotional or psychological problems?

<1> YES → GO TO Q#114

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<2> NO → GO TO Q#115
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#115
<9> *REFUSED* → GO TO Q#115

*** QUESTION #114 ***

Did you continue to use drugs after you knew it caused you those problems?

<1> YES → GO TO Q#115
<2> NO → GO TO Q#115
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#115
<9> *REFUSED* → GO TO Q#115

*** QUESTION #115 ***

Did you give up any important activities to get or use drugs?

<1> YES → GO TO Q#116
<2> NO → GO TO Q#116
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#116
<9> *REFUSED* → GO TO Q#116

*** QUESTION #116 ***

Have you ever driven a car or other motor vehicle while intoxicated on drugs?

<1> YES → GO TO ASSENT REFRESH
<2> NO → GO TO ASSENT REFRESH
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO ASSENT REFRESH
<9> *REFUSED* → GO TO ASSENT REFRESH

*** ASSENT REFRESH ***

We're over halfway done but before we move on to the next section, I would like to make sure you are still comfortable participating in the survey. Are you still comfortable participating and confident that you are the only person in your household on the line?

<1> YES → GO TO Q#117
<2> NO → TERMINATE INTERVIEW

CONDITIONAL: IF Q#35 = 1 OR

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Q#37 = 1 OR
Q#39 = 1 OR
Q#41 = 1 OR
Q#43 = 1 OR
Q#45 = 1 OR
Q#47 = 1 OR
Q#49 = 1 OR
Q#56 = 1, THEN GO TO Q#117, ELSE GO TO Q#131

*** QUESTION #117 ***

Now, I'm going to ask you about alcohol or drug treatment. Treatment might include a stay in a hospital, treatment center, or halfway house. It could also consist of seeing a counselor or receiving medication such as antabuse or methadone as an outpatient, or any substance abuse treatment received while in juvenile hall.

Have you ever been in an alcohol or drug abuse treatment program?

<1> YES → GO TO Q#118
<2> NO → GO TO Q#125
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#125
<9> *REFUSED* → GO TO Q#125

*** QUESTION #118 ***

Was the treatment you received for your alcohol use, drug use or for both?

<1> ALCOHOL → GO TO Q#119
<2> DRUGS → GO TO Q#119
<3> BOTH → GO TO Q#119
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#119
<9> *REFUSED* → GO TO Q#119

*** QUESTION #119 ***

Was this treatment at a program where you spent the night at the treatment center or where you would live at home?

<1> SPENT THE NIGHT → GO TO Q#120
<2> LIVED AT HOME → GO TO Q#121
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#121
<9> *REFUSED* → GO TO Q#121

*** QUESTION #120 ***

How many days did stay in this program?

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<1> open end → GO TO Q#123
IF MORE THAN 365, THEN CODE "777"
<888> *DON'T KNOW* → GO TO Q#123
<999> *REFUSED* → GO TO Q#123

*** QUESTION #121 ***

How many days per week did you attend this program?

<1> open end → GO TO Q#122
<8> *DON'T KNOW* → GO TO Q#122
<9> *REFUSED* → GO TO Q#122

*** QUESTION #122 ***

How many weeks did you attend this program?

<1> open end → GO TO Q#123
IF MORE THAN 52, THEN CODE "77"
<88> *DON'T KNOW* → GO TO Q#123
<99> *REFUSED* → GO TO Q#123

*** QUESTION #123 ***

Where was the program administered, through your school, your health department or some other type of program?

<1> SCHOOL → GO TO Q#125
<2> HEALTH DEPARTMENT → GO TO Q#125
<3> PRIVATE TREATMENT PROGRAM → GO TO Q#125
<4> HOSPITAL → GO TO Q#125
<5> OTHER → GO TO Q#124
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#125
<9> *REFUSED* → GO TO Q#125

*** QUESTION #124 ***

Where else was this program administered? Before you answer, if you think that someone may overhear your answer or that someone may be listening on another extension in the house I suggest you skip this question.

<1> open end → GO TO Q#125

*** QUESTION #125 ***

In the past 12 months, were there any types of help, treatment or services that you would have sought if they had been easily available? This includes detoxification, residential rehabilitation, halfway house, outpatient treatment, self-help, counseling outside of a formal program, and other social services you may have required.

<1> YES → GO TO Q#126
<2> NO → GO TO Q#130
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#130
<9> *REFUSED* → GO TO Q#130

*** QUESTION #126 ***

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Which of the following? Detox, Residential or inpatient rehabilitation, Halfway house, Outpatient rehabilitation, Self-help group, Treatment outside a formal program, or other types of services (child care family counseling, etc)?

- <1> DETOX → GO TO Q#128
- <2> RESIDENTIAL → GO TO Q#128
- <3> INPATIENT → GO TO Q#128
- <4> OUTPATIENT → GO TO Q#128
- <5> SELF-HELP GROUP → GO TO Q#128
- <6> OTHER → GO TO Q#127
- <7> #
- <8> *DON'T KNOW* → GO TO Q#128
- <9> *REFUSED* → GO TO Q#128

*** QUESTION #127 ***

What other services would you have wanted? Before you answer, if you think that someone may overhear your answer or that someone may be listening on another extension in the house I suggest you skip this question.

- <1> open end → GO TO Q#128
- <88> *DON'T KNOW* → GO TO Q#128
- <99> *REFUSED* → GO TO Q#128

*** QUESTION #128 ***

What was the one main reason you did not seek additional treatment for your use of drugs or alcohol?

- <1> DIDN'T WANT ANYONE TO KNOW → GO TO Q#130
- <2> EMBARRASSED OR ASHAMED → GO TO Q#130
- <3> THOUGHT IT WOULD COST TOO MUCH → GO TO Q#130
- <4> DIDN'T KNOW WHO TO ASK → GO TO Q#130
- <5> THOUGHT I COULD HANDLE IT MYSELF → GO TO Q#130
- <6> OTHER → GO TO Q#129
- <7> #
- <8> *DON'T KNOW* → GO TO Q#130
- <9> *REFUSED* → GO TO Q#130

*** QUESTION #129 ***

What was the other reason you did not seek additional treatment for your use of drugs or alcohol? Before you answer, if you think that someone may overhear your answer or that someone may be listening on another extension in the house I suggest you skip this question.

- <1> open end → GO TO Q#130
- <88> *DON'T KNOW* → GO TO Q#130
- <99> *REFUSED* → GO TO Q#130

*** QUESTION #130 ***

At any time during the last 12 months, did you need treatment for drug or alcohol use but not receive it? Treatment includes detoxification, residential rehabilitation, being in a halfway house, outpatient treatment, self-help groups such as Alcoholics Anonymous, and counseling outside of a formal program.

- <1> YES → GO TO Q#131
- <2> NO → GO TO Q#131
- <3> #
- <4> #

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<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#131
<9> *REFUSED* → GO TO Q#131

*** QUESTION #131 ***

Now I'd like to ask you some questions about what people your age might think about you if you did certain things. For example, what are the chances you would be seen as cool if you smoked cigarettes? Would you say:

<1> NO CHANCE → GO TO Q#132
<2> A LITTLE → GO TO Q#132
<3> SOME CHANCE → GO TO Q#132
<4> PRETTY GOOD CHANCE → GO TO Q#132
<5> VERY GOOD CHANCE → GO TO Q#132
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#132
<9> *REFUSED* → GO TO Q#132

*** QUESTION #132 ***

What are the chances you would be seen as cool if you started drinking alcohol once or twice a month? Would you say:

<1> NO CHANCE → GO TO Q#133
<2> A LITTLE → GO TO Q#133
<3> SOME CHANCE → GO TO Q#133
<4> PRETTY GOOD CHANCE → GO TO Q#133
<5> VERY GOOD CHANCE → GO TO Q#133
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#133
<9> *REFUSED* → GO TO Q#133

*** QUESTION #133 ***

What are the chances you would be seen as cool if you smoked marijuana? Would you say:

<1> NO CHANCE → GO TO Q#134
<2> A LITTLE → GO TO Q#134
<3> SOME CHANCE → GO TO Q#134
<4> PRETTY GOOD CHANCE → GO TO Q#134
<5> VERY GOOD CHANCE → GO TO Q#134
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#134
<9> *REFUSED* → GO TO Q#134

*** QUESTION #134 ***

Please think of your three closest friends at school. How many of them have drunk alcohol in the past month? (If not in school, ask about 3 closest friends that are about the same age as the respondent)

<1> none of them → GO TO Q#135
<2> 1 of 3 → GO TO Q#135
<3> 2 of 3 → GO TO Q#135
<4> all three → GO TO Q#135

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<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#135
<9> *REFUSED* → GO TO Q#135

*** QUESTION #135 ***

Please think of your three closest friends at school. How many of them have used drugs (other than alcohol) in the past month? (If not in school, ask about 3 closest friends that are about the same age as the respondent)

<1> none of them → GO TO Q#136
<2> 1 of 3 → GO TO Q#136
<3> 2 of 3 → GO TO Q#136
<4> all three → GO TO Q#136
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#136
<9> *REFUSED* → GO TO Q#136

*** QUESTION #136 ***

How wrong do you think your parents feel it would be for you to drink alcohol regularly? Would they think it is:

<1> VERY WRONG → GO TO Q#137
<2> WRONG → GO TO Q#137
<3> A LITTLE BIT WRONG → GO TO Q#137
<4> NOT WRONG AT ALL → GO TO Q#137
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#137
<9> *REFUSED* → GO TO Q#137

*** QUESTION #137 ***

How wrong do you think your parents feel it would be for you to smoke cigarettes? Would they think it is:

<1> VERY WRONG → GO TO Q#138
<2> WRONG → GO TO Q#138
<3> A LITTLE BIT WRONG → GO TO Q#138
<4> NOT WRONG AT ALL → GO TO Q#138
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#138
<9> *REFUSED* → GO TO Q#138

*** QUESTION #138 ***

How wrong do you think your parents feel it would be for you to smoke marijuana? Would they think it is:

<1> VERY WRONG → GO TO Q#139
<2> WRONG → GO TO Q#139
<3> A LITTLE BIT WRONG → GO TO Q#139
<4> NOT WRONG AT ALL → GO TO Q#139
<5> #

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<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#139
<9> *REFUSED* → GO TO Q#139

*** QUESTION #139 ***

Have you ever been referred to talk to someone because you used alcohol or drugs?

<1> YES → GO TO Q#140
<2> NO → GO TO Q#140
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#140
<9> *REFUSED* → GO TO Q#140

*** QUESTION #140 ***

Have you ever received any counseling because of your behavior or moods?

<1> YES → GO TO Q#141
<2> NO → GO TO Q#141
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#141
<9> *REFUSED* → GO TO Q#141

*** QUESTION #141 ***

Have you ever been in a hospital because of your behavior or moods?

<1> YES → GO TO Q#142
<2> NO → GO TO Q#142
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#142
<9> *REFUSED* → GO TO Q#142

*** QUESTION #142 ***

Have you ever been held in a jail or detention center?

<1> YES → GO TO Q#143
<2> NO → GO TO Q#143
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#143
<9> *REFUSED* → GO TO Q#143

*** QUESTION #143 ***

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Have you ever been placed in a special class or school program because of your behavior?

- <1> YES → GO TO ASSENT REFRESH
- <2> NO → GO TO ASSENT REFRESH
- <3> #
- <4> #
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO ASSENT REFRESH
- <9> *REFUSED* → GO TO ASSENT REFRESH

*** ASSENT REFRESH ***

We're almost done. Before we move on to the last section, I would like to make sure you are still comfortable participating in the survey. Are you still comfortable participating and confident that you are the only person in your household on the line?

- <1> YES → GO TO Q#144
- <2> NO → TERMINATE INTERVIEW

*** QUESTION #144 ***

This final set of questions asks for your opinions on the effects of using certain drugs and other substances.

How much do you think people risk harming themselves (physically or in other ways), if they:

Smoke one or more packs of cigarettes per day? Would you say:

- <1> NO RISK → GO TO Q#145
- <2> SLIGHT RISK → GO TO Q#145
- <3> MODERATE RISK → GO TO Q#145
- <4> GREAT RISK → GO TO Q#145
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#145
- <9> *REFUSED* → GO TO Q#145

*** QUESTION #145 ***

How much do you think people risk harming themselves (physically or in other ways), if they:

Try marijuana once or twice? Would you say:

- <1> NO RISK → GO TO Q#146
- <2> SLIGHT RISK → GO TO Q#146
- <3> MODERATE RISK → GO TO Q#146
- <4> GREAT RISK → GO TO Q#146
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#146
- <9> *REFUSED* → GO TO Q#146

*** QUESTION #146 ***

How much do you think people risk harming themselves (physically or in other ways), if they:

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.
Smoke marijuana once a month? Would you say:

- <1> NO RISK → GO TO Q#147
- <2> SLIGHT RISK → GO TO Q#147
- <3> MODERATE RISK → GO TO Q#147
- <4> GREAT RISK → GO TO Q#147
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#147
- <9> *REFUSED* → GO TO Q#147

*** QUESTION #147 ***

How much do you think people risk harming themselves (physically or in other ways), if they:

.
Smoke marijuana once or twice a week? Would you say:

- <1> NO RISK → GO TO Q#148
- <2> SLIGHT RISK → GO TO Q#148
- <3> MODERATE RISK → GO TO Q#148
- <4> GREAT RISK → GO TO Q#148
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#148
- <9> *REFUSED* → GO TO Q#148

*** QUESTION #148 ***

How much do you think people risk harming themselves (physically or in other ways) if they:

.
Have one or two drinks nearly every day? Would you say:

- <1> NO RISK → GO TO Q#149
- <2> SLIGHT RISK → GO TO Q#149
- <3> MODERATE RISK → GO TO Q#149
- <4> GREAT RISK → GO TO Q#149
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#149
- <9> *REFUSED* → GO TO Q#149

*** QUESTION #149 ***

How much do you think people risk harming themselves (physically or in other ways) if they:

.
Have four or five drinks nearly every day? Would you say:

- <1> NO RISK → GO TO Q#150
- <2> SLIGHT RISK → GO TO Q#150
- <3> MODERATE RISK → GO TO Q#150
- <4> GREAT RISK → GO TO Q#150
- <5> #
- <6> #
- <7> #
- <8> *DON'T KNOW* → GO TO Q#150

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<9> *REFUSED* → GO TO Q#150

*** QUESTION #150 ***

How much do you think people risk harming themselves (physically or in other ways) if they:

.
Have five or more drinks once or twice a week? Would you say:

<1> NO RISK → GO TO Q#151
<2> SLIGHT RISK → GO TO Q#151
<3> MODERATE RISK → GO TO Q#151
<4> GREAT RISK → GO TO Q#151
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#151
<9> *REFUSED* → GO TO Q#151

*** QUESTION #151 ***

How much do you think people risk harming themselves (physically or in other ways) if they:

.
Try cocaine in powder form once or twice? Would you say:

<1> NO RISK → GO TO Q#152
<2> SLIGHT RISK → GO TO Q#152
<3> MODERATE RISK → GO TO Q#152
<4> GREAT RISK → GO TO Q#152
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#152
<9> *REFUSED* → GO TO Q#152

*** QUESTION #152 ***

How much do you think people risk harming themselves (physically or in other ways) if they:

.
Try "crack" cocaine once or twice? Would you say:

<1> NO RISK → GO TO Q#153
<2> SLIGHT RISK → GO TO Q#153
<3> MODERATE RISK → GO TO Q#153
<4> GREAT RISK → GO TO Q#153
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#153
<9> *REFUSED* → GO TO Q#153

*** QUESTION #153 ***

How much do you think people risk harming themselves (physically or in other ways) if they:

.
Try hallucinogens once or twice? Would you say:

<1> NO RISK → GO TO Q#154
<2> SLIGHT RISK → GO TO Q#154
<3> MODERATE RISK → GO TO Q#154

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<4> GREAT RISK → GO TO Q#154
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#154
<9> *REFUSED* → GO TO Q#154

Emerging Drugs

*** QUESTION #154 ***

Are you aware of any new drugs that are being used by yourself or anyone you know?

<1> YES → GO TO Q#155
<2> NO → GO TO Q#162
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#162
<9> *REFUSED* → GO TO Q#162

*** QUESTION #155 ***

What is the name of this drug? Before you answer, if you think that someone may overhear your answer or that someone may be listening on another extension in the house I suggest you skip this question.

<1> open end → GO TO Q#156

*** QUESTION #156 ***

How is [Q#153] used?

<1> SMOKED → GO TO Q#157
<2> SNORTED → GO TO Q#157
<3> IV → GO TO Q#157
<4> EATEN → GO TO Q#157
<5> OTHER → GO TO Q#157
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#157
<9> *REFUSED* → GO TO Q#157

*** QUESTION #157 ***

Which of the following most closely resembles the effects of [Q#153]?

<1> STIMULANTS (like cocaine or amphetamines) → GO TO Q#158
<2> OPIATES (like Oxy or heroin) → GO TO Q#158
<3> HALLUCINOGENS (like LSD or Ecstasy) → GO TO Q#158
<4> SEDATIVES (like Valium) → GO TO Q#158
<5> MARIJUANA → GO TO Q#158
<6> ALCOHOL → GO TO Q#158
<7> #
<8> *DON'T KNOW* → GO TO Q#158
<9> *REFUSED* → GO TO Q#158

*** QUESTION #158 ***

Are you aware of any other new drugs that are being used by yourself or anyone you know?

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<1> YES → GO TO Q#159
<2> NO → GO TO Q#162
<3> #
<4> #
<5> #
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#162
<9> *REFUSED* → GO TO Q#162

*** QUESTION #159 ***

What is the name of this drug? Before you answer, if you think that someone may overhear your answer or that someone may be listening on another extension in the house I suggest you skip this question.

<1> open end → GO TO Q#160

*** QUESTION #160 ***

How is [Q#157] used?

<1> SMOKED → GO TO Q#161
<2> SNORTED → GO TO Q#161
<3> IV → GO TO Q#161
<4> EATEN → GO TO Q#161
<5> OTHER → GO TO Q#161
<6> #
<7> #
<8> *DON'T KNOW* → GO TO Q#161
<9> *REFUSED* → GO TO Q#161

*** QUESTION #161 ***

Which of the following most closely resembles the effects [Q#157]?

<1> STIMULANTS (like cocaine or amphetamines) → GO TO Q#162
<2> OPIATES (like Oxy or heroin) → GO TO Q#162
<3> HALLUCINOGENS (like LSD or Ecstasy) → GO TO Q#162
<4> SEDATIVES (like Valium) → GO TO Q#162
<5> MARIJUANA → GO TO Q#162
<6> ALCOHOL → GO TO Q#162
<7> #
<8> *DON'T KNOW* → GO TO Q#162
<9> *REFUSED* → GO TO Q#162

Termination of interview

*** QUESTION #162 ***

Those are all the questions I needed to ask. I appreciate your willingness to participate in this study. I would like to remind you that if you ever feel the need to discuss any concerns you might have about alcohol or drug use, you can always receive confidential advice from school counselors or find help at your community mental health center.

(Interviewer has a list of crisis numbers in case the subject requests it)

Thank you for your time. Goodbye.

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INTERVIEWER: RESPONDENT'S UNDERSTANDING OF THE QUESTIONS WAS:

- <1> EXCELLENT → GO TO Q#163
- <2> GOOD → GO TO Q#163
- <3> FAIR → GO TO Q#163
- <4> POOR → GO TO Q#163
- <5> VERY POOR → GO TO Q#163

*** QUESTION #163 ***

INTERVIEWER: OPINION OF THE QUALITY OF ANSWERS:

- <1> EXCELLENT
- <2> GOOD
- <3> FAIR
- <4> POOR
- <5> VERY POOR