10/19/01

SUBSTANCE (SU)

*SU1. The next questions are about your use of alcohol. . How old were you the very <u>first</u> time you ever drank an alcoholic beverage – including either beer, wine, a wine cooler, or hard liquor?

YEARS OLD

*SU2. IF R CAN READ: (RB, PG 23) Please use the table on page 23 in your booklet as a guide in answering the next questions. How old were you when you first started drinking at least 12 drinks in a year?

IF R CANNOT READ: When I use the word "drink" in the next questions, I mean either a glass of wine, a can or bottle of beer, or a shot or jigger of liquor either alone or in a mixed drink. How old were you when you first started drinking at least 12 drinks in a year?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens? IF NO/DK, PROBE: Was it before your twenties?

YEARS OLD

BEFORE TEENS	12	
BEFORE 20s	19	
(IF VOL): "NEVER"	997	GO TO *SU41
DON'T KNOW	998	
REFUSED	999	

*SU3. (RB, PG 23) (Look at page 23 in your booklet.) Think about the past 12 months. In the past 12 months, how often did you usually have at least one drink – nearly <u>every day</u>, three to four days a week, <u>one to two</u> days a week, one to three days a month, or less than once a month?

NEARLY EVERY DAY1	
3 - 4 DAYS PER WEEK	
1 - 2 DAYS PER WEEK	
1 - 3 DAYS PER MONTH	
LESS THAN ONCE A MONTH	GO TO *SU8
(IF VOL) DID NOT DRINK IN PAST 12 MONTHS6	GO TO *SU8
DON'T KNOW	GO TO *SU8
REFUSED	GO TO *SU8

*SU4. (RB, PG 23) (Looking at page 23 in your booklet.) On the days you drank in the past 12 months, about how many drinks did you usually have per day?

NUMBER OF DRINKS PER DAY

*SU5. Was there ever a year in your life when you drank more than you did in the past 12 months?

YES	1	GO TO *SU8
NO	5	
DON'T KNOW	8	
REFUSED	9	

*SU6.	INTERVIEWER CHECKPOINT: (SEE *SU3)	
	*SU3 EQUALS '4'	GO TO *SU11.1
*SU7.	INTERVIEWER CHECKPOINT: (SEE *SU4)	
	*SU4 IS EQUALS '3' OR MORE	GO TO *SU11.1 GO TO *SU41

*SU8. Think about the years in your life when you drank <u>most</u>. During those years, how often did you usually have at least one drink – nearly <u>every day</u>, three to four days a week, <u>one to two</u> days a week, one to three days a <u>month</u>, or <u>less</u> than once a month?

NEARLY EVERY DAY1	
3 - 4 DAYS PER WEEK	
1 - 2 DAYS PER WEEK	
1 - 3 DAYS PER MONTH	
LESS THAN ONCE A MONTH	GO TO *SU41
DON'T KNOW	GO TO *SU41
REFUSED	GO TO *SU41

*SU9. And on the days you drank during those years, about how many drinks would you usually have per day?

_____NUMBER OF DRINKS PER DAY

DON'T KNOW998 REFUSED999

*SU10. INTERVIEWER CHECKPOINT: (SEE *SU8)

*SU11. INTERVIEWER CHECKPOINT: (SEE *SU9)

*SU9 EQUALS '3' OR MORE1	
ALL OTHERS2	GO TO *SU41

*SU11.1 INTERVIEWER CHECKPOINT: (SEE *SC26.2, *SC26.3, *SC26.4)

* SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR	
* SC26.4 EQUALS '1'1	
ALL OTHERS	GO TO *SU41

INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU12 SERIES QUESTIONS '9' AND GO TO *SU13 .	YES (1)	NO (5)	DK (8)	RF (9)
 *SU12. The next questions are about problems you may have had because of drinking. First, was there ever a time in your life when your drinking or being hung over frequently interfered with your work or responsibilities at school, on a job, or at home? (KEY PHRASE: interfered with your work) 		5	8	9
*SU12a. Was there ever a time in your life when your drinking caused arguments or other serious or repeated problems with your family, friends, neighbors or co-workers? (KEY PHRASE: caused problems with family, friends or others)	, 1	5 GO TO *SU12c	8 GO TO *SU12c	9 GO TO *SU12c
*SU12b. Did you continue to drink even though it caused problems with these people? (NO KEY PHRASE)	1	5	8	9
 *SU12c. Were there times in your life when you were often under the influence of alcohol in situations where you could get hurt, for example when riding a bicycle, driving, operating a machine, or anything else? (KEY PHRASE: jeopardized your safety because you sometimes drank in situations where you could get hurt) 	1	5	8	9
*SU12d. Were you more than once arrested or stopped by the police because of drunk driving or drunk behavior? (KEY PHRASE: resulted in problems with the police)	1	5	8	9

*SU13. INTERVIEWER CHECKPOINT: (SEE *SU12 SERIES)

ZERO RESPONSES CODED '1'1	GO TO *SU41
ONE RESPONSE CODED '1'2	GO TO *SU15 INTRO 1
ALL OTHERS	GO TO *SU15 INTRO 2

*SU15 INTRO 1.	*SU15 INTRO 2.	
You just reported that your drinking (KEY PHRASE FOR "YES" RESPONSE IN *SU12 SERIES). Can you remember your <u>exact</u> age the <u>very first</u> time you had this problem?		
YES	YES	

*SU15a. (IF NEC: How old were you?)

YEARS O	YEARS OLD	
DON'T KNOW	998	GO TO *SU15.1
REFUSED	999	GO TO *SU15.1

*SU15b. <u>About</u> how old were you (the first time you had [this problem/ (either/ any) of these problems] because of drinking)?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens? IF NO/DK, PROBE: Was it before your twenties?

_____ YEARS OLD

BEFORE TEENS	12
BEFORE 20s	19
DON'T KNOW	998
REFUSED	999

*SU15.1. INTERVIEWER CHECKPOINT: (SEE *SU3)

***SU3** EQUALS '6'1 **GO TO *SU17** ALL OTHERS......2

*SU16. How recently did you have [this problem/ (either/ any) of these problems] because of drinking – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

PAST MONTH 1	GO TO *SU18
2 TO 6 MONTHS AGO	GO TO *SU18
7 TO 12 MONTHS AGO	GO TO *SU18
MORE THAN 12 MONTHS AGO4	
DON'T KNOW	GO TO *SU18
REFUSED	GO TO *SU18

*SU17. How old were you the <u>last</u> time (you had [this problem/ (either/ any) of these problems] because of drinking)?

YEARS OLD

DON'T KNOW	. 998
REFUSED	. 999

*SU18. How many different years in your life did you ever have (this problem/these problems)?

YEARS

INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU19 SERIES QUESTION AND GO TO *SU20 .		NO (5)	DK (8)	RF (9)
*SU19. (The next questions are about some <u>other</u> problems you may have because of drinking.) Was there ever a time in your life when you had such a strong desire to drink that you couldn't resist taking a or found it difficult to think of anything else?	ı often	5	8	9
*SU19a. Did you ever need to drink a larger amount of alcohol to get an effe did you ever find that you could no longer get a "buzz" or a high or amount you used to drink?		5	8	9
*SU19b. People who cut down or stop drinking after drinking steadily for s time may not feel well. These feelings are more intense and can l longer than the usual hangover. Did you ever have times when yo stopped, cut down, or went without drinking and then experienced symptoms like fatigue, headaches, diarrhea, the shakes, or emotion problems?	ast 1 d GOTO	5	8	9
*SU19c. Did you ever have times when you took a drink to <u>keep</u> from have problems like these?	ng 1	5	8	9
*SU19d. Did you have times when you started drinking even though you <u>promised</u> yourself you wouldn't, or when you drank a lot more th intended?	an you 1 GO TO *SU19g	5	8	9
*SU19e. Were there ever times when you drank more frequently or for <u>mo</u> <u>in a row</u> than you intended?	re days GO TO *SU19g	5	8	9
*SU19f. Did you have times when you started drinking and became drunk you didn't want to?	when 1	5	8	9
*SU19g . Were there times when you tried to stop or cut down on your drin and found that you were not able to do so?	king 1	5	8	9
*SU19h. Did you ever have periods of several days or more when you sper much time drinking or recovering from the effects of alcohol that had little time for anything else?		5	8	9
*SU19i. Did you ever have a period of a month or longer when you gave u greatly reduced important activities because of your drinking – lik sports, work, or seeing friends and family?		5	8	9
*SU19j. Did you ever continue to drink when you knew you had a serious physical or emotional problem that might have been caused by or worse by drinking?	made 1	5	8	9

*SU20. INTERVIEWER CHECKPOINT: (SEE *SU19 SERIES)

ZERO TO TWO RESPONSES CODED '1'1	GO TO *SU41
ALL OTHERS2	

*SU20.1 INTERVIWER CHECKPOINT: (SEE *SU3)

*SU3 EQUALS '6'	GO TO *SU28
ALL OTHERS	

*SU26. You reported having a number of alcohol problems. How <u>recently</u> did you have <u>any</u> of these problems – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

PAST MONTH	1
2 TO 6 MONTHS AGO	2
7 TO 12 MONTHS AGO	3
MORE THAN 12 MONTHS AGO	4
DON'T KNOW	8
REFUSED	9

*SU28. (IF *SU20.1 EQUALS '1': You reported having a number of alcohol problems.) About how many different years in your life did you ever have <u>at least one</u> of these problems?

_____YEARS

DON'T KNOW......998 REFUSED.....999

*SU29. Did you ever have three or more of these problems in the same year?

YES1	
NO2	GO TO *SU32
DON'T KNOW	GO TO *SU32
REFUSED9	GO TO *SU32

*SU30. How old were you the first time you had three (or more) of these problems in the same year?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens? IF NO/DK, PROBE: Was it before your twenties?

YEARS OLD

BEFORE TEENS	12
BEFORE 20s	19
DON'T KNOW	
REFUSED	

*SU32. Starting from the time you first began having any of these problems, how many different times did you ever make a serious attempt to <u>quit</u> drinking?

REFUSED999

TIMES

*SU33.	INTERVIEWER CHECKPOINT: (SEE *SU32)	
	*SU32 EQUALS '1' OR MORE	GO TO *SU37

*SU34. Since then, what is the longest period of time you have ever gone without drinking?

DURATION NUMBER		
CIRCLE UNIT OF TIME: DAY1	MONTH2	YEAR3
DON'T KNOW998 REFUSED999		

*SU35. INTERVIEWER CHECKPOINT: (SEE *SU32, *SU34)

*SU32 EQUALS '1'	1 GO TO *SU37
*SU32 EQUALS '2' OR MORE <u>AND</u> *SU34 EQUALS '3' MONTHS OR MORE	2
ALL OTHERS	3 GO TO *SU37

*SU36. How many different times have you gone without drinking for three months or longer?

TIMES

DON'T KNOW998 REFUSED999

*SU37. INTERVIEWER CHECKPOINT: (SEE *SU26)	
*SU26 EQUALS '1', '2', OR '3'	GO TO *SU41

*SU38.	During the <u>past 12 months</u> , how much have you had each of the following experiences because of your drinking:	A LOT (1)	SOME (2)	A LITTLE (3)	NOT AT ALL (4)	DK (8)	RF (9)
*SU38a.	How much has your physical health been harmed by your drinking – a lot, some, a little, or not at all?	1	2	3	4	8	9
*SU38b.	How much has your family been hurt by your drinking (– a lot, some, a little, or not at all)?	1	2	3	4	8	9
*SU38c.	How much have you done impulsive things that you regretted later because of your drinking (– a lot, some, a little, or not at all)?	1	2	3	4	8	9
*SU38d.	How much have you failed to do what was expected of you because of your drinking (– a lot, some, a little, or not at all)?	1	2	3	4	8	9
*SU38e.	How much have you been unhappy because of your drinking (– a lot, some, a little, or not at all)?	1	2	3	4	8	9

WORK DOWN GRID ASKING *SU41-*SU44. THEN FOR EACH ITEM ENDORSED, ASK FOLLOW-UP QUESTIONS SU45- SU48. IF NO '1' RESPONSES IN *SU41-*SU44, GO TO *SU87.	YES (1)	NO (5)	DK (8)	RF (9)
 *SU41. The next questions are about medicines that are often used for any reason other than a health professional said you should use them. Have you ever used either marijuana or hashish, even once? (KEY PHRASE: marijuana or hashish) 	1	5	8	9
 *SU42. (RB, PG 24-25) Looking at Pages 24-25 in your booklet, have you ever used <u>cocaine</u> in any form, including powder, crack, free base, coca leaves, or paste? (KEY PHRASE: cocaine) 	1	5	8	9
 *SU43. (RB, PG 24-25) Look at Pages 24-25 in your booklet. Have you ever used tranquilizers, stimulants, pain killers, or other prescription drugs either without the recommendation of a health professional, or for any reason other than a health professional said you should use them? (KEY PHRASE: prescription drugs without a doctor's recommendation) 	1	5	8	9
 *SU44. (RB, PG 24-25) Looking at pages 24-25 in your booklet, have you ever used any other drug – such as (those listed in your booklet/ heroin, opium, glue, LSD, peyote, or any other drug? (KEY PHRASE: one or more of the drugs on page Y) 	1	5	8	9

*SU44.5. INTERVIEWER CHECKPOINT: (SEE *SU41-*SU44)

*SU45. How old were you the <u>first</u>	*SU47. Did you use (KEY PHRASE) at any	*SU48. How often (did you use KEY
time (you used KEY PHRASE)?	time in the past 12 months?	PHRASE in the past twelve months)-
		nearly every day, 3 to 4 days a week, 1 to
IF "AS LONG AS I CAN		2 days a week, 1 to 3 days a month, or
REMEMBER," PROBE: Was it		less than once a month?
before your teens?		less than once a month.
IF NOT YES, PROBE: Was it before		
your twenties?		
*SU45a.	*SU47a.	*SU48a.
~5043a.	"SU4/a.	5048a.
YEARS OLD	YES1 GO TO *SU48a	NEARLY EVERY DAY 1
BEFORE TEENS 12	11251 0010 50404	3-4 DAYS PER WEEK
BEFORE 20s 19		1-2 DAYS PER WEEK
DON'T KNOW	NO5 GO TO NEXT MEDICINE	1-3 DAYS PER MONTH
REFUSED	DK8 GO TO NEXT MEDICINE	LESS THAN ONCE A MONTH 5
	RF9 GO TO NEXT MEDICINE	
GO TO *SU47a		GO TO NEXT MEDICINE
*SU45b.	*SU47b.	*SU48b.
YEARS OLD	YES1 GO TO *SU48b	NEARLY EVERY DAY 1
BEFORE TEENS 12		3-4 DAYS PER WEEK 2
BEFORE 20s 19		1-2 DAYS PER WEEK 3
DON'T KNOW 998	NO5 GO TO NEXT MEDICINE	1-3 DAYS PER MONTH 4
REFUSED	DK8 GO TO NEXT MEDICINE	LESS THAN ONCE A MONTH 5
	RF9 GO TO NEXT MEDICINE	
GO TO *SU47b		GO TO NEXT MEDICINE
*SU45c.	*SU47c.	*SU48c.
YEARS OLD	YES1 GO TO *SU48c	NEARLY EVERY DAY 1
BEFORE TEENS 12		3-4 DAYS PER WEEK 2
BEFORE 20s 19		1-2 DAYS PER WEEK 3
DON'T KNOW 998	NO5 GO TO NEXT MEDICINE	1-3 DAYS PER MONTH 4
REFUSED	DK8 GO TO NEXT MEDICINE	LESS THAN ONCE A MONTH 5
	RF9 GO TO NEXT MEDICINE	
GO TO *SU47c		GO TO NEXT MEDICINE
*SU45d.	*SU47d.	*SU48d.
YEARS OLD	YES1 GO TO *SU48d	NEARLY EVERY DAY 1
BEFORE TEENS 12		3-4 DAYS PER WEEK 2
BEFORE 20s 19		1-2 DAYS PER WEEK
DON'T KNOW 998	NO5 GO TO *SU50	1-3 DAYS PER MONTH 4
REFUSED	DK8 GO TO *SU50	LESS THAN ONCE A MONTH 5
	RF9 GO TO *SU50	LESS HIM ONCE A MONTH. J
GO TO *SU47d	M	
0010 50 1 /u		

*SU50 INTERVIEWER CHECKPOINT: (SEE *SC26.2, *SC26.3, *SC26.4)

*SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR *SC26.4 EQUALS '1' 1	
ALL OTHERS	GO TO *SU87

*SU63. INTERVIEWER CHECKPOINT: (SEE *SU41 - *SU44 SERIES)

ONLY <u>ONE</u> RESPONSE CODED '1' IN *SU41 - *SU44 SERIES	GO TO *SU64 INTRO 1
MORE THAN ONE RESPONSE CODED '1' IN *SU41 - *SU44 SERIES	GO TO *SU64 INTRO 2
ALL OTHERS	GO TO *SU87

*SU64 INTRO 1.

*SU64 INTRO 2.

You reported using (IF*SU41EQUALS '1': marijuana or hashish/ IF *SU42 EQUALS '1': cocaine/ IF *SU43 EQUALS '1': one or more of the prescription drugs on page X / ALL OTHERS: one or more of the drugs on page Y). The next questions are about any problems you ever had because of your use. Let me review. You reported that in your lifetime you have used (IF*SU41EQUALS '1': marijuana or hashish/ and/ IF *SU42 EQUALS '1': cocaine/ and/ IF *SU43 EQUALS '1': one or more of the prescription drugs on page X / and/ALL OTHERS: one or more of the drugs on page Y). The next questions are about any problems you ever had because of your use.

INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU65 SERIES QUESTIONS '9' AND GO TO *SU66 .	YES (1)	NO (5)	DK (8)	RF (9)
 *SU65. First, was there ever a time in your life when your use of (IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs) frequently interfered with your work or responsibilities at school, on a job, or at home? (KEY PHRASE: interfered with your work) 	1	5	8	9
 *SU65a. Was there ever a time in your life when your use of (IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs) caused arguments or other serious or repeated problems with your family, friends, neighbors, or co-workers? (KEY PHRASE: caused problems with family, friends or others) 	1	5 GO TO *SU65c	8 GO TO *SU65c	9 GO TO *SU65c
*SU65b. Did you continue to use (it/ them) even though (it/ they) caused problems with these people? (NO KEY PHRASE)	1	5	8	9
 *SU65c. Were there times in your life when you were often under the influence of (IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine ALL OTHERS: drugs) in situations where you could get hurt, for example when riding a bicycle, driving, operating a machine, or anything else? (KEY PHRASE: jeopardized your safety because you sometimes used in situations where you could get hurt) 	1	5	8	9
 *SU65d. Were you more than once arrested or stopped by the police because of driving under the influence of (IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs)or because of your behavior while you were high? (KEY PHRASE: resulted in problems with the police) 	1	5	8	9

*SU66. INTERVIEWER CHECKPOINT: (SEE *SU65 SERIES)

ZERO RESPONSES CODED '1'1	GO TO *SU87
ONE RESPONSE CODED '1'	GO TO *SU68 INTRO 1
ALL OTHERS	GO TO *SU68 INTRO 2

*SU68 INTRO 1.	*SU68 INTRO 2.		
You just reported that your drug use (KEY PHRASE FOR "YES' RESPONSE IN *SU65 SERIES). Can you remember your <u>exact</u> age the <u>very first</u> time you had this problem?	Your drug use (KEY PHRASES FOR ALL "YES" RESPONSES IN *SU65 SERIES). Can you remember your <u>exact</u> age the <u>very</u> <u>first</u> time you had (either/ any) of these problems?		
YES1	YES 1		
NO5 GO TO *SU68b	NO		
DON'T KNOW	DON'T KNOW 8 GO TO *SU68b		
REFUSED	REFUSED		

*SU68a. (IF NEC: How old were you?)

YEARS C	DLD	GO TO *SU69
DON'T KNOW	998	GO TO *SU69
REFUSED	999	GO TO *SU69

*SU68b. <u>About</u> how old were you (the first time you had [this problem/ (either/ any) of these problems] because of using [DRUG/ (either/ any) of these substances]?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens? IF NO/DK, PROBE: Was it before your twenties?

YEARS OLD

BEFORE TEENS	12
BEFORE 20s	19
DON'T KNOW	
REFUSED	

*SU68c. INTERVIEWER CHECKPOINT: (SEE *SU47a, *SU47b, *SU47c, *SU47d)

IF *SU47a EQUALS '1' OR *SU47b EQUALS '1' OR *SU47c EQUALS '1' OR *SU47d EQUALS '1' 1	
ALL OTHERS	GO TO *SU70

*SU69. How recently did you have [this problem/ (either/ any) of these problems] because of using (DRUG/ drugs) – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

PAST MONTH 1	GO TO *SU71
2 TO 6 MONTHS AGO	GO TO *SU71
7 TO 12 MONTHS AGO	GO TO *SU71
MORE THAN 12 MONTHS AGO 4	
DON'T KNOW	GO TO *SU71
REFUSED	GO TO *SU71

*SU70. How old were you the <u>last</u> time (you had [this problem/ (either/ any) of these problems] because of [DRUG/ (either/ any) of these substances])?

YEARS OLD

*SU71. How many different years in your life did you ever have (this problem/ these problems)?

_____ YEARS

INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU72 SERIES QUESTIONS '9' AND GO TO *SU73 .	YES (1)	NO (5)	DK (8)	RF (9)
*SU72. (The next questions are about some <u>other</u> problems you may have had because of using [IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs])				
Was there ever a time in your life when you often had such a strong desire to use (IF ONLY *SU41 EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs) that you couldn't resist (it/ them) or found it difficult to think of anything else?	1	5	8	9
*SU72a. Did you ever need to use more than you used to in order to get high, or did you ever find that you could no longer get high on the amount you used to use?	1	5	8	9
 *SU72b. People who cut down their substance use or stop using altogether may not feel well if they have been using steadily for some time. These feelings are more intense and can last longer than the usual hangover. Did you ever have times when you stopped, cut down, or went without (IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' AND *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs) and then experienced symptoms like fatigue, headaches, diarrhea, the shakes, or emotional problems? 	1 GO TO *SU72d	5	8	9
*SU72c. Did you ever have times when you used (IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs) to <u>keep</u> from having problems like these?	1	5	8	9
*SU72d. Did you have times when you used drugs even though you <u>promised</u> yourself you wouldn't, or when you used a lot more than you intended?	1 GO TO *SU72g	5	8	9

INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU72 SERIES QUESTIONS '9' AND GO TO *SU73 .	YES (1)	NO (5)	DK (8)	RF (9)
*SU72e. Were there ever times when you used (IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs) more frequently or for <u>more days in a row</u> than you intended?	1	5	8	9
*SU72f. Were there times when you tried to stop or cut down on your use of (IF ONLY *SU41 EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1' cocaine/IF ONLY SU41 EQUALS '1' and *SU42 EQUALS '1': either marijuana or hashish or cocaine/ ALL OTHERS: drugs) and found that you were not able to do so?	1	5	8	9
*SU72g. Did you ever have times of several days or more when you spent so much time using (IF ONLY *SU41EQUALS '1': marijuana or hashish/IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs) or recovering from the effects of using that you had little time for anything else?	1	5	8	9
*SU72h. Did you ever have times lasting of a month or longer when you gave up or greatly reduced important activities because of your use – like sports, work, or seeing friends and family?	1	5	8	9
*SU72i. Did you ever continue to use (IF ONLY *SU41EQUALS '1': marijuana or hashish/ IF ONLY *SU42 EQUALS '1': cocaine/ IF ONLY *SU41 EQUALS '1' <u>AND</u> *SU42 EQUALS '1': either marijuana or hashish or cocaine / ALL OTHERS: drugs) when you knew you had a serious physical or emotional problem that might have been caused by or made worse by your use?	1	5	8	9

*SU73. INTERVIEWER CHECKPOINT: (SEE *SU72 SERIES)

*SU73.1 INTERVIEWER CHECKPOINT: (SEE *SU47a - *SU47d SERIES)

ONE OR MORE RESPONSES CODED '1'1	
ALL OTHERS2	GO TO *SU81

*SU79. You reported having a number of problems related to drug use. How recently did you have any of these problems – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

PAST MONTH	1
2 TO 6 MONTHS AGO	2
7 TO 12 MONTHS AGO	3
MORE THAN 12 MONTHS AGO	4
DON'T KNOW	8
REFUSED	9

*SU81. How many different years in your life did you have at least one of these problems?

YEARS

*SU82. Did you ever have three or more of these problems in the same year?

YES 1	
NO2	GO TO *SU87
DON'T KNOW	GO TO *SU87
REFUSED9	GO TO *SU87

*SU83. How old were you the first time you had three (or more) of these problems in the same year?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens? IF NO/DK, PROBE: Was it before your twenties?

_____YEARS OLD

BEFORE TEENS	12
BEFORE 20s	19
DON'T KNOW	998
REFUSED	999

*SU85. INTERVIEWER CHECKPOINT: (SEE *SU79)

*SU86.	During the <u>past 12 months</u> , how much have you had each of the following experiences because of using [DRUG/ (either/ any) of these substances]):	A LOT (1)	SOME (2)	A LITTLE (3)	NOT AT ALL (4)	DK (8)	RF (9)
*SU86a.	How much has your physical health been harmed by your use of [DRUG/ (either/ any) of these substances]) – a lot, some, a little, or not at all?	1	2	3	4	8	9
*SU86b.	How much has your family been hurt by your use of [DRUG/ (either/ any) of these substances]) (– a lot, some, a little, or not at all)?	1	2	3	4	8	9
*SU86c.	How much have you done impulsive things that you regretted later because of using [DRUG/ (either/ any) of these substances]) (– a lot, some, a little, or not at all)?	1	2	3	4	8	9
*SU86d.	How much have you failed to do what was expected of you because of your use of [DRUG/ (either/ any) of these substances]) (– a lot, some, a little, or not at all)?	1	2	3	4	8	9
*SU86e.	How much have you been unhappy because of using [DRUG/ (either/ any) of these substances]) (– a lot, some, a little, or not at all)?	1	2	3	4	8	9

	 *SU87. The next questions are about the first time you had an opportunity to drink alcohol or to use drugs, whether or not you used them. By "an opportunity to use" I mean someone either offered you alcohol or drugs, or you were present when others were using and you could have used if you wanted to. Please do not include times when a health care provider may have offered you free samples. (Thinking back over your entire lifetime,) About how old were you the very first time you had an opportunity to use (alcohol/drugs)? INITIAL DK, PROBE: Was it before your teens? IF NO/DK, PROBE: Was it before your twenties? 	 *SU88. About how many different times did you have the opportunity to use (alcohol/drugs) before ever using (it/ them)? INTERVIEWER: IF R NEVER USED (DRUG), PROBE: Then about how many times did you have the opportunity to use (alcohol/drugs) in your lifetime? INTERVIEWER INSTRUCTION: IF R SAYS "TOO MANY TIMES TO COUNT", CODE '997'.
	INTERVIEWER: GO DOWN THE *SU87 COLUMN FIRST, THEN ASK *SU88 SERIES .	
ALCOHOL	*SU87a. (13x) YEARS OLD NEVER 997 GO TO *SU87b DK 998 RF 999	*SU88a. (13x) TIMES DON'T KNOW 998 REFUSED 999
DRUGS	*SU87b. YEARS OLD NEVER 997 GO TO *SU88.1 DK 998 RF 999	*SU88b. TIMES

*SU95. Did you <u>ever</u> in your life talk to a medical doctor or other professional about your use of (alcohol/drugs/alcohol or drugs)? (By professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES1	
NO5	GO TO *SU119.2
DON'T KNOW8	GO TO *SU119.2
REFUSED9	GO TO *SU119.2

*SU95a. How old were you the first time [you talked to a professional about your use of (alcohol/drugs/alcohol or drugs)]?

YEARS OLD

*SU102. Did you ever get treatment for your use of (alcohol/drugs/alcohol or drugs) that you considered helpful or effective?

YES 1	
NO5	GO TO *SU102c
DON'T KNOW 8	GO TO *SU102c
REFUSED9	GO TO *SU102c

*SU102a. How old were you the first time [you got helpful treatment for your use of (alcohol/drugs/alcohol or drugs)]?

_____ YEARS OLD

*SU102b. How many professionals did you <u>ever</u> talk to about your use of (alcohol/drugs/alcohol or drugs), up to and including the first time you got helpful treatment?

NUMBER OF PROFESSIONALS GO TO *SU103

 DON'T KNOW
 98
 GO TO *SU103

 REFUSED
 99
 GO TO *SU103

*SU102c. How many professionals did you ever talk to about your use of (alcohol/drugs/alcohol or drugs)?

NUMBER OF PROFESSIONALS

DON'T KNOW98 EFUSED99

*SU103.Did you receive professional treatment for your episodes of (alcohol/drugs/alcohol or drugs) at any time in the past 12 months?

YES	1
NO	5
DON'T KNOW	8
REFUSED	9

*SU119. Were you ever hospitalized overnight for your use of (alcohol/drugs/alcohol or drugs)?

YES1	
NO5	GO TO *SU119.2
DON'T KNOW8	GO TO *SU119.2
REFUSED9	GO TO *SU119.2

*SU119.1. How old were you the first time [you were hospitalized overnight because of your use of (alcohol/drugs/alcohol or drugs)]?

YEARS OLD

DON'T KNOW	998
REFUSED	999

*SU119.2. Did you ever go to a self-help group like Alcohol Anonymous or Rational Recovery for help with your use of (alcohol/drugs/alcohol or drugs)]?

YES1	
NO5	GO TO *SU119.5
DON'T KNOW8	GO TO *SU119.5
REFUSED9	GO TO *SU119.5

*SU119.3. How old were you the first time (you went to a self-help group of this sort)?

YEARS OLD

*SU119.4. How many meetings of such a group did you attend in the past 12 months?

MEETINGS

MORE THAN '97'	97
DON'T KNOW	98
REFUSED	99

*SU119.5. How many of your close relatives -- including your biological parents, brothers and sisters, and children -- ever had problems with alcohol or drug use?

NUMBER

DON"T KNOW	98
REFUSED	99

GO TO NEXT SECTION