

SUBSTANCE (SU)

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

_____ YEARS OLD

(IF VOL): "NEVER"997 **GO TO *SU40.6**
 DON'T KNOW998
 REFUSED999

- *SU2. IF R CAN READ: (RB, PG 14) Please use the table on page 14 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 TEENS12
 BEFORE 20s19
 (IF VOL): "NEVER"997 **GO TO *SU40.6**
 DON'T KNOW998
 REFUSED999

- *SU3. (RB, PG 14) (Look at page 14 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 every day, three to four days a week, one to two days a week, one to three days a month, or less than once a month?

NEARLY EVERY DAY1
 3 - 4 DAYS PER WEEK2
 1 - 2 DAYS PER WEEK3
 1 - 3 DAYS PER MONTH4
 LESS THAN ONCE A MONTH5 **GO TO *SU8**
 (IF VOL) DID NOT DRINK IN PAST 12 MONTHS6 **GO TO *SU8**
 DON'T KNOW8 **GO TO *SU8**
 REFUSED9 **GO TO *SU8**

- *SU4. (RB, PG 14) (Looking at page 14 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

DON'T KNOW998
 REFUSED999

*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
REFUSED9

*SU6. INTERVIEWER CHECKPOINT: (SEE *SU3)

*SU3 EQUALS '4'1
ALL OTHERS.....2 **GO TO *SU12**

*SU7. INTERVIEWER CHECKPOINT: (SEE *SU4)

*SU4 EQUALS '3' OR MORE.....1 **GO TO *SU12**
ALL OTHERS.....2 **GO TO *SU40.6**

*SU8. Think about the years since (NCS1 YEAR) when you drank most. During those years, how often did you usually have at least one drink – nearly every day, three to four days a week, one to two days a week, one to three days a month, or less than once a month?

NEARLY EVERY DAY1
3 - 4 DAYS PER WEEK.....2
1 - 2 DAYS PER WEEK.....3
1 - 3 DAYS PER MONTH4
LESS THAN ONCE A MONTH5 **GO TO *SU40.6**
DON'T KNOW8 **GO TO *SU40.6**
REFUSED9 **GO TO *SU40.6**

*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)

*SU8 EQUALS '4'1
ALL OTHERS.....2 **GO TO *SU12**

*SU11. INTERVIEWER CHECKPOINT: (SEE *SU9)

*SU9 EQUALS '3' OR MORE.....1
ALL OTHERS.....2 **GO TO *SU40.6**

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 since (NCS1 YEAR). First, was there ever a time during those years 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)	1	5	8	9
*SU12a. Was there a time 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 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 since (NCS1 YEAR)? (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 *SU40.6**
ONE RESPONSE CODED '1' 2 **GO TO *SU15 INTRO 1**
ALL OTHERS 3 **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 1 NO 5 GO TO *SU15b DON'T KNOW 8 GO TO *SU15b REFUSED 9 GO TO *SU15b	Your drinking (KEY PHRASES FOR ALL "YES" RESPONSES IN *SU12 SERIES). Can you remember your <u>exact</u> age the <u>very first</u> time you had (either/ any) of these problems? YES 1 NO 5 GO TO *SU15b DON'T KNOW 8 GO TO *SU15b REFUSED 9 GO TO *SU15b

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

_____ YEARS OLD **GO TO *SU15.1**
DON'T KNOW998 **GO TO *SU15.1**
REFUSED999 **GO TO *SU15.1**

***SU15b.** About 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 20s19
DON'T KNOW998
REFUSED999

***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 2 **GO TO *SU18**
7 TO 12 MONTHS AGO 3 **GO TO *SU18**
MORE THAN 12 MONTHS AGO..... 4
DON'T KNOW 8 **GO TO *SU18**
REFUSED 9 **GO TO *SU18**

***SU17.** How old were you the last 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

DON'T KNOW 998
REFUSED 999

INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU19 SERIES QUESTIONS '9' AND GO TO *SU20.	YES (1)	NO (5)	DK (8)	RF (9)
*SU19. (The next questions are about some <u>other</u> problems you may have had because of drinking.) Was there a time since (NCS1 YEAR) when you often had such a strong desire to drink that you couldn't resist taking a drink or found it difficult to think of anything else?	1	5	8	9
*SU19a. Did you need to drink a larger amount of alcohol to get an effect, or did you find that you could no longer get a "buzz" or a high on the amount you used to drink?	1	5	8	9
*SU19b. People who cut down or stop drinking after drinking steadily for some time may not feel well. These feelings are more intense and can last longer than the usual hangover. Did you have times since (NCS1 YEAR) when you stopped, cut down, or went without drinking and then experienced symptoms like fatigue, headaches, diarrhea, the shakes, or emotional problems?	1 GO TO *SU19d	5	8	9
*SU19c. Did you have times when you took a drink to <u>keep</u> from having problems like these?	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 than you intended?	1 GO TO *SU19g	5	8	9
*SU19e. Were there times when you drank more frequently or for <u>more days in a row</u> than you intended?	1 GO TO *SU19g	5	8	9
*SU19f. Did you have times when you started drinking and became drunk when <u>you didn't want to</u> ?	1	5	8	9
*SU19g. Were there times when you tried to stop or cut down on your drinking and found that you were not able to do so?	1	5	8	9
*SU19h. Did you have times lasting several days or more when you spent so much time drinking or recovering from the effects of alcohol that you had little time for anything else?	1	5	8	9
*SU19i. Did you have a period of a month or longer since (NCS1 YEAR) when you gave up or greatly reduced important activities because of your drinking – like sports, work, or seeing friends and family?	1	5	8	9
*SU19j. Did you continue to drink when you knew you had a serious physical or emotional problem that might have been caused by or made worse by drinking?	1	5	8	9

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

ZERO TO TWO RESPONSES CODED '1' 1 **GO TO *SU40.6**
ALL OTHERS..... 2

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

***SU3** EQUALS '6' 1 **GO TO *SU29**
ALL OTHERS..... 2

***SU26.** You reported having a number of alcohol problems. 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

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

YES..... 1
NO 2 **GO TO *SU31**
DON'T KNOW..... 8 **GO TO *SU31**
REFUSED 9 **GO TO *SU31**

***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 20s19
DON'T KNOW998
REFUSED999

***SU31. INTERVIEWER INSTRUCTIONS**

INTERVIEWER: LABEL A ROW ON THE 10-YEAR CALENDAR "ALCOHOL PROBLEMS" AND HAND THE CALENDAR TO R WITH THE FOLLOWING INSTRUCTIONS:

I want you to put an X in the box for each year since (**NCS1 YEAR**) when you had any of these problems. Tell me when you are finished.

***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 quit drinking?

_____ TIMES

DON'T KNOW.....998
REFUSED999

*SU33. INTERVIEWER CHECKPOINT: (SEE *SU32)

*SU32 EQUALS '1' OR MORE..... 1
ALL OTHERS..... 2 **GO TO *SU40.6**

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

_____ DURATION NUMBER

CIRCLE UNIT OF TIME: DAY.....1 WEEK.....2 MONTH.....3 YEAR.....4

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

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

*SU32 EQUALS '1' 1 **GO TO *SU40.6**
*SU32 EQUALS '2' OR MORE AND *SU34 EQUALS '3' MONTHS OR MORE..... 2
ALL OTHERS 3 **GO TO *SU40.6**

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

_____ TIMES

DON'T KNOW998
REFUSED999

*SU40.6. The next questions are about nonmedical use of prescription-type drugs. Nonmedical use is any use on your own that is either

- without a doctor's prescription, or
- in greater amounts than prescribed, or
- more often than prescribed, or
- for any reason other than a doctor said you should take this, such as for kicks, to get high, or curiosity about the pill's effect.

*SU40.6a. (RB, PAGE 15) The first question is about sedatives and tranquilizers. These are medicines that people sometimes use to help them get to sleep or to stay calm and relaxed. Sedatives and tranquilizers are sometimes called "downers" or "nerve pills." Examples are shown at the top of Page 15.

Did you use a sedative or tranquilizer nonmedically at any time since (NCS1 YEAR)?

YES..... 1
NO..... 2 **GO TO *SU45**
DON'T KNOW 8 **GO TO *SU45**
REFUSED 9 **GO TO *SU45**

*SU41. How old were you the first time you used a sedative or tranquilizer nonmedically?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens?
IF NOT YES, PROBE: Was it before your twenties?

_____ YEARS OLD

BEFORE TEENS12
BEFORE 20s19
DON'T KNOW998
REFUSED999

*SU43a. Did you use sedatives or tranquilizers nonmedically at any time in the past 12 months?

YES1 **GO TO *SU44**
NO5
DON'T KNOW8
REFUSED9

*SU43d. How old were you the last time you used sedatives or tranquilizers nonmedically ?

_____ YEARS OLD

DON'T KNOW998
REFUSED999

*SU44. INTERVIEWER INSTRUCTION: **CIRCLE THE LETTER "B" FOR SEDATIVES OR TRANQUILIZERS IN GRID AT *SU62. THEN GO TO *SU45.**

*SU45. (RB, PAGE 15) The next questions are about a group of medicines called stimulants. These are medicines that people sometimes use to lose weight, to stay awake, or to raise their spirits. Stimulants are sometimes called "uppers" or "speed." Examples are shown on the list in the middle of Page 15.

Did you use a stimulant nonmedically at any time since (NCS1 YEAR) ?

YES1
NO5 **GO TO *SU50**
DON'T KNOW8 **GO TO *SU50**
REFUSED9 **GO TO *SU50**

*SU46. How old were you the first time you used a stimulant nonmedically?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens?
IF NOT YES, PROBE: Was it before your twenties?

_____ YEARS OLD

(13i)

BEFORE TEENS12
BEFORE 20s19
DON'T KNOW998
REFUSED999

*SU48a. Did you use stimulants nonmedically at any time in the past 12 months?

YES 1 **GO TO *SU49**
NO..... 5
DON'T KNOW 8
REFUSED..... 9

*SU48d. How old were you the last time you used stimulants nonmedically ?

_____ YEARS OLD

DON'T KNOW998
REFUSED.....999

***SU49. INTERVIEWER INSTRUCTION: CIRCLE THE LETTER “C” FOR STIMULANTS IN GRID AT *SU62. THEN GO TO *SU50.**

*SU50. (RB, PAGE 15) The next questions are about a group of medicines called analgesics. These are medicines that people usually take as “pain killers.” Examples are shown at the bottom of Page 15.

Did you use an analgesic nonmedically at any time since (NCS1 YEAR) ?

YES..... 1
NO..... 5 **GO TO *SU55**
DON'T KNOW..... 8 **GO TO *SU55**
REFUSED 9 **GO TO *SU55**

*SU51. How old were you the first time you used an analgesic nonmedically?

IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before your teens?
IF NOT YES, PROBE: Was it before your twenties?

_____ YEARS OLD

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

*SU53a. Did you use analgesics nonmedically at any time in the past 12 months?

YES..... 1 **GO TO *SU54**
NO..... 5
DON'T KNOW 8
REFUSED 9

*SU53d. How old were you the last time you used analgesics nonmedically ?

_____ YEARS OLD

DON'T KNOW998
REFUSED999

***SU54. INTERVIEWER INSTRUCTION: CIRCLE THE LETTER “D” FOR ANALGESICS IN GRID AT *SU62. THEN GO TO *SU55.**

INTERVIEWER: GO ACROSS THE GRID FOR EACH ENDORSED ITEM.

	YES (1)	NO (5)	DK (8)	RF (9)	How old were you the <u>first</u> time you used (KEY PHRASE)? IF "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens? IF NOT YES, PROBE: Was it before your twenties?
<p>*SU55. The next questions are about your experience with several other types of drugs since (NCS1 YEAR).</p> <p>Did you use either marijuana or hashish, even once since (NCS1 YEAR) ?</p> <p>(KEY PHRASE: marijuana or hashish)</p>	1	5	8	9	<p>*SU55a.</p> <p>_____ YEARS OLD</p> <p>BEFORE TEENS 12</p> <p>BEFORE 20s 19</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>
<p>*SU56. Did you use <u>cocaine</u> in any form, including powder, crack, free base, coca leaves, or paste since (NCS1 YEAR)?</p> <p>(KEY PHRASE: cocaine)</p>	1	5	8	9	<p>*SU56a.</p> <p>_____ YEARS OLD</p> <p>BEFORE TEENS 12</p> <p>BEFORE 20s 19</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>
<p>*SU57. Did you use either <u>heroin</u>, <u>opium</u>, or other opiate drugs even once since (NCS1 YEAR)?</p> <p>(KEY PHRASE: heroin or opiates)</p>	1	5	8	9	<p>*SU57a.</p> <p>_____ YEARS OLD</p> <p>BEFORE TEENS 12</p> <p>BEFORE 20s 19</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>
<p>*SU58. Did you use <u>ecstasy</u>, even once since (NCS1 YEAR) ?</p> <p>(KEY PHRASE: ecstasy)</p>	1	5	8	9	<p>*SU58a.</p> <p>_____ YEARS OLD</p> <p>BEFORE TEENS 12</p> <p>BEFORE 20s 19</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>
<p>*SU59. Did you sniff, inhale or "huff" something like glue, paint, toluene, aerosol spray, cleaning fluids, gasoline, or any other <u>inhalant</u> for kicks or to get high?)</p> <p>(KEY PHRASE: inhalants)</p>	1	5	8	9	<p>*SU59a.</p> <p>_____ YEARS OLD</p> <p>BEFORE TEENS 12</p> <p>BEFORE 20s 19</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>
<p>*SU60. Did you use a <u>hallucinogen</u>, such as LSD, PCP, peyote (PAY-OH-TEE), or mescaline (MES-KA-LIN), even once since (NCS1 YEAR) ?</p> <p>(KEY PHRASE: hallucinogens)</p>	1	5	8	9	<p>*SU60a.</p> <p>_____ YEARS OLD</p> <p>BEFORE TEENS 12</p> <p>BEFORE 20s 19</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>

<p>Did you use (KEY PHRASE) at any time in the past 12 months?</p>	<p>How old were you the <u>last</u> time you used (KEY PHRASE)?</p>
<p>*SU55c.</p> <p>YES..... 1 GO TO *SU56 NO..... 5 DK..... 8 RF 9</p>	<p>*SU55e.</p> <p>_____ YEARS OLD</p> <p>DON'T KNOW998 REFUSED999</p> <p>GO TO *SU56</p>
<p>*SU56c.</p> <p>YES..... 1 GO TO *SU57 NO..... 5 DK..... 8 RF 9</p>	<p>*SU56e.</p> <p>_____ YEARS OLD</p> <p>DON'T KNOW998 REFUSED999</p> <p>GO TO *SU57</p>
<p>*SU57c.</p> <p>YES..... 1 GO TO *SU58 NO..... 5 DK..... 8 RF 9</p>	<p>*SU57e.</p> <p>_____ YEARS OLD</p> <p>DON'T KNOW998 REFUSED999</p> <p>GO TO *SU58</p>
<p>*SU58c.</p> <p>YES..... 1 GO TO *SU59 NO..... 5 DK..... 8 RF 9</p>	<p>*SU58e.</p> <p>_____ YEARS OLD</p> <p>DON'T KNOW998 REFUSED999</p> <p>GO TO *SU59</p>
<p>*SU59c.</p> <p>YES..... 1 GO TO *SU60 NO..... 5 DK..... 8 RF 9</p>	<p>*SU59e.</p> <p>_____ YEARS OLD</p> <p>DON'T KNOW998 REFUSED999</p> <p>GO TO *SU60</p>
<p>*SU60c.</p> <p>YES..... 1 GO TO *SU61 NO..... 5 DK..... 8 RF 9</p>	<p>*SU60e.</p> <p>_____ YEARS OLD</p> <p>DON'T KNOW998 REFUSED999</p> <p>GO TO *SU61</p>

***SU61. INTERVIEWER CHECKPOINT: (SEE *SU55-60 COLUMN)**

R USED AT LEAST ONE DRUG IN THE *SU55-60 COLUMN 1
ALL OTHERS..... 2 **GO TO *SU63**

(13v)

***SU62. INTERVIEWER INSTRUCTION: (SEE *SU55-60 COLUMN)**

CIRCLE THE LETTERS FOR DRUGS USED IN THE *SU55-60 COLUMN (STARTING WITH LETTER "E").

B	SEDATIVES OR TRANQUILIZERS
C	STIMULANTS
D	ANALGESICS
E	MARIJUANA OR HASHISH
F	COCAINE
G	HEROIN OR OPIATES
H	ECSTASY
I	INHALANTS
J	HALLUCINOGENS

***SU63. INTERVIEWER CHECKPOINT: (SEE *SU62 GRID)**

ZERO LETTERS CIRCLED IN *SU62 GRID 1 **GO TO *SU87**
ONLY ONE LETTER "B – J" IS CIRCLED IN *SU62 GRID ... 3 **GO TO *SU64 INTRO 1**
ALL OTHERS..... 5 **GO TO *SU64 INTRO 2**

<p>*SU64 INTRO 1.</p> <p>You reported that since (NCS1 YEAR) you used: (DRUG CIRCLED IN *SU62 B-J). The next questions are about any problems you ever had because of your use of (DRUG) since (NCS1 YEAR).</p>	<p>*SU64 INTRO 2.</p> <p>Let me review. You reported that since (NCS1 YEAR) you used (MENTION ALL DRUGS CIRCLED IN *SU62 B-J). The next questions are about any problems you had because of your use of (either/ any) of these substances since (NCS1 YEAR).</p>
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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 since (NCS1 YEAR) when your use of [DRUG/ (either/ any) of these substances] 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 since (NCS1 YEAR) when your use of [DRUG/ (either/ any) of these substances] 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 since (NCS1 YEAR) when you were often under the influence of [DRUG/ (either/ any) of these substances] 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 since (NCS1 YEAR) arrested or stopped by the police because of driving under the influence of [DRUG/ (either/ any) of these substances] 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 "YES" RESPONSES IN *SU65 SERIES	1	GO TO *SU87
1 "YES" RESPONSE IN *SU65 SERIES	2	GO TO *SU68 INTRO 1
ALL OTHERS.....	3	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 first</u> time you had (either/ any) of these problems?
YES.....1	YES 1
NO5 GO TO *SU68b	NO 5 GO TO *SU68b
DON'T KNOW8 GO TO *SU68b	DON'T KNOW 8 GO TO *SU68b
REFUSED9 GO TO *SU68b	REFUSED 9 GO TO *SU68b

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

_____ YEARS OLD **GO TO *SU69**

DON'T KNOW998 **GO TO *SU69**

REFUSED999 **GO TO *SU69**

*SU68b. About 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 20s19

DON'T KNOW998

REFUSED999

*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 2 **GO TO *SU71**

7 TO 12 MONTHS AGO 3 **GO TO *SU71**

MORE THAN 12 MONTHS AGO.....4

DON'T KNOW 8 **GO TO *SU71**

REFUSED 9 **GO TO *SU71**

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

_____ YEARS OLD

DON'T KNOW 998

REFUSED 999

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

_____ YEARS

DON'T KNOW998

REFUSED999

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. Was there ever a time since (NCS1 YEAR) when you often had such a strong desire to use [DRUG/ (either/ any) of these substances] that you couldn't resist (it/ them) or found it difficult to think of anything else? (KEY PHRASE: you had a strong and irresistible urge to use)	1	5	8	9
*SU72a. Did you since ever (NCS1 YEAR) need larger amounts of [DRUG/ (either/ any) of these substances] to get an effect, or did you ever find that you could no longer get high on the amount you used to use? (KEY PHRASE: you needed larger amounts to get an effect)	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 since (NCS1 YEAR) when you stopped, cut down, or went without [DRUG/ (either/ any) of these substances] and then experienced symptoms like fatigue, headaches, diarrhea, the shakes, or emotional problems? (KEY PHRASE: you didn't feel well when you stopped using)	1 GO TO *SU72d	5	8	9
*SU72c. Did you since (NCS1 YEAR) have times when you used [DRUG/ (either/ any) of these substances] to <u>keep</u> from having problems like these? (KEY PHRASE: you used to keep from feeling physical problems)	1	5	8	9
*SU72d. Did you have times since (NCS1 YEAR) when you used [DRUG/ (either/ any) of these substances] even though you <u>promised</u> yourself you wouldn't, or when you used a lot more than you intended? (KEY PHRASE: you used when you planned not to, or you used more than you planned)	1 GO TO *SU72f	5	8	9
*SU72e. Were there ever times since (NCS1 YEAR) when you used [DRUG/ (either/ any) of these substances] more frequently or for <u>more days in a row</u> than you intended? (KEY PHRASE: you used more frequently than you intended)	1	5	8	9
*SU72f. Were there times when you tried to stop or cut down on your use of [DRUG/ (either/ any) of these substances] and found that you were not able to do so? (KEY PHRASE: you tried but weren't able to stop or cut down)	1	5	8	9
*SU72g. Did you have periods of several days or more when you spent so much time using [DRUG/ (either/ any) of these substances] or recovering from the (its/ their) effects that you had little time for anything else? (KEY PHRASE: you spent periods of several days doing little more than using or getting over the effects of using)	1	5	8	9
*SU72h. Did you have a month or longer since (NCS1 YEAR) when you gave up or greatly reduced important activities because of your use of [DRUG/ (either/ any) of these substances] – like sports, work, or seeing friends and family? [KEY PHRASE: you gave up or reduced important activities because of your (DRUG/ substance) use]	1	5	8	9
*SU72i. Did you ever continue to use [DRUG/ (either/ any) of these substances] when you knew you had a serious physical or emotional problem that might have been caused by or made worse by (it/ them)? (KEY PHRASE: you used even though it caused or worsened physical or emotional problems)	1	5	8	9

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

ZERO "YES" RESPONSES IN *SU72 SERIES 1 **GO TO *SU87**
1 OR 2 "YES" RESPONSES IN *SU72 SERIES 2
ALL OTHERS 3 **GO TO *SU78**

***SU74.** You just reported that there were times when (KEY PHRASES FOR ALL "YES" RESPONSES IN *SU72 SERIES). Can you remember your exact age the very first time you had (this problem/ either of these problems)?

YES.....1
NO5 **GO TO *SU74b**
DON'T KNOW8 **GO TO *SU74b**
REFUSED9 **GO TO *SU74b**

***SU74a.** (IF NEC: How old were you?)

_____ YEARS OLD **GO TO *SU85**

DON'T KNOW998 **GO TO *SU85**
REFUSED999 **GO TO *SU85**

***SU74b.** About how old were you [the first time you had (this problem/ either 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 TEENS12
BEFORE 20s19
DON'T KNOW998
REFUSED999

GO TO *SU85

***SU78.** You reported having a number of substance-use problems, such as (KEY PHRASES FOR FIRST THREE "YES" RESPONSES IN *SU72 SERIES). Can you remember your exact age the very first time you had any of these problems?

YES.....1
NO5 **GO TO *SU78b**
DON'T KNOW8 **GO TO *SU78b**
REFUSED9 **GO TO *SU78b**

***SU78a.** (IF NEC: How old were you?)

_____ YEARS OLD **GO TO *SU82**

DON'T KNOW998 **GO TO *SU82**
REFUSED999 **GO TO *SU82**

*SU78b. About how old were you (the first time you had 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 TEENS12
BEFORE 20s19
DON'T KNOW998
REFUSED999

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

YES 1
NO 2 **GO TO *SU85**
DON'T KNOW 8 **GO TO *SU85**
REFUSED 9 **GO TO *SU85**

*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 TEENS12
BEFORE 20s19
DON'T KNOW998
REFUSED999

*SU84. How many different years in your life did you ever have three (or more) of these problems?

_____ YEARS

DON'T KNOW998
REFUSED999

*SU85. INTERVIEWER INSTRUCTIONS (SEE 10-YEAR CALENDER)

INTERVIEWER: LABEL A ROW ON THE 10-YEAR CALENDAR "DRUG PROBLEMS" AND HAND THE CALENDAR TO R WITH THE FOLLOWING INSTRUCTIONS:

I want you to put an X in the box for each year since (NCS1 YEAR) when you had any of these problems. Tell me when you are finished.

*SU85.1. Starting from the time you first began having any of these problems, how many different times did you ever make a serious attempt to quit using (DRUG/drugs)?

_____ TIMES

DON'T KNOW998

REFUSED999

*SU85.2. INTERVIEWER CHECKPOINT: (SEE *SU85.1)

*SU85.1 EQUALS '1' OR MORE..... 1

ALL OTHERS.....2 **GO TO *SU87**

*SU85.3. Since then, what is the longest period of time you have ever gone without using (DRUG/drugs)?

_____ DURATION NUMBER

CIRCLE UNIT OF TIME: DAY.....1 MONTH.....2 YEAR.....3

DON'T KNOW998

REFUSED999

*SU85.4. INTERVIEWER CHECKPOINT: (SEE *SU85.1, *SU85.3)

*SU85.1 EQUALS '1' 1 **GO TO *SU87**

*SU85.1 EQUALS '2' OR MORE AND *SU85.3 EQUALS '3' MONTHS OR MORE.....2

ALL OTHERS3 **GO TO *SU87**

*SU85.5. How many different times have you gone without using (DRUG/drugs) for three months or longer?

_____ TIMES

DON'T KNOW998

REFUSED999

*SU87. INTERVIEWER CHECKPOINT: (SEE *SU12 SERIES)

AT LEAST ONE "YES" RESPONSE IN *SU12 SERIES 1

ALL OTHERS..... 2 **GO TO *SU91**

*SU90. INTERVIEWER CHECKPOINT: (SEE *SU65 SERIES)

AT LEAST ONE "YES" RESPONSE IN *SU65 SERIES 1 **GO TO *SU92**

ALL OTHERS..... 2 **GO TO *SU93**

*SU91. INTERVIEWER CHECKPOINT: (SEE *SU65 SERIES)

AT LEAST ONE "YES" RESPONSE IN *SU65 SERIES 1 **GO TO *SU94**

ALL OTHERS..... 2 **GO TO *SU124**

***SU92.** INTERVIEWER INSTRUCTION: FOR REST OF SECTION, USE THE PHRASE “ALCOHOL OR DRUGS.”
GO TO *SU95

***SU93.** INTERVIEWER INSTRUCTION: FOR REST OF SECTION, USE THE WORD “ALCOHOL.”
GO TO *SU95

***SU94.** INTERVIEWER INSTRUCTION: FOR REST OF SECTION, USE THE WORD “DRUGS.”

	YES (1)	NO (5)	DK (8)	RF (9)
*SU95. Did you <u>ever</u> in your life talk to a medical doctor other than a psychiatrist about your use of (alcohol/ alcohol or drugs/ drugs)?	1	5 GO TO *SU99	8 GO TO *SU99	9 GO TO *SU99
*SU95a. How old were you the <u>first time</u> [you talked to a doctor other than a psychiatrist about your use of (alcohol/ alcohol or drugs/ drugs)]?	<p>_____ YEARS OLD</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>			
*SU96. Did a medical doctor other than a psychiatrist ever prescribe <u>medication</u> for your use of (alcohol/ alcohol or drugs/ drugs)? (IF NEC: “Prescribe” means a doctor’s prescription needs to be handed to a pharmacist to obtain the medication.)	1	5 GO TO *SU97	8 GO TO *SU97	9 GO TO *SU97
*SU96a. How old were you the <u>first time</u> [a doctor other than a psychiatrist prescribed medication for you because of your use of (alcohol/ alcohol or drugs/ drugs)]?	<p>_____ YEARS OLD</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>			
*SU97. Did a medical doctor other than a psychiatrist ever give you <u>psychological counseling</u> for more than a few minutes for your use of (alcohol/ alcohol or drugs/ drugs)?	1	5 GO TO *SU98	8 GO TO *SU98	9 GO TO *SU98
*SU97a. How old were you the <u>first time</u> [a doctor other than a psychiatrist gave you psychological counseling for more than a few minutes for your use of (alcohol/ alcohol or drugs/ drugs)]?	<p>_____ YEARS OLD</p> <p>DON'T KNOW 998</p> <p>REFUSED 999</p>			
*SU98. Did a medical doctor other than a psychiatrist ever advise you to see a mental health specialist (– someone like a psychiatrist, psychologist, psychotherapist, or mental health counselor --) about your use of (alcohol/ alcohol or drugs/ drugs)?	1	5 GO TO *SU99	8 GO TO *SU99	9 GO TO *SU99

*SU98a. How old were you the <u>first time</u> [a doctor other than a psychiatrist advised you to see a mental health specialist about your use of (alcohol/ alcohol or drugs/ drugs)]?	_____ YEARS OLD DON'T KNOW 998 REFUSED 999
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	YES (1)	NO (5) GO TO *SU100	DK (8) GO TO *SU100	RF (9) GO TO *SU100
*SU99. Did you ever get treatment for your use of (alcohol/ alcohol or drugs/ drugs) from a mental health specialist (– such as a psychiatrist, psychologist, psychotherapist, or mental health counselor)?	1	5 GO TO *SU100	8 GO TO *SU100	9 GO TO *SU100
*SU99a. How old were you the <u>first time</u> [you got treatment from a mental health specialist for your use of (alcohol/ alcohol or drugs/ drugs)]?	_____ YEARS OLD DON'T KNOW 998 REFUSED 999			
*SU100. Did you ever get treatment from any <u>other</u> professional for your use of (alcohol/ alcohol or drugs/ drugs)? (Other professionals include spiritual advisors, herbalists, acupuncturists, and any other health professionals.)	1	5 GO TO *SU101	8 GO TO *SU101	9 GO TO *SU101
*SU100a. How old were you the <u>first time</u> [you got treatment from any other professional for your use of (alcohol/ alcohol or drugs/ drugs)]?	_____ YEARS OLD DON'T KNOW 998 REFUSED 999			

***SU101. INTERVIEWER CHECKPOINT: (SEE *SU95 - *SU100)**

ONE OR MORE “YES” RESPONSES IN *SU95 - *SU100 1
 ALL OTHERS 2 **GO TO *PEA1, NEXT SECTION (GO TO *SU124) ****

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

YES 1
 NO 5 **GO TO *SU102c**
 DON'T KNOW 8 **GO TO *SU102c**
 REFUSED 9 **GO TO *SU102c**

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

_____ YEARS OLD

 DON'T KNOW 998
 REFUSED 999

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

_____ NUMBER OF PROFESSIONALS **GO TO *SU110**

DON'T KNOW..... 98 **GO TO *SU110**
 REFUSED..... 99 **GO TO *SU110**

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

_____ NUMBER OF PROFESSIONALS

DON'T KNOW..... 98
 REFUSED..... 99

*SU110. Have you ever in your life used any of the following types of treatments for your problems with (alcohol/ alcohol or drugs/ drugs): INTERVIEWER: ASK ALL *SU110 SERIES QUESTIONS BEFORE GOING TO THE *SU112 SERIES AND *SU113 SERIES QUESTIONS.		*SU112. How old were you when you first used (TREATMENT) for your problems with (alcohol/ alcohol or drugs/ drugs)? INTERVIEWER: ASK *SU112 AND *SU113 IN SEQUENCE FOR EACH "YES" IN *SU110 .	*SU113. Have you used (TREATMENT) in the past 12 months for your problems with (alcohol/ alcohol or drugs/ drugs)?
*SU110a. ...acupuncture?	YES 1 NO 5 DK 8 RF 9	*SU112a. _____ YEARS OLD DK 998 RF 999 GO TO *SU113a	*SU113a. YES 1 NO 5 DK 8 RF 9
*SU110d. ...herbal therapies of any kind?	YES 1 NO 5 DK 8 RF 9	*SU112d. _____ YEARS OLD DK 998 RF 999 GO TO *SU113d	*SU113d. YES 1 NO 5 DK 8 RF 9
*SU110e. ...a self-help group such as Alcoholics Anonymous or Alanon?	YES 1 NO 5 DK 8 RF 9	*SU112e. _____ YEARS OLD DK 998 RF 999 GO TO *SU113e	*SU113e. YES 1 NO 5 DK 8 RF 9
*SU110f. ...relaxation therapy like yoga, meditation, or the relaxation response?	YES 1 NO 5 DK 8 RF 9	*SU112f. _____ YEARS OLD DK 998 RF 999 GO TO *SU113f	*SU113f. YES 1 NO 5 DK 8 RF 9
*SU110i. ...any other type of therapy that is generally not provided by medical doctors, such as aromatherapy or hypnosis?	YES 1 NO 5 DK 8 RF 9	*SU112i. _____ YEARS OLD DK 998 RF 999 GO TO *SU113i	*SU113i. YES 1 NO 5 DK 8 RF 9

*SU114. Have you ever in your life been hospitalized overnight for problems with (alcohol/ alcohol or drugs/ drugs)?

YES 1
 NO 5 **GO TO *SU120**
 DON'T KNOW 8 **GO TO *SU120**
 REFUSED 9 **GO TO *SU120**

*SU115.How old were you the first time [you were hospitalized for problems with (alcohol/ alcohol or drugs/ drugs)]?

_____ YEARS OLD

DON'T KNOW 998
REFUSED 999

*SU116.How many times have you been hospitalized for problems with (alcohol/ alcohol or drugs/ drugs) in your entire life?

_____ TIMES

DON'T KNOW 998
REFUSED 999

*SU120. Have you ever in your life gone to an outpatient drug or alcohol rehabilitation program?

YES 1
NO 5 **GO TO *SU124**
DON'T KNOW 8 **GO TO *SU124**
REFUSED 9 **GO TO *SU124**

*SU121.How old were you the first time (you ever went to an outpatient drug or alcohol rehabilitation program)?

_____ YEARS OLD

DON'T KNOW 998
REFUSED 999

*SU124. INTERVIEWER CHECKPOINT:

GO TO NEXT SECTION