

INSTITUTE FOR SURVEY RESEARCH
TEMPLE UNIVERSITY
-Of The Commonwealth System Of Higher Education-
1601 NORTH BROAD STREET
PHILADELPHIA, PENNSYLVANIA 19122

FALL/WINTER 1987-1988

STUDY #540-386-01

ADAPTATIONS TO STRESS STUDY

(FOR OFFICE USE ONLY)

ISR ID#: _____

3-6

CASE #: _____

7-13

Name: _____

Address: _____ Apt. _____

City: _____ State: _____ Zip: _____

Phone #: () _____

Date of Interview: _____ 14-17

Time Began: _____ A.M. _____ P.M. 18-20

Time Ended: _____ A.M. _____ P.M.

Interviewer: _____ ID#: _____

21-24

(FOR OFFICE USE ONLY)

ISR ID#: _____

CASE #: _____

(RESPONDENT MUST SIGN CONSENT FORM BEFORE INTERVIEW IS BEGUN)

08/

1. First, I'd like to ask you some questions about driving and riding in a motor vehicle. How often do you wear a seat belt when you are in a car or other motor vehicle:

never,	1
seldom,	2
about half the time,	3
frequently, or	4
always?	5

21

2. When you drive, do you drive within the speed limit:

always,	1
usually,	2
about half the time,	3
rarely,	4
never, or	5
(SKIP TO Q. 4) don't you drive?	6

22

3. How often do you drink more than one alcoholic beverage, beer, wine, cocktail, or hard drink, one hour before driving a car:

never,	1
a few times a year,	2
a couple of times a month,	3
a couple of times a week, or	4
daily?	5

23

4. How often have you ridden with a driver who had more than one alcoholic beverage, beer, wine, cocktail, or hard drink, one hour before driving:

never,	1
a few times a year,	2
a couple of times a month,	3
a couple of times a week, or	4
daily?	5

24

(IF R DOESN'T DRIVE [Q. 2], SKIP TO Q. 6)

5. Do you keep a safe distance from the car in front of you when driving:

always,	1
usually,	2
about half the time,	3
rarely, or	4
never?	5

25

6. Now some questions about eating behaviors.

What type of milk, if any, do you usually drink:

(CIRCLE ONLY ONE CODE)

none,	1
whole milk,	2
low-fat milk 1% or 2%,	3
skim milk,	4
powdered or instant milk,	5
buttermilk, or	6
some other type of milk?	7

26

7. What type of fat or oil is used most often for cooking in your home:

(CIRCLE ONLY ONE CODE)

none,	1
butter,	2
margarine,	3
vegetable oil such as corn oil,	4
olive oil or peanut oil,	5
shortening,	6
lard, or	7
some other type?	8

27

8. How often, if ever, do you add salt to your food at the table:

never,	1
rarely,	2
about half the time,	3
often, or	4
always?	5

28

9. How many days a week do you usually eat breakfast?

(NUMBER)

29

10. Are you now on any special diet?

	Yes	1
(SKIP TO Q. 13)	No	2

30

11. What kind of a diet is it? (CIRCLE ALL THAT APPLY)

Low salt	1	31
Low fat	1	32
Low cholesterol	1	33
Low carbohydrate	1	34
Low protein	1	35
High protein	1	36
Low fiber	1	37
Weight loss	1	38
Weight gain	1	39
Diabetic	1	40
Vegetarian	1	41
Bland	1	42
Other (SPECIFY:) _____	1	43

12. During the last 12 months, what percentage of the time have you been on a diet?

_____ %

44-46

13. What is your current weight?

(POUNDS)

47-49

14. What do you consider your ideal weight?

(POUNDS)

50-52

15. What is your height?

____ AND ____
(FEET) (INCHES)

53-55

16. Are you getting as much sleep as you feel you need each day?

(SKIP TO Q. 18)	Yes	1
	No	2

56

17. How much more sleep do you feel you need a day to be rested?

____ OR ____
(HOURS) (MINUTES)

57-60

18. I'll read five categories that describe levels of physical activity. Tell me the one category that best describes your current level of physical activity.

a. Inactive (You have a sit-down job or no regular physical activity.)	1
b. Relatively inactive (Three to four hours of walking or standing per day are usual. You have no regular organized physical activity outside of work.)	2
c. Sporadically mildly active (You are sporadically involved in recreational activities such as weekend golf or tennis, occasional jogging, swimming or cycling.)	3
d. Regularly moderately active (Usual job activities might include lifting or stair climbing, or you participate regularly in recreational/fitness activities such as jogging, swimming, or cycling at least three times per week for 30 to 60 minutes each time.)	4
e. Regularly vigorously active (You participate in extensive physical activity for 60 minutes or more at least four days per week.)	5

61

19. How many times a week do you usually exercise?

(TIMES)

(IF NONE, SKIP TO Q. 22)

62-63

20. How strenuous, on average, is your exercise? Is it:

light activity, a small increase in breathing rate,	1
medium activity, some increase in breathing rate, some perspiration, or	2
heavy activity, a large increase in breathing rate, heavy perspiration?	3

64

21. How many minutes does your exercise usually last?

(MINUTES)

65-67

22. On a different subject, at this time, what is the highest grade or number of years of formal schooling you have completed? (IF VOCATIONAL/TECHNICAL TRAINING, ADD NUMBER OF YEARS TO HIGHEST GRADE)

(CIRCLE ONLY ONE CODE)

No schooling	00
Elementary	01 02 03 04 05 06 07 08
High School	09 10 11 12 GED
College	13 14 15 16
Graduate/Professional	17+

68-69

23. Are you currently:

enrolled in a degree-granting college program,	1
not enrolled but plan to be for the next semester,	2
enrolled in a vocational or technical school,	3
enrolled in another type of school from which you will receive a degree or diploma, or	4
(SKIP TO Q. 27) are you neither enrolled nor plan to be next semester?	5

70

24. What kind of program is that? Is it to obtain:

a bachelor's degree,	1
a master's degree,	2
a Ph.D.,	3
an M.D., or	4
what? (SPECIFY): _____	7

71

(IF PLANS TO ENROLL [CODE 2 CIRCLED IN Q. 23], SKIP TO Q. 26)

25. Do the following happen to you, often, sometimes, hardly ever or never:
(REPEAT CATEGORIES AS NEEDED)

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER
a. missing classes?	1	2	3
b. getting good grades?	1	2	3
c. feeling ashamed of your classwork or grades?	1	2	3
d. getting into arguments with faculty or classmates?	1	2	3
e. feeling interested in your schoolwork?	1	2	3
f. feeling dissatisfied with your schoolwork?	1	2	3

72

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26. What kind of work do you realistically think you will be doing when you finish your schooling? (CIRCLE ONLY ONE CODE)

7-8

01	Laborer (car washer, sanitary worker, farm laborer)
02	Service worker (cook, waiter, barber, janitor, gas station attendant, practical nurse, beautician)
03	Operative or semi-skilled worker (garage worker, taxicab, bus or truck driver, assembly-line worker, welder)
04	Sales clerk in a retail store (shoe salesperson, department store clerk, drug store clerk)
05	Clerical or office worker (bank teller, bookkeeper, secretary, typist, postal clerk or carrier, ticket agent)
06	Protective service (police officer, fireman, detective)
07	Military service
08	Craftsman or skilled worker (carpenter, electrician, bricklayer, mechanic, machinist, tool and die maker, telephone installer)
09	Farm owner, farm manager
10	Owner of small business (restaurant owner, shop owner)
11	Sales representative (insurance agent, real estate broker, bond salesman)
12	Manager or administrator (office manager, sales manager, school administrator, government official)
13	Professional without doctoral degree (registered nurse, librarian, teacher, engineer, architect, social worker, technician, accountant, actor, artist, musician)
14	Professional with doctoral degree or equivalent (lawyer, physician, dentist, scientist, college professor)
15	(IF UNABLE TO CODE ELSEWHERE, SPECIFY JOB DESCRIPTION AND INDUSTRY): _____ _____
16	Full-time homemaker or housewife
98	Don't know

27. The following questions concern your various daily activities. The first questions are about employment. Are you:

	working full-time for pay 35 hours or more per week,	1
	working part-time for pay,	2
	not at work because of temporary illness, vacation, or strike, or	3
(SKIP TO Q. 36)	are you not employed?	4

9

28. What kind of work do you do? What is your job title? If you have more than one job, tell me about the job at which most of your time is spent.

10-11

29. What are your main activities and duties at this job?

30. What kind of business or industry is this?

31. How often do each of the following things happen on that job--often, sometimes, hardly ever or never:

(REPEAT CATEGORIES AS NEEDED)

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER	
a. people acting toward you as if you had no feelings?	1	2	3	12
b. being given more work than you can handle?	1	2	3	13
c. having to learn new ways of doing things?	1	2	3	14
d. being given too much responsibility?	1	2	3	15
e. having to work in noisy surroundings?	1	2	3	16
f. having to work in dirty surroundings?	1	2	3	17

32. Is each of the following statements about your job true or false?

	TRUE	FALSE	
a. The chances for promotion, advancement or success are good.	1	2	18
b. The job security is good.	1	2	19
c. The work is interesting.	1	2	20
d. The pay is good.	1	2	21
e. I am good at my job.	1	2	22
f. I get along with the people at work.	1	2	23
g. I am proud of the job I have.	1	2	24

33. In your experiences on the job, how often do you have each of the following feelings--often, sometimes, hardly ever or never:
(REPEAT CATEGORIES AS NEEDED)

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER	
a. bothered or upset?	1	2	3	25
b. worried?	1	2	3	26
c. angry?	1	2	3	27
d. ashamed?	1	2	3	28
e. bored?	1	2	3	29
f. unsure of yourself?	1	2	3	30

34. How many days of work did you miss during the past 20 workdays because you were ill? Exclude any vacation time.

(DAYS MISSED)

31-32

35. How many days of work did you miss during the past 20 workdays because you just didn't feel like going to work? Exclude any vacation time.

(DAYS MISSED)

(ALL SKIP TO Q. 42)

33-34

36. Are you currently a full-time homemaker?

Yes	1
No	2

35

37. Are you looking for work?

Yes	1
No	2

36

38. Have you ever worked for pay?

	Yes	1
(SKIP TO Q. 42)	No	2

37

39. What kind of work did you usually do when you were working? What was your job title?

38-39

40. What were your main activities and duties at that job?

41. What kind of business or industry was that?

42. What kind of work, if any, do you realistically expect to be doing in 10 years?

40-41

(IF R IS CURRENTLY WORKING [Q. 27; CODES 1, 2, 3], SKIP TO Q. 53, PAGE 15)

43. Do you have any physical disability?

Yes	1
No	2

42

44. Did you recover from a long-term illness or injury within the last 12 months?

Yes	1
No	2

43

45. Have you stopped or finished your formal or technical schooling within the last 12 months?

Yes	1
No	2

44

(IF EVER WORKED FOR PAY [SEE Q. 38], ASK Q. 46; OTHERWISE SKIP TO Q. 49)

46. Were you laid off from the last job you had due to economic conditions?

(SKIP TO Q. 48)	Yes	1
	No	2

45

47. Were you fired from the last job you had?

Yes	1
No	2

46

48. How many weeks have you been without some paid employment since this time last year? Do not count vacation or illness while you were holding a job.

47-48

(# OF WEEKS)

49. How much is not having paid employment on your mind? Is it something that you think about:

often,	1
sometimes,	2
hardly ever or never?	3

49

50. When you compare yourself to other people without paid employment, would you say you are:

better off,	1
about the same, or	2
worse off?	3

50

51. Thinking for a moment of the things that happen to you because you do not have paid employment, how often do you feel (a-f)--often, sometimes, hardly ever or never?

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER
a. bothered or upset	1	2	3
b. worried	1	2	3
c. angry	1	2	3
d. ashamed	1	2	3
e. bored	1	2	3
f. unsure of yourself	1	2	3

51

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52. Does not having paid employment result in any of the following for you:

	YES	NO
a. not being able to buy the things you need for yourself or your family?	1	2
b. having to depend on others for help?	1	2
c. people not being interested in you?	1	2

57

58

59

53. Are you currently:		
(GO TO Q. 55)	married and living with your (wife/husband),	1
	married and living apart for reasons other than marital problems,	2
	separated due to marital problems,	3
	divorced,	4
	widowed, or	5
(SKIP TO Q. 56)	have you never been married?	6

54. (THIS QUESTION HAS BEEN OMITTED.)

55. How many times have you been married?

(NUMBER OF TIMES)

(IF CURRENTLY MARRIED [CODE 1 OR 2 CIRCLED IN Q. 53], SKIP TO Q. 57)

56. Are you in a long-term relationship with a person of the opposite sex-- someone to whom you are not married, but have lived with for a long time or expect to live with for a long time sharing an essentially "married" life?

Yes	1
No	2

57. How many times (if ever, including your present relationship) have you lived with someone of the opposite sex in a long-term relationship other than a marriage?

(NUMBER OF TIMES)

(IF MARRIED [CODE 1 OR 2 CIRCLED IN Q. 53] OR IN A LONG-TERM RELATIONSHIP [YES TO Q. 56], SKIP TO Q. 59)

58. Are you in a long-term relationship with a person of your same sex-- someone with whom you have lived for a long time or expect to live for a long time sharing an essentially "married" life?

Yes	1
No	2

65

59. How many times (if ever, including your present relationship) have you lived with someone of the same sex in a long-term relationship?

(NUMBER OF TIMES)

66-67

(IF NOT MARRIED AND NOT IN A LONG-TERM RELATIONSHIP [CODE 3-6 CIRCLED IN Q. 53 AND NO TO QQ. 56 AND 58], SKIP TO Q. 77)

60. In what month and year did you start living with your current (wife/husband/partner)?

68-71

(MONTH)

(YEAR)

61. Is your (wife/husband/partner) working for pay?

	Yes	1
(SKIP TO Q. 66)	No	2

72

62. What kind of work does (he/she) do? What is (his/her) job title?
If (he/she) has more than one job, tell me about the one at which most of (his/her) time is spent.

73-74

63. What are (his/her) main activities and duties at that job?

64. What kind of business or industry is that?

65. Is it a full-time or part-time job?

(SKIP TO Q. 69)	Full-time	1
	Part-time	2

7

66. When was the last time, if ever, (he/she) had a full-time job for pay?

	Never	1
(SKIP	More than three years ago	2
TO	Between one and three years ago	3
Q. 68)	Within the last year	4

8

(IF PART-TIME [CODE 2] IN Q. 65, SKIP TO Q. 68)

67. Has (he/she) ever worked part-time for pay?

	Yes	1
(SKIP TO Q. 69)	No	2

9

68. What kind of work did (he/she) usually do when (he/she) was working?

10-11

69. What kind of work, if any, do you realistically expect (him/her) to be doing in 10 years?

12-13

(IF IN A MALE SAME-SEX LONG-TERM RELATIONSHIP [YES TO Q. 58], SKIP TO Q. 71)

70. (Are you/Is your [wife/partner]) pregnant?

Yes	1
No	2

14

71. Now I'm going to read some statements. Tell me from your experience whether you agree or disagree with each of them:

	AGREE	DISAGREE	
a. My (husband/wife/partner) insists on having (his/her) own way.	1	2	15
b. I can rely on (him/her) to help me with most of the problems that have to be taken care of in the family.	1	2	16
c. I can really talk with (him/her) about things that are important to me.	1	2	17
d. (He/She) is affectionate toward me.	1	2	18
e. (He/She) is a good sexual partner.	1	2	19
f. (He/She) appreciates the job I do.	1	2	20
g. I am affectionate toward (him/her).	1	2	21
h. My (marriage/relationship) is a very happy one.	1	2	22

72. During the last week, how many times did you and your (wife/husband/partner):

	# OF TIMES	
a. go out for leisure time or social activities together?		23-24
b. have major arguments?		25-26
c. have sexual intercourse? (physical sexual contact between individuals that involves the genitals of at least one person)		27-28

73. Within the last two years, have you been separated from your (husband/wife/partner) for more than a few days because of (marriage/relationship) problems?

Yes	1
No	2

29

74. When you think of all the pleasures and problems that go into daily life with your (husband/wife/partner), how often do you feel (a-f)--often, sometimes, hardly ever or never?

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER
a. dissatisfied	1	2	3
b. unsure of yourself	1	2	3
c. bored	1	2	3
d. angry	1	2	3
e. bothered or upset	1	2	3
f. worried	1	2	3

30

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75. Is this your (husband/wife/partner)'s first (marriage/relationship)?

Yes	1
No	2

36

76. During a typical week, about how often do you find yourself thinking over any problems in your (marriage/relationship):

fairly often,	1
sometimes,	2
hardly ever or never?	3

37

(ALL SKIP TO Q. 80)

77. With how many people are you currently involved in an intimate sexual relationship?

(NUMBER)

38

77a. (Are you/Is anyone you are or were recently involved with) pregnant?

Yes	1
No	2

39

78. Tell me if you often, sometimes, hardly ever or never (a-f)?

(REPEAT CATEGORIES AS NEEDED)

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER	DOES NOT APPLY
a. Feel out of place in a social situation because you are single	1	2	3	
b. Feel the need to talk to someone about yourself	1	2	3	
c. Wonder if you may not be an interesting person	1	2	3	
d. Feel that you are not having the kind of sex life you would like	1	2	3	
e. Feel unhappy about the people you date	1	2	3	4
f. Do not go out because you need a friend with you to do the kinds of things you want to do	1	2	3	

40

41

42

43

44

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79. When you think of your daily life as a (never married/separated/divorced/widowed) person, how often do you feel (a-f)--often, sometimes, hardly ever or never?

(REPEAT CATEGORIES AS NEEDED)

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER	
a. worried	1	2	3	46
b. unhappy	1	2	3	47
c. bored	1	2	3	48
d. lonely	1	2	3	49
e. unsure of yourself	1	2	3	50
f. ashamed	1	2	3	51

80. (Other than your [spouse/partner]) with whom (else) are you currently living? Please include all natural, adopted, step and foster children and any children temporarily away at school who live with you more than 60 days a year. (PROBE): Who else?

Roommate(s)--same or opposite sex	1	52
Parent(s)	1	53
Other adult relatives	1	54
Child(ren)	1	55
No one	1	56
Other (SPECIFY): _____	1	57

(IF NO CHILDREN, SKIP TO Q. 89)

81. How many children are living with you?

(NUMBER)

58-59

10/

11/

82. Please tell me their ages, sex, and if they are natural, adopted, step or foster children, or what their relationship is to you. (RECORD BELOW AND BE SURE YOU HAVE ACCOUNTED FOR ALL CHILDREN IN Q. 81)

AGE	MALE	FEMALE	NATURAL	ADOPTED	STEP	FOSTER	OTHER (SPECIFY):
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____
_____	1	2	1	2	3	4	5 _____

10/

60-63

64-67

68-71

72-75

11/

7-10

11-14

15-18

19-22

23-26

27-30

83. Do you do each of the following things with (this/these) child(ren) often, sometimes, hardly ever or never:
(REPEAT CATEGORIES AS NEEDED)

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER
a. spend free time together?	1	2	3
b. hug and kiss one another?	1	2	3
c. show interest in what your child(ren) (is/are) doing, who (his/her/their) friends are, how (he/she/they) (is/are) doing in school, what (he/she/they) (plays/play), and things like that?	1	2	3

31

32

33

84. When you think of your experiences as a parent--all the daily pleasures and daily problems that you have, how often do you feel (a-c)--often, sometimes, hardly ever or never?

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER
a. worried	1	2	3
b. unhappy	1	2	3
c. unsure of yourself	1	2	3

34

35

36

85. During a typical day, how often do you find that problems of being a parent are on your mind? Is it:

almost always,	1
a good part of the time,	2
some of the time, or	3
almost never or not at all?	4

37

86. (Does this child/Do any of these children) have any special kinds of health problems or conditions?

	Yes	1
(SKIP TO Q. 89)	No	2

38

87. What is wrong? (PROBE FOR DIAGNOSIS OR SPECIFIC PROBLEM)

39-41

88. How serious is this to you? Is it:

very serious,	1
somewhat serious,	2
slightly serious, or	3
not at all serious?	4

42

89. Altogether, how many children by birth or adoption would you like to have (if any)?

43-44

(# OF CHILDREN)

90. Now, on a different subject, how much of the housework in your home do you do:

all,	1
most,	2
some, or	3
none?	4

45

(SKIP TO Q. 92)

91. Do you agree or disagree with the following statements as they apply to you?

	AGREE	DISAGREE	NOT APPLICABLE	
a. Keeping my home clean means a lot to me.	1	2		46
b. I am ashamed of how I do my housework.	1	2		47
c. I am not appreciated for my work in the house.	1	2	3	48
d. I am uninterested or bored with doing housework chores.	1	2		49
e. I very often find myself watching TV, going to movies or just finding something else to do when the housework needs to be done.	1	2		50
f. I have trouble keeping up with my housework including cooking, cleaning, laundry, grocery shopping and errands.	1	2		51
g. I am ashamed of having to do housework.	1	2		52
h. I usually feel upset while doing my housework.	1	2		53

92. Now we would like to ask you about any friends you might have (other than romantic relationships) with whom you have had long relationships.

In the last week, how many different friends have you been with socially; for example, visiting, movies, bowling, church, eating out, invited to your home?

(NUMBER)

93. Within the last week, to how many different friends have you spoken on the telephone?

(NUMBER)

94. Think of the friend with whom you have been or to whom you have spoken most in the past week. How many times have you been with or spoken to this person?

(NUMBER)

95. When you think of your day-to-day relationships with your friends, or your lack of friends, how often do you feel (a-f)--very often, sometimes, hardly ever or never?

(REPEAT CATEGORIES AS NEEDED)

	VERY OFTEN	SOMETIMES	HARDLY EVER OR NEVER
a. ashamed	1	2	3
b. bored	1	2	3
c. comfortable	1	2	3
d. unsure of yourself	1	2	3
e. unwanted	1	2	3
f. worried	1	2	3

60

61

62

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64

65

96. How often do you talk with friends about your feelings and problems:

		often,	1
		sometimes,	2
		hardly ever or never?	3
(SKIP TO Q. 98)	(DO NOT READ)	No friends	8

66

97. How often are your feelings hurt by friends:

	often,	1
	sometimes,	2
	hardly ever or never?	3

67

98. At present, about how often do you attend religious services? Is it:

about once a week or more,	1
about two or three times a month,	2
about once a month,	3
a few times a year, as on important holidays or special occasions,	4
hardly ever or never?	5

68

99. How often do you use prayer or religious meditation when you are troubled or need help in working out a problem? Would you say:

often,	1
once in a while, or	2
never?	3

69

100. How important would you say religion is in your life? Would you say:

very important,	1
somewhat important,	2
not very important, or	3
not at all important?	4

70

The following questions concern your political activities.

101. Within the last year, did you:

	YES	NO
a. vote in a public election?	1	2
b. write to a public official?	1	2
c. give money to a political candidate or cause?	1	2
d. work in a campaign for a political candidate or cause?	1	2

71

72

73

74

102. What political party do you generally prefer?

Republican	1
Democrat	2
None/Independent	3
Other (SPECIFY): _____	4
Don't know or haven't decided	8

75

103. Which of the following best describes your political views:

conservative,	1
moderate,	2
liberal,	3
radical, or	4
what? (SPECIFY): _____	5

76

104. People often think of each other in terms of what social class they are in.

Judging by the prestige or respect people have for your and your family's occupations, education and income, do you think you are in the:

	upper class,	1
	upper-middle class,	2
	middle class,	3
	lower-middle class,	4
	working class, or	5
	lower class?	6
(DO NOT READ)	Other (SPECIFY): _____	7

105. How important is it to you to move to a higher prestige social class than the one you're now in? Is it:

important,	1
fairly important, or	2
not important?	3

106. What would you guess your chances for success are in moving to a higher prestige social class? Would you guess:

	good,	1
	fair, or	2
	poor?	3
(DO NOT READ)	Already in the highest class	8

107. When thinking of your social class, how often do you feel (a-d)--often, sometimes, hardly ever or never?

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER
a. ashamed	1	2	3
b. angry	1	2	3
c. unhappy	1	2	3
d. unsure of yourself	1	2	3

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108. People have many different kinds of friends, neighbors, and co-workers who are members of diverse groups. Think first about the friends you now have. To the best of your knowledge, how many of your friends are (a-f)--all, most, some or none?

(REPEAT CATEGORIES AS NEEDED)

					(DO NOT READ)
	ALL	MOST	SOME	NONE	DON'T KNOW
a. primarily homosexual, or gay	1	2	3	4	8
b. primarily heterosexual, or straight	1	2	3	4	8
c. intravenous drug users	1	2	3	4	8
d. drug users, other than intravenous	1	2	3	4	8
e. prostitutes	1	2	3	4	8
f. heavy drinkers	1	2	3	4	8

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19

(IF R IS NOT EMPLOYED [CODE 4, Q. 27, P. 9], SKIP TO Q. 110)

109. Now think about your co-workers. To the best of your knowledge, how many of them are (a-f)--all, most, some or none?

(REPEAT CATEGORIES AS NEEDED)

(DO NOT READ)

	ALL	MOST	SOME	NONE	DON'T KNOW	
a. primarily homosexual, or gay	1	2	3	4	8	20
b. primarily heterosexual, or straight	1	2	3	4	8	21
c. intravenous drug users	1	2	3	4	8	22
d. drug users, other than intravenous	1	2	3	4	8	23
e. prostitutes	1	2	3	4	8	24
f. heavy drinkers	1	2	3	4	8	25

110. And to the best of your knowledge, how many of your neighbors are (a-f)--all, most, some or none?

(DO NOT READ)

	ALL	MOST	SOME	NONE	DON'T KNOW	
a. primarily homosexual, or gay	1	2	3	4	8	26
b. primarily heterosexual, or straight	1	2	3	4	8	27
c. intravenous drug users	1	2	3	4	8	28
d. drug users, other than intravenous	1	2	3	4	8	29
e. prostitutes	1	2	3	4	8	30
f. heavy drinkers	1	2	3	4	8	31

111. At places to which you go socially, how many of the people do you think are (a-f)--all, most, some or none?

						(DO NOT READ)
	ALL	MOST	SOME	NONE		DON'T KNOW
a. primarily homosexual, or gay	1	2	3	4		8
b. primarily heterosexual, or straight	1	2	3	4		8
c. intravenous drug users	1	2	3	4		8
d. drug users, other than intravenous	1	2	3	4		8
e. prostitutes	1	2	3	4		8
f. heavy drinkers	1	2	3	4		8

112. In this booklet are some questions you may answer yourself. For each statement, just circle a number--1 for true or 2 for false.
(RECORD R'S CASE # AND YOUR NAME AND ID#. HAND R SAQ 1 AND A PEN.)

COMPLETED BY:	RESPONDENT	1
	INTERVIEWER	2
	BOTH	3

(RECORD R'S CASE # ON EACH PAGE AND REVIEW SAQ FOR COMPLETENESS.
ASK ANY QUESTIONS R HAS OMITTED.)

113. Now think about a situation that you experienced where someone important to you criticized or rejected you, or argued with you, or didn't do what you expected them to do. Has such an event that you consider a major incident ever happened to you?

	Yes	1
(SKIP TO Q. 117)	No	2

114. When was the most recent time it happened?

(MONTH) AND (YEAR)

115. What happened? _____

116. Which of the following things did you do? Did you: (a-z)? (RECORD IN Q. 116 COLUMN AND THEN SKIP TO Q. 118, PAGE 35)

117. Which of the following would you probably do if such a thing happened? Would you: (a-z)? (RECORD IN Q. 117 COLUMN)

	Q. 116 COLUMN		Q. 117 COLUMN		
	YES	NO	YES	NO	
a. Hide your feelings	1	2	1	2	45-46
b. Just wait for things to work themselves out	1	2	1	2	47-48
c. Compare yourself to others who were worse off	1	2	1	2	49-50
d. Tell yourself it wasn't worth getting upset about	1	2	1	2	51-52
e. Take some action to change the situation, borrow money, talk over the difficulties with the person, learn what you had to, etc.	1	2	1	2	53-54
f. Keep busy with other things to keep your mind off it	1	2	1	2	55-56
g. Ignore the situation--act as if it didn't happen	1	2	1	2	57-58
h. Yell or shout or let off steam	1	2	1	2	59-60
i. Stay away from the situation or the people involved	1	2	1	2	61-62
j. Put it behind you and go on with other things	1	2	1	2	63-64
k. Work out things so that you got something good out of the situation	1	2	1	2	65-66
l. Blame yourself for bringing on the problem	1	2	1	2	67-68

(CONTINUED ON THE NEXT PAGE)

12/

13/

116. Did you:	Q. 116 COLUMN		Q. 117 COLUMN		
117. Would you:					
	YES	NO	YES	NO	
m. Sleep more than usual	1	2	1	2	12/ 69-70
n. Get mad at the people or things that caused the problem	1	2	1	2	71-72
o. Get professional help	1	2	1	2	73-74
p. Try to make yourself feel better by eating, drinking, smoking, or taking medication	1	2	1	2	75-76
q. Joke about it	1	2	1	2	13/ 7-8
r. Ask friends or relatives for advice or sympathy	1	2	1	2	9-10
s. Take out your feelings on other people	1	2	1	2	11-12
t. Refuse to believe that it had happened	1	2	1	2	13-14
u. Make a promise to yourself that things would be different next time	1	2	1	2	15-16
v. Change something about yourself so that you could deal with the situation	1	2	1	2	17-18
w. Have fantasies or wishes about how things might turn out	1	2	1	2	19-20
x. Think about fantastic or unreal things such as the perfect revenge or finding a million dollars	1	2	1	2	21-22
y. Wish that the situation would go away or somehow be over with	1	2	1	2	23-24
z. Try to get even or take revenge against the people or things that caused the problem	1	2	1	2	25-26

118. When people have problems, they can solve some of them because of their own knowledge or abilities. Other problems require the help of others. The following questions refer to the resources people have that may help to solve their problems. In the last six months, have you read any book or magazine dealing with:

	YES	NO	
a. how to improve your physical or mental health?	1	2	27
b. how to improve your marriage, relationships or be a better parent?	1	2	28
c. how to make or manage money?	1	2	29

119. If you had to, would you (or your [wife/husband/partner]) know how to or how to find out how to:

	YES	NO	
a. apply for a bank loan?	1	2	30
b. look for a new house?	1	2	31
c. look for a job?	1	2	32
d. arrange for a funeral?	1	2	33

120. Finances are also among the resources people have. During a typical week, about how much are money problems on your mind? Would you say:

often,	1	
sometimes,	2	34
hardly ever or never?	3	

121. At the present time, are you (and your [partner/spouse/dependents]) able to afford:

	YES	NO	
a. a large enough and comfortable enough place to live?	1	2	35
b. furniture or household equipment when it needs to be replaced?	1	2	36
c. the kind of food needed?	1	2	37
d. the kind of medical care needed?	1	2	38
e. the monthly payments on bills?	1	2	39

122. When you think of your financial situation, the things you (and your [partner/spouse/dependents]) are able to afford, and the things you would like to have for yourself (and your family) but are unable to afford, how often do you feel (a-e)--often, sometimes, hardly ever or never?

	OFTEN	SOMETIMES	HARDLY EVER OR NEVER	
a. worried	1	2	3	40
b. angry	1	2	3	41
c. unhappy	1	2	3	42
d. insecure	1	2	3	43
e. ashamed	1	2	3	44

123. Excluding any time you may have lived at school, in what year, if ever, did you move out of your parents' home on what you expected to be a permanent basis?

19 _____

(SKIP TO Q. 125) Never stopped living with parent(s) 95

124. In what year, if ever, did you most recently move back home?

47-48

(YEAR)

Never moved back

95

(HAND R CARD 1)

125. Please tell me the letter on this card that represents your own total income, before taxes, from all sources for the 1986 calendar year, January 1 to December 31.

(CIRCLE CORRESPONDING CODE)

49-50

	WEEKLY	MONTHLY	YEARLY	CODE
A.	\$ 96 OR LESS	\$ 417 OR LESS	UNDER \$5,000	01
B.	\$ 97 - \$ 192	\$ 418 - \$ 750	\$ 5,000 - \$ 9,999	02
C.	\$ 193 - \$ 288	\$ 751 - \$1,250	\$10,000 - \$14,999	03
D.	\$ 289 - \$ 385	\$1,252 - \$1,667	\$15,000 - \$19,999	04
E.	\$ 386 - \$ 480	\$1,668 - \$2,083	\$20,000 - \$24,999	05
F.	\$ 481 - \$ 673	\$2,084 - \$2,917	\$25,000 - \$34,999	06
G.	\$ 674 - \$ 961	\$2,918 - \$4,167	\$35,000 - \$49,999	07
H.	\$ 962 - \$1,442	\$4,168 - \$6,250	\$50,000 - \$74,999	08
I.	\$1,443 OR MORE	\$6,251 OR MORE	\$75,000 OR MORE	09

(TAKE CARD 1 BACK)

Don't know

98

126. Often we have to depend on other people to help us solve our problems. Do you have relatives, friends, or neighbors who:

(REPEAT LEAD-IN AS NEEDED)

	YES	NO	
a. in an emergency would look after your family (spouse/partner/children and any others for whom you are responsible) for a week?	1	2	51
b. in an emergency would look after your house or apartment for a week?	1	2	52
c. would give you emotional support if something tragic happened such as the death of someone close, a divorce, etc.?	1	2	53
d. would lend you several hundred dollars or more for unexpected expenses if you asked, assuming they could afford it?	1	2	54
e. would help you arrange for a funeral?	1	2	55
f. would be good people to tell your troubles to?	1	2	56

127. Now, on a different subject. How old were you when you first tried:

	AGE	NEVER USED	
a. Cigarettes?	_____	95	13/ 57-58
b. Beer?	_____	95	59-60
c. Wine?	_____	95	61-62
d. Hard liquor, alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic?	_____	95	63-64
e. Opiates or painkillers such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription?	_____	95	65-66
f. Stimulants, uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription?	_____	95	67-68
g. Sedatives or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription?	_____	95	69-70
h. Tranquilizers such as valium, librium, miltown, meproamate or equanil with or without a prescription?	_____	95	71-72
i. Non-prescription drugs such as cough syrup, NoDoz, sleeping pills (Sominex, etc.)?	_____	95	73-74
j. Marijuana, hash, THC, herb, weed, ganja?	_____	95	75-76
k. Psychedelics, hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.?	_____	95	77-78
l. Cocaine, coke, crack, sister, white powder, toots, girl, ice, etc.?	_____	95	79-80
m. Heroin, horse, skag, H, boy?	_____	95	14/ 7-8
n. Inhalants, solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa?	_____	95	9-10
o. PCP, phencyclidine, angel dust?	_____	95	11-12
p. Any of the designer drugs such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.?	_____	95	13-14

(EXTEND PAGE. USE AS REFERENCE FOR QQ. 128-217)

(IF ALL CODE 95 [NEVER USED] OR IF ALL AGES ARE 19 AND OLDER, SKIP TO Q. 129)

(CIRCLE THE LETTER [a-p] OF EACH SUBSTANCE USED IN Q. 127. ASK Q. 128 ABOUT EACH OF THOSE SUBSTANCES)

(HAND R CARD 2)

128. Please look at this card. Then tell me, when you were in high school, what was the most often you ever used:

	NEVER	ONCE OR A FEW TIMES	ONCE A MONTH	2 OR 3 TIMES A MONTH	WEEKLY	DAILY	
a. Cigarettes?	1	2	3	4	5	6	15
b. Beer?	1	2	3	4	5	6	16
c. Wine?	1	2	3	4	5	6	17
d. Hard liquor, alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic?	1	2	3	4	5	6	18
e. Opiates or painkillers such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription?	1	2	3	4	5	6	19
f. Stimulants, uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription?	1	2	3	4	5	6	20
g. Sedatives or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription?	1	2	3	4	5	6	21
h. Tranquilizers such as valium, librium, miltown, meproamate or equanil with or without a prescription?	1	2	3	4	5	6	22
i. Non-prescription drugs such as cough syrup, NoDoz, sleeping pills (Sominex, etc.)?	1	2	3	4	5	6	23

(CONTINUED ON THE NEXT PAGE)

	NEVER	ONCE OR A FEW TIMES	ONCE A MONTH	2 OR 3 TIMES A MONTH	WEEKLY	DAILY	
j. Marijuana, hash, THC, herb, weed, ganja?	1	2	3	4	5	6	24
k. Psychedelics, hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.?	1	2	3	4	5	6	25
l. Cocaine, coke, crack, sister, white powder, toots, girl, ice, etc.?	1	2	3	4	5	6	26
m. Heroin, horse, skag, H, boy?	1	2	3	4	5	6	27
n. Inhalants, solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa?	1	2	3	4	5	6	28
o. PCP, phencyclidine, angel dust?	1	2	3	4	5	6	29
p. Any of the designer drugs such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.?	1	2	3	4	5	6	30
(TAKE BACK CARD 2)							

(HAND R CARD 3. ASK ABOUT EACH SUBSTANCE AND CIRCLE THE APPROPRIATE CODE IN EACH COLUMN)

129. Please look at this card. When you were in high school, how did your mother (or mother substitute) feel or how would she have felt about you using:

	cigarettes?	alcohol?	marijuana?	other drugs?
a. Encouraged me	1	1	1	1
b. Approved, but did not encourage me	2	2	2	2
c. Discouraged me, but not strongly	3	3	3	3
d. Strongly discouraged me	4	4	4	4
e. Don't really know how she felt	5	5	5	5
f. Didn't care what I did	6	6	6	6
g. No mother/mother substitute	7	7	7	7
	31	32	33	34

130. When you were in high school, how did your father (or father substitute) feel or how would he have felt about you using:

	cigarettes?	alcohol?	marijuana?	other drugs?
a. Encouraged me	1	1	1	1
b. Approved, but did not encourage me	2	2	2	2
c. Discouraged me, but not strongly	3	3	3	3
d. Strongly discouraged me	4	4	4	4
e. Don't really know how he felt	5	5	5	5
f. Didn't care what I did	6	6	6	6
g. No father/father substitute	7	7	7	7
	35	36	37	38

131.

When you were in high school, how did your friends feel or how would they have felt about you using:

	cigarettes?	alcohol?	marijuana?	other drugs?
a. Encouraged me	1	1	1	1
b. Approved, but did not encourage me	2	2	2	2
c. Discouraged me, but not strongly	3	3	3	3
d. Strongly discouraged me	4	4	4	4
e. Don't really know how they felt	5	5	5	5
f. Didn't care what I did	6	6	6	6
<div> <div>39</div> <div>40</div> <div>41</div> <div>42</div> </div>				
(TAKE BACK CARD 3)				

(IF NO MOTHER/MOTHER SUBSTITUTE [Q. 129], SKIP TO INSTRUCTION ABOVE Q. 133)

(HAND R CARD 2)

132. To the best of your knowledge, when you were in high school, how often did your mother (or mother substitute) use:

(DO NOT
READ)

	NEVER	ONCE OR A FEW TIMES	ONCE A MONTH	2 OR 3 TIMES A MONTH	WEEKLY	DAILY	DON'T KNOW	
a. Cigarettes?	1	2	3	4	5	6	8	43
b. Beer?	1	2	3	4	5	6	8	44
c. Wine?	1	2	3	4	5	6	8	45
d. Hard liquor, alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic?	1	2	3	4	5	6	8	46
e. Opiates or painkillers such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription?	1	2	3	4	5	6	8	47
f. Stimulants, uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription?	1	2	3	4	5	6	8	48
g. Sedatives or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription?	1	2	3	4	5	6	8	49
h. Tranquilizers such as valium, librium, miltown, meproamate or equanil with or without a prescription?	1	2	3	4	5	6	8	50

(CONTINUED ON THE NEXT PAGE)

							(DO NOT READ)
	NEVER	ONCE OR A FEW TIMES	ONCE A MONTH	2 OR 3 TIMES A MONTH	WEEKLY	DAILY	DON'T KNOW
i. Non-prescription drugs such as cough syrup, NoDoz, sleeping pills (Sominex, etc.)?	1	2	3	4	5	6	8
j. Marijuana, hash, THC, herb, weed, ganja?	1	2	3	4	5	6	8
k. Psychedelics, hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.?	1	2	3	4	5	6	8
l. Cocaine, coke, crack, sister, white powder, toots, girl, ice, etc.?	1	2	3	4	5	6	8
m. Heroin, horse, skag, H, boy?	1	2	3	4	5	6	8
n. Inhalants, solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa?	1	2	3	4	5	6	8
o. PCP, phencyclidine, angel dust?	1	2	3	4	5	6	8
p. Any of the designer drugs such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.?	1	2	3	4	5	6	8

(IF NO FATHER/FATHER SUBSTITUTE [Q. 130], SKIP TO INSTRUCTION ABOVE Q. 134)

133. To the best of your knowledge, when you were in high school, how often did your father (or father substitute) use:

	(DO NOT READ)							
	NEVER	ONCE OR A FEW TIMES	ONCE A MONTH	2 OR 3 TIMES A MONTH	WEEKLY	DAILY	DON'T KNOW	
a. Cigarettes?	1	2	3	4	5	6	8	59
b. Beer?	1	2	3	4	5	6	8	60
c. Wine?	1	2	3	4	5	6	8	61
d. Hard liquor, alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic?	1	2	3	4	5	6	8	62
e. Opiates or painkillers such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription?	1	2	3	4	5	6	8	63
f. Stimulants, uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription?	1	2	3	4	5	6	8	64
g. Sedatives or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription?	1	2	3	4	5	6	8	65
h. Tranquilizers such as valium, librium, miltown, meproamate or equanil with or without a prescription?	1	2	3	4	5	6	8	66

(CONTINUED ON THE NEXT PAGE)

		ONCE OR A FEW TIMES	ONCE A MONTH	2 OR 3 TIMES A MONTH	WEEKLY	DAILY	(DO NOT READ) DON'T KNOW	
	NEVER							
i. Non-prescription drugs such as cough syrup, NoDoz, sleeping pills (Sominex, etc.)?	1	2	3	4	5	6	8	67
j. Marijuana, hash, THC, herb, weed, ganja?	1	2	3	4	5	6	8	68
k. Psychedelics, hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.?	1	2	3	4	5	6	8	69
l. Cocaine, coke, crack, sister, white powder, toots, girl, ice, etc.?	1	2	3	4	5	6	8	70
m. Heroin, horse, skag, H, boy?	1	2	3	4	5	6	8	71
n. Inhalants, solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa?	1	2	3	4	5	6	8	72
o. PCP, phencyclidine, angel dust?	1	2	3	4	5	6	8	73
p. Any of the designer drugs such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.?	1	2	3	4	5	6	8	74
(TAKE BACK CARD 2)								

(HAND R CARD 4)

134. To the best of your knowledge, when you were in high school, about how many of your close friends tried or used:

	(DO NOT READ)							
	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW	
a. Cigarettes?	1	2	3	4	5	6	8	7
b. Beer?	1	2	3	4	5	6	8	8
c. Wine?	1	2	3	4	5	6	8	9
d. Hard liquor (alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic)?	1	2	3	4	5	6	8	10
e. Opiates or painkillers (such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription)?	1	2	3	4	5	6	8	11
f. Stimulants (uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription)?	1	2	3	4	5	6	8	12
g. Sedatives (or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription)?	1	2	3	4	5	6	8	13
h. Tranquilizers (such as valium, librium, miltown, meproamate or equanil with or without a prescription)?	1	2	3	4	5	6	8	14

(CONTINUED ON THE NEXT PAGE)

							(DO NOT READ)	
	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW	
i. Non-prescription drugs such as cough syrup, NoDoz, sleeping pills (Sominex, etc.)?	1	2	3	4	5	6	8	15
j. Marijuana (hash, THC, herb, weed, ganja)?	1	2	3	4	5	6	8	16
k. Psychedelics (hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.)?	1	2	3	4	5	6	8	17
l. Cocaine (coke, crack, sister, white powder, toots, girl, ice, etc.)?	1	2	3	4	5	6	8	18
m. Heroin (horse, skag, H, boy)?	1	2	3	4	5	6	8	19
n. Inhalants (solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa)?	1	2	3	4	5	6	8	20
o. PCP (phencyclidine, angel dust)?	1	2	3	4	5	6	8	21
p. Any of the designer drugs (such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.)?	1	2	3	4	5	6	8	22

(IF ALL CODE 1 [NONE] IN Q. 134 [PP. 48 & 49], SKIP TO Q. 136)

(CIRCLE THE LETTER [a-p] OF EACH SUBSTANCE CODED 2-6 IN Q. 134 AND ASK Q. 135 ABOUT EACH OF THOSE SUBSTANCES)

135. To the best of your knowledge, when you were in high school, about how many of your close friends used the following at least once a week:

							(DO NOT READ)	
	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW	
a. Cigarettes?	1	2	3	4	5	6	8	23
b. Beer?	1	2	3	4	5	6	8	24
c. Wine?	1	2	3	4	5	6	8	25
d. Hard liquor (alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic)?	1	2	3	4	5	6	8	26
e. Opiates or painkillers (such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription)?	1	2	3	4	5	6	8	27
f. Stimulants (uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription)?	1	2	3	4	5	6	8	28
g. Sedatives (or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription)?	1	2	3	4	5	6	8	29
h. Tranquilizers (such as valium, librium, miltown, meproamate or equanil with or without a prescription)?	1	2	3	4	5	6	8	30

(CONTINUED ON THE NEXT PAGE)

							(DO NOT READ)
	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW
i. Non-prescription drugs such as cough syrup, NoDoz, sleeping pills (Sominex, etc.)?	1	2	3	4	5	6	8
j. Marijuana (hash, THC, herb, weed, ganja)?	1	2	3	4	5	6	8
k. Psychedelics (hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.)?	1	2	3	4	5	6	8
l. Cocaine (coke, crack, sister, white powder, toots, girl, ice, etc.)?	1	2	3	4	5	6	8
m. Heroin (horse, skag, H, boy)?	1	2	3	4	5	6	8
n. Inhalants (solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa)?	1	2	3	4	5	6	8
o. PCP (phencyclidine, angel dust)?	1	2	3	4	5	6	8
p. Any of the designer drugs (such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.)?	1	2	3	4	5	6	8

136. As far as you know, about how many kids in your high school used:

(DO NOT
READ)

	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW	
a. Cigarettes?	1	2	3	4	5	6	8	39
b. Beer?	1	2	3	4	5	6	8	40
c. Wine?	1	2	3	4	5	6	8	41
d. Hard liquor (alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic)?	1	2	3	4	5	6	8	42
e. Opiates or painkillers (such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription)?	1	2	3	4	5	6	8	43
f. Stimulants (uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription)?	1	2	3	4	5	6	8	44
g. Sedatives (or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription)?	1	2	3	4	5	6	8	45
h. Tranquilizers (such as valium, librium, miltown, meproamate or equanil with or without a prescription)?	1	2	3	4	5	6	8	46
i. Non-prescription drugs such as cough syrup, NoDoz, sleep- ing pills (Sominex, etc.)?	1	2	3	4	5	6	8	47

(CONTINUED ON THE NEXT PAGE)

							(DO NOT READ)
	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW
j. Marijuana (hash, THC, herb, weed, ganja)?	1	2	3	4	5	6	8
k. Psychedelics (hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.)?	1	2	3	4	5	6	8
l. Cocaine (coke, crack, sister, white powder, toots, girl, ice, etc.)?	1	2	3	4	5	6	8
m. Heroin (horse, skag, H, boy)?	1	2	3	4	5	6	8
n. Inhalants (solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa)?	1	2	3	4	5	6	8
o. PCP (phencyclidine, angel dust)?	1	2	3	4	5	6	8
p. Any of the designer drugs (such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.)?	1	2	3	4	5	6	8

137. To the best of your knowledge, now that you are an adult, how many of your current friends have ever tried:

							(DO NOT READ)	
	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW	
a. Cigarettes?	1	2	3	4	5	6	8	55
b. Beer?	1	2	3	4	5	6	8	56
c. Wine?	1	2	3	4	5	6	8	57
d. Hard liquor (alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic)?	1	2	3	4	5	6	8	58
e. Opiates or painkillers (such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription)?	1	2	3	4	5	6	8	59
f. Stimulants (uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription)?	1	2	3	4	5	6	8	60
g. Sedatives (or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription)?	1	2	3	4	5	6	8	61
h. Tranquilizers (such as valium, librium, miltown, meprobamate or equanil with or without a prescription)?	1	2	3	4	5	6	8	62
i. Non-prescription drugs such as cough syrup, NoDoz, sleeping pills (Sominex, etc.)?	1	2	3	4	5	6	8	63

(CONTINUED ON THE NEXT PAGE)

							(DO NOT READ)	
	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW	
j. Marijuana (hash, THC, herb, weed, ganja)?	1	2	3	4	5	6	8	64
k. Psychedelics (hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.)?	1	2	3	4	5	6	8	65
l. Cocaine (coke, crack, sister, white powder, toots, girl, ice, etc.)?	1	2	3	4	5	6	8	66
m. Heroin (horse, skag, H, boy)?	1	2	3	4	5	6	8	67
n. Inhalants (solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa)?	1	2	3	4	5	6	8	68
o. PCP (phencyclidine, angel dust)?	1	2	3	4	5	6	8	69
p. Any of the designer drugs (such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.)?	1	2	3	4	5	6	8	70
(IF ALL NONE [CODE 1], TAKE BACK CARD 4 AND SKIP TO INSTRUCTION ABOVE Q. 139)								

(CIRCLE THE LETTER [a-p] OF EACH SUBSTANCE CODED 2-6 IN Q. 137 AND ASK Q. 138 ABOUT EACH OF THOSE SUBSTANCES)

138. To the best of your knowledge, now that you are an adult, how many of your current friends use the following at least once a week:

							(DO NOT READ)	
	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW	
a. Cigarettes?	1	2	3	4	5	6	8	71
b. Beer?	1	2	3	4	5	6	8	72
c. Wine?	1	2	3	4	5	6	8	73
d. Hard liquor (alcohol like whiskey or gin, or mixed alcoholic drinks like gin and tonic)?	1	2	3	4	5	6	8	74
e. Opiates or painkillers (such as opium, morphine, codeine, dilaudid, demerol, percodan, paregoric, methadone with or without a prescription)?	1	2	3	4	5	6	8	75
f. Stimulants (uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine, ritalin with or without a prescription)?	1	2	3	4	5	6	8	76
g. Sedatives (or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaalude or 714 with or without a prescription)?	1	2	3	4	5	6	8	77
h. Tranquilizers (such as valium, librium, miltown, meproamate or equanil with or without a prescription)?	1	2	3	4	5	6	8	78

(CONTINUED ON THE NEXT PAGE)

(DO NOT
READ)

	NONE	FEW	ABOUT HALF	MORE THAN HALF	ALMOST ALL	ALL	DON'T KNOW	
i. Non-prescription drugs such as cough syrup, NoDoz, sleeping pills (Sominex, etc.)?	1	2	3	4	5	6	8	7
j. Marijuana (hash, THC, herb, weed, ganja)?	1	2	3	4	5	6	8	8
k. Psychedelics (hallucinogens, LSD, acid, mescaline, peyote, magic mushrooms, psilocybin, DMT, STP, etc.)?	1	2	3	4	5	6	8	9
l. Cocaine (coke, crack, sister, white powder, toots, girl, ice, etc.)?	1	2	3	4	5	6	8	10
m. Heroin (horse, skag, H, boy)?	1	2	3	4	5	6	8	11
n. Inhalants (solvents, nitrous oxide, laughing gas, whippets, glue, snappers, amyl nitrite, chloroform, aerosols, poppers, medusa)?	1	2	3	4	5	6	8	12
o. PCP (phencyclidine, angel dust)?	1	2	3	4	5	6	8	13
p. Any of the designer drugs (such as XTC, Ecstasy, X, MDMA, Adam, Eve, MDA, China white, etc.)?	1	2	3	4	5	6	8	14
(TAKE BACK CARD 4)								

(IF NEVER SMOKED CIGARETTES [Q. 127a], SKIP TO INSTRUCTION ABOVE Q. 143)

139. Have you smoked cigarettes within the last eight years, since 1980?

	Yes	1
(SKIP TO INSTRUCTION ABOVE Q. 143)	No	2

15

(HAND R CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

140. About how often did you smoke cigarettes in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	16	17	18	19	20	21	22	23

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 140 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 142)

(HAND R CARD 6)

141. When did you last smoke a cigarette?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

24

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R SMOKED [CODES 1-8] IN Q. 140. ASK Q. 142 ABOUT EACH OF THOSE YEARS)

142. During those days that you smoked cigarettes in 19(80-87), how many did you usually smoke per day? Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 a day,	1	1	1	1	1	1	1	1
just a few (1-4) cigarettes,	2	2	2	2	2	2	2	2
about half a pack (5-14),	3	3	3	3	3	3	3	3
about a pack (15-24),	4	4	4	4	4	4	4	4
about 1-1/2 packs (25-34) a day,	5	5	5	5	5	5	5	5
about 2 packs (35-44), or	6	6	6	6	6	6	6	6
more than 2 packs (45 or more) a day?	7	7	7	7	7	7	7	7
	25	26	27	28	29	30	31	32

(IF NEVER DRANK BEER, WINE OR LIQUOR [Q. 127b,c,d ARE ALL CODED 95],
SKIP TO INSTRUCTION ABOVE Q. 147)

143. Have you had a drink of beer, wine, or hard liquor in the last eight years,
that is, since 1980?

Yes	1
-----	---

33

(SKIP TO INSTRUCTION ABOVE Q. 147)

No	2
----	---

(HAND CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

144. About how often did you drink beer, wine, or liquor in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	34	35	36	37	38	39	40	41

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 144 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 146)

(HAND R CARD 6)

145. When was the last time you drank beer, wine or liquor?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

42

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R DRANK [CODES 1-8] IN Q. 144. ASK Q. 146 ABOUT EACH OF THOSE YEARS)

(HAND R CARD 7)

146. During those days when you drank beer, wine, or liquor in 19(80-87), how many bottles, cans, glasses or drinks did you usually drink per day? For beer we mean a 12-ounce bottle or can, for wine a 4-ounce glass, and for hard liquor, a drink with 1-1/2 ounces of liquor. Did you drink:

	1980	1981	1982	1983	1984	1985	1986	1987
one drink or less than one,	1	1	1	1	1	1	1	1
2,	2	2	2	2	2	2	2	2
3,	3	3	3	3	3	3	3	3
4,	4	4	4	4	4	4	4	4
5,	5	5	5	5	5	5	5	5
6,	6	6	6	6	6	6	6	6
more than six but less than a dozen, or	7	7	7	7	7	7	7	7
a dozen or more?	8	8	8	8	8	8	8	8
	43	44	45	46	47	48	49	50

(TAKE BACK CARD 7)

(IF NEVER USED MARIJUANA [Q. 127j], SKIP TO INSTRUCTION ABOVE Q. 151)

147. Have you smoked marijuana or hash since 1980?

Yes 1

(SKIP TO INSTRUCTION ABOVE Q. 151)

No 2

51

(HAND R CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

148. About how often did you smoke marijuana or hash in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	52	53	54	55	56	57	58	59

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 148 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 150)

(HAND R CARD 6)

149. When was the last time you smoked marijuana or hash?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

60

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R SMOKED MARIJUANA [CODES 1-8] IN Q. 148. ASK Q. 150 ABOUT EACH OF THOSE YEARS)

(IF R SMOKED HASH, ASK R TO APPROXIMATE USAGE IN MARIJUANA EQUIVALENT)

150. During those days that you smoked marijuana or hash in 19(80-87), how much did you usually smoke per day? Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
1 joint, or half a bowlful,	1	1	1	1	1	1	1	1
2 to 3 joints, or about a bowlful,	2	2	2	2	2	2	2	2
4 to 5 joints, or about 2 bowls,	3	3	3	3	3	3	3	3
6 to 7 joints, or about 3 bowls,	4	4	4	4	4	4	4	4
8 to 9 joints, or about 4 bowls,	5	5	5	5	5	5	5	5
10 to 15 joints, or about 5 to 7 bowls,	6	6	6	6	6	6	6	6
16 to 25 joints, or about 8 to 12 bowls, up to one ounce, or	7	7	7	7	7	7	7	7
more than one (1) ounce of marijuana per day?	8	8	8	8	8	8	8	8

61

62

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(IF NEVER USED PSYCHEDELICS, HALLUCINOGENS, LSD, ETC. [Q. 127k],
SKIP TO INSTRUCTION ABOVE Q. 159)

151. Have you taken any of the psychedelics or hallucinogens such as LSD or Acid, Mescaline, Peyote, Psilocybin, DMT, STP, Magic mushrooms, Morning glory seeds, etc., in the last eight years, that is, since 1980?

Yes	1
-----	---

(SKIP TO INSTRUCTION ABOVE Q. 159)

No	2
----	---

(HAND R CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

152. About how often did you take psychedelics or hallucinogens in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] TO Q. 152 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 154)

(HAND R CARD 6)

153. When was the last time you used psychedelics or hallucinogens?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R TOOK A PSYCHEDELIC OR HALLUCINOGEN
[CODES 1-8] IN Q. 152. ASK Q. 154 ABOUT EACH OF THOSE YEARS)

154. During those days that you took a psychedelic or hallucinogen in 19(80-87),
how many hits did you usually take per day?

	1980	1981	1982	1983	1984	1985	1986	1987
1/2 hit or less,	01	01	01	01	01	01	01	01
1 hit,	02	02	02	02	02	02	02	02
1-1/2 hits,	03	03	03	03	03	03	03	03
2 hits,	04	04	04	04	04	04	04	04
3 hits,	05	05	05	05	05	05	05	05
4 hits,	06	06	06	06	06	06	06	06
5 to 6 hits,	07	07	07	07	07	07	07	07
7 to 8 hits,	08	08	08	08	08	08	08	08
9 to 10 hits,	09	09	09	09	09	09	09	09
11 to 15 hits, or	10	10	10	10	10	10	10	10
16 or more hits?	11	11	11	11	11	11	11	11

17-18 19-20 21-22 23-24 25-26 27-28 29-30 31-32 *

*33-41: BLANK

(CIRCLE EACH YEAR IN WHICH R TOOK A PSYCHEDELIC OR HALLUCINOGEN [CODES 1-8] IN Q. 152. ASK Q. 155 ABOUT EACH OF THOSE YEARS)

155. When you used psychedelics or hallucinogens in 19(80-87), what methods did you use?

(IF RESPONSE IS INJECTION, PROBE FOR TYPE. IF RESPONSE IS BY MOUTH, PROBE FOR SMOKE, SWALLOW, OR DISSOLVE)

(CIRCLE ALL THAT APPLY)

	1980	1981	1982	1983	1984	1985	1986	1987
Mainline (intravenous)	01	01	01	01	01	01	01	01
Intramuscular	02	02	02	02	02	02	02	02
Skin Pop	03	03	03	03	03	03	03	03
Smoke	04	04	04	04	04	04	04	04
Inhale	05	05	05	05	05	05	05	05
Snort	06	06	06	06	06	06	06	06
Swallow	07	07	07	07	07	07	07	07
Dissolve under the tongue	08	08	08	08	08	08	08	08
Other (SPECIFY):	09	09	09	09	09	09	09	09
_____ 17/	42-50	52-60	62-70	18/7-15	17-25	27-35	37-45	47-55*

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 155 AND ASK Q. 156 ABOUT EACH OF THOSE YEARS. IF NO YEAR CODED 01, 02 OR 03 IN Q. 155, SKIP TO INSTRUCTION ABOVE Q. 159)

156. When you shot psychedelics or hallucinogens in 19(80-87), did you share a needle:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4

18/ 57 58 59 60 61 62 63 64

*17/51, 61, 71-80: BLANK

18/16, 26, 36, 46, 56: BLANK

157. Have you ever gone to a "shooting gallery" in order to do psychedelics?

Yes	1
-----	---

(SKIP TO INSTRUCTION ABOVE Q. 159)

No	2
----	---

(CIRCLE EACH YEAR WITH A CODE 01 OR 02 OR 03 IN Q. 155 AND ASK Q. 158 ABOUT EACH OF THOSE YEARS)

158. How often in 19(80-87) did you go to a "shooting gallery" in order to do psychedelics:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4

66

67

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69

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73

(IF NEVER USED COCAINE [Q. 1271], SKIP TO INSTRUCTION ABOVE Q. 167)

159. Have you used cocaine since 1980?

Yes 1

(SKIP TO INSTRUCTION ABOVE Q. 167)

No 2

7

(HAND R CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

160. How often did you use cocaine in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 160 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 162)

(HAND R CARD 6)

161. When was the last time you used cocaine?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R USED COCAINE [CODES 1-8] IN Q. 160. ASK Q. 162 ABOUT EACH OF THOSE YEARS)

162. During those days that you used cocaine in 19(80-87), how many lines did you usually use per day? Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 line or hit,	01	01	01	01	01	01	01	01
1 line or hit,	02	02	02	02	02	02	02	02
2 lines or hits,	03	03	03	03	03	03	03	03
3 lines, hits or about 1/4 gram,	04	04	04	04	04	04	04	04
4 lines, hits or between 1/4 and 1/2 gram,	05	05	05	05	05	05	05	05
5 to 6 lines, hits or between 1/2 and 3/4 gram,	06	06	06	06	06	06	06	06
7 to 8 lines, hits or about 3/4 to 1 gram,	07	07	07	07	07	07	07	07
9 to 10 lines, hits or up to 1-1/4 grams,	08	08	08	08	08	08	08	08
11 to 15 lines, hits or up to 2 grams,	09	09	09	09	09	09	09	09
16 to 20 lines, hits or 2 to 2-1/2 grams, or	10	10	10	10	10	10	10	10
21 or more lines, hits or more than 2-1/2 grams?	11	11	11	11	11	11	11	11

17-18 19-20 21-22 23-24 25-26 27-28 29-30 31-32*

*33-41: BLANK

(CIRCLE EACH YEAR R USED COCAINE [CODES 1-8] IN Q. 160. ASK Q. 163 ABOUT EACH OF THOSE YEARS)

163. When you used cocaine in 19(80-87), what methods did you use?

(IF RESPONSE IS INJECTION, PROBE FOR TYPE. IF RESPONSE IS BY MOUTH, PROBE FOR SMOKE, SWALLOW, OR DISSOLVE)

(CIRCLE ALL THAT APPLY)

	1980	1981	1982	1983	1984	1985	1986	1987
Mainline (intravenous)	01	01	01	01	01	01	01	01
Intramuscular	02	02	02	02	02	02	02	02
Skin Pop	03	03	03	03	03	03	03	03
Smoke	04	04	04	04	04	04	04	04
Inhale	05	05	05	05	05	05	05	05
Snort	06	06	06	06	06	06	06	06
Swallow	07	07	07	07	07	07	07	07
Dissolve under the tongue	08	08	08	08	08	08	08	08
Free base	09	09	09	09	09	09	09	09
Other (SPECIFY): _____	10	10	10	10	10	10	10	10

19/ 42-51 52-61 62-71 20/7-16 17-26 27-36 37-46 47-56

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 163 AND ASK Q. 164 ABOUT EACH OF THOSE YEARS. IF NO YEAR CODED 01, 02 OR 03 IN Q. 163, SKIP TO INSTRUCTION ABOVE Q. 167)

164. When you shot cocaine in 19(80-87), did you share a needle:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4
	57	58	59	60	61	62	63	64

165. Have you ever gone to a "shooting gallery" in order to do cocaine?

	Yes	1
(SKIP TO INSTRUCTION ABOVE Q. 167)	No	2

65

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 163 AND ASK Q. 166 ABOUT EACH OF THOSE YEARS)

166. How often in 19(80-87) did you go to a "shooting gallery" in order to do cocaine:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4
	66	67	68	69	70	71	72	73

(IF NEVER USED HEROIN [Q. 127m], SKIP TO INSTRUCTION ABOVE Q. 175)

167. Have you used heroin since 1980?

Yes 1

(SKIP TO INSTRUCTION ABOVE Q. 175)

No 2

(HAND R CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

168. About how often did you use heroin in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 168 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 170)

(HAND R CARD 6)

169. When was the last time you used heroin?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R USED HEROIN [CODES 1-8] IN Q. 168 AND ASK Q. 170 ABOUT EACH OF THOSE YEARS)

170. During those days that you used heroin in 19(80-87), how many hits did you usually use per day:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 hit (\$25 paper or quarter bag),	01	01	01	01	01	01	01	01
1 hit or about a \$25 paper or quarter bag,	02	02	02	02	02	02	02	02
2 hits or two \$25 papers (two quarter bags),	03	03	03	03	03	03	03	03
3 hits or up to three \$25 papers,	04	04	04	04	04	04	04	04
4 hits or about four \$25 papers,	05	05	05	05	05	05	05	05
5 to 6 hits or up to about an eighth teaspoon (six \$25 papers),	06	06	06	06	06	06	06	06
7 to 8 hits (more than an eighth teaspoon, less than nine \$25 papers),	07	07	07	07	07	07	07	07
9 to 10 hits (about nine to ten \$25 papers),	08	08	08	08	08	08	08	08
11 to 12 hits (about a quarter teaspoon),	09	09	09	09	09	09	09	09
13 to 15 hits (more than a quarter teaspoon), or	10	10	10	10	10	10	10	10
16 to 20 hits or more (around three eighth teaspoons or more)?	11	11	11	11	11	11	11	11

17-18 19-20 21-22 23-24 25-26 27-28 29-30 31-32*

*33-41: BLANK

21/

22/

(CIRCLE EACH YEAR R USED HEROIN [CODES 1-8] IN Q. 168 AND ASK Q. 171 ABOUT EACH OF THOSE YEARS)

171. When you used heroin in 19(80-87), what methods did you use?

(IF RESPONSE IS INJECTION, PROBE FOR TYPE)

(CIRCLE ALL THAT APPLY)

	1980	1981	1982	1983	1984	1985	1986	1987
Mainline (intravenous)	1	1	1	1	1	1	1	1
Intramuscular	2	2	2	2	2	2	2	2
Skin Pop	3	3	3	3	3	3	3	3
Inhale	4	4	4	4	4	4	4	4
Snort	5	5	5	5	5	5	5	5
Other (SPECIFY):	6	6	6	6	6	6	6	6
_____ 21/	42-47	52-57	62-67	22/7-12	17-22	27-32	37-42	47-52*

(CIRCLE EACH YEAR CODED 1, 2 OR 3 IN Q. 171 AND ASK Q. 172 ABOUT EACH OF THOSE YEARS. IF NO YEAR CODED 1, 2 OR 3 IN Q. 171, SKIP TO INSTRUCTION ABOVE Q. 175)

172. When you shot heroin in 19(80-87), did you share a needle:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4
22/	57	58	59	60	61	62	63	64

173. Have you ever gone to a "shooting gallery" in order to do heroin?

	Yes	1
(SKIP TO INSTRUCTION ABOVE Q. 175)	No	2

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*21/48-51, 58-61, 68-80: BLANK

22/13-16, 23-26, 33-36, 43-46, 53-56: BLANK

(CIRCLE EACH YEAR CODED 1, 2 OR 3 IN Q. 171 AND ASK Q. 174 ABOUT EACH OF THOSE YEARS)

174. In 19(80-87) did you go to a "shooting gallery" in order to do heroin?

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4
	66	67	68	69	70	71	72	73

(IF NEVER USED OPIATES [Q. 127e], SKIP TO INSTRUCTION ABOVE Q. 185)

175. Have you used other opiates or opiate substitutes including opium, morphine, codeine, dilaudid, demerol, percodan, paregoric and methadone since 1980? Do not include heroin.

Yes	1
-----	---

(SKIP TO INSTRUCTION ABOVE Q. 185)

No	2
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(HAND R CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

176. How often did you use opiates or opiate substitutes including opium, dilaudid, morphine, etc., in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 176 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 178)

(HAND R CARD 6)

177. When was the last time you used an opiate or opiate substitute?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R USED OPIATES [CODES 1-8] IN Q. 176 AND ASK Q. 178 ABOUT EACH OF THOSE YEARS)

178. During those days that you used opiates or opiate substitutes including opium, dilaudid, morphine, etc., in 19(80-87), how many total hits, pills or tabs of those drugs did you usually use per day:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 hit,	01	01	01	01	01	01	01	01
1 hit,	02	02	02	02	02	02	02	02
2 hits,	03	03	03	03	03	03	03	03
3 hits,	04	04	04	04	04	04	04	04
4 hits,	05	05	05	05	05	05	05	05
5 to 6 hits,	06	06	06	06	06	06	06	06
7 to 8 hits,	07	07	07	07	07	07	07	07
9 to 10 hits,	08	08	08	08	08	08	08	08
11 to 15 hits,	09	09	09	09	09	09	09	09
16 or 20 hits, or	10	10	10	10	10	10	10	10
21 or more hits?	11	11	11	11	11	11	11	11
	17-18	19-20	21-22	23-24	25-26	27-28	29-30	31-32

179. Were any of those prescribed for you by a physician or dentist?

	Yes	1
(SKIP TO INSTRUCTION ABOVE Q. 181)	No	2

(CIRCLE EACH YEAR IN WHICH R USED OPIATES [CODES 1-8] IN Q. 176 AND ASK Q. 180 ABOUT EACH OF THOSE YEARS)

180. Of all the opiates or opiate substitutes including opium, dilaudid, morphine, etc., you used in 19(80-87), what proportion was used without a physician's or dentist's prescription or was used illegitimately-- unauthorized refills, more than prescribed amount or obtained illegally? Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
all,	1	1	1	1	1	1	1	1
half or more,	2	2	2	2	2	2	2	2
less than half, or	3	3	3	3	3	3	3	3
none?	4	4	4	4	4	4	4	4
	34	35	36	37	38	39	40	41

(CIRCLE EACH YEAR R USED AN OPIATE OR OPIATE SUBSTITUTE [CODES 1-8] IN Q. 176 AND ASK Q. 181 ABOUT EACH OF THOSE YEARS)

181. When you used opiates or opiate substitutes in 19(80-87), what methods did you use?

(IF RESPONSE IS INJECTION, PROBE FOR TYPE. IF RESPONSE IS BY MOUTH, PROBE FOR SMOKE, SWALLOW, OR DISSOLVE)

(CIRCLE ALL THAT APPLY)

	1980	1981	1982	1983	1984	1985	1986	1987
Mainline (intravenous)	01	01	01	01	01	01	01	01
Intramuscular	02	02	02	02	02	02	02	02
Skin Pop	03	03	03	03	03	03	03	03
Smoke	04	04	04	04	04	04	04	04
Inhale	05	05	05	05	05	05	05	05
Snort	06	06	06	06	06	06	06	06
Swallow	07	07	07	07	07	07	07	07
Dissolve under the tongue	08	08	08	08	08	08	08	08
Other (SPECIFY):	09	09	09	09	09	09	09	09
_____ 23/	42-50	52-60	62-70	24/7-15	17-25	27-35	37-45	47-55*

(CIRCLE ALL YEARS CODED 01, 02 OR 03 IN Q. 181 AND ASK Q. 182 ABOUT EACH OF THOSE YEARS. IF NO YEAR CODED 01, 02 OR 03 IN Q. 181, SKIP TO INSTRUCTION ABOVE Q. 185)

182. When you shot opiates in 19(80-87), did you share a needle:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4

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*23/51, 61, 71-80: BLANK

24/16, 26, 36, 46, 56: BLANK

183. Have you ever gone to a "shooting gallery" in order to do opiates?

Yes	1
-----	---

(SKIP TO INSTRUCTION ABOVE Q. 185)

No	2
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(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 181 AND ASK Q. 184 ABOUT EACH OF THOSE YEARS)

184. In 19(80-87) did you go to a "shooting gallery" in order to do opiates:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4

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(IF NEVER USED STIMULANTS [Q. 127f], SKIP TO INSTRUCTION ABOVE Q. 195)

185. Have you used stimulants, uppers, speed, bennies, dexamyl, dexedrine, methedrine, amphetamine, black beauty, benzedrine or ritalin since 1980?

Yes	1
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(SKIP TO INSTRUCTION ABOVE Q. 195)

No	2
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(HAND R CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

186. How often did you use stimulants in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] TO Q. 186 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 188)

(HAND R CARD 6)

187. When was the last time you used stimulants?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R USED STIMULANTS [CODES 1-8] IN Q. 186 AND ASK Q. 188 ABOUT EACH OF THOSE YEARS)

188. During those days that you used stimulants in 19(80-87), how much did you usually use per day:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 hit,	01	01	01	01	01	01	01	01
1 hit,	02	02	02	02	02	02	02	02
2 hits,	03	03	03	03	03	03	03	03
3 hits,	04	04	04	04	04	04	04	04
4 hits,	05	05	05	05	05	05	05	05
5 to 6 hits,	06	06	06	06	06	06	06	06
7 to 8 hits,	07	07	07	07	07	07	07	07
9 to 10 hits,	08	08	08	08	08	08	08	08
11 to 15 hits,	09	09	09	09	09	09	09	09
16 or 20 hits, or	10	10	10	10	10	10	10	10
21 or more hits?	11	11	11	11	11	11	11	11
	17-18	19-20	21-22	23-24	25-26	27-28	29-30	31-32

189. Were any of those stimulants prescribed for you by a physician or dentist?

	Yes	1
(SKIP TO INSTRUCTION ABOVE Q. 191)	No	2

(CIRCLE EACH YEAR IN WHICH R USED STIMULANTS [CODES 1-8] IN Q. 186 AND
ASK Q. 190 ABOUT EACH OF THOSE YEARS)

190. Of all the stimulants, uppers, speed, bennies, dexamyl, dexedrine, methedrine or amphetamines you used in 19(80-87), what proportion was used without a physician's or dentist's prescription or was used illegally--unauthorized refills, more than the prescribed amount or obtained illegally? Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
all,	1	1	1	1	1	1	1	1
half or more,	2	2	2	2	2	2	2	2
less than half, or	3	3	3	3	3	3	3	3
none?	4	4	4	4	4	4	4	4
	34	35	36	37	38	39	40	41

(CIRCLE EACH YEAR IN WHICH R USED STIMULANTS [CODES 1-8] IN Q. 186 AND ASK Q. 191 ABOUT EACH OF THOSE YEARS)

191. When you used stimulants in 19(80-87), what methods did you use?

(IF RESPONSE IS INJECTION, PROBE FOR TYPE. IF RESPONSE IS BY MOUTH, PROBE FOR SMOKE, SWALLOW, OR DISSOLVE)

(CIRCLE ALL THAT APPLY)

	1980	1981	1982	1983	1984	1985	1986	1987
Mainline (intravenous)	01	01	01	01	01	01	01	01
Intramuscular	02	02	02	02	02	02	02	02
Skin Pop	03	03	03	03	03	03	03	03
Smoke	04	04	04	04	04	04	04	04
Inhale	05	05	05	05	05	05	05	05
Snort	06	06	06	06	06	06	06	06
Swallow	07	07	07	07	07	07	07	07
Dissolve under the tongue	08	08	08	08	08	08	08	08
Other (SPECIFY):	09	09	09	09	09	09	09	09
_____ 25/	42-50	52-60	62-70	26/7-15	17-25	27-35	37-45	47-55*

(CIRCLE ALL YEARS CODED 01, 02 OR 03 IN Q. 191 AND ASK Q. 192 ABOUT EACH OF THOSE YEARS. IF NO YEAR CODED 01, 02 OR 03 IN Q. 191, SKIP TO INSTRUCTION ABOVE Q. 195)

192. When you shot stimulants in 19(80-87), did you share a needle:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4

26/ 57 58 59 60 61 62 63 64

*25/51, 61, 71-80: BLANK

26/16, 26, 36, 46, 56: BLANK

193. Have you ever gone to a "shooting gallery" in order to do stimulants?

Yes 1

(SKIP TO INSTRUCTION ABOVE Q. 195)

No 2

65

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 191 AND ASK Q. 194 ABOUT EACH OF THOSE YEARS)

194. In 19(80-87) did you go to a "shooting gallery" in order to do stimulants:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4

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(IF NEVER USED INHALANTS [Q. 127n], SKIP TO INSTRUCTION ABOVE Q. 199)

195. Have you used inhalants since 1980?

Yes 1

(SKIP TO INSTRUCTION ABOVE Q. 199)

No 2

7

(HAND R CARD 5. ASK ABOUT EACH YEAR FROM 1980-1987)

196. When you used inhalants in 19(80-87), how often did you use them?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] TO Q. 196 FOR 1986 AND 1987, SKIP TO INSTRUCTION ABOVE Q. 198)

(HAND R CARD 6)

197. When was the last time you used inhalants?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R USED INHALANTS [CODES 1-8] IN Q. 196 AND ASK Q. 198 ABOUT EACH OF THOSE YEARS)

198. During those days that you used inhalants in 19(80-87), how much did you usually use per day:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 hit,	01	01	01	01	01	01	01	01
1 hit,	02	02	02	02	02	02	02	02
2 hits,	03	03	03	03	03	03	03	03
3 hits,	04	04	04	04	04	04	04	04
4 hits,	05	05	05	05	05	05	05	05
5 to 6 hits,	06	06	06	06	06	06	06	06
7 to 8 hits,	07	07	07	07	07	07	07	07
9 to 10 hits,	08	08	08	08	08	08	08	08
11 to 15 hits,	09	09	09	09	09	09	09	09
16 or 20 hits, or	10	10	10	10	10	10	10	10
21 or more hits?	11	11	11	11	11	11	11	11

17-18 19-20 21-22 23-24 25-26 27-28 29-30 31-32 *

*27/33-80: BLANK

(IF NEVER USED PCP [Q. 127o], SKIP TO INSTRUCTION ABOVE Q. 207)

199. Have you intentionally used PCP since 1980?

Yes 1

(SKIP TO INSTRUCTION ABOVE Q. 207)

No 2

(HAND R CARD 5. ASK Q. 200 ABOUT EACH YEAR FROM 1980-1987)

200. When you used PCP in 19(80-87), how often did you use it?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 200 FOR 1986 AND 1987, SKIP TO INSTRUCTION
ABOVE Q. 202)

(HAND R CARD 6)

201. When was the last time you used PCP?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR IN WHICH R USED PCP [CODES 1-8] IN Q. 200 AND ASK Q. 202 ABOUT EACH OF THOSE YEARS)

202. During those days that you used PCP in 19(80-87), how much did you usually use per day:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 hit,	01	01	01	01	01	01	01	01
1 hit,	02	02	02	02	02	02	02	02
2 hits,	03	03	03	03	03	03	03	03
3 hits,	04	04	04	04	04	04	04	04
4 hits,	05	05	05	05	05	05	05	05
5 to 6 hits,	06	06	06	06	06	06	06	06
7 to 8 hits,	07	07	07	07	07	07	07	07
9 to 10 hits,	08	08	08	08	08	08	08	08
11 to 15 hits,	09	09	09	09	09	09	09	09
16 or 20 hits, or	10	10	10	10	10	10	10	10
21 or more hits?	11	11	11	11	11	11	11	11

17-18 19-20 21-22 23-24 25-26 27-28 29-30 31-32 *

*33-41: BLANK

28/

29/

(CIRCLE EACH YEAR R USED PCP [CODES 1-8] IN Q. 200 AND ASK Q. 203 ABOUT EACH OF THOSE YEARS)

203. When you used PCP in 19(80-87), what methods did you use?

(IF RESPONSE IS INJECTION, PROBE FOR TYPE. IF RESPONSE IS BY MOUTH, PROBE FOR SMOKE, SWALLOW, OR DISSOLVE)

(CIRCLE ALL THAT APPLY)

	1980	1981	1982	1983	1984	1985	1986	1987
Mainline (intravenous)	01	01	01	01	01	01	01	01
Intramuscular	02	02	02	02	02	02	02	02
Skin Pop	03	03	03	03	03	03	03	03
Smoke	04	04	04	04	04	04	04	04
Inhale	05	05	05	05	05	05	05	05
Snort	06	06	06	06	06	06	06	06
Swallow	07	07	07	07	07	07	07	07
Dissolve under the tongue	08	08	08	08	08	08	08	08
Other (SPECIFY):	09	09	09	09	09	09	09	09
_____ 28/	42-50	52-60	62-70	29/7-15	17-25	27-35	37-45	47-55*

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 203 AND ASK Q. 204 ABOUT EACH OF THOSE YEARS. IF NO YEAR CODED 01, 02 OR 03 IN Q. 203, SKIP TO INSTRUCTION ABOVE Q. 207)

204. When you shot PCP in 19(80-87), did you share a needle:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4

29/ 57 58 59 60 61 62 63 64

*28/51, 61, 71-80: BLANK

29/16, 26, 36, 46, 56: BLANK

205. Have you ever gone to a "shooting gallery" in order to do PCP?

Yes 1

(SKIP TO INSTRUCTION ABOVE Q. 207)

No 2

65

(ASK Q. 206 ABOUT EACH YEAR CODED 01, 02 OR 03 IN Q. 203)

206. In 19(80-87) did you go to a "shooting gallery" in order to do PCP:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4
	66	67	68	69	70	71	72	73

(IF NEVER USED SEDATIVES [Q. 127g], SKIP TO INSTRUCTION ABOVE Q. 217)

207. Have you used sedatives or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaaludes or 714 since 1980? Don't include any tranquilizers.

Yes 1

(SKIP TO INSTRUCTION ABOVE Q. 217)

No 2

(HAND R CARD 5. ASK Q. 208 ABOUT EACH YEAR FROM 1980-1987)

208. When you used sedatives in 19(80-87), how often did you use them?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 208 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS ABOVE Q. 210)

(HAND R CARD 6)

209. When was the last time you used sedatives?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR R USED SEDATIVES [CODES 1-8] IN Q. 208 AND ASK Q. 210 ABOUT EACH OF THOSE YEARS)

210. During those days that you used sedatives in 19(80-87), how much did you use per day:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 hit, cap or tab,	01	01	01	01	01	01	01	01
1 hit, cap or tab,	02	02	02	02	02	02	02	02
2 hits, caps or tabs,	03	03	03	03	03	03	03	03
3 hits, caps or tabs,	04	04	04	04	04	04	04	04
4 hits, caps or tabs,	05	05	05	05	05	05	05	05
5 to 6 hits, caps or tabs,	06	06	06	06	06	06	06	06
7 to 8 hits, caps or tabs,	07	07	07	07	07	07	07	07
9 to 10 hits, caps or tabs,	08	08	08	08	08	08	08	08
11 to 15 hits, caps or tabs,	09	09	09	09	09	09	09	09
16 or 20 hits, caps or tabs, or	10	10	10	10	10	10	10	10
21 or more hits, caps or tabs?	11	11	11	11	11	11	11	11

17-18 19-20 21-22 23-24 25-26 27-28 29-30 31-32

211. Were any of those sedatives prescribed for you by a physician or dentist?

	Yes	1
(SKIP TO INSTRUCTION ABOVE Q. 213)	No	2

(CIRCLE EACH YEAR IN WHICH R USED SEDATIVES [CODES 1-8] IN Q. 208 AND ASK Q. 212 ABOUT EACH OF THOSE YEARS)

212. Of all the sedatives or barbiturates, downers, seconal, nembutal, tuinal, phenobarbital, quaaludes or 714 you used in 19(80-87), what proportion was used without a physician's or dentist's prescription or was used illegitimately--unauthorized refills, more than the prescribed amount or obtained illegally? Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
all,	1	1	1	1	1	1	1	1
half or more,	2	2	2	2	2	2	2	2
less than half, or	3	3	3	3	3	3	3	3
none?	4	4	4	4	4	4	4	4
	34	35	36	37	38	39	40	41

30/

31/

(CIRCLE EACH YEAR R USED SEDATIVES [CODES 1-8] IN Q. 208 AND ASK Q. 213 ABOUT EACH OF THOSE YEARS)

213. When you used sedatives in 19(80-87), what methods did you use?

(IF RESPONSE IS INJECTION, PROBE FOR TYPE. IF RESPONSE IS BY MOUTH, PROBE FOR SMOKE, SWALLOW, OR DISSOLVE)

(CIRCLE ALL THAT APPLY)

	1980	1981	1982	1983	1984	1985	1986	1987
Mainline (intravenous)	01	01	01	01	01	01	01	01
Intramuscular	02	02	02	02	02	02	02	02
Skin Pop	03	03	03	03	03	03	03	03
Smoke	04	04	04	04	04	04	04	04
Inhale	05	05	05	05	05	05	05	05
Snort	06	06	06	06	06	06	06	06
Swallow	07	07	07	07	07	07	07	07
Dissolve under the tongue	08	08	08	08	08	08	08	08
Other (SPECIFY): _____	09	09	09	09	09	09	09	09

30/ 42-50 52-60 62-70 31/7-15 17-25 27-35 37-45 47-55 *

*30/51, 61, 71-80: BLANK

31/16, 26, 36, 46, 56: BLANK

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 213 AND ASK Q. 214 ABOUT EACH OF THOSE YEARS. IF NO YEAR CODED 01, 02 OR 03 IN Q. 213, SKIP TO INSTRUCTION ABOVE Q. 217)

214. When you shot sedatives in 19(80-87), did you share a needle:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4
	57	58	59	60	61	62	63	64

215. Have you ever gone to a "shooting gallery" in order to do sedatives?

	Yes	1
(SKIP TO INSTRUCTION ABOVE Q. 217)	No	2

65

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 213 AND ASK Q. 216 ABOUT EACH OF THOSE YEARS)

216. In 19(80-87) did you go to a "shooting gallery" in order to do sedatives:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4
	66	67	68	69	70	71	72	73

(IF NEVER USED TRANQUILIZERS [Q. 127h], SKIP TO Q. 227)

217. Have you used tranquilizers such as valium, librium, miltown, meproamate or equinal since 1980? Don't include sedatives.

	Yes	1
(SKIP TO Q. 227)	No	2

7

(HAND R CARD 5. ASK Q. 218 ABOUT EACH YEAR FROM 1980-1987)

218. When you used tranquilizers in 19(80-87), how often did you use them?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	8	9	10	11	12	13	14	15

(TAKE BACK CARD 5)

(IF NEVER [CODE 0] IN Q. 218 FOR 1986 AND 1987, SKIP TO INSTRUCTIONS
ABOVE Q. 220)

(HAND R CARD 6)

219. When was the last time you used tranquilizers?

More than a year ago	0
7-12 months ago	1
4-6 months ago	2
2-3 months ago	3
A month ago	4
1-3 weeks ago	5
2-6 days ago	6
Yesterday	7
Today	8

16

(TAKE BACK CARD 6)

(CIRCLE EACH YEAR R USED TRANQUILIZERS [CODES 1-8] IN Q. 218 AND ASK Q. 220 ABOUT EACH OF THOSE YEARS)

220. During those days that you used tranquilizers in 19(80-87), how much did you usually use per day:

	1980	1981	1982	1983	1984	1985	1986	1987
less than 1 hit, cap or tab,	01	01	01	01	01	01	01	01
1 hit, cap or tab,	02	02	02	02	02	02	02	02
2 hits, caps or tabs,	03	03	03	03	03	03	03	03
3 hits, caps or tabs,	04	04	04	04	04	04	04	04
4 hits, caps or tabs,	05	05	05	05	05	05	05	05
5 to 6 hits, caps or tabs,	06	06	06	06	06	06	06	06
7 to 8 hits, caps or tabs,	07	07	07	07	07	07	07	07
9 to 10 hits, caps or tabs,	08	08	08	08	08	08	08	08
11 to 15 hits, caps or tabs,	09	09	09	09	09	09	09	09
16 or 20 hits, caps or tabs, or	10	10	10	10	10	10	10	10
21 or more hits, caps or tabs?	11	11	11	11	11	11	11	11
	17-18	19-20	21-22	23-24	25-26	27-28	29-30	31-32

221. Were any of those tranquilizers prescribed for you by a physician or dentist?

	Yes	1
(SKIP TO Q. 223)	No	2

(CIRCLE EACH YEAR IN WHICH R USED TRANQUILIZERS [CODES 1-8] IN Q. 218 AND ASK Q. 222 ABOUT EACH OF THOSE YEARS)

222. Of all the tranquilizers such as valium, librium, miltown, meproamate or equanil you used in 19(80-87), what proportion was used without a physician's or dentist's prescription or was used illegitimately-- unauthorized refills, more than the prescribed amount or obtained illegally? Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
all,	1	1	1	1	1	1	1	1
half or more,	2	2	2	2	2	2	2	2
less than half, or	3	3	3	3	3	3	3	3
none?	4	4	4	4	4	4	4	4
	34	35	36	37	38	39	40	41

(CIRCLE EACH YEAR R USED TRANQUILIZERS [CODES 1-8] IN Q. 218 AND ASK Q. 223 ABOUT EACH OF THOSE YEARS)

223. When you used tranquilizers in 19(80-87), what methods did you use?

(IF RESPONSE IS INJECTION, PROBE FOR TYPE. IF RESPONSE IS BY MOUTH, PROBE FOR SMOKE, SWALLOW, OR DISSOLVE)

(CIRCLE ALL THAT APPLY)

	1980	1981	1982	1983	1984	1985	1986	1987
Mainline (intravenous)	01	01	01	01	01	01	01	01
Intramuscular	02	02	02	02	02	02	02	02
Skin Pop	03	03	03	03	03	03	03	03
Smoke	04	04	04	04	04	04	04	04
Inhale	05	05	05	05	05	05	05	05
Snort	06	06	06	06	06	06	06	06
Swallow	07	07	07	07	07	07	07	07
Dissolve under the tongue	08	08	08	08	08	08	08	08
Other (SPECIFY):	09	09	09	09	09	09	09	09
_____ 32/	42-50	52-60	62-70	33/7-15	17-25	27-35	37-45	47-55 *

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 223 AND ASK Q. 224 ABOUT EACH OF THOSE YEARS. IF NO YEAR CODED 01, 02 OR 03 IN Q. 223, SKIP TO Q. 227)

224. When you shot tranquilizers in 19(80-87) did you share a needle:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4
33/	57	58	59	60	61	62	63	64

*32/51, 61, 71-80: BLANK

33/16, 26, 36, 46, 56: BLANK

225. Have you ever gone to a "shooting gallery" in order to do tranquilizers?

	Yes	1
(SKIP TO Q. 227)	No	2

(CIRCLE EACH YEAR CODED 01, 02 OR 03 IN Q. 223 AND ASK Q. 226 ABOUT EACH OF THOSE YEARS)

226. In 19(80-87) did you go to a "shooting gallery" in order to do tranquilizers:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
occasionally,	2	2	2	2	2	2	2	2
about half the time, or	3	3	3	3	3	3	3	3
frequently?	4	4	4	4	4	4	4	4

66 67 68 69 70 71 72 73

	YES	NO	
(227.) Have you ever taken something from someone using a weapon, threats or force, including bank robberies, muggings, hold-ups, or knocking someone down while stealing a purse or other items?	1	2	7
(228.) Have you ever sold or manufactured illegal drugs, including growing marijuana with intent to sell or distribute it?	1	2	8
(229.) Have you ever broken into and entered a house or building to steal something or illegally entered through an unlocked door or window to steal something?	1	2	9
(230.) Have you ever attacked a person with a weapon or your hands intending to kill or seriously injure the person?	1	2	10
(231.) Have you ever stolen anything without using force, threats or a weapon against another person including picking a pocket, snatching a purse, shoplifting, breaking into a car for stripping or sale, breaking into coin machines, stealing something left unattended for stripping or sale, and stealing from an employer?	1	2	11
(232.) Have you ever intentionally damaged someone's car or done anything else to destroy or severely damage someone's property, whether public or private, for reasons other than legitimate or legal destruction of property?	1	2	12
(233.) Have you ever been arrested or picked up by the police for anything other than a minor traffic violation?	1	2	13
(234.) Have you ever been sent to a local city or county jail for <u>any</u> reason including a minor traffic violation that required you to be incarcerated at least overnight?	1	2	14
(235.) Have you ever been imprisoned in a state or federal prison?	1	2	15
(IF NO TO ALL QQ. 227-235, SKIP TO Q. 245)			

Here is a card to refer to for the following question(s).

(HAND R CARD 5)

(IF NO TO Q. 227 [P. 114], SKIP TO INSTRUCTION ABOVE Q. 237)

236. How often did you take something from someone using a weapon, threats or force in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8

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(IF NO TO Q. 228 [P. 114], SKIP TO INSTRUCTION ABOVE Q. 238)

237. How often did you sell or manufacture with intent to sell illegal drugs, including growing marijuana with intent to sell or distribute it in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	24	25	26	27	28	29	30	31

(IF NO TO Q. 229 [P. 114], SKIP TO INSTRUCTION ABOVE Q. 239)

238. How often did you break and enter or illegally enter to steal in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	32	33	34	35	36	37	38	39

(IF NO TO Q. 230 [P. 114], SKIP TO INSTRUCTION ABOVE Q. 240)

239. How often did you attack a person with the intent to kill or seriously injure in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	40	41	42	43	44	45	46	47

(IF NO TO Q. 231 [P. 114], SKIP TO INSTRUCTION ABOVE Q. 241)

240. How often did you steal anything without using a weapon, force or threats in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	48	49	50	51	52	53	54	55

(IF NO TO Q. 232 [P. 114], SKIP TO INSTRUCTION ABOVE Q. 242)

241. How often did you intentionally damage property in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	56	57	58	59	60	61	62	63

(IF NO TO Q. 233 [P. 114], SKIP TO INSTRUCTIONS ABOVE Q. 243)

242. How often were you arrested or picked up other than for a minor traffic violation in 19(80-87)?

	1980	1981	1982	1983	1984	1985	1986	1987
Never	0	0	0	0	0	0	0	0
One or two times during the year	1	1	1	1	1	1	1	1
Several times during the year	2	2	2	2	2	2	2	2
Once a month	3	3	3	3	3	3	3	3
Two or three times a month	4	4	4	4	4	4	4	4
One day a week	5	5	5	5	5	5	5	5
Two or three times a week	6	6	6	6	6	6	6	6
Four to six times a week	7	7	7	7	7	7	7	7
Every day	8	8	8	8	8	8	8	8
	64	65	66	67	68	69	70	71

(TAKE BACK CARD 5)

(TAKE BACK CARD 5)

(IF NO TO Q. 234 [P. 114], SKIP TO INSTRUCTION ABOVE Q. 244)

(HAND R CARD 8)

243. How long were you jailed in a local city or county jail in 19(80-87)?
Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
a. not at all,	0	0	0	0	0	0	0	0
b. once, overnight,	1	1	1	1	1	1	1	1
c. only a few days during the year,	2	2	2	2	2	2	2	2
d. over a week during the year,	3	3	3	3	3	3	3	3
e. nearly a month,	4	4	4	4	4	4	4	4
f. a month but less than two months,	5	5	5	5	5	5	5	5
g. two to six months,	6	6	6	6	6	6	6	6
h. six months to under a year, or	7	7	7	7	7	7	7	7
i. the entire year?	8	8	8	8	8	8	8	8

72 73 74 75 76 77 78 79

(TAKE BACK CARD 8)

(IF NO TO Q. 235 [P. 114], SKIP TO Q. 245)

244. How long were you imprisoned in a state or federal prison in 19(80-87)?
Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
a. not at all,	1	1	1	1	1	1	1	1
b. only a few months during the year,	2	2	2	2	2	2	2	2
c. over six months during the year,	3	3	3	3	3	3	3	3
d. nearly the entire year, or	4	4	4	4	4	4	4	4
e. were you imprisoned during the entire year?	5	5	5	5	5	5	5	5
	7	8	9	10	11	12	13	14

245. Now we are going to ask about some of the other experiences you have had including some you may have had at an early age. Many children have had experiences when they were younger that later, as adults, they realized were sexual in nature but may or may not have known this at the time they were having the experience. They may have been called "games" at the time, or any of a number of other things.

Before you were 11 or 12 years old, how often did you: (a-e)? Was it many times, a few times, once, or never?

(REPEAT CATEGORIES AS NEEDED)

	MANY	A FEW	ONCE	NEVER	
a. play sex games with other children your same age, including anything from show and tell, touching private parts or playing doctor	1	2	3	4	15
b. play sex games with other children your same sex, including anything from show and tell, touching private parts or playing doctor	1	2	3	4	16
c. play sex games with older children, including anything from show and tell, touching private parts or playing doctor	1	2	3	4	17
d. play sex games with an adult, including anything from show and tell, touching private parts or playing doctor	1	2	3	4	18
e. play sex games with other children younger than yourself, including anything from show and tell, touching private parts or playing doctor	1	2	3	4	19

246.

Please look at this card and give me the number of the statement that best expresses your current attitude about yourself:

(HAND R CARD 9 AND READ EACH NUMBER AND STATEMENT)

1. I am exclusively homosexual and have no interest in or response to heterosexual possibilities.	1
2. I am predominantly homosexual, with only a slight interest in or response to heterosexual possibilities.	2
3. I am predominantly homosexual, with a substantial interest in or response to heterosexual possibilities.	3
4. I am equally interested in and responsive to both homosexual and heterosexual possibilities.	4
5. I am predominantly heterosexual, with a substantial interest in or response to homosexual possibilities.	5
6. I am predominantly heterosexual, with only a slight interest in or response to homosexual possibilities.	6
7. I am exclusively heterosexual and have no interest or response to homosexual possibilities.	7

20

(TAKE BACK CARD 9)

(IF R HAS NO MOTHER [Q. 129, P. 42], SKIP TO INSTRUCTION ABOVE Q. 248)

247. Would you say that your mother knows your sexual preference or identity?

Yes	1
No	2
Don't know	8
Mother deceased	5

21

(IF NO FATHER [Q. 130, P. 42], SKIP TO Q. 249)

248. Would you say your father knows your sexual preference or identity?

Yes	1
No	2
Don't know	8
Father deceased	5

22

249. Do any of your siblings know your sexual preference or identity?

Yes	1
No	2
Don't know	8
No siblings	5

23

250. Do any of your co-workers, clients or customers know your sexual preference or identity?

Yes	1
No	2
Don't know	8
No co-workers, clients, customers	5

24

251. (RECORD R'S CASE NUMBER AND HAND R SAQ2 AND A PEN. READ THE INSTRUCTIONS SLOWLY)

Here is a part of the interview that you may complete on your own. I will read the questions for the first item to you and then tell me if you prefer to complete this booklet on your own or if you want me to ask you the questions about the items and record the answers.

Please open the booklet, follow along as I read and record your answers. Let's start with item 1--had heterosexual intercourse. How old were you when you had heterosexual intercourse the first time? Record your age at that time, or, if you have never had heterosexual intercourse, circle code 95 for never. If your answer is never, you should go on to the next item, but this first time I will read all the questions to you.

In column 2, record the month and year you last (had heterosexual intercourse/item). Please try to remember the month. If you can't, record the season.

In column 3, circle the code for how often you (had heterosexual intercourse/item) during the last 12-month period you had it. Circle 1 if it was very often; 2 if it was often; 3 if it was only a few times; or 4 if that was the only time.

In column 4, circle the number for how many of the people with whom you (had heterosexual intercourse/item) were strangers or pick-ups. Circle 1 if it was most; 2 if it was some; or 3 if it was none, all were already known to you.

In column 5, circle the number that indicates how important (heterosexual intercourse/item) was to your sexual pleasure during the 12-month period before you last did it. Circle 1 if it was very important; 2 if it was somewhat important; 3 if it was somewhat unimportant; or 4 if it was not at all important.

In column 6, circle the number that indicates if you have changed how often you (have heterosexual intercourse/item) in response to the threat of AIDS. Circle 1 if you are having it more often; 2 if you are having it less often; or 3 if you have not changed how often you are (having heterosexual intercourse/item). If you have changed the frequency but not in response to the threat of AIDS, circle 3.

If you circled either code 1 or code 2 in column 6, in column 7 record the month and year you made that change. Please try to remember the month. If you can't, record the season.

Now you may continue with item 2 or, if you prefer, I will continue to ask you about the items. If you choose to complete this yourself, you may ask for my help at any time. If you are not sure what a column refers to, please ask me to read the complete question to you.

(IF R IS MALE, SAY): Please answer the questions about items 2 through 26 and then give me the questionnaire.

(IF R IS FEMALE, SAY): Please complete the questions about items 2 through 22 and 27 and 28 and then give me the questionnaire.

(HAVE AN SAQ TO REFER TO IF R NEEDS HELP)

(WHEN SAQ IS HANDED TO YOU, RECORD R'S CASE # ON EACH PAGE, REVIEW THE SAQ FOR COMPLETENESS AND ASK ANY APPROPRIATE QUESTIONS THAT R HAS OMITTED. IF ANY ITEM'S DATE IN COLUMN 7 IS LATER THAN THE DATE IN COLUMN 2, RESOLVE THE DISCREPANCY WITH R AND MAKE THE CORRECTION.)

(ON THE SAQ COVER, INDICATE WHO ADMINISTERED THE SAQ AND RECORD YOUR NAME AND ID#.)

252. Have you ever: (a-i)? (RECORD IN Q. 252 COLUMN. IF YES, ASK Q. 253 IMMEDIATELY. HAND R CARD 10)

253. How often in 19(80-87) did you do that? Was it: (1) never; (2) once a month or less; (3) about once a week; (4) twice a week; (5) nearly every day; or (6) more than once a day? Just tell me the number of your answer.
(RECORD A CODE FOR EACH YEAR IN Q. 253 COLUMN)

	Q. 252 COL.		Q. 253 COLUMN								
	YES	NO	80	81	82	83	84	85	86	87	
a. used alcohol to enhance sexual activity	1	2	—	—	—	—	—	—	—	—	35/ 25-33
b. used marijuana to enhance sexual activity	1	2	—	—	—	—	—	—	—	—	34-42
c. used cocaine to enhance sexual activity	1	2	—	—	—	—	—	—	—	—	43-51
d. used speed to enhance sexual activity	1	2	—	—	—	—	—	—	—	—	52-60
e. used quaaludes to enhance sexual activity	1	2	—	—	—	—	—	—	—	—	61-69
f. used poppers or inhalants to enhance sexual activity	1	2	—	—	—	—	—	—	—	—	70-78
g. used MDA to enhance sexual activity	1	2	—	—	—	—	—	—	—	—	36/ 7-15
h. used LSD to enhance sexual activity	1	2	—	—	—	—	—	—	—	—	16-24
i. used any other drugs to enhance sexual activity (SPECIFY DRUGS AND INDICATE YEAR EACH WAS USED):	1	2	—	—	—	—	—	—	—	—	25-33 34

(CONTINUED ON THE NEXT PAGE)

36/

37/

252. Have you ever: (j-o)? (RECORD IN Q. 252 COLUMN. IF YES, ASK Q. 253 IMMEDIATELY)

253. How often in 19(80-87) did you do that? Was it: (1) never; (2) once a month or less; (3) about once a week; (4) twice a week; (5) nearly every day; or (6) more than once a day? Just tell me the number of your answer.
(RECORD A CODE FOR EACH YEAR IN Q. 253 COLUMN)

	Q. 252 COL.		Q. 253 COLUMN							
	YES	NO	80	81	82	83	84	85	86	87
(IF FEMALE, SKIP TO Q. 254. IF MALE, AND CODED 7 IN Q. 246 [P. 125], SKIP TO Q. 254. IF MALE AND CODED 1-6 IN Q. 246 [P. 125], ASK j-o)										
j. cruised the gay bars	1	2	—	—	—	—	—	—	—	—
k. cruised the streets looking for another male	1	2	—	—	—	—	—	—	—	—
l. cruised parks or rest stops looking for another male	1	2	—	—	—	—	—	—	—	—
m. had sex in an arcade with another male	1	2	—	—	—	—	—	—	—	—
n. had sex in a public setting, a movie, or a toilet with another male	1	2	—	—	—	—	—	—	—	—
o. had sex in the baths with another male	1	2	—	—	—	—	—	—	—	—

36/

35-43

44-52

53-61

62-70

71-79

37/

7-15

(TAKE BACK CARD 10)

254. Have you ever: (a-d)? (RECORD IN Q. 254 COLUMN. IF YES, ASK Q. 255 IMMEDIATELY)

255. Did you have it in 19(80-87)? (FOR EACH YEAR, RECORD 1 IF YES OR 2 IF NO)

	Q. 254 COLUMN		Q. 255 COLUMN								
	YES	NO	80	81	82	83	84	85	86	87	
a. had syphilis?	1	2	—	—	—	—	—	—	—	—	16-24
b. had gonorrhea?	1	2	—	—	—	—	—	—	—	—	25-33
c. had herpes?	1	2	—	—	—	—	—	—	—	—	34-42
d. had any other sexually transmitted disease or venereal disease?	1	2	—	—	—	—	—	—	—	—	43-51

256. When cruising, or looking for a sexual partner, do you more often approach or wait for the other to approach?

Approach	1
Wait for other to approach	2
Don't cruise	3

52

257. Compared to last year, would you say your sex life is:

better, or	1
worse?	2
(DO NOT READ) same	3

53

258. Compared to five years ago, would you say your sex life is:

better, or	1
worse?	2
(DO NOT READ) same	3

54

259. Recently, have you (ASK ITEM a BELOW Q. 262):

(IF YES, IMMEDIATELY ASK QQ. 260-262. THEN ASK ITEM b.
IF NO TO ITEM a, ASK ITEM b IMMEDIATELY)

260. In what month and year was the most recent change? (RECORD IN Q. 260 COLUMN)

261. Did you make this change entirely, partly, or not at all because you did not want to risk getting AIDS? (RECORD IN Q. 261 COLUMN)

262. Did you make this change entirely, partly, or not at all because you did not want to risk spreading AIDS or giving it to someone else? (RECORD IN Q. 262 COLUMN)

	Q. 259 COLUMN		Q. 260 COLUMN		Q. 261 COLUMN			Q. 262 COLUMN		
	YES	NO	MOST RECENT CHANGE		ENTIRELY	PARTLY	NOT AT ALL	ENTIRELY	PARTLY	NOT AT ALL
			MO.	YR.						
a. declined sexual opportunities you once might have accepted?	1	2	_____	_____	1	2	3	1	2	3
b. selected different kinds of partners than you used to?	1	2 ↑	_____	_____	1	2	3	1	2	3

55-61

62-68

→ (IF NO TO b, SKIP TO Q. 263)

The next questions are about your health.

263. Does your health: (a-d)?

	YES	NO
a. limit the kinds of physical activities you can do, such as running, lifting heavy objects, participating in strenuous sports	1	2
b. make you stay indoors most or all day	1	2
c. prevent you from doing certain kinds or amounts of work, housework, or schoolwork	1	2
d. require that you get help eating, dressing, bathing, or with toilet activities	1	2

264. During the past 30 days, did you have: (a-j)? (RECORD IN Q. 264 COLUMN)
(IF YES, IMMEDIATELY ASK Q. 265)

265. Did you call or see a doctor about it? (RECORD IN Q. 265 COLUMN)

	Q. 264 COLUMN		Q. 265 COLUMN	
	YES	NO	YES	NO
a. a cough, without fever, which lasted at least three weeks	1	2	1	2
b. a sore throat or cold, with fever, lasting more than three days	1	2	1	2
c. stiffness, pain or swelling of joints lasting more than two weeks?	1	2	1	2
d. a skin rash, or breaking out on any part of the body	1	2	1	2
e. shortness of breath with light exercise or light work	1	2	1	2
f. chest pain when exercising	1	2	1	2
g. headaches almost every day	1	2	1	2
h. loss of consciousness, fainting, or passing out	1	2	1	2
i. acid indigestion or heartburn after eating many different types of foods	1	2	1	2
j. stomach flu or virus with vomiting or diarrhea	1	2	1	2

266. Compared to the past five years, is your present health:

better,	1
about the same, or	2
worse?	3

27

267. Do you expect your health over the next five years to be:

better,	1
about the same, or	2
worse?	3

28

268. Compared to most other people of your age and sex, do you think your health is:

better,	1
about the same, or	2
worse?	3

29

269. How many times, if ever, have you been hospitalized or stayed in a treatment center or program overnight for psychiatric or nervous or emotional reasons or because of drugs or alcohol?

30-31

(NUMBER OF TIMES)

(IF NEVER, SKIP TO Q. 280)

(IF ONLY ONE TIME IN Q. 269, SKIP TO Q. 272)

270. In what month and year were you first hospitalized or admitted to an overnight program for such problems?

32-35

(MONTH) AND (YEAR)

271. In what month and year were you last hospitalized overnight for such problems?

_____(MONTH)_____ AND _____(YEAR)_____

36-39

272. What was the (longest) period of time you were (continuously) hospitalized for such problems? In what month and year did it begin and in what month and year did it end?

FROM: _____ AND _____
(MONTH) (YEAR)

TO: _____ AND _____
(MONTH) (YEAR)

40-47

273. Why were you hospitalized at that time? (PROBE FOR DIAGNOSIS OR SPECIFIC PROBLEMS)

48-50

274. Thinking of the (longest) time you were hospitalized for these problems, were you willing to be hospitalized or were you hospitalized against your will?

	Willing	1
(SKIP TO Q. 275, ITEM b)	Against his/her will	2

51

275. Mainly, whose idea was the hospitalization:

a. yours,	1
b. a doctor's or other professional you had been seeing,	2
c. the police or some public agency,	3
d. members of your family, or	4
e. someone else? (SPECIFY): _____	5

52

276. Were you rid of the problem you went in for by the time you left the hospital?

Yes	1
No	2

53

277. Did you feel best the month before your hospitalization, during your hospital stay, or the month after you left the hospital?

Before	1
During	2
After	3
Same	4

54

278. Did you like or respect yourself most, the month before, during, or the month after your hospitalization?

Before	1
During	2
After	3
Same	4

55

279. Did you get along better with people the month before, during, or the month after your hospitalization?

Before	1
During	2
After	3
Same	4

56

280. Altogether, how many times, if ever, have you visited a doctor or other professional because of mental, emotional, alcohol or drug problems for which you were not hospitalized?

(NUMBER OF TIMES)

(IF NEVER, SKIP TO Q. 293)

57-59

(IF ONCE IN Q. 280, SKIP TO Q. 283)

281. In what month and year were you first treated for such problems?

(MONTH) AND _____
(YEAR)

60-63

282. In what month and year were you last treated for such problems?

(MONTH) AND _____
(YEAR)

CURRENTLY IN TREATMENT

95

64-67

283. What was the (longest) period of time you were (continuously) treated for this? In what month and year did it begin (and in what month and year did it end)?

FROM: _____ AND _____
(MONTH) (YEAR)

TO: _____ AND _____
(MONTH) (YEAR)

68-75

OR

CURRENTLY IN TREATMENT

95

284. Why (were you/are you being) treated? (PROBE FOR DIAGNOSIS OR SPECIFIC PROBLEM)

76-78

285. What sort of treatment (did you receive/are you receiving)?

79-80

286. Thinking of the (longest) treatment for (this/these) problem(s), were you willing to be treated or were you treated against your will?

	Willing	1
(SKIP TO Q. 287, ITEM b)	Against his/her will	2

7

287. Mainly, whose idea was the treatment:

a. yours,	1
b. a doctor's or other professional you had been seeing,	2
c. the police or some public agency,	3
d. members of your family, or	4
e. someone else? (SPECIFY): _____	5

8

(IF CURRENTLY IN TREATMENT [Q. 282], SKIP TO Q. 289)

288. Were you rid of the problem you were being treated for by the time you finished the treatment?

Yes	1
No	2

9

(ALL SKIP TO Q. 290)

289. Did the treatment get rid of the problem as of now?

Yes	1
No	2

10

(ALL SKIP TO Q. 290a)

290. Did you feel best the month before treatment, during treatment, or the month after you finished treatment?

290a. (IF CURRENTLY IN TREATMENT, ASK): Did you feel better the month before you began treatment or now?

Before	1
During/Now	2
After	3
Same	4

11

(IF CURRENTLY IN TREATMENT, ASK Q. 291a)

291. Did you like yourself more the month before treatment, during treatment, or the month after you finished treatment?

291a. (IF CURRENTLY IN TREATMENT, ASK): Did you like yourself more the month before treatment or now?

Before	1
During/Now	2
After	3
Same	4

12

(IF CURRENTLY IN TREATMENT, ASK Q. 292a)

292. Did you get along better with people the month before, during, or the month after treatment?

292a. (IF CURRENTLY IN TREATMENT, ASK): Did you get along better with people the month before treatment or now?

Before	1
During/Now	2
After	3
Same	4

13

293. How many times, if ever, have you had any emotional, nervous, alcohol or drug problem for which you were not treated?

(NUMBER OF TIMES)

(IF NONE, SKIP TO Q. 303)

14-15

(IF ONCE IN Q. 293, SKIP TO Q. 296)

294. In what month and year did you first have one of these or this problem?

(MONTH) AND _____
(YEAR)

16-19

295. In what month and year did you last have this or your latest problem?

(MONTH) AND _____
(YEAR)

CURRENTLY HAS PROBLEM

95

20-23

296. What was the (longest continuous) time you had this problem? In what month and year did it begin (and in what month and year did it end)?

FROM: _____ AND _____
(MONTH) (YEAR)

TO: _____ AND _____
(MONTH) (YEAR)

24-31

OR

CURRENTLY HAS PROBLEM

95

297. What kind of problem (was/is) it? (PROBE FOR DIAGNOSIS OR SPECIFIC PROBLEM)

32-34

298. Thinking of the (longest continuous) time you had this problem, did people want you to see a doctor or other professional about it or go into the hospital because of it?

Yes	1
No	2

35

299. Did others think of this as a more serious problem than you did?

Yes	1
No	2

36

(IF CURRENTLY HAS PROBLEM, ASK Q. 300a)

300. Did you feel best the month before this period, during this period, or the month after this period?

300a. (IF CURRENTLY IN PROBLEM PERIOD, ASK): Did you feel better the month before this problem period, or now?

Before	1
During/Now	2
After	3
Same	4

37

(IF CURRENTLY HAS PROBLEM, ASK Q. 301a)

301. Did you like or respect yourself more the month before, during, or the month after this problem period?

301a. (IF CURRENTLY IN PROBLEM PERIOD, ASK): Did you like or respect yourself more the month before this problem period or now?

Before	1
During/Now	2
After	3
Same	4

38

(IF CURRENTLY HAS PROBLEM, ASK Q. 302a)

302. Did you get along better with people the month before, during, or the month after this problem period?

302a. (IF CURRENTLY IN PROBLEM PERIOD, ASK): Did you get along better with people the month before this problem period or now?

Before	1
During/Now	2
After	3
Same	4

39

Now I'll be asking some questions about AIDS. AIDS is a health issue that some people have heard about from many different sources and some people have heard more about it than others.

303. Have you heard or read about or do you know about anyone (else) who has or had AIDS, even if you don't or didn't know them personally?

Yes	1
No	2

40

(SKIP TO Q. 305)

304. How well do or did you know this person? If you know about more than one person who has or had AIDS, answer about the person you know or knew best. Is this person:

someone you heard or read about,	1
someone in your neighborhood or a friend's relative,	2
someone you personally know by name that is not a close friend,	3
a close friend or relative,	4
your former lover or sex partner,	5
a current lover or sex partner, or	6
yourself?	7

41

305. I am going to read a list of activities. For each one, tell me if you think it increases risk of exposure to AIDS or risk of getting AIDS. Since we are interested in what you believe, there are no right or wrong answers. Just tell me what you think. (ASK ABOUT ITEMS a-aj ON PAGES 142-144)

Would (a-aj) increase risk: (1) not at all; (2) possibly; or (3) definitely?
(RECORD IN Q. 305 COLUMN BELOW Q. 307. REPEAT CATEGORIES AS NEEDED)

(HAND R CARD 11)

(ASK Q. 306 ABOUT EACH ACTIVITY, a-aj. IN Q. 306, IF 1, 2 OR 3 CODED, ASK Q. 307 IMMEDIATELY. THEN ASK ABOUT NEXT ACTIVITY. IF 4 OR 5 CODED, ASK ABOUT NEXT ACTIVITY IMMEDIATELY)

306. I'm going to read the list of activities again. Since you first heard about the threat of AIDS, whether or not you think the activity has anything to do with AIDS, tell me if you are doing it (1) more often; (2) less often; (3) neither more nor less often, but have been doing it with more caution; (4) has there been no change; or (5) have you never done it? Just give me the number on the card.

307. In what month and year after you first heard about the threat of AIDS did you make that change? (PROBE FOR MOST ACCURATE DATE)

	Q. 305	Q. 306	Q. 307	
	RISK	CHANGE	MO.	YR.
a. Smoking tobacco	1 2 3	1 2 3 4 5	_____	_____
b. Drinking alcohol heavily	1 2 3	1 2 3 4 5	_____	_____
c. Smoking marijuana	1 2 3	1 2 3 4 5	_____	_____
d. Sharing a razor	1 2 3	1 2 3 4 5	_____	_____
e. Sharing a toothbrush	1 2 3	1 2 3 4 5	_____	_____
f. Giving blood	1 2 3	1 2 3 4 5	_____	_____
g. Casual kissing, on the cheek, for example	1 2 3	1 2 3 4 5	_____	_____
h. Intimate kissing	1 2 3	1 2 3 4 5	_____	_____
i. Hugging	1 2 3	1 2 3 4 5	_____	_____
j. Shaking hands	1 2 3	1 2 3 4 5	_____	_____
k. Eating out in a restaurant that may have gay employees	1 2 3	1 2 3 4 5	_____	_____
l. Intimate heterosexual sexual contact	1 2 3	1 2 3 4 5	_____	_____

(CONTINUED ON THE NEXT PAGE)

305. Would (m-y) increase your risk: (1) not at all; (2) possibly; or (3) definitely? (RECORD BELOW Q. 307. REPEAT CATEGORIES AS NEEDED)

(ASK Q. 306 ABOUT EACH ACTIVITY, m-y. IN Q. 306, IF 1, 2, OR 3 CODED, ASK Q. 307 IMMEDIATELY. THEN ASK ABOUT NEXT ACTIVITY. IF 4 OR 5 CODED, ASK ABOUT NEXT ACTIVITY IMMEDIATELY)

306. Since you first heard about the threat of AIDS, whether or not you think the activity has anything to do with AIDS, tell me if you are doing it (1) more often; (2) less often; (3) neither more nor less often, but have been doing it with more caution; (4) has there been no change; or (5) have you never done it? Just give me the number on the card.

307. In what month and year after you first heard about the threat of AIDS did you make that change? (PROBE FOR MOST ACCURATE DATE)

	Q. 305	Q. 306	Q. 307	
	RISK	CHANGE	MO.	YR.
m. Intimate homosexual sexual contact	1 2 3	1 2 3 4 5	_____	_____
n. Using inhalants, for example, nitrites and "poppers"	1 2 3	1 2 3 4 5	_____	_____
o. Illegal intravenous drug use	1 2 3	1 2 3 4 5	_____	_____
p. Sharing needles or "works" with friends during illegal intravenous drug use	1 2 3	1 2 3 4 5	_____	_____
q. Sharing needles or "works" with strangers, shooting up in a gallery, for example	1 2 3	1 2 3 4 5	_____	_____
r. Sharing food, drinks, or eating utensils with a gay male	1 2 3	1 2 3 4 5	_____	_____
s. Sharing food, drinks, or eating utensils with someone who has AIDS	1 2 3	1 2 3 4 5	_____	_____
t. Sex without condoms	1 2 3	1 2 3 4 5	_____	_____
u. Anonymous sex, sex with a stranger	1 2 3	1 2 3 4 5	_____	_____
v. Being promiscuous, having sex with many different people	1 2 3	1 2 3 4 5	_____	_____
w. Going to a prostitute or gigolo	1 2 3	1 2 3 4 5	_____	_____
x. Having sexual intercourse with an illegal intravenous drug user	1 2 3	1 2 3 4 5	_____	_____
y. Heavy use of illegal drugs other than intravenously	1 2 3	1 2 3 4 5	_____	_____

(CONTINUED ON THE NEXT PAGE)

305. Would (z-aj) increase your risk: (1) not at all; (2) possibly; or (3) definitely? (RECORD BELOW Q. 307. REPEAT CATEGORIES AS NEEDED)

(ASK Q. 306 ABOUT EACH ACTIVITY, z-aj. IN Q. 306, IF 1, 2 OR 3 CODED, ASK Q. 307 IMMEDIATELY. THEN ASK ABOUT NEXT ACTIVITY. IF 4 OR 5 CODED, ASK ABOUT NEXT ACTIVITY IMMEDIATELY)

306. Since you first heard about the threat of AIDS, whether or not you think the activity has anything to do with AIDS, tell me if you are doing it (1) more often; (2) less often; (3) neither more nor less often, but have been doing it with more caution; (4) has there been no change; or (5) have you never done it? Just give me the number on the card.

307. In what month and year after you first heard about the threat of AIDS did you make that change? (PROBE FOR MOST ACCURATE DATE)

	Q. 305	Q. 306	Q. 307	
	RISK	CHANGE	MO.	YR.
z. Taking antibiotics	1 2 3	1 2 3 4 5	_____	_____
aa. Using public toilets	1 2 3	1 2 3 4 5	_____	_____
ab. Using public showers	1 2 3	1 2 3 4 5	_____	_____
ac. Exchanging body fluids such as saliva during sex	1 2 3	1 2 3 4 5	_____	_____
ad. Exchanging body fluids such as swallowing sperm during sex	1 2 3	1 2 3 4 5	_____	_____
ae. Exchanging body fluids such as allowing ejaculation into your anus during sex	1 2 3	1 2 3 4 5	_____	_____
af. Sex without spermicidal foam	1 2 3	1 2 3 4 5	_____	_____
ag. Sharing needles or "works" washed with soap and water	1 2 3	1 2 3 4 5	_____	_____
ah. Sharing "works" washed in alcohol or clorox	1 2 3	1 2 3 4 5	_____	_____
ai. Sharing "works" boiled between use	1 2 3	1 2 3 4 5	_____	_____
aj. IV drug use, even with new needles	1 2 3	1 2 3 4 5	_____	_____

(TAKE BACK CARD 11)

The following questions can be answered yes or no. In general:			
	YES	NO	
(308) Do you believe everyone who has AIDS will die from it?	1	2	43
(309) Do you think AIDS can be prevented?	1	2	44
(310) Given what you know about "safe sex" guidelines, do you think it is worth the trouble to follow safe sex guidelines in order to prevent the spread of AIDS?	1	2	45
(311) Do you know how to prevent the spread of AIDS?	1	2	46
(312) Do you think AIDS will continue to spread even if people try to prevent it?	1	2	47
(313) In general, do you think getting AIDS is the result of carelessness?	1	2	48
(314) In general, do you think getting AIDS is the result of immoral behavior?	1	2	49
(IF R HAS SAID S/HE HAS AIDS, SKIP TO INSTRUCTION ABOVE Q. 316)			
315. Do you worry about getting AIDS?	1	2	50

(IF YOU KNOW THAT AN ITEM IS INAPPLICABLE, CIRCLE CODE 3 AND SKIP IT)

316. Have you discussed the AIDS health threat with:

	Yes	No	Inapplicable	
a. your (spouse/sexual partner)?	1	2	3	51
b. your father?	1	2	3	52
c. your mother?	1	2	3	53
d. a sister?	1	2	3	54
e. a brother?	1	2	3	55
f. a close friend?	1	2	3	56
g. a health care worker?	1	2	3	57
h. a physician?	1	2	3	58
i. a co-worker?	1	2	3	59

(IF R HAS SAID S/HE HAS AIDS, ASK Q. 317; OTHERWISE, SKIP TO Q. 318)

(IF YOU KNOW THAT AN ITEM IS INAPPLICABLE, CIRCLE CODE 3 AND SKIP IT)

317. Have you discussed the fact that you have AIDS with:

	Yes	No	Inapplicable	
a. your (spouse/sexual partner)?	1	2	3	60
b. your father?	1	2	3	61
c. your mother?	1	2	3	62
d. a sister?	1	2	3	63
e. a brother?	1	2	3	64
f. a close friend?	1	2	3	65
g. a health care worker?	1	2	3	66
h. a physician?	1	2	3	67
i. a co-worker?	1	2	3	68

Answer the following questions related to AIDS as best you can for your beliefs about the experiences of the typical persons described in the questions. In general:

		YES	NO	DON'T KNOW	
318.	Do you believe there is any AIDS risk involved to someone who donates blood?	1	2	8	7
319.	Do you believe there is any risk of getting AIDS in receiving a blood transfusion?	1	2	8	8
320.	Do you think the treatment for AIDS can contribute to other health problems?	1	2	8	9
321.	Do you think AIDS patients have reason to fear that others will assume that they are gay?	1	2	8	10
322.	Do you think AIDS patients have reason to fear that others will assume they have a drug abuse history?	1	2	8	11
323.	Do you think AIDS patients have reason to fear they are in danger of losing their jobs?	1	2	8	12
324.	Do you think AIDS patients have reason to fear they are in danger of losing their housing, being evicted, etc.?	1	2	8	13
325.	Do you think AIDS patients have reason to fear their friends might reject or abandon them?	1	2	8	14
326.	Do you think AIDS patients have reason to fear their families might reject or abandon them?	1	2	8	15
327.	Do you think AIDS patients have reason to fear their spouses or lovers might reject or abandon them?	1	2	8	16
328.	Do you think the current treatment for AIDS has any benefit for AIDS patients?	1	2	8	17
329.	Do you think treatment costs for AIDS are expensive?	1	2	8	18
330.	Do you think persons with AIDS should be quarantined?	1	2	8	19

331. Do you think any of the following groups should be encouraged to be tested for the AIDS virus on a voluntary basis:

	YES	NO	
a. Marriage license applicants?	1	2	20
b. Prison inmates?	1	2	21
c. Food service workers?	1	2	22
d. Military personnel?	1	2	23
e. Gays?	1	2	24
f. Blood donors?	1	2	25
g. Drug users?	1	2	26
h. Nurses?	1	2	27
i. Doctors?	1	2	28
j. Dentists?	1	2	29
k. Prostitutes?	1	2	30
l. Outpatients with sexually transmitted diseases?	1	2	31
m. Anyone else? (SPECIFY): _____ _____	1	2	32
(DO NOT READ) n. Everyone	1	2	33
o. No one	1	2	34

332. Do you think any of the following groups ought to be required by law to be tested for the AIDS virus:

	YES	NO	
a. Marriage license applicants?	1	2	35
b. Prison inmates?	1	2	36
c. Food service workers?	1	2	37
d. Military personnel?	1	2	38
e. Gays?	1	2	39
f. Blood donors?	1	2	40
g. Drug users?	1	2	41
h. Nurses?	1	2	42
i. Doctors?	1	2	43
j. Dentists?	1	2	44
k. Prostitutes?	1	2	45
l. Outpatients with sexually transmitted diseases?	1	2	46
m. Anyone else? (SPECIFY): _____ _____	1	2	47
(DO NOT READ) n. Everyone	1	2	48
o. No one	1	2	49

333. Do you think that you might have the AIDS virus?

Yes	1	50
No	2	

334. Have you ever had an AIDS antibody test?

(SKIP TO Q. 337)	Yes	1	51
	No	2	

335. Even though you have never been tested or diagnosed, do you think you have ARC, AIDS Related Complex?

Yes	1
No	2

52

336. Even though you have never been tested or diagnosed, do you think you have AIDS?

Yes	1
No	2

53

(ALL SKIP TO Q. 343)

337. Was the result positive or negative?

Positive	1
Negative	2

54

338. Have you been diagnosed as having ARC, AIDS Related Complex?

Yes	1
No	2

55

339. Have you been diagnosed as having AIDS?

Yes	1
No	2

56

340. Have you been diagnosed as having Kaposi's sarcoma?

Yes	1
No	2

57

341. Have you been diagnosed as having any other AIDS infections?

Yes 1

(SKIP TO Q. 343)

No 2

342. What are those infections?

343. Now I'm going to read some statements. For each one, tell me if you strongly agree, agree, disagree or strongly disagree. (READ a-s):
(REPEAT CATEGORIES AS NEEDED)

	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	
a. I often worry about the possibility that I have a serious illness.	1	2	3	4	61
(IF R HAS SAID S/HE HAS AIDS [CODE 1, Q. 339], SKIP TO c)					
b. I often worry about the possibility that I have AIDS.	1	2	3	4	62
c. I frequently try to explain to others how I physically feel.	1	2	3	4	63
d. I find that I am often aware of various signs of illness or other symptoms happening to me (my body).	1	2	3	4	64
e. I often have symptoms of very serious illnesses.	1	2	3	4	65
f. When AIDS was brought to my attention, I worried about getting it myself.	1	2	3	4	66
g. When I feel ill and someone tells me that I am looking better, I become annoyed.	1	2	3	4	67

(CONTINUED ON THE NEXT PAGE)

	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE	
(h.) It is hard for me to believe the doctor when he or she tells me there is nothing to worry about when I feel ill.	1	2	3	4	68
(i.) When I am sick, people do not take my illness seriously enough.	1	2	3	4	69
(j.) Other people's illnesses bother me.	1	2	3	4	70
(k.) I think there is something seriously wrong with my body.	1	2	3	4	71
(l.) I am afraid of illness.	1	2	3	4	72
(m.) In general, people who have poor health just haven't taken very good care of themselves.	1	2	3	4	73
(n.) I have many doubts about some things doctors say they can do for AIDS.	1	2	3	4	74
(o.) When I think I am getting sick, I find it comforting to talk to someone about it.	1	2	3	4	75
(p.) When a person starts getting well, it is hard to give up having people do things for him or her.	1	2	3	4	76
(q.) Being ill is a good excuse to take time off and relax.	1	2	3	4	77
(r.) When a person is ill, he or she should go see a doctor.	1	2	3	4	78
(s.) When a person is ill, he or she should always try to handle the problem himself or herself before going to the doctor.	1	2	3	4	79

(344)

Please answer the following questions about AIDS, yes or no.

(IF FEMALE AND HAS AIDS [CODE 1, Q. 339],
SKIP TO b)

	YES	NO	DON'T KNOW	
a. Do you believe females can get AIDS?	1	2	8	7
b. Do you believe a mother who has AIDS can transmit the disease to her unborn baby?	1	2	8	8
c. Do you believe AIDS can be caught through casual contact from co-workers who have it?	1	2	8	9
d. Do you believe AIDS can be caught through casual contact with a schoolmate who has it?	1	2	8	10
e. Do you believe AIDS can be caught from insect bites?	1	2	8	11
f. Do you believe AIDS can be caught by a child through casual contact with a babysitter who has it?	1	2	8	12
g. Do you believe receiving blood or blood products increases your risk of getting AIDS?	1	2	8	13
h. Do you believe being coughed or sneezed on by a gay male increases your risk of getting AIDS?	1	2	8	14
i. Do you believe being coughed or sneezed on by an AIDS patient increases your risk of getting AIDS?	1	2	8	15
j. Do you believe being seen by a doctor who treats AIDS patients increases your risk of getting AIDS?	1	2	8	16
k. Do you believe sleeping in a hotel or motel bed previously occupied by a gay male increases your risk of getting AIDS?	1	2	8	17
l. Do you believe sleeping in a hotel or motel bed previously occupied by an AIDS patient increases your risk of getting AIDS?	1	2	8	18
m. Do you believe sleeping in a hospital bed previously occupied by a gay male increases your risk of getting AIDS?	1	2	8	19
n. Do you believe sleeping in a hospital bed previously occupied by an AIDS patient increases your risk of getting AIDS?	1	2	8	20

The following questions are about doctors and general health care.

- (345) When you need health care, do you usually, sometimes or never use:
(REPEAT CATEGORIES AS NEEDED)

	USUALLY	SOMETIMES	NEVER	
a. a free community clinic?	1	2	3	21
b. a community clinic where you pay?	1	2	3	22
c. a private hospital emergency room?	1	2	3	23
d. a public hospital emergency room?	1	2	3	24
e. a private physician?	1	2	3	25

- (346) For the following questions, answer what your usual experience is when you see a doctor. (ASK a-g):

	YES	NO	
a. Does the doctor usually spend enough time with you?	1	2	26
b. Is the doctor willing to listen to you?	1	2	27
c. Is the doctor sympathetic and understanding?	1	2	28
d. Do you feel you can discuss personal problems with the doctor?	1	2	29
e. Are the doctor's examinations thorough?	1	2	30
f. Does the doctor usually tell you enough concerning your illness?	1	2	31
g. Do you usually receive good treatment?	1	2	32

(HAND R CARD 12)

347.

Please look at this card and tell me how many times in 19(80-87): (a-c)?
 Was it (1) never; (2) one to three times; (3) four to six times; (4) seven
 to nine times; (5) ten times to once a month; (6) once a week; or (7) more
 than once a week? Just give me the number of the category on the card.

(RECORD CODE FOR EACH YEAR)

	80	81	82	83	84	85	86	87	
a. did you see a doctor	_____	_____	_____	_____	_____	_____	_____	_____	33-40
b. did you go to an emergency room for treatment	_____	_____	_____	_____	_____	_____	_____	_____	41-48
c. were you admitted to a hospital	_____	_____	_____	_____	_____	_____	_____	_____	49-56

(TAKE BACK CARD 12)

348. Now we'll be talking about your health. Within the last 12 months: (a-k)?
(IF YES, IMMEDIATELY ASK QQ. 349 AND 350.)

349. Have you had that within the last 30 days?

350. Did you see a doctor about that?

	Q. 348		Q. 349		Q. 350	
	LAST 12 MONTHS		LAST 30 DAYS		DOCTOR	
	YES	NO	YES	NO	YES	NO
a. Have you had unexplained fatigue lasting for two weeks or more	1	2	1	2	1	2
b. Have you had an unexplained fever lasting for two weeks or more	1	2	1	2	1	2
c. Have you had unexplained chills lasting for two weeks or more	1	2	1	2	1	2
d. Have you had unexplained night sweats lasting for two weeks or more	1	2	1	2	1	2
e. Have you had an unexplained weight loss of 10 pounds or more	1	2	1	2	1	2
f. Have you had a dry cough unrelated to smoking lasting for two weeks or more	1	2	1	2	1	2
g. Have you had unexplained diarrhea lasting for two weeks or more	1	2	1	2	1	2
h. Have you had severe shortness of breath lasting for two weeks or more	1	2	1	2	1	2
i. Have you had swollen or tender lymph glands in your neck, jaw, armpit, or groin	1	2	1	2	1	2
j. Have you had an unusual bruise, swelling, skin discoloration including rashes lasting for two weeks or more	1	2	1	2	1	2
k. Have you had severe confusion or change in mental status	1	2	1	2	1	2

The following questions are about your general health, illnesses or health conditions you may have had, and certain health habits.

351. Do you have or have you ever had: (a-h)? (IF YES, ASK QQ. 352 AND 353 IMMEDIATELY)

352. In what month and year did that first happen? (PROBE FOR AN ACCURATE DATE)

(ASK Q. 353 STARTING WITH YEAR OF ONSET IN Q. 352 OR 1980 IF ONSET IS PRIOR TO 1980)

(HAND R CARD 12)

353. How often were you treated for that in 19(80-87)? Was it: (1) never; (2) one to three times; (3) four to six times; (4) seven to nine times; (5) ten times to once a month; (6) once a week; or (7) more than once a week? Just give me the number of the category on the card. (RECORD CODE FOR EACH YEAR)

	Q. 351		Q. 352		Q. 353							
	HAVE/HAD		ONSET		TREATED							
	YES	NO	MO.	YR.	80	81	82	83	84	85	86	87
a. asthma	1	2	—	—	—	—	—	—	—	—	—	—
b. chronic bronchitis, emphysema, pneumonia	1	2	—	—	—	—	—	—	—	—	—	—
c. allergies	1	2	—	—	—	—	—	—	—	—	—	—
d. hepatitis A or jaundice	1	2	—	—	—	—	—	—	—	—	—	—
e. hepatitis B	1	2	—	—	—	—	—	—	—	—	—	—
f. CMV (cytomegalovirus) infection	1	2	—	—	—	—	—	—	—	—	—	—
g. EBV (Epstein-Barr virus, adult mono) infection	1	2	—	—	—	—	—	—	—	—	—	—
h. cirrhosis of the liver	1	2	—	—	—	—	—	—	—	—	—	—

45/

19-31

32-44

45-57

58-70

46/

7-19

20-32

33-45

46-58

(CONTINUED ON THE NEXT PAGE)

351. Do you have or have you ever had: (i-n)? (IF YES, ASK QQ. 352 AND 353 IMMEDIATELY)
352. In what month and year did that first happen? (PROBE FOR AN ACCURATE DATE)
(ASK Q. 353 STARTING WITH YEAR OF ONSET IN Q. 352 OR 1980 IF ONSET IS PRIOR TO 1980)
353. How often were you treated for that in 19(80-87)? Was it: (1) never; (2) one to three times; (3) four to six times; (4) seven to nine times; (5) ten times to once a month; (6) once a week; or (7) more than once a week? Just give me the number of the category on the card. (RECORD CODE FOR EACH YEAR)

	Q. 351		Q. 352		Q. 353							
	HAVE/HAD		ONSET		TREATED							
	YES	NO	MO.	YR.	80	81	82	83	84	85	86	87
i. anemia	1	2	—	—	—	—	—	—	—	—	—	—
j. diabetes	1	2	—	—	—	—	—	—	—	—	—	—
k. arthritis or gout	1	2	—	—	—	—	—	—	—	—	—	—
l. cancer of any type	1	2	—	—	—	—	—	—	—	—	—	—
m. sexually transmitted disease	1	2	—	—	—	—	—	—	—	—	—	—
n. psoriasis	1	2	—	—	—	—	—	—	—	—	—	—

(TAKE BACK CARD 12)

354. What chronic health problem, if any, do you have?

NONE 95

47/

48/

47/

74

48/

15-20

21

22

355. During periods of high stress or deep depression, some people feel so bad that they actually try to do harm to themselves by attempting to commit suicide. Have you ever felt so bad, or have you ever, for any reason, tried to kill yourself?

Yes	1
-----	---

(SKIP TO Q. 357)

No	2
----	---

356. For some people, these feelings of stress or depression persist or return so that attempted suicide is repeated. Other reasons for attempting suicide also have been given. You said that you have tried to commit suicide. Please tell me how often, for any reason, you tried to kill yourself in 19(80-87). Was it:

	1980	1981	1982	1983	1984	1985	1986	1987
never,	1	1	1	1	1	1	1	1
once or twice,	2	2	2	2	2	2	2	2
three times, or	3	3	3	3	3	3	3	3
more than three times?	4	4	4	4	4	4	4	4

48/ 7 8 9 10 11 12 13 14

357. Just a few more questions about you and your background.

What is your birthdate?

_____/_____/_____
MONTH DAY YEAR

358. (INTERVIEWER: CODE SEX OF RESPONDENT)

Male	1
------	---

Female	2
--------	---

359. Are you living in Houston or someplace within an hour's drive of Houston?

Yes	1
-----	---

No	2
----	---

360. In what kind of a community are you now living? Is it:

a. in open country, not on a farm,	1
b. on a farm,	2
c. in a small city or town under 50,000,	3
d. in a medium-size city, 50,000-250,000,	4
e. in a large city between 250,000 and 1,000,000,	5
f. in a large city of more than 1,000,000,	6
g. a suburb of a large city, or	7
h. something else? (SPECIFY): _____	8

23

361. In what state have you resided for most of the last 12 months?

(STATE)

24-25

(FOR OFFICE USE ONLY)

ISR ID #: _____

CASE #: _____

362. What is your phone number? (_____) _____
(AREA CODE)

363. Your participation in this important research is very valuable. If the project is continued, we may want to contact you again to see how things are going. These last questions are for our records only, so that we can get in touch with you. Remember, everything you say is completely confidential. If we contact any of these people, it will only be to reach you. No information will be given to them.

Please think of three close relatives or friends who, several years from now, would know where you moved. This could be your (or your husband's/ wife's) parents, a brother, sister or favorite relative with whom you keep in touch. It could be a very close friend.

Who are the three relatives or close friends (other than your current spouse) who will know where you are?

1) Name: _____ Relationship: _____

Address: _____
(NUMBER) (STREET) (APT.)

(CITY) (STATE) (ZIP) Phone: _____
(AREA CODE)

(IF REFERENCE IS FEMALE, ASK):

What is her husband's full name? _____ OR Not married 1

2) Name: _____ Relationship: _____

Address: _____
(NUMBER) (STREET) (APT.)

(CITY) (STATE) (ZIP) Phone: _____
(AREA CODE)

(IF REFERENCE IS FEMALE, ASK):

What is her husband's full name? _____ OR Not married 1

3) Name: _____ Relationship: _____

Address: _____
(NUMBER) (STREET) (APT.)

(CITY) (STATE) (ZIP) Phone: _____
(AREA CODE)

(IF REFERENCE IS FEMALE, ASK):

What is her husband's full name? _____ OR Not married 1

(IF R IS CURRENTLY MARRIED OR COHABITING, ASK):

364. What is your (husband's/wife's/partner's) full (maiden) name?

(FIRST) (MIDDLE) (LAST)

(IF R IS FEMALE AND EVER MARRIED, ASK):

365. What is your full maiden name?

(FIRST) (MIDDLE) (LAST)

INTERVIEWER INSTRUCTIONS:

366.

Thank R and ask him/her to complete the Respondent's Section of the Request for Payment Form.

Complete the Interviewer's Section of the form and place it between the first two pages of the questionnaire.

367.

Read the following statement to R:

At this time, we would like to offer you the opportunity to participate in the second phase of the study, which will require the drawing of a small amount of blood. This blood sample will also be coded by number, not by your name, and you will be paid an additional \$20. The interviewer will be able to set up an appointment for you if you live within the Houston-Harris County area. For those of you who do not live within the Houston-Harris County area, the interviewer will provide you with written instructions and the necessary materials which will enable you to go about making your blood donation. The interviewer can answer any questions you may have about this procedure. You are not obligated to donate the small blood sample, just as you were not obligated to answer any of the questions in the questionnaire.

The purpose of the blood sample will be to allow us to determine the characteristics and proportion of the population that have been exposed to the AIDS virus and the ability of the body to ward off disease. You will not be contacted any further if the results of the test are negative, but, if you are interested, you may contact us for an appointment to discuss your results. In either case, the results of a negative test will remain anonymous, identified only by a code number. If the results of the test are confirmed to be positive, we will be required to inform you and will offer you the opportunity to come in person to receive further information. At that time, you will also receive initial notice by registered letter that the results are available. The letter will also give you a phone number to call in order to make an appointment to receive the results in person. If you make an appointment, positive results will be given only to you and only in person. At that time, you will also be offered initial counseling by an experienced counselor who can explain in detail the meaning of your results. The letter you receive will not mention that your results were positive nor give any other information obtained from your participation in the study. However, the receiving of this letter should be understood by you to mean that the results are confirmed to be positive and that it would be advisable to avail yourself of the offered counseling. Again, although we cannot absolutely guarantee that accidental disclosure of information will not occur, these precautions are taken to prevent this from happening. At the time of the blood donation, you will be again asked to sign an informed consent form like the one the interviewer has to show you.

368. Did R agree to participate in the second phase of the study?

(GO TO INSTRUCTION 369)

Yes

1

(SKIP TO INSTRUCTION 370)

No

2

369. If R lives in the Houston-Harris County area, tell him/her the times available for drawing blood. Complete the appointment card and give it to R. Record date and time below and call Janice or Praveen at 799-6061 as soon as possible to make the appointment.

Appointment was made for: _____ at _____
(DATE) (TIME)

If R lives outside the Houston-Harris County area, give him/her the blood sample packet and circle the code 1

(ALL SKIP TO INSTRUCTION 371)

370. Record R's case # and your name and ID # on the Baylor College of Medicine invitation to participate letter. Give the letter, the Baylor postage-paid envelope, and the appointment card to R. Circle this code 1

371. Record the time here and on the questionnaire cover. Complete the Interviewer Evaluation section as soon as you can do so without the respondent observing you.

TIME ENDED: _____

I certify that I administered this interview face-to-face with the designated respondent, that I followed all ISR specifications, and that I will keep all information obtained during the interview confidential.

INTERVIEWER'S SIGNATURE: _____ ID#: _____

INTERVIEWER EVALUATION

THESE QUESTIONS ARE TO BE ANSWERED IMMEDIATELY AFTER THE INTERVIEW
BUT NOT IN R'S PRESENCE.

1. Does R have:

	YES	NO	
a. a speech defect, such as stuttering, stammering, lisping, etc.?	1	2	27
b. anything that prevents complete use of his/her legs?	1	2	28
c. anything that prevents complete use of his/her arms?	1	2	29
d. bad scars or other physical stigmata, e.g., hare lip, badly proportioned parts of body, etc.?	1	2	30

2. During the interview, was R generally:

very interested,	1	
somewhat interested,	2	
indifferent,	3	31
somewhat bored, or	4	
very bored?	5	

3. How attentive was R during the interview?

Attentive, involved, responsive	1	
Somewhat inattentive or uninvolved	2	32
Easily distracted, needed urging to pay attention	3	

4. In general, how quickly did R respond to questions?

Responded quickly, without hesitation	1
Deliberated some, but responses were generally not too slow	2
Was often slow to respond	3
Was usually very slow to respond, needed much urging	4

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5. Which questions, if any, did R have difficulty understanding?

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6. Rate R's apparent intelligence.

Very high	1
Above average	2
Average	3
Below average	4
Very low	5

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7. How truthful did R seem?

Completely truthful	1
Mainly truthful	2
About half and half	3
Mainly untruthful, evasive	4

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8. At the end of the interview, did R seem to be:

very tired,	1
fairly tired,	2
a little tired, or	3
not tired at all?	4

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9. At any time during the interview, was there anyone present and able to overhear the interview?

Yes	1
No	2

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10. What else is there about the interview that will help in interpreting the data?

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