

ICPSR 2295

**California Drug and Alcohol  
Treatment Assessment  
(CALDATA), 1991-1993**

Participant Abstraction Record and  
Questionnaires

*California Department of Alcohol and  
Drug Programs*

First ICPSR Edition  
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Inter-university Consortium for  
Political and Social Research  
P.O. Box 1248  
Ann Arbor, Michigan 48106  
[www.icpsr.umich.edu](http://www.icpsr.umich.edu)



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## Data Collection Description

Principal Investigator(s): California Department of Alcohol and Drug Programs

Title: California Drug and Alcohol Treatment Assessment (CALDATA), 1991-1993

ICPSR Study Number: 2295

Funding Agency: California Department of Alcohol and Drug Programs

Grant Number: 92-00110

Summary: The California Drug and Alcohol Treatment Assessment (CALDATA) was designed to study the costs, benefits, and effectiveness of the state's alcohol and drug treatment infrastructure (recovery services) and specifically to assess (1) the effects of treatment on participant behavior, (2) the costs of treatment, and (3) the economic value of treatment to society. Data were collected on participants (clients) across four types of treatment programs, or modalities: residential, residential "social model," nonmethadone outpatient, and outpatient methadone (detoxification and maintenance). Data were collected in two phases. In Phase 1, treatment records were abstracted for clients who received treatment or were discharged between October 1, 1991, and September 30, 1992. In Phase 2, these clients were located and recruited for a follow-up interview. The CALDATA design and procedures included elements from several national treatment outcome studies including the DRUG SERVICES RESEARCH SURVEY (ICPSR 3393), SERVICES RESEARCH OUTCOMES STUDY (ICPSR 2691), NATIONAL TREATMENT IMPROVEMENT EVALUATION STUDY (ICPSR 2884), and DRUG ABUSE TREATMENT OUTCOME STUDY (ICPSR 2258). The record abstract was designed to collect identifying and locating information for interview reference during the personal interviewing phase. The abstract also collected demographic, drug, or alcohol use, and treatment and service information. The follow-up questionnaire covered time periods before, during, and after treatment and focused on topics such as ethnic and educational background, drug and alcohol use, mental and physical health, HIV and AIDS status, drug testing, illegal activities and criminal status, living arrangements and family issues, employment and income, and treatment for drug, alcohol, and mental health problems. Drugs included alcohol, barbiturates, benzodiazepines, cocaine powder, crack, downers, hallucinogens, heroin, illegal methadone, inhalants, LSD, marijuana/hashish/THC, methamphetamines and other stimulants, narcotics, over-the-counter drugs, PCP, ritalin or preludein, and sedatives/hypnotics. CALDATA was originally known as the California Outcomes Study (COS).

Universe: All clients receiving recovery services in the four treatment modalities included in the study from California-based treatment providers known to the California Alcohol and Drug Data System (CADDs) as of September 1992. The CADDs programs include all providers who (1)

received any type of public funding for treatment or recovery services, (including grants, contracts, and MediCal reimbursements) during the current or previous fiscal years, and (2) are required to report to CADDIS as a condition of state licensing.

**Sample:** CALDATA employed a multistage stratified sample design consisting of three stages. In the first stage, the state was stratified geographically into four regions to ensure state-wide coverage. Counties within these strata were randomly selected, with large counties being selected with certainty and small counties being clustered to provide sufficiently large sampling units. Selection chances for the non-certainty counties were weighted based on the number of participants. In the second stage of sampling, treatment providers were selected using similar principles of geographically balanced, size weighted random selection. In order to analyze each treatment modality, approximately equal numbers of facilities were selected across the modalities. As with counties, the smallest providers were clustered to provide adequately sized sampling units. In the third stage, client records were randomly chosen at each sampled facility with the number varying by the size of the provider and the extent to which the on-site listing of clients matched the number expected for that provider. Approximately 3,000 clients were selected for abstraction. Of these, 1,859 were recruited for the follow-up interview.

**Date of Collection:** September 1992-December 1993

**Response Rates:** The overall CALDATA participant response rates are approximately 50 percent for the discharge sample and approximately 46 percent for the continuing methadone maintenance (CMM) sample. Response rates by modality in cooperating providers range from 56-61 percent, with the exception of methadone maintenance (76.5 percent).

**Data Collection Notes:** (1) The study was conducted by the National Opinion Research Center at the University of Chicago and Lewin-VHI, Inc., Fairfax, Virginia, and Corte Madera, California. (2) The original data collection also included data on the treatment facilities. However, these data are not being released, per the data producers. (3) While 1,859 clients participated in the follow-up interview, 33 interviews were completed too late to be included in the study's final report. These cases are also excluded from the public use dataset, yielding a total of 1,826 cases. (4) The codebook, methodology report, and data collection instruments are provided by ICPSR as Portable Document Format (PDF) files. The PDF file format was developed by Adobe Systems Incorporated and can be accessed using PDF reader software, such as the Adobe Acrobat Reader. Information on how to obtain a copy of the Acrobat Reader is provided on the ICPSR and SAMHDA Web sites.

**Data Source:** personal interviews and record abstractions

**Restrictions:** Users are reminded that these data are to be used solely for statistical analysis and reporting of aggregated information and not for the investigation of specific individuals or organizations.

Extent of Collection: 1 data file + machine-readable documentation (PDF) + SAS data definition statements + SPSS data definition statements + data collection instruments (PDF)

Extent of Processing: CONCHK.PR/ CONCHK.ICPSR/ DDEF.ICPSR/ FREQ.ICPSR/ MDATA.PR/ SCAN/ REFORM.DOC/ REFORM.DATA/ UNDOCCHK.PR/ UNDOCCHK.ICPSR/ RECODE

Data Format: Logical Record Length with SAS and SPSS data definition statements

## File Specifications

<i>Part No.</i>	<i>Part Name</i>	<i>File Structure</i>	<i>Case Count</i>	<i>Variable Count</i>	<i>LRECL</i>	<i>Records Per Case</i>
1	Data file	rectangular	1,826	1,205	2,551	1







**I. ADMISSION AND DEMOGRAPHIC INFORMATION**

**1. THIS QUESTION INTENTIONALLY OMITTED**

2. |\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_| **DATE OF ADMISSION (ENTER IN PLR. Q.18)**  
Mo Da Yr

(Q2\_MO)(Q2\_DA)(Q2\_YR)

98. Unknown/not mentioned

3. |\_\_|\_\_|\_\_| **WAITING TIME FOR ADMISSION INTO PROGRAM (# OF DAYS)**  
Days

98. Unknown/not mentioned

4. |\_\_|\_\_|\_\_| **PLANNED LENGTH OF TREATMENT SERVICES MENTIONED IN TREATMENT PLAN**  
Days

98. Unknown/not mentioned

**5. PRIMARY REFERRAL SOURCE (CODE ONE)**

01. Self

02. Family

03. Friend/acquaintance

04. Clergy

05. School

06. Social service agency

07. Employee Assistance Program (EAP)

08. Employer (other than EAP)

09. Criminal justice/legal system (judge, parole officer, legal advisor)

10. Private physician

11. Community mental health center

12. Other health professional or provider/hospital

13. Another alcohol/drug abuse treatment program

14. Other (SPECIFY)\_\_\_\_\_

98. Unknown/not mentioned

**6. PRIMARY SOURCE OF PAYMENT FOR THESE TREATMENT SERVICES (CODE ONE)**

01. No payment; public subsidy

02. No payment; philanthropy

03. No payment; not otherwise specified

04. Self-pay

05. HMO or other pre-paid plan

06. Private health insurance

07. Medicaid/Medi-Cal

08. Medicare

09. DOD

10. CHAMPUS

11. VA

12. Social services

13. Public housing/home relief

14. Other (SPECIFY):\_\_\_\_\_

97. Not permitted to abstract

98. Unknown/not mentioned

**7. SECONDARY SOURCE OF PAYMENT FOR THESE TREATMENT SERVICES (CODE ONE)**

- |   |                                |
|---|--------------------------------|
| 01. No payment; public subsidy          | 09. DOD                        |
| 02. No payment; philanthropy            | 10. CHAMPUS                    |
| 03. No payment; not otherwise specified | 11. VA                         |
| 04. Self-pay                            | 12. Social services            |
| 05. HMO or other pre-paid plan          | 13. Public housing/home relief |
| 06. Private health insurance            | 14. Other (SPECIFY):_____      |
| 07. Medicaid/Medi-Cal                   | 97. Not permitted to abstract  |
| 08. Medicare                            | 98. Unknown/not mentioned      |

**8. |\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_| DATE TREATMENT SERVICES BEGAN**  
Mo Da Yr

(Q8\_MO)(Q8\_DA)(Q8\_YR)

98. Unknown/not mentioned

**9. |\_\_|\_\_| |\_\_|\_\_| |\_\_|\_\_| DATE OF BIRTH (ENTER IN PLR, Q.6)**  
Mo Da Yr

(Q9\_MO)(Q9\_DA)(Q9\_YR)

98. Unknown/not mentioned

**10. |\_\_|\_\_| AGE AT ADMISSION (IN YEARS)**

98. Unknown/not mentioned

**11. GENDER (ENTER IN PLR, Q.7)**

- 1. Male
- 2. Female
- 8. Unknown/not mentioned

**12. RACE (ENTER IN PLR, Q.8)**

- |                             |                           |
|-----------------------------|---------------------------|
| 1. White                    | 10. Hawaiian              |
| 2. Black (African-American) | 11. Japanese              |
| 3. Native American          | 12. Korean                |
| 4. Alaskan Native           | 13. Laotian               |
| 5. Asian Indian             | 14. Samoan                |
| 6. Cambodian                | 15. Vietnamese            |
| 7. Chinese                  | 16. Other Asian           |
| 8. Filipino                 | 17. Other (SPECIFY) _____ |
| 9. Guamanian                | 18. Unknown/not mentioned |

**13. ETHNICITY (ENTER IN PLR, Q.9)**

- |                           |                          |
|---------------------------|--------------------------|
| 1. Hispanic or Latino     | 3. Other (SPECIFY)_____  |
| 2. Not of hispanic origin | 8. Unknown/not mentioned |

**14. MARITAL STATUS AT ADMISSION (CODE ONE)**

- 1. Never married
- 2. Married/common law
- 3. Widowed
- 4. Separated/divorced
- 5. Single
- 6. Other (SPECIFY)\_\_\_\_\_
- 8. Unknown/not mentioned

**15. HAVE CHILD/CHILDREN AT ADMISSION**

- 1. Yes
- 2. No (GO TO Q.17)
- 8. Unknown/not mentioned (GO TO Q.17)

**16. LIVING WITH OWN CHILD/CHILDREN AT ADMISSION**

- 1. Yes
- 2. No
- 8. Unknown/not mentioned

**17. LIVING ARRANGEMENT AT ADMISSION**

- 1. No stable arrangement (include homeless, shelters)
- 2. With partner/spouse (GO TO Q.18)
- 3. With parent(s) (GO TO Q.18)
- 4. With other family (GO TO Q.18)
- 5. With unrelated other(s) (GO TO Q.18)
- 6. With children but no other adult (GO TO Q.18)
- 7. Alone (GO TO Q.18)
- 8. Controlled environment (GO TO Q.18)
- 9. Other (SPECIFY)\_\_\_\_\_ (GO TO Q.18)
- 98. Unknown/not mentioned (GO TO Q.18)

**17A. PERIOD WITHOUT STABLE LIVING ARRANGEMENTS**

- 1. Less than 1 month
- 2. 1 month to a year
- 3. 1 year or more
- 98. Unknown/not mentioned

**18. EDUCATION AT ADMISSION (CODE HIGHEST LEVEL MENTIONED)**

- 1. Less than 8 years
- 2. 8-11 Years
- 3. Less than high school graduate, not otherwise specified
- 4. High school graduate/GED
- 5. Some college
- 6. College graduate
- 7. Postgraduate
- 8. Other (SPECIFY)\_\_\_\_\_
- 98. Unknown/not mentioned

**19. STUDENT AT ADMISSION**

- 1. Yes
- 2. No
- 8. Unknown/not mentioned

**20. EMPLOYMENT AT ADMISSION (CODE ONE)**

- |  |  |
|--|--|
| 1. Full-time (35 hrs/wk or more)         | 6. Unemployed, disabled                |
| 2. Part-time (less than 35 hrs/wk)       | 7. Unemployed, not otherwise specified |
| 3. Employed, not otherwise specified     | 8. Other (SPECIFY) _____               |
| 4. Keeping house, not otherwise employed | 98. Unknown/not mentioned              |
| 5. Unemployed, retired                   |  |

**21. USUAL (OR LAST) OCCUPATION**

SPECIFY \_\_\_\_\_

**II. CRIMINAL JUSTICE SYSTEM INFORMATION**

**22. DWI/DUI PRIOR TO ADMISSION**

- |        |                              |
|--------|------------------------------|
| 1. Yes | 7. Not permitted to abstract |
| 2. No  | 8. Unknown/not mentioned     |

**23. OTHER ARRESTS PRIOR TO ADMISSION**

- |                              |                              |
|------------------------------|------------------------------|
| 1. Yes, within past year     | 7. Not permitted to abstract |
| 2. Yes, more than a year ago | 8. Unknown/not mentioned     |
| 3. No                        |                              |

**24. PRISON OR JAIL RECORD PRIOR TO ADMISSION (ENTER DATES, PLACES IN PLR, Q.21)**

- |                    |   |
|--------------------|---|
| 1. Yes             | 7. Not permitted to abstract (GO TO Q.25) |
| 2. No (GO TO Q.25) | 8. Unknown/not mentioned (GO TO Q.25)     |

**24A. TOTAL LENGTH OF PRISON OR JAIL STAYS PRIOR TO ADMISSION**

- |                      |                           |
|----------------------|---------------------------|
| 1. Less than 1 month | 3. 1 year or more         |
| 2. 1 month to a year | 98. Unknown/not mentioned |

**25. RECEIVING DRUG TREATMENT AS A CONDITION OF PROBATION OR PAROLE?**

- |        |                              |
|--------|------------------------------|
| 1. Yes | 7. Not permitted to abstract |
| 2. No  | 8. Unknown/not mentioned     |

**III. MEDICAL INFORMATION**

**26. NUMBER OF ACUTE MEDICAL HOSPITALIZATIONS IN YEAR PRIOR TO ADMISSION (NOT INCLUDING PSYCHIATRIC HOSPITALIZATIONS)**

|\_\_| |\_\_| (ENTER 00 FOR NONE AND GO TO Q.27)  
Number

98. Unknown/not mentioned

**26A. TOTAL LENGTH OF ACUTE MEDICAL HOSPITALIZATIONS IN YEAR PRIOR TO ADMISSION (NOT INCLUDING PSYCHIATRIC HOSPITALIZATIONS)**

\_\_\_\_\_ ENTER NUMBER OF DAYS, IF KNOWN

98. Unknown/not mentioned

**27. CHRONIC MEDICAL CONDITIONS AT ADMISSION?**

1. Yes (ANSWER A) →

2. No

8. Unknown/not mentioned

<p><b>A. SPECIFY</b> _____</p> <p>_____</p> <p>_____</p> <p><b>98. Unknown/not mentioned</b></p>
--

**28. HISTORY OF PSYCHOLOGICAL DISORDERS AT ADMISSION (OTHER THAN DRUG/ALCOHOL RELATED PROBLEMS)**

1. Yes

2. No (GO TO Q.30)

8. Unknown/not mentioned (GO TO Q.30)

**28A. NUMBER OF LIFETIME PSYCHIATRIC HOSPITALIZATIONS**

\_\_\_\_\_ ENTER NUMBER OF HOSPITALIZATIONS, IF KNOWN

98. Unknown/not mentioned

**28B. TOTAL TIME SPENT IN PSYCHIATRIC HOSPITALIZATIONS**

1. Less than 1 month

3. 1 year or more

2. 1 month to a year

98. Unknown/not mentioned

**29. SUBSTANCE ABUSE/MENTAL ILLNESS (DUAL DIAGNOSIS) PARTICIPANT AT ADMISSION?**

1. Yes (SPECIFY \_\_\_\_\_)

2. No

8. Unknown/not mentioned

**30. PREGNANCY STATUS AT ADMISSION AS STATED IN RECORD**

1. Not applicable, client is male

3. Pregnant

2. Not pregnant

8. Unknown/not mentioned

**31. PRESENTING PROBLEM AT ADMISSION**

- 1. Single drug abuse only (excluding alcohol)
- 2. Polydrug abuse only (excluding alcohol)
- 3. Alcohol abuse only
- 4. Alcohol abuse and abuse of one other drug combined

- 5. Alcohol abuse and abuse of two or more other drugs
- 6. Other (SPECIFY) \_\_\_\_\_
- 8. Unknown/not mentioned

**32. PRINCIPAL TREATMENT FOCUS**

- 1. Single drug abuse only (excluding alcohol)
- 2. Polydrug abuse only (excluding alcohol)
- 3. Alcohol abuse only

- 4. Alcohol and other drug abuse combined
- 5. Other (SPECIFY) \_\_\_\_\_
- 8. Unknown/not mentioned

**33. A. SPECIFY PRIMARY PROBLEM (COPY VERBATIM):**

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**B. LIST OTHER PROBLEMS OR DIAGNOSES:**

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98. Unknown/not mentioned

**34. HIV STATUS AS DETERMINED FROM MEDICAL TESTING**

- 1. Negative
- 2. Positive (ANSWER A) →
- 3. Suspected
- 4. Other (SPECIFY) \_\_\_\_\_
- 7. Not permitted to abstract
- 8. Unknown/not mentioned

<b>A. HAS AIDS?</b>
1. Yes
2. No
8. Unable to determine

**34.1 HIV STATUS AS REPORTED/KNOWN BY PARTICIPANT**

- 1. Negative
- 2. Positive (ANSWER A) →
- 3. Suspected
- 4. Other (SPECIFY) \_\_\_\_\_
- 7. Not permitted to abstract
- 8. Unknown/not mentioned

<b>A. HAS AIDS?</b>
1. Yes
2. No
8. Unable to determine

**IV. ALCOHOL AND OTHER DRUG HISTORY**

FOR EACH SUBSTANCE LISTED, CODE COL. A; IF "YES" TO A, COMPLETE B AND C.  
 CODES FOR A & B: YES=1 NO=2 UNKNOWN/NOT MENTIONED=8  
 CODE FOR C: 98 = DK AGE; OTHERWISE, ROUND TO NEAREST YEAR

	A.	B.	C.
	EVER USED (Q _ EVER)	USED IN LAST 30 DAYS (Q _ USED)	AGE (IN YRS.) AT FIRST USE (Q _ AGE)
35. Cocaine (Exclude crack)	1 2 8	1 2 8	_ _
36. Crack	1 2 8	1 2 8	_ _
37. Heroin	1 2 8	1 2 8	_ _
38. Non-treatment methadone	1 2 8	1 2 8	_ _
39. Other opiates/synthetics	1 2 8	1 2 8	_ _
40. Barbiturates	1 2 8	1 2 8	_ _
41. Benzodiazepines	1 2 8	1 2 8	_ _
42. Other sedatives/hypnotics	1 2 8	1 2 8	_ _
43. Methamphetamines	1 2 8	1 2 8	_ _
44. Other amphetamines	1 2 8	1 2 8	_ _
45. Marijuana/hashish/THC	1 2 8	1 2 8	_ _
46. PCP	1 2 8	1 2 8	_ _
47. LSD of other hallucinogens	1 2 8	1 2 8	_ _
48. Inhalants	1 2 8	1 2 8	_ _
49. Over-the-counter (SPECIFY) _____	1 2 8	1 2 8	_ _
50. Alcohol	1 2 8	1 2 8	_ _
51. Other (SPECIFY) _____	1 2 8	1 2 8	_ _

52. |\_|\_| DRUG OF CHOICE SPECIFIED AT ADMISSION (ENTER QUESTION NUMBER OF DRUG OF CHOICE FROM TABLE ABOVE)

01. No drug of choice                      98. Unknown/Not mentioned

**53. EVER USED NEEDLES**

1. Yes (ANSWER A)                      2. No (GO TO Q. 54)                      8. Unknown/not mentioned (GO TO Q. 54)

**A. INTRAVENOUS DRUG USER AT ADMISSION**

1. Yes (ANSWER B)                      2. No (GO TO Q.54)                      8. Unknown/not mentioned (GO TO Q.54)

**B. FREQUENCY OF INTRAVENOUS DRUG USE AT ADMISSION**

1. Daily    3. Sporadically  
 2. Regularly but not daily                      8. Unknown/not mentioned

**DRUG OR ALCOHOL ABUSE TESTING DURING SAMPLE EPISODE?**

1. Yes (COMPLETE TABLE BELOW)
2. No (LEAVE TABLE BLANK; GO TO Q.57)
8. Unknown/not mentioned (LEAVE TABLE BLANK; GO TO Q.57)

DRUG OR ALCOHOL ABUSE TESTING TABLE		
Type of Test	CODE FIRST TEST (Q54 _ TST1)	CODE LAST TEST (Q54 _ TST2)
	1 = Urine (SPECIFY) _____ 2 = Serum/Blood _____ 3 = Other _____ 8 = Unknown/not mentioned _____	1 = Urine (SPECIFY) _____ 2 = Serum/Blood _____ 3 = Other _____ 8 = Unknown/not mentioned _____
Date of Results	_ _ _ - _ _ _ - _ _ _  Mo Da Yr (Q54_MO1) (Q54_DA1) (Q54_YR1)	_ _ _ - _ _ _ - _ _ _  Mo Da Yr (Q54_MO2) (Q54_DA2) (Q54_YR2)
	TEST RESULTS (ONLY INDICATE DRUGS THAT TESTED POSITIVE ENTER "1" FOR EACH DRUG THAT TESTED POSITIVE, LEAVE BLANK IF NEGATIVE OR NOT APPLICABLE)	
54a. Cocaine (Including crack)	_	_
54b. Heroin	_	_
54c. Non-treatment methadone	_	_
54d. Other opiates/synthetics	_	_
54e. Barbiturates	_	_
54f. Benzodiazepines	_	_
54g. Other sedatives/hypnotics	_	_
54h. Methamphetamines	_	_
54i. Other amphetamines	_	_
54j. Marijuana/hashish/THC	_	_
54k. PCP	_	_
54l. LSD or other hallucinogens	_	_
54m. Inhalants	_	_
54n. Alcohol	_	_
54o. Other (SPECIFY)	_	_

55. |\_|\_|\_| TOTAL NUMBER OF TESTS WHILE IN TREATMENT SERVICES ACCORDING TO RECORD

\_\_\_\_\_|\_\_\_\_\_|\_\_\_\_\_| TOTAL (OF Q.55 NUMBER) OF POSITIVE TESTS ACCORDING TO RECORD (POSITIVE TEST = POSITIVE RESULT FOR ONE OR MORE SUBSTANCES IN ONE SPECIMEN)

998. Unknown/not mentioned

**V. ALCOHOL AND DRUG TREATMENT SERVICES HISTORY**

57. |\_\_|\_|\_\_\_\_\_| TOTAL NUMBER OF TREATMENT SERVICES EPISODES (FOR ANY DRUG OR ALCOHOL ABUSE) PRIOR TO SAMPLE EPISODE

N/A. No prior treatment service episodes (GO TO Q. 59)

98. Unknown/not mentioned (GO TO Q. 59)

A. |\_\_|\_|\_\_\_\_\_| NUMBER OF YEARS OVER WHICH TREATMENT SERVICE EPISODES WERE REPORTED

N/A. Less than six months

98. Unknown/not mentioned

58. PAST TREATMENT SERVICES EPISODES (FOR ANY DRUG OR ALCOHOL SUBSTANCE ABUSE) PRIOR TO SAMPLE EPISODE (ENTER PROGRAM NAMES, DATES, IN PLR, Q.20)

- 1. Yes (COMPLETE TABLE BELOW; RECORD ADDITIONAL EPISODES IN COMMENTS.)
- 2. No (LEAVE TABLE BLANK; GO TO Q.59)
- 8. Unknown/not mentioned (LEAVE TABLE BLANK; GO TO Q.59)

PAST TREATMENT SERVICES EPISODES				
	REASON FOR TREATMENT SERVICES (DRUG TYPE)		FACILITY (Q58 _ FAC)	REASON FOR DISCHARGE (Q58 _ RES)
	Primary (Q58 _ PRI)	Secondary (Q58 _ SEC)		
58a.	__ _	__ _	__	__
58b.	__ _	__ _	__	__
58c.	__ _	__ _	__	__
58d.	__ _	__ _	__	__
58e.	__ _	__ _	__	__
58f.	__ _	__ _	__	__
58g.	__ _	__ _	__	__
58h.	__ _	__ _	__	__
58i.	__ _	__ _	__	__
58j.	__ _	__ _	__	__
58k.	__ _	__ _	__	__
58l.	__ _	__ _	__	__
58m.	__ _	__ _	__	__
58n.	__ _	__ _	__	__





**VI. TREATMENT SERVICES INFORMATION FOR SAMPLE EPISODE**

**FOR EACH SERVICE, REFER TO CODES LISTED BELOW, AND CODE COLUMN A.  
FOR CODES 2-5 AT A, CODE B AND C.**

	A.	B.	C.
	SERVICE GIVEN (Q59 _ SER)	FACILITY (Q59 _ FAC)	NO. OF ENCOUNTERS (998=UNKNOWN) (Q59 _ NO)
59.	Individual counseling	1 2 8	_ _ _
60.	Group counseling	1 2 8	_ _ _
61.	Family counseling	1 2 8	_ _ _
62.	Drug/alcohol education/counseling	1 2 8	_ _ _
63.	Employment counseling	1 2 8	
64.	Job training	1 2 8	
65.	Educational classes	1 2 8	
66.	Detoxification - residential	1 2 8	
66.1	Detoxification - ambulatory	1 2 8	
67.	Activity groups	1 2 8	
68.	Self-help groups (include AA and NA)	1 2 8	
69	Day care for children	1 2 8	
69.1	Day Treatment	1 2 8	
69.2	Case Management	1 2 8	
69.3	Acupuncture	1 2 8	
69.4	Sober living	1 2 8	

**SERVICE GIVEN CODES**

1. Not given
2. Actually given, completed
3. Actually given, not completed by administration choice
4. Actually given, not completed by client choice
5. Actually given, not completed, but not mentioned by whose choice
6. Planned or recommended, can't confirm if actually given
8. Unknown/not mentioned

**FACILITY CODES**

1. Here
2. Elsewhere
8. Unknown/not mentioned

**70. ANY MEDICATIONS PRESCRIBED DURING TREATMENT SERVICES (EXCLUDING METHADONE)**

- 1. Yes (ANSWER A)
- 2. No (GO TO Q.71)
- 8. Unknown/not mentioned (GO TO Q.71)

A. SPECIFY MEDICATIONS: \_\_\_\_\_  
 \_\_\_\_\_

**71. ANY PHYSICIAN NOTES AT ADMISSION**

- 1. Yes
- 2. No
- 8. Unknown/not mentioned

**72. PHYSICIAN NOTES AT DISCHARGE**

- 1. Yes
- 2. No
- 8. Unknown/not mentioned

**73. ANY PHYSICIAN NOTES AT ANY OTHER TIME**

- 1. Yes
- 2. No
- 8. Unknown/not mentioned

**74. METHADONE GIVEN DURING THIS TREATMENT**

- 1. Yes, more than 30 days (COMPLETE 74A-E)
- 2. Yes, 30 days or less (SKIP TO Q.75)
- 8. No (SKIP TO Q.76)

**74A. DATE METHADONE WAS FIRST GIVEN**

$\frac{\text{Q74\_MO}}{1} / \frac{\text{Q74\_DA}}{1} / \frac{\text{Q74\_YR}}{1}$

**74B. HIGHEST DAILY METHADONE DOSE RECEIVED DURING FIRST 30 DAYS**

\_\_\_\_\_ milligrams per day

**74C. HIGHEST DAILY METHADONE DOSE RECEIVED AFTER FIRST 30 DAYS**

\_\_\_\_\_ milligrams per day

**74D. DATE METHADONE WAS LAST GIVEN**

$\frac{\text{Q74\_MO}}{2} / \frac{\text{Q74\_DA}}{2} / \frac{\text{Q74\_YR}}{2}$

**74E. DOSE OF LAST METHADONE RECEIVED**

\_\_\_\_\_ milligrams per day

**75. METHADONE SUPPLY TAKEN HOME DURING THIS TREATMENT**

- 1. Yes
- 2. No
- 8. Unknown/not mentioned

**VII. DISCHARGE INFORMATION**

**76. REASON FOR DISCHARGE**

- 1. Participant deceased (ANSWER A AND B)
- 2. Completed planned treatment services (GO TO Q.77)
- 3. Did not complete treatment services; referred to another program (GO TO Q.77)
- 4. Did not complete treatment services by administration choice (SPECIFY REASON IN C)
- 5. Did not complete treatment services by participant choice (SPECIFY REASON IN C)
- 6. Did not complete treatment services, not mentioned by whose choice (SPECIFY REASON IN C)
- 7. Incarcerated (GO TO Q.77)
- 8. Other (SPECIFY REASON IN C)
- 98. Unknown/not mentioned (GO TO Q.77)

A. |\_\_|\_\_|\_|-|\_\_|\_\_|\_|-|\_\_|\_\_|\_| DATE OF DEATH  
 Mo Day Yr  
 (Q76 \_ MO) (Q76 \_ DA) (Q76 \_ YR)  
 98. Unknown/not mentioned

B. CAUSE OF DEATH: \_\_\_\_\_  
 98. Unknown/not mentioned

(GO TO SECTION VIII)

C. SPECIFY REASON		
01	Completed treatment plan/graduated from program	07 Became incarcerated
02	Kicked out of program by staff/involuntary discharge	08 Logistical problems/too difficult to get there, child care, conflict on job
03	Did not want to be there in the first place	09 Couldn't afford it
04	Treatment not successful/kept doing drugs/discouraged	10 Pressure from family and friends to end treatment
05	Transferred to another program because dissatisfied	11 Left the area
06	Changes in eligibility/program had to reduce size	12 Other (SPECIFY) _____
		98 UNKNOWN/NOT MENTIONED

77. |\_\_|\_\_|\_|-|\_\_|\_\_|\_|-|\_\_|\_\_|\_| DATE OF DISCHARGE (ENTER IN PLR, Q.19)  
 Mo Day Yr  
 (Q77 \_ MO) (Q77 \_ DA) (Q77 \_ YR)  
 98. Unknown/not mentioned

78. |\_\_|\_\_|\_|-|\_\_|\_\_|\_|-|\_\_|\_\_| DATE OF LAST TREATMENT BEFORE SAMPLE EPISODE DISCHARGE  
Mo Day Yr

(Q78 \_ MO) (Q78 \_ DA) (Q78 \_ YR)

98. Unknown/not mentioned

79. DRUG OR ALCOHOL ABUSE/MENTAL ILLNESS (DUAL DIAGNOSIS) PARTICIPANT AT DISCHARGE  
(E.G., DEPRESSION, SCHIZOPHRENIA)

1. Yes (SPECIFY) \_\_\_\_\_

2. No

8. Unknown/not mentioned

80. AFTER-CARE PLAN STATED IN RECORD

1. Yes

2. No (GO TO Q.82)

8. Unknown/not mentioned (GO TO Q.82)

81. SERVICES IN AFTER-CARE PLAN

1. Services specified (CODE LIST BELOW)

8. Unknown/not mentioned (LEAVE LIST BLANK; GO TO Q.82)

FOR EACH SERVICE LISTED, CODE 1= YES, 2= NO, 8= UNKNOWN/NOT MENTIONED

81a. |\_\_| Individual counseling

81b. |\_\_| Group counseling

81c. |\_\_| Family counseling

81d. |\_\_| Drug/alcohol education/counseling

81e. |\_\_| Employment counseling

81f. |\_\_| Job training

81g. |\_\_| Educational classes

81h. |\_\_| Activity groups

81i. |\_\_| Self-help groups (include AA and NA)

81j. |\_\_| Alumni group/reunion

81k. |\_\_| Day treatment

81l. |\_\_| Case management

81m. |\_\_| Acupuncture

81n. |\_\_| Sober living

81o. |\_\_| Detoxification - residential

81p. |\_\_| Detoxification - ambulatory

81q. |\_\_| Other (SPECIFY) \_\_\_\_\_

**82. FURTHER TREATMENT SERVICES TO WHICH PARTICIPANT WAS REFERRED AFTER DISCHARGE  
(ENTER IN PLR, Q.16)**

- 1. No treatment services
- 2. Hospital inpatient
- 3. Residential
- 4. Outpatient/methadone maintenance
- 5. Other outpatient
- 6. Other (SPECIFY) \_\_\_\_\_
- 8. Unknown/not mentioned

**VIII. CHARGE DATA FOR SAMPLE EPISODE**

**83. BILLED CHARGES FOR THIS TREATMENT SERVICE EPISODE**

- 1. Yes (SPECIFY DOLLAR AMOUNT AND CHARGE CODE IN A)
- 2. No (ANSWER B)
- 3. Other (SPECIFY) \_\_\_\_\_ (ANSWER B)
- 7. Not permitted to abstract (ANSWER B)
- 8. Unknown/not mentioned (ANSWER B)

A. \$|\_|\_|\_|\_|\_| DOLLAR AMOUNT

**CHARGE CODE:**

- 1. Full amount billed
- 2. Sliding fee amount
- 3. Reduced amount: |\_|\_|% of full bill charged
- 4. Other (SPECIFY) \_\_\_\_\_
- 7. Not permitted to abstract
- 8. Unknown/not mentioned

**B. WAS THIS A FUNDED SLOT?**

- 1. Yes (SPECIFY: Funded by? \_\_\_\_\_)
- 2. No
- 8. Unknown/not mentioned

**RECORD END TIME ON FRONT COVER. NOW COMPLETE PARTICIPANT LOCATING RECORD (PLR.)**

# CALIFORNIA OUTCOMES STUDY

Sponsored by  
**HEALTH AND WELFARE AGENCY**  
**STATE OF CALIFORNIA**

Conducted by  
**National Opinion Research Center**  
**at the University of Chicago**

## PARTICIPANT QUESTIONNAIRE

**ANNOTATED  
VERSION**

Date of Interview **DINTMO**\_\_\_/**DINTDAY**\_\_\_ 19 **DINTYR**\_\_\_\_\_

Time Started **DHRSTART**\_:\_**DMINSTAR**\_\_ am/pm **DBEGAMPM**

Time Finished **DHREND**\_:\_**DMINEND**\_\_ am/pm **DENDAMPM**

### Interview Status

Partial Complete	60	Spanish In-person (complete or partial complete)	63
In-person Complete	61	Spanish Phone (complete or partial complete)	64
Phone Complete	62		

The information entered on this form will be handled in the strictest confidence and will not be released to unauthorized personnel. The confidentiality of this information is protected by United States Code, Title 42, Sections 241(d) and 290ee-3. This research was reviewed and approved by the Committee on Protection of Human Subjects of the Health and Welfare Agency, State of California, Project No. 92-08-05.

**National Opinion Research Center**  
**at the University of Chicago**  
**1155 East 60th Street**  
**Chicago, Illinois 60637**

**MAILING ADDRESS for the CALIFORNIA OUTCOMES STUDY:**  
**301 N. Lake Avenue, Suite 330**  
**Pasadena, California 91101**  
**1-800-995-8494**



## PRE-INTERVIEW CALENDAR CONSTRUCTION AND INTERVIEW CORRECTIONS

1. TO CONSTRUCT SAMPLE EPISODE SEGMENT, REFER TO Q.18 AND Q.19 OF THE PLR. (1) ENTER THE ADMISSION AND DISCHARGE MONTHS BELOW. (2) DRAW A LINE ACROSS ROW A ON THE CALENDAR FROM ADMISSION MONTH THROUGH DISCHARGE MONTH, AND WRITE PROGRAM NAME/CITY ABOVE THE LINE. (3) DRAW A LINE THAT OUTLINES ALL THE CALENDAR MONTHS THAT COMPRISE THE SAMPLE EPISODE. (REMEMBER, THERE MAY BE MULTIPLE ADMISSIONS TO THE PROGRAM.) WRITE SEGMENT 2 ON THE CALENDAR.

A. <b>DQ1A1MO19DQ1A1YR</b> = ADMISSION MONTH Mo            Yr
B. <b>DQ1B1MO19DQ1B1YR</b> =DISCHARGE MONTH Mo            Yr

<b>CORRECTED DATES:</b>
A. <b>DQ1A2MO19DQ1A2YR</b> = ADMISSION MONTH Mo            Yr
B. <b>DQ1B2MO19DQ1B2YR</b> =DISCHARGE MONTH Mo            Yr

TO CONSTRUCT PRE-SAMPLE EPISODE SEGMENT

2. THIS SEGMENT IS FOR THE 12 MONTHS BEFORE THE SAMPLE EPISODE SEGMENT. TO CONSTRUCT THE SEGMENT: (1) ENTER THE START AND END MONTHS BELOW. (2) DRAW A LINE THROUGH ALL THE MONTHS IN SEGMENT ON ROW A AND WRITE SEGMENT 1 ABOVE THE LINE. (3) DRAW A LINE THAT OUTLINES ALL THE CALENDAR MONTHS THAT COMPRISE SEGMENT 1.

A. <b>DQ2A1MO 19 DQ2A1YR</b> = START MONTH Mo            Yr
B. <b>DQ2B1MO 19 DQ2B1YR</b> = END MONTH Mo            Yr

<b>CORRECTED DATES:</b>
A. <b>DQ2A2MO 19 DQ2A2YR</b> = START MONTH Mo            Yr
B. <b>DQ2B2MO 19 DQ2B2YR</b> = END MONTH Mo            Yr

TO CONSTRUCT POST-SAMPLE EPISODE SEGMENT

3. THIS SEGMENT IS FOR THE TIME ELAPSED SINCE THE LAST MONTH OF THE SAMPLE EPISODE. TO CONSTRUCT THE SEGMENT: (1) ENTER THE START AND END MONTHS BELOW. (2) DRAW A LINE THROUGH ALL THE MONTHS IN SEGMENT IN ROW A AND WRITE SEGMENT 3 ABOVE THE LINE. (3) DRAW A LINE THAT OUTLINES ALL THE CALENDAR MONTHS THAT COMPRISE SEGMENT 3.

A. <b>DQ3A1MO 19 DQ3A1YR</b> = START MONTH Mo            Yr
B. <b>DQ3B1MO 19 DQ3B1YR</b> = END MONTH Mo            Yr

<b>CORRECTED DATES:</b>
A. <b>DQ3A2MO 19 DQ3A2YR</b> = START MONTH Mo            Yr
B. <b>DQ3B2MO 19 DQ3B2YR</b> = END MONTH Mo            Yr

4. DOES Q.21 ON THE PLR CONTAIN ANY INCARCERATION HISTORY?

YES ..... 1  
 NO ..... 2 (SKIP TO SECTION A)

A. HOW MANY INCARCERATIONS ARE LISTED?

\_\_\_\_\_

5. ENTER PLACE AND DATES FOR EACH INCARCERATION:

A. PLACE NAME	B. ADMISSION DATE	C. RELEASE DATE
(1) _____ _____	_____ 19_____ Mo Yr	_____ 19_____ Mo Yr
(2) _____ _____	_____ 19_____ Mo Yr	_____ 19_____ Mo Yr
(3) _____ _____	_____ 19_____ Mo Yr	_____ 19_____ Mo Yr
(4) _____ _____	_____ 19_____ Mo Yr	_____ 19_____ Mo Yr

6. DID ANY INCARCERATION BEGIN OR END DURING THE 12 MONTHS BEFORE THE SAMPLE EPISODE?

YES ..... 1 (RECORD ON CALENDAR ON  
 ROW C. DRAW A LINE  
 THROUGH MONTHS OF EACH  
 TIME, AND WRITE NAME OF  
 PLACE ABOVE LINE)

NO ..... 2 (SECTION A)

## INTERVIEWER'S INTRODUCTORY SCRIPT

Hello, I am (YOUR NAME), an interviewer with the National Opinion Research Center affiliated with the University of Chicago. (SHOW ID CARD) We are conducting a public health survey. Are you (RESPONDENT'S FULL NAME)?

***PROBE AS NEEDED TO CONFIRM RESPONDENT'S IDENTITY WITHOUT SPECIFYING ANY DETAILS FROM FACE SHEET OR CALENDAR ABOUT RESPONDENT'S HISTORY OR ABOUT THE TOPIC OF THE COS. AFTER CONFIRMING THE RESPONDENT'S IDENTITY AND ASSURING PRIVACY, CONTINUE:***

NORC is a survey research center that has conducted research studies about issues and problems of concern to all Americans for more than 50 years. The University of Chicago's Institutional Review Board has oversight over all research conducted by NORC, and will not permit NORC to conduct any survey that invades the confidentiality or privacy of individuals.

I am contacting you in relation to the California Outcomes Study, a survey NORC is conducting for the Department of Alcohol and Drug Programs. For this study, under U.S. Public Health guidelines, NORC has gathered some information about your treatment for a substance abuse problem in the time period between (DATES) at (SPECIFY FACILITY NAME FROM FACESHEET).

Understanding drug treatment and discovering what works to help drug users is an important goal for the Department of Alcohol and Drug Programs. The California Outcomes Study is designed to collect information that will answer questions about the outcome of treatment for many people.

We hope you can participate in this important survey and want to assure you that, under guidelines of the U.S. Public Health Service and by U.S. law, there are important protections for your confidentiality and privacy. Information that identifies individuals in treatment is disclosed only for research purposes and is never known beyond employees actively engaged in the research. As an NORC employee, I also have signed NORC'S pledge of confidentiality that I will never disclose respondents' identity or information they give in response to survey questions.

Here is a Consent Form that explains the study in more detail. **(SHOW CONSENT FORM TO RESPONDENT AND READ IT ALOUD AS THE RESPONDENT READS IT)** I would be happy to answer any questions you might have. I would then like to conduct an interview at your convenience.

# SECTION A. CALENDAR

## TIME SEGMENT VERIFICATION

Before I start the interview, I would like to explain to you that we will be talking about your life in very specific periods or blocks of time. We are using a calendar to help you remember what was going on in your life during each time period.

To help me prepare the calendar with information that is relevant to your life, first I want to verify information that we have from our records. Then I will ask you for some other information about your life, and record that on the calendar.

A1. Before we begin the interview, first I'd like to verify some information. **(POINT TO MONTH OF ADMISSION FOR SAMPLE EPISODE ON CALENDAR)**. First, my records show that you (entered treatment at/came to) **(PROGRAM NAME)** in **(MONTH OF ADMISSION FOR SAMPLE EPISODE)**. As best as you can remember, is that right?

Yes ..... 1 **(A2)**  
No ..... 2

DK

A1a. **(POINT TO MONTH OF ADMISSION FOR SAMPLE EPISODE ON CALENDAR)**. Looking at **(MONTH OF ADMISSION FOR SAMPLE EPISODE)** on the calendar, when would you say you (entered treatment at/came to) **(PROGRAM NAME)**? **RECORD AND PROBE FOR MONTH AND YEAR. (REMEMBER THAT MAY BE MULTIPLE TIMES)**.

\_\_\_\_\_ 19 \_\_\_\_\_ = NEW MONTH OF ADMISSION FOR SAMPLE EPISODE  
Mo Yr

A2. **(POINT TO MONTH OF DISCHARGE FOR SAMPLE EPISODE ON CALENDAR.)** For the time that started **(ADMISSION MONTH)**, my records show that you (stopped going to treatment at/last went to) **(PROGRAM NAME)** in **(MONTH OF DISCHARGE FOR SAMPLE EPISODE)**. As best as you can remember, is that right?

Yes ..... 1 **(A3)**  
No ..... 2

DK

A2a. **(POINT TO MONTH OF DISCHARGE FOR SAMPLE EPISODE ON CALENDAR)**. Looking at **(MONTH OF DISCHARGE)** on the calendar, when would you say you stopped going to treatment at **(PROGRAM NAME)** (that time)? **RECORD AND PROBE FOR MONTH AND YEAR. (REMEMBER THAT THERE MAY BE MULTIPLE TIMES TO THE PROVIDER)**.

\_\_\_\_\_ 19 \_\_\_\_\_ = NEW MONTH OF DISCHARGE FROM SAMPLE EPISODE  
Mo Yr

A3. **IF AFTER PROBING AND VERIFICATION, NEW DATES ARE ESTABLISHED, COMPLETE SAMPLE EPISODE CONSTRUCTION ON SPARE CALENDAR. CONSTRUCT NEW PRE-SAMPLE EPISODE AND**

## MARITAL STATUS

A4. The first questions are about whether you've been married, widowed, separated or divorced, or if you've lived with someone in a marriage-like relationship. First, have you ever been married?

**DQA4**

Yes ..... 1 (A5)  
 No ..... 2

A4a. Have you ever lived with someone in a marriage-like relationship?

**DQA4a**

Yes ..... 1  
 No ..... 2 (A8)

A5. When did you first (get married/start living with someone in a marriage-like relationship)? Just give me the month and year.

\_\_\_\_\_ 19 \_\_\_\_\_  
 Month Year

**DA5MO DA5YR**

	(1) First	(2) Next	(3) Next	(4) Next
A6. What was the (first/next) change in your marital status after that?	<b>DA6_1</b>	<b>DA6_2</b>	<b>DA6_3</b>	<b>DA6_4</b>
NO CHANGE	1 (A8)	1 (A8)	1 (A8)	1 (A8)
Married	2	2	2	2
Living with someone in a marriage-like relationship	3	3	3	3
Widowed	4	4	4	4
Separated	5	5	5	5
Divorced	6	6	6	6
A7. In what month and year (were you married/widowed/separated/divorced) (did you begin living with someone in a marriage-like relationship) (that time)?	_____ 19 _____ Mo Yr <b>DA7_1MO</b> <b>DA7_1YR</b> (NEXT COL)	_____ 19 _____ Mo Yr <b>DA7_2MO</b> <b>DA7_2YR</b> (NEXT COL)	_____ 19 _____ Mo Yr <b>DA7_3MO</b> <b>DA7_3YR</b> (NEXT COL)	_____ 19 _____ Mo Yr <b>DA7_4MO</b> <b>DA7_4YR</b> (NEXT COL)

(5) Next	(6) Next	(7) Next	(8) Next	(9) Next	(10) Next	
<b>DA6_5</b> 1 (A8)	<b>DA6_6</b> 1 (A8)	<b>DA6_7</b> 1 (A8)	<b>DA6_8</b> 1 (A8)	<b>DA6_9</b> 1 (A8)	<b>DA6_10</b> 1 (A8)	
2	2	2	2	2	2	Married
3	3	3	3	3	3	Live With
4	4	4	4	4	4	Widowed
5	5	5	5	5	5	Separated
6	6	6	6	6	6	Divorced
____ 19 ____ Mo Yr <b>DA7_5MO</b> <b>DA7_5YR</b> (NEXT COL)	____ 19 ____ Mo Yr <b>DA7_6MO</b> <b>DA7_6YR</b> (NEXT COL)	____ 19 ____ Mo Yr <b>DA7_7MO</b> <b>DA7_7YR</b> (NEXT COL)	____ 19 ____ Mo Yr <b>DA7_8MO</b> <b>DA7_8YR</b> (NEXT COL)	____ 19 ____ Mo Yr <b>DA7_9MO</b> <b>DA7_9YR</b> (NEXT COL)	____ 19 ____ Mo Yr <b>DA7_10MO</b> <b>DA7_10YR</b> (A8)	

**A8. DRAW A LINE ACROSS ROW B ON CALENDAR. ENTER MARITAL STATUS AND STATUS CHANGES (M, L, W, S, D) ON ROW B OF CALENDAR IN APPROPRIATE MONTH. FOR STATUS/CHANGES PRIOR TO CALENDAR PERIOD, ENTER LAST ONE IN FIRST MONTH OF ROW B.**

**A9. The next questions are about being under supervision by the court, the sheriff, or the department of corrections, that is, prison, jail, probation, detention, or parole. CHECK ROW C ON THE CALENDAR FOR INCARCERATIONS DURING SEGMENT 1. IF ANY BEGAN OR ENDED DURING THAT PERIOD, ADD: According to my records, you were in [PLACE(S)] at some time during (MONTHS). I have some questions about that and about other court supervision.**

A10. During (START MONTH SEGMENT 1), were you on probation, detention, parole, (in prison), or in jail including California Youth Authority Supervision or Facility for more than one day?  
 Yes ..... 1 DA\_10  
 No ..... 2 (A12)

A10a. What kind of supervision (by the court, the sheriff, or the department of corrections), were you under during (MONTHS)? **RECORD VERBATIM AND CODE.**

.....  
 INCARCERATION ..... 1 DA10a  
 PAROLE ..... 2  
 PROBATION ..... 3  
 ELECTRONIC SURVEILLANCE ..... 5  
 OTHER SUPERVISION ..... 6

A11. When did (STATUS) begin? Just give me the month and year.

\_\_\_\_\_ 19 \_\_\_\_\_ DA11\_MO DA11\_YR

	(1) First	(2) Next	(3) Next	(4) Next
A12. Did your situation change after that? <b>PROBE FOR CHANGES OF MORE THAN 1 DAY.</b>	Yes. 1 DA12_1 No ... 2 (A15)	Yes. 1 DA12_2 No .. 2 (A15)	Yes. 1 DA12_3 No .. 2 (A15)	Yes. 1 DA12_4 No ... 2 (A15)
A13. What was that change? (READ CATEGORIES IF NEEDED).	DA13_1	DA13_2	DA13_3	DA13_4
NO SUPERVISION	1	1	1	1
Incarceration	2	2	2	2
Parole	3	3	3	3
Probation	4	4	4	4
Electronic Surveillance	6	6	6	6
Other supervision	7	7	7	7
A14. In what month and year did that (STATUS) begin?	_____ 19 _____ Mo Yr DA14_MO1 DA14_YR1 (NEXT COL)	_____ 19 _____ Mo Yr DA14_MO2 DA14_YR2 (NEXT COL)	_____ 19 _____ Mo Yr DA14_MO3 DA14_YR3 (NEXT COL)	_____ 19 _____ Mo Yr DA14_MO4 DA14_YR4 (NEXT COL)

(5) Next	(6) Next	(7) Next	(8) Next	(9) Next	(10) Next
Yes. 1 <b>DA12_5</b> No . . 2 (A15)	Yes. 1 <b>DA12_6</b> No . . 2 (A15)	Yes. 1 <b>DA12_7</b> No . . 2 (A15)	Yes. 1 <b>DA12_8</b> No . . 2 (A15)	Yes. 1 <b>DA12_9</b> No . . 2 (A15)	Yes. 1 <b>DA12_10</b> No . . 2 (A15)
<b>DA13_5</b>	<b>DA13_6</b>	<b>DA13_7</b>	<b>DA13_8</b>	<b>DA13_9</b>	<b>DA13_10</b>
1	1	1	1	1	1
2	2	2	2	2	2
3	3	3	3	3	3
4	4	4	4	4	4
6	6	6	6	6	6
7	7	7	7	7	7
___ 19 ___ Mo Yr <b>DA14_MO5</b> <b>DA14_YR5</b> (NEXT COL)	___ 19 ___ Mo Yr <b>DA14_MO6</b> <b>DA14_YR6</b> (NEXT COL)	___ 19 ___ Mo Yr <b>DA14_MO7</b> <b>DA14_YR7</b> (NEXT COL)	___ 19 ___ Mo Yr <b>DA14_MO8</b> <b>DA14_YR8</b> (NEXT COL)	___ 19 ___ Mo Yr <b>DA14_MO9</b> <b>DA14_YR9</b> (NEXT COL)	___ 19 ___ Mo Yr <b>DA14MO10</b> <b>DA14YR10</b> (A15)

**NO SUPERVISION**  
**INCARCERATION**  
**PAROLE**  
**PROBATION**  
**ELECTRONIC SURVEILLANCE**  
**OTHER**

**A15. DRAW A LINE ACROSS ROW C ON CALENDAR FOR CORRECTIONAL STATUS. ENTER STATUS CHANGES (NS, I, P, PR, ES, O) ON ROW C OF CALENDAR IN APPROPRIATE MONTH.**

## **INSTRUCTIONS FOR USING THE CALENDAR DURING THE INTERVIEW**

### **SHOW R THE CALENDAR, AND SAY:**

**The outlined portions are for three time periods: The year before you started treatment at (PROGRAM), the treatment period, and the time since you left treatment through the present month. Row A shows the three time periods. Row B shows your marital status. Row C shows your legal status. Row D is there for us to use if other key events from your life are relevant, or help you recall what was going on in your life during a particular period. Before we talk about the three time periods, I want to ask you some background questions about your life.**

## SECTION B. BACKGROUND

- B1. CODE WITHOUT ASKING. VERIFY, IF NEEDED, BY ASKING:**  
 I am required to ask--are you male or female"?
- DB1**
- Male ..... 1  
 Female ..... 2
- B2. What is your date of birth? RECORD MONTH, DAY AND YEAR.**
- \_\_\_\_\_/\_\_\_\_\_/19\_\_\_\_\_  
 MO DAY YR
- DB2MO DB2YR**
- B3. So you are (AGE COMPUTED FROM B2) years old?**
- DB3**
- Yes ..... 1  
 No ..... 2 (REASK B2)
- B4. Were you born in the United States? IF R BORN ON A U.S. MILITARY BASE/LOCATION, CODE "1."**
- DB4**
- Yes ..... 1 (B5)  
 No ..... 2
- B4a. Which country were you born in? RECORD VERBATIM.**
- DB4a**
- Canada ..... 1  
 Mexico ..... 2  
 Other Latin American country ..... 3  
 Asian/Pacific Island/  
 Pacific Rim ..... 4  
 European country ..... 5  
 African country ..... 6
- B5. Was your natural mother born in the United States?**
- DB5**
- Yes ..... 1  
 No ..... 2 DK
- B6. Was your natural father born in the United States?**
- DB6**
- Yes ..... 1  
 No ..... 2 DK
- B7. Are you of Mexican, Puerto Rican, Cuban or any other Spanish-speaking background?**
- DB7**
- Yes ..... 1  
 No ..... 2 DK

B8. What best describes you? Are you... **READ CATEGORIES AND CODE ONE.**

**DB8**

- Alaskan Native, ..... 1
- Native American, ..... 2
- Asian or Pacific Islander, ..... 3
- Black or African-American, or ..... 4
- White? ..... 5
- MIXTURE ..... 6
- OTHER ..... 7

B9. (As you were growing up, did/Do) you speak any language besides English with the people you (lived/live) with?

**DB9**

- Yes ..... 1
- No ..... 2 **(B10)**

B9a. What language (was/is) that? **CODE ONE.**

**DB9a**

- SPANISH ONLY ..... 1
- OTHER LANGUAGE(S) ONLY ..... 2
- BOTH SPANISH AND OTHER LANGUAGE(S) ..... 3

B10. Would you say your ability to read (English) is... **READ CATEGORIES AND CODE ONE.**

**DB10**

- Excellent, ..... 1
- Good, ..... 2
- Fair, or ..... 3
- Poor? ..... 4

B11. Are you now in school, or receiving any job or skills training? (This includes vocational or technical schools, colleges, or working for your high school diploma).

**DB11**

- Yes ..... 1
- No ..... 2
- NEVER ATTENDED SCHOOL ..... 3 **(B15)**

B12. Do you have a high school diploma or a GED? (**CODE ONE**)

**DB12**

- Yes, diploma ..... 1
- Yes, GED ..... 2
- No ..... 3 **(B13)**
- NEVER ATTENDED SCHOOL ..... 4 **(B15)**

B12a. In what year did you receive your (high school diploma/GED)?

19 \_\_\_\_\_

**DB12a**

B13. What is the highest grade or year of school you ever attended, even if you did not complete that grade? **CODE ONE ONLY.**

**DB13**

- 1st Grade ..... 01
- 2nd Grade ..... 02
- 3rd Grade ..... 03
- 4th Grade ..... 04
- 5th Grade ..... 05
- 6th Grade ..... 06
- 7th Grade ..... 07
- 8th Grade ..... 08
- 9th Grade ..... 09
- 10th Grade ..... 10
- 11th Grade ..... 11
- 12th Grade ..... 12
- 1 Year College/Technical School ..... 13
- 2 Years College/Technical School ..... 14
- 3 Years College/Technical School ..... 15
- 4 Years College/Technical School ..... 16
- Graduate/Professional School ..... 17
- NEVER ATTENDED SCHOOL ..... 18 **(B15)**

B14. (Were you ever/Have you ever been) expelled or suspended from school for more than a day?

**DB14**

- Yes ..... 1
- No ..... 2 **(B15)**

B14a. Were you expelled or suspended from school more than one time?

**DB14a**

- Yes ..... 1
- No ..... 2

B15. Have you ever belonged to a street gang?

**DB15**

- Yes ..... 1
- No ..... 2



C4.						
Before (START DATE SEGMENT 1), in the month you used (DRUG) the most, about how many days did you use (DRUG)? CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.						
	1 day	2-5 days	6-10 days	11-20 days	More than 20 days	DK
a.	1	2	3	4	5	DK DC4_a
b.	1	2	3	4	5	DK DC4_b
c.	1	2	3	4	5	DK DC4_c
d.	1	2	3	4	5	DK DC4_d
e.	1	2	3	4	5	DK DC4_e
f.	1	2	3	4	5	DK DC4_f
g.	1	2	3	4	5	DK DC4_g
h.	1	2	3	4	5	DK DC4_h
i.	1	2	3	4	5	DK DC4_i
j.	1	2	3	4	5	DK DC4_j
k.	1	2	3	4	5	DK DC4_k
l.	1	2	3	4	5	DK DC4_l

C5. Before (START MONTH SEGMENT 1), what was the main drug or drug combination, including alcohol, that you used? USE SHOWCARD: REVIEW CATEGORIES CODED AT C1 AS NEEDED. CODE ALL THAT APPLY.

Inhalants ..... 1 DC5m1

Marijuana/Hashish . . . . .	2	<b>DC5m2</b>
Crack . . . . .	3	<b>DC5m3</b>
Cocaine Powder . . . . .	4	<b>DC5m4</b>
PCP or angel dust . . . . .	5	<b>DC5m5</b>
Hallucinogens or Psychedelics, LSD, etc . . . . .	6	<b>DC5m6</b>
Heroin . . . . .	7	<b>DC5m7</b>
Illegal methadone . . . . .	8	<b>DC5m8</b>
Other narcotics . . . . .	9	<b>DC5m9</b>
Methamphetamines . . . . .	10	<b>DC5m10</b>
Downers . . . . .	11	<b>DC5m11</b>
Other drugs . . . . .	12	<b>DC5m12</b>
Alcohol . . . . .	13	<b>DC5m13</b>
Ritalin or Preludin . . . . .	14	<b>DC5m14</b>

C6. The first time you tried (**DRUGS CODED AT C5**), were you with . . . **READ AND CODE EACH CHOICE. IF a-g ARE CODED "2", ASK: Were you with anyone the first time you tried (DRUGS CODED AT C5)? IF YES, REASK CATEGORIES.**

	<u>Yes</u>	<u>No</u>	
a. Friends, not including a boyfriend or a girlfriend? . . . . .	1	2	<b>DC6_a</b>
b. Boyfriend or girlfriend? . . . . .	1	2	<b>DC6_b</b>
c. Spouse or partner? . . . . .	1	2	<b>DC6_c</b>
d. Brothers and/or sisters? . . . . .	1	2	<b>DC6_d</b>
e. Parents? . . . . .	1	2	<b>DC6_e</b>
f. Other family members? . . . . .	1	2	<b>DC6_f</b>
g. Someone else? . . . . .	1	2	<b>DC6_g</b>
h. NO ONE . . . . .	1		<b>DC6_h</b>

- C7. Before (**START MONTH SEGMENT 1**), did you ever go to the hospital because of a drug overdose? **DC7**
- Yes ..... 1
- No ..... 2 DK
- C8. Before (**START MONTH SEGMENT 1**) did you ever go to anyone for professional help or treatment for using drugs? **DC8**
- Yes ..... 1
- No ..... 2 (C9)
- C8a. How many times did you go for professional help before (**START MONTH SEGMENT 1**)? **ENTER NUMBER. PROBE FOR ESTIMATE.**
- \_\_\_\_\_ Number of times **DC8\_a**
- C9. Before (**START MONTH SEGMENT 1**), did you ever, even one time, use a needle to inject drugs to get high or for other non-medical effects? **DC9**
- Yes ..... 1 (C10)
- No ..... 2
- C9a. Did someone else ever use a needle to inject you with drugs for you to get high or for other non-medical effects before (**START MONTH SEGMENT**)? **DC9\_a**
- Yes ..... 1
- No ..... 2 DK

C10. Now I would like to ask about your use of alcoholic beverages. By alcoholic beverages I mean beer, malt liquors, wine, wine coolers and hard liquor, such as vodka and mixed drinks. Before **(START MONTH SEGMENT 1)**, did you ever have a drink of alcohol? By a drink, I mean either a can of beer, a glass of wine or a wine cooler, a shot of hard liquor, or a single mixed drink.

Yes ..... 1 **DC10**  
 No ..... 2 **(SECTION D)**

C10a. Before **(START MONTH SEGMENT 1)**, think about the month you were drinking the most. How many days did you drink that month? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

One day ..... 2 **DC10\_a**  
 2-5 days ..... 3  
 6-10 days ..... 4  
 11-20 days ..... 5  
 More than 20 days ..... 6

**DK (C14)**

	(1) Beer/Malt Liquor	(2) Wine/Wine Coolers	(3) Liquor
C11. Still think about the month you were drinking the most. On a typical drinking day, did you drink any <b>(TYPE)</b> ?	Yes ..... 1 <b>DC11_1</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>DC11_2</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>DC11_3</b> No ..... 2 (C14)
C12. On a typical drinking day, about how much <b>(TYPE)</b> did you <u>usually</u> drink? <b>ENTER AMOUNT AND CODE.</b>	<u>DC12_1</u> amount <b>C12a. CODE:</b> <b>DC12_a1</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10 (NEXT TYPE) Other (SPECIFY) ... 11  <u>RECODED</u> (NEXT TYPE)	<u>DC12_2</u> amount <b>C12a. CODE:</b> <b>DC12_a2</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10 (NEXT TYPE) Other (SPECIFY) ... 11  <u>RECODED</u> (NEXT TYPE)	<u>DC12_3</u> amount <b>C12a. CODE:</b> <b>DC12_a3</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10  (C14)
C13. What size (bottle/can) was that (in ounces)? <b>RECORD VERBATIM.</b>	<u>MC13_1VB</u>	<u>MC13_2VB</u>	

C14. Before (START MONTH SEGMENT 1), did you ever go to the hospital because of your drinking?

Yes ..... 1 **DC14**  
No ..... 2

C15. Before, (START MONTH SEGMENT 1), did you ever go to anyone for professional help for your drinking?

**DC15**  
Yes ..... 1  
No ..... 2 (C16)

C15a. How many times did you go for professional help for your drinking? **RECORD NUMBER.**

**DC15a**  
\_\_\_\_\_ times

C16. Before (START MONTH SEGMENT 1), did you ever attend any . . .

	<u>Yes</u>	<u>No</u>	
a. Alcoholics Anonymous meetings . . . . .	1 . . . . .	2	<b>DC16a</b>
b. Narcotics Anonymous meetings . . . . .	1 . . . . .	2	<b>DC16b</b>
c. Cocaine Anonymous meetings . . . . .	1 . . . . .	2	<b>DC16c</b>

**C17. IS ANY ITEM CODED "1" AT C16?**

**DC17**  
YES ..... 1  
NO ..... 2 (SECTION D)

C17a. Before (START MONTH SEGMENT 1), did you attend five or more of any of these meetings?

**DC17a**  
Yes ..... 1  
No ..... 2

## SECTION D. MENTAL AND PHYSICAL HEALTH HISTORY

Now I would like to ask you a few questions about any problems you ever had with emotions, nerves, or your mental health during your life before **(START MONTH SEGMENT 1)**.

D1. Before **(START MONTH/YEAR OF SEGMENT 1)**, did you ever have at least 2 weeks when you felt very sad, blue or depressed, and you lost interest or pleasure in things you usually cared about? **DD1**

Yes ..... 1

No ..... 2 **(D2)**

D1a. Were all, some, or none of these times a direct result of your alcohol/drug use? **DD1a**

All ..... 1 **(D2)**

Some ..... 2

None ..... 3

D1b. How old were you when you first felt like this when it was not the result of alcohol or drugs? **DD1b**

\_\_\_\_\_ years old

D2. Before **(START MONTH SEGMENT 1)**, did you ever attempt suicide? **DD2**

Yes ..... 1

No ..... 2 **(D3)**

D2a. How many times did you attempt suicide before **(START MONTH SEGMENT 1)**? **DD2a**

\_\_\_\_\_ times

D2b. Were all, some, or none of those attempts the result of the effects of drugs or alcohol? **DD2b**

All ..... 1

Some ..... 2

None ..... 3

D3. Before (**START MONTH SEGMENT 1**), did you ever have trouble controlling your temper or violent behavior? **DD3**

- Yes ..... 1
- No ..... 2 (**D4**)

D3a. Were all, some, or none of the times you had trouble controlling your temper or violent behavior the result of alcohol or drug use? **DD3a**

- All ..... 1
- Some ..... 2
- None ..... 3

D4. Before (**START MONTH SEGMENT 1**), did you have hallucinations or delusions, that is, did you see or hear things that no one else could see or hear or did you think that someone else controlled your thoughts? **DD4**

- Yes ..... 1
- No ..... 2 (**D5**)

D4a. Were all, some, or none of these hallucinations a direct result of your alcohol or drug use? **DD4a**

- All ..... 1
- Some ..... 2
- None ..... 3

D5. Before (**START MONTH SEGMENT 1**), did you ever stay overnight in a hospital or clinic for treatment of your emotions, nerves, or mental health that wasn't the result of drugs or alcohol use? **DD5**

- Yes ..... 1
- No ..... 2 (**D7**)

D5a. How old were you the first time you stayed overnight in a hospital or clinic somewhere for treatment of these problems? **DD5a**

\_\_\_\_\_ years old

D6. Before (**START MONTH SEGMENT 1**), how many times did you ever stay overnight in a hospital or clinic for treatment of your emotions, nerves, or your mental health? **DD6**

\_\_\_\_\_ Number of Times

D7. Next, I want to ask you some questions about some physical health problems you may have had. I'm going to read a list of illnesses or conditions that can cause a person pain, limit a person's activities, or cause other health problems. Before (**START MONTH SEGMENT 1**), did you have any problems with . . .

	<u>Yes</u>	<u>No</u>	<u>DK</u>	
a. a serious breathing condition, such as bronchitis or tuberculosis? . . . . .	1	2	DK	<b>DD7a</b>
b. a serious heart or blood condition, including high blood pressure, or anemia? . . . . .	1	2	DK	<b>DD7b</b>
c. hepatitis or yellow jaundice? . . . . .	1	2	DK	<b>DD7c</b>
d. a serious internal condition, such as stomach ulcers, sugar diabetes, or kidney or liver problems? . . . . .	1	2	DK	<b>DD7d</b>
e. a serious bone or muscle condition, such as being paralyzed, bad arthritis, limping, or bursitis? . . . . .	1	2	DK	<b>DD7e</b>
f. a serious nerve condition, such as convulsions, epilepsy, or migraine headaches? Please do not include any mental health problems . . . . .	1	2	DK	<b>DD7f</b>
g. <b>FEMALE R ONLY:</b> Miscarriage, Toxemia, bad Pap smear, or other serious female condition? . . . . .	1	2	DK	<b>DD7g</b>
h. syphilis, gonorrhea, or genital herpes, or any other sexually transmitted disease other than AIDS? . . . . .	1	2	DK	<b>DD7h</b>

D8. Before (**START MONTH SEGMENT 1**), did you ever have a blood test for the AIDS virus? **DD8**  
 Yes . . . . . 1  
 No . . . . . 2 (**D10**)

D8a. Do you know the results of that (last) test? **DD8a**  
 Yes . . . . . 1  
 No . . . . . 2

D9. Before (**START MONTH SEGMENT 1**), did a doctor or other health professional tell you that you were  
 HIV positive or had the AIDS virus? **DD9**  
 Yes . . . . . 1 (**RECORD "A" IN ROW D OF  
 THE CALENDAR, IN THE  
 MONTH JUST BEFORE  
 SEGMENT 1 STARTS. THEN  
 ASK D10.**)  
 No . . . . . 2

D10. Before (**START MONTH SEGMENT 1**), were you ever hospitalized for physical health problems? Do not  
 include a normal pregnancy, treatment for alcohol or drug use, or detox. **DD10**  
 Yes . . . . . 1  
 No . . . . . 2 (**SECTION E**)

D10a. How many times? **DD10a**  
 \_\_\_\_\_ Number of Times                      DK      RF

## SECTION E. ILLEGAL ACTIVITIES HISTORY

Now I would like to ask about any involvement with the police, courts, and illegal activities. Let me remind you that this information will remain confidential and you can refuse to answer any questions.

E1. Before (**START MONTH SEGMENT 1**), were you ever arrested? **DE1**

Yes ..... 1

No ..... 2 **(E2)**

E1a. About how many times were you arrested before (**START MONTH SEGMENT 1**)? **DE1a**

\_\_\_\_\_ Number of Times

E1b. How old were you the first time you were arrested? **DE1b**

\_\_\_\_\_ Years old

E1c. What was/were the main charge(s) you were arrested for? **RECORD VERBATIM AND CODE ALL THAT APPLY ON CODE LIST.**

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<p><b><u>DRUG OFFENSES</u></b></p> <p>Drug Possession ..... 1 <b>DE1cm1</b></p> <p>Drug Sale or manufacturing ..... 2 <b>DE1cm2</b></p> <p><b><u>VIOLENT OFFENSES</u></b></p> <p>Armed robbery, Robbery by force ..... 3 <b>DE1cm3</b></p> <p>Aggravated assault, Assault with the intent to kill, Other serious intent ..... 4 <b>DE1cm4</b></p> <p>Forcible rape, Statutory Rape, Sexual assault ..... 5 <b>DE1cm5</b></p> <p>Murder, Manslaughter, Homicide ..... 6 <b>DE1cm6</b></p> <p>Other violent offenses (Arson, Damage to or destruction of property, Vandalism, Simple assault, Fighting) .... 7 <b>DE1cm7</b></p>	<p><b><u>PROPERTY OFFENSES</u></b></p> <p>Forgery, Passing bad checks, Credit card fraud ..... 8 <b>DE1cm8</b></p> <p>Motor Vehicle theft ..... 9 <b>DE1cm9</b></p> <p>Breaking and entering, Burglary ..... 10 <b>DE1cm10</b></p> <p>Pimping, procuring ..... 11 <b>DE1cm11</b></p> <p>Other theft (Larceny, Pick pocketing, Purse snatching, Mugging, Receiving, Possession of stolen goods, Shoplifting) ..... 12 <b>DE1cm12</b></p> <p><b><u>PUBLIC ORDER OFFENSES</u></b></p> <p>Driving while intoxicated (DWI), Driving under the influence (DUI) .... 13 <b>DE1cm13</b></p> <p>Prostitution, solicitation ..... 14 <b>DE1cm14</b></p> <p>Violation of parole ..... 15 <b>DE1cm15</b></p> <p>Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway) ..... 16 <b>DE1cm16</b></p> <p>CANNOT CODE CHARGE ..... 17 <b>DE1cm17</b></p>
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E2. Before ( <b>START MONTH SEGMENT 1</b> ), did you ever . . . ( <b>IF R WAS 18 YEARS OR OLDER AT START MONTH OF SEGMENT 1, ADD:</b> Include any involvement you had <u>before and after</u> you were 18 years old.		E3. About how old were you when you first did this?
b. Steal a vehicle (car, truck, van or motorcycle)? <b>DE2b</b>	Yes . . . . 1 No . . . . . 2 RF	
c. Sell drugs or help someone else sell drugs, including cutting, weighing, packaging or making drugs? <b>DE2c</b>	Yes . . . . 1 ( <b>E3</b> ) No . . . . . 2 RF	<b>DE3c</b> _____ years old
d. Have sex for money or drugs (prostitution)? <b>DE2d</b>	Yes . . . . 1 No . . . . . 2 RF	
f. Pass bad checks, forge checks, or use a stolen credit card? <b>DE2f</b>	Yes . . . . 1 No . . . . . 2 RF	
g. Break into a house, a business, or a vehicle to take someone else's money or property? <b>DE2g</b>	Yes . . . . 1 ( <b>E3</b> ) No . . . . . 2 RF	<b>DE3g</b> _____ years old
h. Use a weapon or physical force against someone to steal money or property from them? <b>DE2h</b>	Yes . . . . 1 ( <b>E3</b> ) No . . . . . 2 RF	<b>DE3h</b> _____ years old
i. Set fire to a house, building, or vehicle? <b>DE2i</b>	Yes . . . . 1 No . . . . . 2 RF	
j. Threaten or attack someone with a weapon? <b>DE2j</b>	Yes . . . . 1 ( <b>E3</b> ) No . . . . . 2 RF	<b>DE3j</b> _____ years old
k. Force someone to have sex or to do any kind of sex act against their will? <b>DE2k</b>	Yes . . . . 1 No . . . . . 2 RF	
l. Kill someone, other than by accident? <b>DE2l</b>	Yes . . . . 1 No . . . . . 2 RF	

<p>n. Do anything else against the law that I didn't ask about? (<b>SPECIFY</b>)</p> <p><b>CODE ONE</b> <span style="float: right;"><b>DE2n</b></span></p> <p>1= Drug Possession</p> <p>7= Other violent offenses (Arson, Damage to or destruction of property, Vandalism, Simple assault, Fighting)</p> <p>11= Pimping, procuring</p> <p>12= Other theft (Larceny, Pick pocketing, Purse snatching, Mugging, Receiving, Possession of stolen goods, Shoplifting)</p> <p>13= Driving while intoxicated (DWI, Driving under the influence (DUI))</p> <p>15= Violation of parole</p> <p>16= Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway)</p> <p>17= Cannot Code Charge</p> <p style="text-align: right;"><b>DE2nCODE</b></p>	<p>Yes . . . . . 1</p> <p>No . . . . . 2      RF</p>
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E4. Did you ever support yourself mainly from illegal activity (hustling, dealing, fraud, etc.) for a least one year before (**START MONTH SEGMENT 1**)?

**DE4**

Yes . . . . . 1

No . . . . . 2      RF    DK

E5. The next questions are about any times you may have been attacked with a weapon or seriously hit or beaten. Before (**START MONTH SEGMENT 1**) were you ever attacked with a weapon such as a knife or a gun?

**DE5**

Yes . . . . . 1

No . . . . . 2      RF    DK

E6. Before (**START MONTH SEGMENT 1**), were you ever hit or beaten so seriously that you were badly bruised, had to see a doctor, or had to stay in bed for one day or more?

**DE6**

Yes . . . . . 1

No . . . . . 2      RF    DK

## SECTION F. LIVING ARRANGEMENTS

Next, I would like to ask you about your past living arrangements.

- F1. Before (**START MONTH OF SEGMENT 1**), how old were you when you last lived with your mother, including your natural mother, stepmother, foster mother, or adoptive mother? **RECORD "0" IF NEVER LIVED WITH MOTHER.**

**DF1**

\_\_\_\_\_ years old

- F2. Before (**START MONTH OF SEGMENT 1**), how old were you when you last lived with your father, including your natural father, stepfather, foster father, or adoptive father? **RECORD "0" IF NEVER LIVED WITH FATHER.**

**DF2**

\_\_\_\_\_ years old

- F3. (Before you were 18 years old, did/Have) the courts or a social service agency ever (arrange/arranged) a place for you to live?

**DF3**

Yes ..... 1

No ..... 2

- F4. (Before you were 18 years old, did/Have) you ever run away from home or the place you usually (lived/live)?

**DF4**

Yes ..... 1

No ..... 2 (F5)

- F4a. Altogether, how many times did you run away?

**DF4a**

\_\_\_\_\_ Times

- F5. (At any time before you were 18 years old, were you/Have you ever been) asked to leave home by a parent or guardian?

**DF5**

Yes ..... 1

No ..... 2

**IF RESPONDENT 15 OR YOUNGER, GO TO SECTION H.**

- F6. Altogether, how many natural children did you have before (**START MONTH OF SEGMENT 1**)?

**DF6**

\_\_\_\_\_ Number of children

- F7. At anytime before (**START MONTH OF SEGMENT 1**) did you lose custody (of any of your natural children under age 18, or) of any (other) children you were raising, including adopted children and foster children? By custody, I mean being legally in charge of a child.

**DF7**

Yes ..... 1

No ..... 2

## SECTION G. EMPLOYMENT HISTORY

G1. The next questions are about your employment. Before (**START MONTH SEGMENT 1**), were you ever employed full-time, that is, did you ever work 35 hours or more a week? (Do not count any job that involved illegal activity.)

**DG1**

Yes ..... 1  
 No ..... 2 (**G5**)

G2. Before (**START MONTH SEGMENT 1**), what was the longest time you had any one job where you worked 35 hours a week or more?

**DG2**

Less than one year ..... 1  
 1-2 years ..... 2  
 More than 2 years but less than 5 years ..... 3  
 Five years or more ..... 4

G3. What kind of work did you do at the full-time job that you had the longest? That is, what was your job title or what was your job called? **RECORD VERBATIM AND ENTER CODE.**

**DG3**

---

- 1 Clerical Worker; (Ex. Bankteller, receptionist, word processor, office worker)
- 2 Sales Worker; (Ex. Salesclerk, cashier, gas station attendant, telephone or door-to-door sales)
- 3 Service Worker; (Ex. Janitor, cook, waitress/waiter, nursing aide, police officer, farm worker)
- 4 Private HH Worker; (Ex. Maid, housekeeper, childcare worker, private HH cook, gardener)
- 5 Skilled Worker or Craftsmen; (Ex. Carpenter, electrician, machinist, mechanic)
- 6 Laborer; (Ex. Construction worker, maintenance worker)
- 7 Operator or Machine Operator; (Ex. Assembler, machine or textile operator)
- 8 Transportation Equipment Operator; (Ex. Cab, truck, or bus driver, conductor, fork lift operator)
- 9 Farm Laborer; (Ex. Farm worker, picker, seasonal farm worker)
- 10 Farmer or Farm Manager
- 11 Manager/Administrator; (Ex. Officer manager, inspectors, bank or store administrator)
- 12 Lay Counselor; (Ex. drug counselor without professional degree, "peer" counselor)
- 13 Professional/Technical; (Ex. nurse, clinical social worker, teacher, artist, lawyer)
- 14 Other
- 15 UNABLE TO CODE
- 16 Military

G4. Before taxes, what was your highest wage, salary, or rate of pay at that full-time job? **RECORD DOLLARS AND CENTS AND CODE.**

**DG4**

\$ \_\_\_\_\_.

G4a. CODE:	Per hour ..... 1		
	Every week ..... 2		
	Every two weeks ..... 3		<b>DG4a</b>
	Per month ..... 4		
	Per year ..... 5		
	OTHER (SPECIFY) _____ <b>RECODED</b> ..... 6	RF	DK
	Day ..... 7		
	Unit/Product ..... 8		
	Unit/Service ..... 9		
	Room & Board ..... 10		

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- G5. Before (**START MONTH SEGMENT 1**), did you ever have a part-time job? **DG5**
- Yes ..... 1
- No ..... 2 **(G8)**

- G5a. Before (**START MONTH SEGMENT 1**), what was the longest time you had any one part-time job? **DG5a**
- Less than one year ..... 1
- 1-2 years ..... 2
- More than 2 years but less than 5 years ..... 3
- Five years or more ..... 4

- G6. What kind of work did you do at the part-time job that you had the longest? That is, what was your job title or what was your job called? **RECORD VERBATIM AND ENTER CODE FROM CODE LIST.** **DG6**

\_\_\_\_\_

\_\_\_\_\_

- G7. Before taxes, what was your highest wage, salary, or rate of pay at that part-time job? **RECORD DOLLARS AND CENTS AND CODE.** **DG7**
- \$ \_\_\_\_\_.

- G7a. CODE:
- Per hour ..... 1
- Every week ..... 2
- Every two weeks ..... 3
- Per month ..... 4 **DG7a**
- Per year ..... 5
- OTHER (SPECIFY) \_\_\_\_\_ **RECODED** \_\_\_\_\_ 6 RF DK
- Day ..... 7
- Unit/Product ..... 8
- Unit/Service ..... 9
- Room & Board ..... 10

- G8. Before (**START MONTH OF SEGMENT 1**), what is the longest period of time that you were unemployed, not counting years when you were in school full-time (or in jail)? **DG8**
- Less than one year ..... 1
- 1-2 years ..... 2
- More than 2 years but less than 5 years ..... 3
- Five years or more ..... 4
- NEVER WORKED ..... 5

## SECTION H. SEGMENT 1 (PRE-SAMPLE EPISODE SEGMENT)

Next, I would like to ask what was going on in your life during the year before you went to (PROGRAM) in (MONTH). **GO TO FIRST SEGMENT OUTLINED IN CALENDAR; THE 12 MONTH PERIOD PRIOR TO THE SAMPLED EPISODE SEGMENT.** You may find it helpful to refer to the calendar when answering the questions. This period of time is from \_\_\_\_\_ through \_\_\_\_\_.

**H1a. CHECK ROW C OF THE CALENDAR. WERE THERE ANY INCARCERATIONS DURING THE SEGMENT 1 PERIOD?** **DH1a**

YES ..... 1  
 NO ..... 2 (H6)

**H1b. HOW MANY INCARCERATIONS ARE ON THE CALENDAR FOR SEGMENT 1?**

**DH1b**

\_\_\_\_\_ Number of Incarceration

**ASK H2-H5 FOR EACH INCARCERATION. USE CODE LIST BELOW TO CODE H3.**

**DRUG OFFENSES**

Drug Possession ..... 1  
 Drug Sale or manufacturing ..... 2

**VIOLENT OFFENSES**

Armed robbery, Robbery by force ..... 3  
 Aggravated assault,  
 Assault with the intent to kill,  
 Other serious intent ..... 4  
 Forcible rape, Statutory Rape, Sexual assault ..... 5  
 Murder, Manslaughter, Homicide ..... 6  
 Other violent offenses (Arson, Damage  
 to or destruction of property,  
 Vandalism, Simple assault, Fighting) ..... 7

**PROPERTY OFFENSES**

Forgery, Passing bad checks, Credit card fraud ..... 8  
 Motor Vehicle theft ..... 9  
 Breaking and entering, Burglary ..... 10  
 Pimping, procuring ..... 11  
 Other theft (Larceny, Pick pocketing,  
 Purse snatching, Mugging, Receiving,  
 Possession of stolen goods, Shoplifting) ..... 12

**PUBLIC ORDER OFFENSES**

Driving while intoxicated (DWI),  
 Driving under the influence (DUI) ..... 13  
 Prostitution, solicitation ..... 14  
 Violation of parole ..... 15  
 Other public order offenses (Bookmaking,  
 Numbers, Gambling, Curfew violation,  
 Truancy, Being a runaway) ..... 16  
 CANNOT CODE CHARGE ..... 17

	PLACE 1    DH2_1	PLACE 2    DH2_2
<p><b>H2.</b> The next questions are about <b>(PLACE/ PRISON/JAIL)</b> you told me about earlier. <b>CODE WITHOUT ASKING IF KNOWN FROM CALENDAR.</b> <b>OTHERWISE ASK:</b> Was <b>(PLACE NAME)</b> the place you went to in <b>(MONTH/YEAR)</b> a . . . <b>RECORD VERBATIM AND CODE.</b></p>	<p>Juvenile hall or county camp, . . . . . 1</p> <p>a youth authority facility . . . . . 2</p> <p>a jail, . . . . . 3</p> <p>a prison, or . . . . . 4</p> <p>some other place? . . . . . 5</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Juvenile hall or county camp, . . . . . 1</p> <p>a youth authority facility, . . . . . 2</p> <p>a jail, . . . . . 3</p> <p>a prison, or . . . . . 4</p> <p>some other place? . . . . . 5</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>H3.</b> What was the main charge that you were sentenced for then? <b>RECORD VERBATIM AND CODE FROM CODE LIST. PROBE AS NEEDED USING LIST.</b></p>	<p><input type="checkbox"/> _____</p> <p style="text-align: right;"><b>DH3_1</b></p> <p>_____</p> <p>_____</p> <p>_____</p>	<p><input type="checkbox"/> _____</p> <p style="text-align: right;"><b>DH3_2</b></p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>H4.</b> During the time when you were in <b>(PLACE)</b>, were any drug or alcohol treatment programs offered there, not counting Narcotics Anonymous, Cocaine Anonymous, or Alcoholics Anonymous?</p>	<p style="text-align: right;"><b>DH4_1</b></p> <p>Yes . . . . . 1</p> <p>No . . . . . 2</p> <p style="text-align: center;"><b>(NEXT PLACE OR H6)</b></p>	<p style="text-align: right;"><b>DH4_2</b></p> <p>Yes . . . . . 1</p> <p>No . . . . . 2</p> <p style="text-align: right;"><b>(H6)</b></p>
<p><b>H5.</b> Did you participate in any of the drug or alcohol treatment programs offered, not counting NA, CA, or AA?</p>	<p style="text-align: right;"><b>DH5_1</b></p> <p>Yes . . . . . 1</p> <p>No . . . . . 2</p>	<p style="text-align: right;"><b>DH5_2</b></p> <p>Yes . . . . . 1</p> <p>No . . . . . 2</p>

**(NEXT PLACE OR H6)**

**(H6)**

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**H6. CHECK ROW C OF THE CALENDAR. WAS PAROLE OR PROBATION STATUS NOTED DURING SEGMENT 1 PERIOD?**

**DH6**

YES ..... 1 **(IF MORE THAN ONE, ASK H7 ABOUT THE LAST ONE. IF ON PAROLE AND PROBATION SIMULTANEOUSLY ASK ABOUT THE ONE WITH THE HIGHEST NUMBER OF CONTACTS.)**

NO ..... 2 **(H9)**

H7. During **(MONTHS)** did you report to or have any contact with your (probation/parole) officer? **DH7**

Yes ..... 1

No ..... 2 **(H9)**

H7a. During **(MONTHS)** how often did you have contact with or report to your (probation/parole) officer?  
**ENTER NUMBER AND CODE.** **DH7a**

\_\_\_\_\_ # of times

H7b. CODE: Per Month ..... 1 **DH7b**

Per Year ..... 2

H8. During **(MONTHS)** were urine tests required as a condition of (probation/parole)? **DH8**

Yes ..... 1

No ..... 2 **(H9)**

H8a. How many times per month were these tests required? **DH8a**

\_\_\_\_\_ # of times per month

**H9. CHECK ROW C OF THE CALENDAR. HOW MANY MONTHS WAS R INCARCERATED DURING SEGMENT 1?**

**DH9**

**0-9 MONTHS INCARCERATED ..... 1**

**10-12 MONTHS INCARCERATED ..... 2 (H43)**

H10.

Next, I would like to ask some questions about your use of drugs from the street and your use of prescription drugs to get high or for other non-medical effects, and your use of alcohol. **(SHOWCARD)** During **(MONTHS)** did you use **(DRUG)** five times or more? **READ AND CODE a-m. THEN ASK H11-H12 FOR EACH DRUG CODED "1" AT H10.**

a. Inhalants	<b>DH10a</b>	Yes ..... 1 No ..... 2
b. Marijuana/Hashish	<b>DH10b</b>	Yes ..... 1 No ..... 2
c. Crack	<b>DH10c</b>	Yes ..... 1 No ..... 2
d. Cocaine powder	<b>DH10d</b>	Yes ..... 1 No ..... 2
e. PCP or angel dust	<b>DH10e</b>	Yes ..... 1 No ..... 2
f. Hallucinogens or Psychedelics/LSD etc.	<b>DH10f</b>	Yes ..... 1 No ..... 2
g. Heroin	<b>DH10g</b>	Yes ..... 1 No ..... 2
h. Illegal Methadone	<b>DH10h</b>	Yes ..... 1 No ..... 2
i. Other Narcotics	<b>DH10i</b>	Yes ..... 1 No ..... 2
j. Methamphetamines	<b>DH10j</b>	Yes ..... 1 No ..... 2
k. Downers	<b>DH10k</b>	Yes ..... 1 No ..... 2
l. Other drug ( <b>SPECIFY</b> ) 12= Other Prescription Drug 14= Ritalin or Preludin  _____	<b>DH10l</b>   <b>DH10lVB</b>	Yes ..... 1 No ..... 2
m. Alcohol	<b>DH10m</b>	Yes ..... 1 No ..... 2

	H11.						H12.					
	Now, please look at the calendar and think about the month when you used (DRUG) the most during (MONTHS). About how many days did you use (DRUG) then? CODE; PROBE WITH CATEGORIES IF NEEDED.						During (MONTHS), how many months were you not using (DRUG)? CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.					
	1 day	2-5 days	6-10 days	More 11-20 days	than 20	DK	USED EVERY MONTH	1-3 months	4-6 months	7-9 months	Over 9 months	DK
a.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11a</b>						<b>DH12a</b>					
b.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11b</b>						<b>DH12b</b>					
c.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11c</b>						<b>DH12c</b>					
d.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11d</b>						<b>DH12d</b>					
e.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11e</b>						<b>DH12e</b>					
f.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11f</b>						<b>DH12f</b>					
g.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11g</b>						<b>DH12g</b>					
h.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11h</b>						<b>DH12h</b>					
i.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11i</b>						<b>DH12i</b>					
j.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11j</b>						<b>DH12j</b>					
k.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11k</b>						<b>DH12k</b>					
l.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11l</b>						<b>DH12l</b>					
m.	1	2	3	4	5	DK	1	2	3	4	5	DK
	<b>DH11m</b>						<b>DH12m</b>					

H13. During (MONTHS), did you ever go to a hospital because of a drug overdose? DH13

Yes ..... 1

No ..... 2

H14. During (MONTHS), did you even one time, use a needle to inject drugs to get high or for other non-medical effects? DH14

Yes ..... 1 (H16)

No ..... 2

H15. During (MONTHS), did someone else ever use a needle to inject you with drugs for you to get high or for other non-medical effects? DH15

Yes ..... 1

No ..... 2 (H17)

H16. During (MONTHS), when you used a needle to inject drugs to get high, about how often did you use it after someone else? Was that ... (READ CHOICES AND CODE ONE) DH16

Never, ..... 1 (H17)

Less than half of the time, ..... 2

Half of the time, ..... 3

More than half of the time, or ..... 4

Every time? ..... 5

RF (H17)

DK (H17)

H16a. During (MONTHS), when you used a needle after someone else, about how often did you clean it with bleach before you used it? Would you say ... DH16a

Never ..... 1

Less than half of the time, ..... 2

Half of the time, ..... 3

More than half of the time, or ..... 4

Every time? ..... 5 RF DK

<p>H17. WAS ALCOHOL CODED "1" AT H10? <span style="float: right;">DH17</span></p> <p>YES ..... 1 (H19)</p> <p>NO ..... 2</p>
--

H18. Now I would like to ask about your use of alcoholic beverages. (By alcoholic beverages I mean beer, malt liquors, wine, wine coolers and hard liquor, such as vodka and mixed drinks.) During (MONTHS), did you ever have a drink of alcohol? (By a drink, I mean either a can of beer, a glass of wine or a wine cooler, a shot of hard liquor, or a single mixed drink.)

DH18

- Yes ..... 1
- No ..... 2 (H24)

H19. During (MONTHS), think about the month you were drinking the most. How many days did you drink during that month?  
**CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

DH19

- One day ..... 1
- 2-5 days ..... 2
- 6-10 days ..... 3
- 11-20 days ..... 4
- More than 20 days ..... 5

DK RF

	(1) Beer/Malt Liquor	(2) Wine/Wine Coolers	(3) Liquor
H20. Still think about the month you were drinking the most. On a typical drinking day, did you drink any (TYPE)?	Yes ..... 1 <b>DH20_1</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>DH20_2</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>DH20_3</b> No ..... 2 (H23)
H21. On a typical drinking day, about how much (TYPE) did you usually drink? ENTER AMOUNT AND CODE.	<u>   DH21_1   </u> amount <b>H21a. CODE:</b> <b>DH21_a1</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10 (NEXT TYPE) Other (SPECIFY) ... 11  <u>   RECODED   </u> (NEXT TYPE)	<u>   DH21_2   </u> amount <b>H21a. CODE:</b> <b>DH21_a2</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10 (NEXT TYPE) Other (SPECIFY) ... 11  <u>   RECODED   </u> (NEXT TYPE)	<u>   DH21_3   </u> amount <b>H21a. CODE:</b> <b>DH21_a3</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10  <u>   RECODED   </u> (NEXT TYPE)  <b>(H23)</b>
H22. What size (bottle/can) was that (in ounces)? RECORD VERBATIM.	<u>   DH22_1   </u>	<u>   DH22_2   </u>	

H23. During (MONTHS), were you ever in a hospital because of your drinking? **DH23**

Yes ..... 1

No ..... 2

H24. Now I have some questions about your past living arrangements.  
 During (MONTHS), did you ever for at least two nights in a row have no place to stay except for a homeless shelter or street? **DH24**

Yes ..... 1

No ..... 2 (H26)

H25. How long were you in a shelter or on the street during (MONTHS)? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.** **DH25**

Less than 1 month ..... 1

1-3 months ..... 2

4-6 months ..... 3

7-9 months ..... 4

10-12 months ..... 5

HOMELESS/ON THE STREET ENTIRE TIME ..... 6 (H31)

H26. During (MONTHS), did you live in your own apartment or house at any time, either renting or buying, including living with parents or guardians? **DH26**

Yes ..... 1

No ..... 2 (H27)

H26a. During (MONTHS), how long did you live there? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.** **DH26a**

Less than 1 month ..... 1

1-3 months ..... 2

4-6 months ..... 3

7-9 months ..... 4

10-12 months ..... 5

H27.		H28.
During (MONTHS), please tell me if you lived with any of the following people at any time. Did you live with . . .		During (MONTHS), what is the longest time you lived with PERSON? <b>READ CHOICES ONLY AS PROBE.</b>
<b>CODE "1" WITHOUT ASKING, IF KNOWN.</b>  a. Your (wife/husband) or someone who was like a spouse or partner?	<b>DH27a</b>  Yes . . . . . 1 (H28) No . . . . . 2	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5  <b>DH28a</b> <span style="float: right;">DK</span>
b. Your mother, including your natural mother, stepmother, foster mother, or adoptive mother?	<b>DH27b</b>  Yes . . . . . 1 (H28) No . . . . . 2	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5  <b>DH28b</b> <span style="float: right;">DK</span>
c. Your father, including your natural father, stepfather, foster father, or adoptive father?	<b>DH27c</b>  Yes . . . . . 1 (H28) No . . . . . 2	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5  <b>DH28c</b> <span style="float: right;">DK</span>
<b>CODE "3" WITHOUT ASKING, IF KNOWN.</b>  d. Children of yours who were <u>18 years or older</u> ?	<b>DH27d</b>  Yes . . . . . 1 (H28) No . . . . . 2 R HAD NO CHILDREN . 3 (H31)	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5  <b>DH28d</b> <span style="float: right;">DK</span>
e. Children <u>under 18 years old</u> who were your natural children or who you were raising as your own?	<b>DH27e</b>  Yes . . . . . 1 No . . . . . 2 (H31) R HAD NO CHILDREN . 3 (H31)	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5  <b>DH28e</b> <span style="float: right;">DK</span>

H29. During (MONTHS), how many children under 18 years old were you raising and living with, including natural children, adopted children, and foster children? **ENTER NUMBER OF CHILDREN. IF NONE, CODE "0."**

**DH29**

0. NONE (H31)  
 \_\_\_\_\_ Number of Children

H30. During (MONTHS), did you lose custody of any children you were raising? By custody, I mean being legally in charge of a child.

**DH30**

Yes ..... 1  
 No ..... 2

H31. Now, I am going to ask about types of alcohol or drug treatment that include professional help such as doctors or counselors. During (MONTHS), did you receive treatment or counseling for drinking or using drugs?

**DH31**

Yes ..... 1  
 No ..... 2 (H32)

H31a. What kind of treatment was that? **RECORD VERBATIM AND CODE.**

**DH31a**

\_\_\_\_\_  
 Inpatient ..... 1  
 Residential ..... 2  
 Outpatient (non-methadone) ..... 3  
 Methadone ..... 4

H32. During (MONTHS), did you ever attend any ...

	<u>Yes</u>	<u>No</u>	
a. Alcoholics Anonymous meetings? .....	1	2	<b>DH32a</b>
b. Narcotics Anonymous meetings? .....	1	2	<b>DH32b</b>
c. Cocaine Anonymous meetings? .....	1	2	<b>DH32c</b>

H32a. IS ANY ITEM CODED "1" AT H32?

**DH32a\_1**

**YES** ..... 1

**NO** ..... 2 (H33)

H32b. During (MONTHS), did you attend five or more of any of these meetings?

**DH32b\_1**

Yes ..... 1  
 No ..... 2

H33. During (MONTHS), did you ever have at least two weeks when you felt very sad, blue, or depressed, and you lost interest or pleasure in things you usually cared about?

**DH33**

Yes ..... 1  
 No ..... 2 (H34)  
 DK .... (H34)

H33a. During (**MONTHS**), were all, some, or none of these times caused by drugs or alcohol you took? **DH33a**

All of the times ..... 1

Some of the times ..... 2

None of the times ..... 3 (**H34**)

H33b. During (**MONTHS**), did you have any times like this that were not caused by drugs or alcohol you took? **DH33b**

Yes ..... 1

No ..... 2

H34. During (**MONTHS**) did you ever attempt suicide? **DH34**

Yes ..... 1 (**H35**)

No ..... 2

H34a. During those 12 months, did you ever think seriously about committing suicide? **DH34a**

Yes ..... 1

No ..... 2

H35. During (**MONTHS**), did you see a doctor, nurse, counselor or social worker for problems with your emotions, nerves, or mental health? **DH35**

Yes ..... 1

No ..... 2 (**H36**)

H35a. How many times was that? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.** **DH35a**

1-5 times ..... 1

6-10 times ..... 2

11-30 times ..... 3

31 times or more ..... 4 DK

H36. During (**MONTHS**), did you stay overnight in a hospital or clinic for treatment of problems with your emotions, nerves, or mental health? **DH36**

Yes ..... 1

No ..... 2

H37. Now I would like to ask about your involvement with the police, the courts, and illegal activities. During (MONTHS), did you ever . . .		H38. During (MONTHS), how many different times did you do that? <b>CODE R'S RESPONSE.</b> <b>1 2-5 6-20 21-100 More</b> <b>Time Times Times Times than 100</b>					H39. What drugs were you dealing or selling during (MONTHS)? <b>CODE ALL THAT APPLY.</b>
a. Drive a vehicle (car, truck, van or motorcycle) while you were drunk or high?	Yes .. 1 (H38) No .... 2 RF DH37a	1	2	3	4	5	
b. Steal a vehicle (car, truck, van or motorcycle)?	Yes .. 1 (H38) No .... 2 RF DH37b	1	2	3	4	5	
c. Sell drugs or help someone else sell drugs, including cutting, weighing, packaging or making drugs?	Yes .. 1 (H38) No .... 2 RF DH37c	1	2	3	4	5	
							Inhalants ..... 1 <b>DH39cm1</b> Marijuana/Hash ..... 2 <b>DH39cm2</b> Crack ..... 3 <b>DH39cm3</b> Cocaine powder ..... 4 <b>DH39cm4</b> PCP/angel dust ..... 5 <b>DH39cm5</b> Hallucinogen or Psychedelics/LSD .... 6 <b>DH39cm6</b> Heroin ..... 7 <b>DH39cm7</b> Illegal Methadone .... 8 <b>DH39cm8</b> Other Narcotics ..... 9 <b>DH39cm9</b> Methamphetamines . 10 <b>DH39cm10</b> Downers ..... 11 <b>DH39cm11</b> Other drug ..... 12 <b>DH39cm12</b> Alcohol ..... 13 <b>DH39cm13</b> Ritalin or Preludin .. 14 <b>DH39cm14</b>
d. Have sex for money or drugs (prostitution)?	Yes .. 1 (H38) No .... 2 RF DH37d	1	2	3	4	5	
e. Take something from a store without paying for it, that is, shoplifted?	Yes .. 1 (H38) No .... 2 RF DH37e	1	2	3	4	5	

<p>g. Break into a house, a business, or a vehicle to take someone else's money or property?</p>	<p>Yes . . 1 (H38) No . . . . 2 RF DH37g</p>	<p style="text-align: center;"><b>DH38g</b></p> <p style="text-align: center;">1    2        3        4        5</p>
<p>h. Use a weapon or physical force against someone to steal money or property from them?</p>	<p>Yes . . 1 (H38) No . . . . 2 RF DH37h</p>	<p style="text-align: center;"><b>DH38h</b></p> <p style="text-align: center;">1    2        3        4        5</p>
<p>m. Do any other things to make money that are against the law?</p>	<p>Yes . . 1 (H38) No . . . . 2 RF DH37m</p>	<p style="text-align: center;"><b>DH38m</b></p> <p style="text-align: center;">1    2        3        4        5</p>
<p>n. Do any thing else against the law that I didn't ask about? (<b>SPECIFY</b>) <b>CODE ONE.</b> 1= Drug Possession 4= Aggravated assault, Assault with the intent to kill, Other serious intent 5= Forcible rape, Statutory Rape, Sexual assault 6= Murder, Manslaughter, Homicide 7= Other violent offenses (Arson, Damage to or destruction of property, Vandalism, Simple assault, Fighting) 15= Violation of parole 16= Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway) 17= Cannot Code Charge</p> <hr/> <p style="text-align: center;"><b>DM37nVB</b></p>	<p>Yes . . 1 (H38) No . . . . 2 RF DH37n</p>	<p style="text-align: center;"><b>DH38n</b></p> <p style="text-align: center;">1    2        3        4        5</p>

<b>H40. WAS ANY ACTIVITY CODED "1" AT H37?</b>		<b>DH40</b>
YES .....		<b>1</b>
NO .....		<b>2 (H43)</b>

H41. During (**MONTHS**), how many months were you doing any of the activities we just talked about? **DH41**

\_\_\_\_\_ Number of Months

H41a. In a typical week, during (**MONTHS**), about how much money would you say you earned from these activities? **DH41a**

\$ \_\_\_\_\_. 00 per week

H42. **CODE WITHOUT ASKING, IF KNOWN.** During (**MONTHS**), were you ever arrested and booked or taken into custody? **DH42**

Yes ..... 1

No ..... 2 (**H43**)

H42a. About how many times were you arrested and booked (or taken into custody) during (**MONTHS**)? **DH42a**

\_\_\_\_\_ Number of Times

H42b. What was/were the main charge(s)? **RECORD VERBATIM AND CODE ALL THAT APPLY.**

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**DRUG OFFENSES**

- Drug Possession ..... 1 **DH42bm1**
- Drug Sale or manufacturing ..... 2 **DH42bm2**

**VIOLENT OFFENSES**

- Armed robbery, Robbery by force ..... 3 **DH42bm3**
- Aggravated assault,  
Assault with the intent to kill,  
Other serious intent ..... 4 **DH42bm4**
- Forcible rape, Statutory Rape, Sexual assault ..... 5 **DH42bm5**
- Murder, Manslaughter, Homicide ..... 6 **DH42bm6**
- Other violent offenses (Arson, Damage  
to or destruction of property,  
Vandalism, Simple assault, Fighting) ..... 7 **DH42bm7**

**PROPERTY OFFENSES**

- Forgery, Passing bad checks, Credit card fraud ..... 8 **DH42bm8**
- Motor Vehicle theft ..... 9 **DH42bm9**
- Breaking and entering, Burglary ..... 10 **DH42bm10**
- Pimping, procuring ..... 11 **DH42bm11**
- Other theft (Larceny, Pick pocketing,  
Purse snatching, Mugging, Receiving,  
Possession of stolen goods, Shoplifting) ..... 12 **DH42bm12**

**PUBLIC ORDER OFFENSES**

- Driving while intoxicated (DWI),  
Driving under the influence (DUI) ..... 13 **DH42bm13**
- Prostitution, solicitation ..... 14 **DH42bm14**
- Violation of parole ..... 15 **DH42bm15**
- Other public order offenses (Bookmaking,  
Numbers, Gambling, Curfew violation,  
Truancy, Being a runaway) ..... 16 **DH42bm16**
- CANNOT CODE CHARGE ..... 17 **DH42bm17**

H43. During (**MONTHS**), were you ever attacked with a weapon such as a knife or a gun?

**DH43**

- Yes ..... 1
- No ..... 2      RF      DK

H44. During (**MONTHS**), were you ever hit or beaten so seriously that you were badly bruised, had to see a doctor, or had to stay in bed for one day or more?

DH44

Yes ..... 1  
No ..... 2 RF DK

H45. IS "1" CODED AT H43 OR H44?		<b>DH45</b>
YES .....	1	
NO .....	2 (H47)	

H46. During (MONTHS), how many times were you attacked with a weapon or seriously hit or beaten? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

DH46

One time ..... 1  
2-5 times ..... 2  
6-10 times ..... 3  
11-20 times ..... 4  
21-100 times ..... 5  
More than 100 times ..... 6 RF DK

H47. The next questions are about your physical health. During (MONTHS), would you say your health was . . .

DH47

Excellent, ..... 1  
Good, ..... 2  
Fair, or ..... 3  
Poor? ..... 4

H48. During (MONTHS), did you have any illness or condition that caused you pain, limited your activities, or caused you problems at work (or in school)?

DH48

Yes ..... 1  
No ..... 2 (H49i)

H49.	During ( <b>MONTHS</b> ), did you have <u>any</u> problems with . . .	<b>Yes</b>	<b>No</b>	<b>DK</b>	
	b. a heart or blood condition, . . . . .	1 . . . . .	2 . . . . .	DK	<b>DH49b</b>
	c. hepatitis or yellow jaundice? . . . . .	1 . . . . .	2 . . . . .	DK	<b>DH49c</b>
	d. an internal condition, such as ulcers, diabetes, or kidney or liver problems? . . . . .	1 . . . . .	2 . . . . .	DK	<b>DH49d</b>
	e. a bone or muscle condition, . . . . .	1 . . . . .	2 . . . . .	DK	<b>DH49e</b>
	f. a nerve condition, such as convulsions, or migraines? . . . . .	1 . . . . .	2 . . . . .	DK	<b>DH49f</b>
	g. <b>FEMALE R ONLY:</b> miscarriage, toxemia, bad Pap smear or other serious female condition? . . . . .	1 . . . . .	2 . . . . .	DK	<b>DH49g</b>
	h. any sexually transmitted disease other than AIDS? . . . . .	1 . . . . .	2 . . . . .	DK	<b>DH49h</b>

**i. CHECK ROW D OF THE CALENDAR. HAVE YOU ALREADY ENTERED "A" ON ROW D?  
DH49i**

**YES . . . . . 1 (ASK H49j)**

**NO . . . . . 2 (H50)**

j. any AIDS-related condition? . . . . . 1(**H52**) . . . . . 2(**H52**) . . . . . DK(**H52**) **DH49j**

H50. During (**MONTHS**), did you have a blood test for AIDS? **DH50**

Yes . . . . . 1

No . . . . . 2 (**H52**)

H50a. Did you find out the results of that test? **DH50a**

Yes . . . . . 1

No . . . . . 2

H51. During (**MONTHS**), did a doctor or other health professional tell you that you were HIV-positive or had the AIDS virus? **DH51**

Yes . . . . . 1 (**RECORD "A" IN ROW D OF THE CALENDAR, IN THE LAST MONTH OF SEGMENT 1. THEN ASK H52**)

No . . . . . 2

H52. During (MONTHS), about how many times did you see a doctor for a physical illness, condition or injury? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**DH52**

- Once, ..... 1
- 2-9 times, or ..... 2
- 10 or more times? ..... 3
- NEVER SAW A DOCTOR ..... 4

H53. During (MONTHS), how many times did you go to a hospital emergency room but did not stay overnight? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**DH53**

- Once, ..... 1
- 2-9 times, or ..... 2
- 10 or more times? ..... 3
- NEVER WENT ..... 4

H54. During (MONTHS), did you ever go to a hospital for at least 24 hours for a physical illness, condition or injury?

**DH54**

- Yes ..... 1
- No ..... 2 (H55)

H54a. During (MONTHS), about how many nights did you spend in the hospital for a physical illness, condition, or injury?

**DH54a**

\_\_\_\_\_ nights      DK

H55. **FEMALE R ONLY:** Now, I am going to ask about pregnancy and giving birth. During (MONTHS), were you pregnant at any time?

**DH55**

- Yes ..... 1
- No ..... 2 (H56)

H55a. Did you give birth to a live baby?

**DH55a**

- Yes ..... 1
- No ..... 2

H56. During (MONTHS), about how many different people did you have sex with, even if only one time? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**DH56**

- NONE ..... 1 (H57)
- One ..... 2
- 2-9 ..... 3
- 10-25 ..... 4
- 26-100 ..... 5
- More than 100 ..... 6      RF      DK

H56a. During those 12 months, did you have sex with someone so they would give you money, drugs, clothes or a place to sleep?

DH56a

Yes ..... 1  
 No ..... 2 RF DK

<p><b>H57. CHECK ROW C OF THE CALENDAR. HOW MANY MONTHS WAS R INCARCERATED DURING SEGMENT 1?</b></p> <p style="text-align: center;"><b>DH57</b></p> <p>0-9 MONTHS ..... 1</p> <p>10-12 MONTHS ..... 2 (SECTION K)</p>
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H58. Next, I would like to ask about how you supported yourself during (MONTHS), that is, how you got the money that you used to live on. During (MONTHS), did you get most of your support from illegal activities that you did?

DH58

Yes ..... 1  
 No ..... 2 (H59)  
 RF (H59)

H58a. During (MONTHS), when you were getting most of your support from illegal activities, what did you do most of the time to get money? **CODE ALL THAT APPLY.**

Drug dealing .....	1		DH58am1
Prostitution .....	2		DH58am2
Motor vehicle theft .....	3		DH58am3
Shoplifting .....	4		DH58am4
Breaking and entering, Burglary .....	5		DH58am5
Armed robbery, Robbery by force .....	6		DH58am6
Other property crime: Moonshining, boot legging, running liquor, pimping, procuring, forgery, Passing bad checks, credit card fraud, bookmaking, numbers, gambling, receiving, possession of stolen goods, other theft (larceny, pick pocketing, purse snatching, mugging) .....	7		DH58am7
Violent crime for pay: Arson, aggravated assault, other serious assault, murder .....	8		DH58am8
OTHER ILLEGAL ACTIVITY .....	9	RF DK	DH58am9

H59. The next questions are about your employment. During (MONTHS), were you employed full-time at any time, that is, did you work 35 hours or more a week at any job? (Do not count any job that involved illegal activity.)

DH59

Yes ..... 1  
 No ..... 2 (H63)

H60. During (MONTHS), how many months did you work full-time?

DH60

\_\_\_\_\_ number of months

H61. What kind of work did you do at your longest full-time job? That is, what was your job title or what was your job called?  
**RECORD VERBATIM AND ENTER CODE.**

DH61

\_\_\_\_\_

- 1 Clerical Worker; (Ex. Bankteller, receptionist, word processor, office worker)
- 2 Sales Worker; (Ex. Salesclerk, cashier, gas station attendant, telephone or door-to-door sales)
- 3 Service Worker; (Ex. Janitor, cook, waitress/waiter, nursing aide, police officer, farm worker)
- 4 Private HH Worker; (Ex. Maid, housekeeper, childcare worker, private HH cook, gardener)
- 5 Skilled Worker or Craftsmen; (Ex. Carpenter, electrician, machinist, mechanic)
- 6 Laborer; (Ex. Construction worker, maintenance worker)
- 7 Operator or Machine Operator; (Ex. Assembler, machine or textile operator)
- 8 Transportation Equipment Operator; (Ex. Cab, truck, or bus driver, conductor, fork lift operator)
- 9 Farm Laborer; (Ex. Farm worker, picker, seasonal farm worker)
- 10 Farmer or Farm Manager
- 11 Manager/Administrator; (Ex. Officer manager, inspectors, bank or store administrator)
- 12 Lay Counselor; (Ex. drug counselor without professional degree, "peer" counselor)
- 13 Professional/Technical; (Ex. nurse, clinical social worker, teacher, artist, lawyer)
- 14 Other
- 15 UNABLE TO CODE
- 16 Military

H62. Before taxes, what was your highest wage, salary, or rate of pay at that full-time job? **RECORD DOLLARS AND CENTS AND CODE.**

DH62

\$ \_\_\_\_\_

- H62a. CODE:
- Per hour ..... 1
  - Every week ..... 2
  - Every two weeks ..... 3
  - Per month ..... 4
  - Per year ..... 5
  - OTHER (SPECIFY) \_\_\_\_\_ **RECODED** \_\_\_\_\_ RF \_\_\_\_\_ ~~DK~~
  - Day ..... 7
  - Unit/Product ..... 8
  - Unit/Service ..... 9
  - Room & Board ..... 10

DH62a

H63. During (MONTHS), did you have a part-time job at any time?

DH63

- Yes ..... 1
- No ..... 2 (H66)

H64. During (MONTHS), how many months did you work part-time? **DH64**  
 \_\_\_\_\_ number of months

H65. Before taxes, what was your highest wage, salary, or rate of pay at the part-time job you had the longest during (MONTHS)? **RECORD DOLLARS AND CENTS AND CODE.** **DH65**  
 \$ \_\_\_\_\_.

- H65a. CODE: **DH65a**
- Per hour . . . . . 1
  - Every week . . . . . 2
  - Every two weeks . . . . . 3
  - Per month . . . . . 4
  - Per year . . . . . 5
  - OTHER (SPECIFY)           RECODED           RF ~~DK~~
  - Day . . . . . 7
  - Unit/Product . . . . . 8
  - Unit/Service . . . . . 9
  - Room & Board . . . . . 10

H66. **CODE WITHOUT ASKING, IF KNOWN.** During (MONTHS), did anyone you lived with (help with/pay your) expenses, such as housing, food, clothing, medical costs, (and/or) transportation? **DH66**

- Yes . . . . . 1
- No . . . . . 2 **(H67)**
- RF . . . . . **(H67)**

H66a. During (MONTHS), would you say that this help with your living expenses paid for less than half, half or more, or all of your living expenses? **DH66a**

- Less than half . . . . . 1
- Half or more . . . . . 2
- All . . . . . 3

H67.		H68.
<p>Now, I will ask about (other) sources of income you may have had during (MONTHS). (Please do <u>not</u> include income from illegal activities) (or help you received with living expenses from someone you lived with.)</p> <p>During (MONTHS), did you ever <u>personally</u> get any income from . . .</p>		<p>During (MONTHS), <u>before taxes</u>, about how much income did you personally get from (INCOME SOURCE). <b>IF YOU CODE "3", SKIP TO THE NEXT INCOME SOURCE. RECORD DOLLAR AMOUNT. ROUND TO NEAREST DOLLAR.</b></p>
<p>a. <b>CODE WITHOUT ASKING IF KNOWN.</b> Your wages or salary, including tips, (from all jobs or businesses)?</p>	<p>Yes . . . . . 1 (H68)  No . . . . . 2  RF  <b>DH67a</b> DK</p>	<p><b>DH68aa</b>  \$ _____ .00 RF DK  <b>(H68a) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>DH68a1</b> Total . . . 3  <b>(H68a) (2)</b> _____ Number (wks/mos)  <b>DH68a2WK DH68a2MO</b></p>
<p>b. (Money/Other money) from a (spouse, partner, or other) family member who was <u>not</u> living with you? (Not including the help we've already talked about).</p>	<p>Yes . . . . . 1 (H68)  No . . . . . 2  RF  <b>DH67b</b> DK</p>	<p><b>DH68bb</b>  \$ _____ .00 RF DK  <b>(H68b) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>DH68b1</b> Total . . . 3  <b>(H68b) (2)</b> _____ Number (wks/mos)  <b>DH68b2WK DH68b2MO</b></p>
<p>c. Welfare, including General Assistance, or Relief or Aid to Dependent Children or to Families with Dependent Children?</p>	<p>Yes . . . . . 1 (H68)  No . . . . . 2  RF  <b>DH67c</b> DK</p>	<p><b>DH68cc</b>  \$ _____ .00 RF DK  <b>(H68c) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>DH68c1</b> Total . . . 3  <b>(H68c) (2)</b> _____ Number (wks/mos)  <b>DH68c2WK DH68c2MO</b></p>
<p>d. Unemployment compensation, disability pay, or SSI?</p>	<p>Yes . . . . . 1 (H68)  No . . . . . 2  RF  <b>DH67d</b> DK</p>	<p><b>DH68dd</b>  \$ _____ .00 RF DK  <b>(H68d) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>DH68d1</b> Total . . . 3  <b>(H68d) (2)</b> _____ Number (wks/mos)  <b>DH68d2WK DH68d2MO</b></p>
<p>e. Social Security, pension, annuity, or interest from savings?</p>	<p>Yes . . . . . 1 (H68)  No . . . . . 2  RF  <b>DH67e</b> DK</p>	<p><b>DH68ee</b>  \$ _____ .00 RF DK  <b>(H68e) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>DH68e1</b> Total . . . 3  <b>(H68e) (2)</b> _____ Number (wks/mos)  <b>DH68e2WK DH68e2MO</b></p>
<p>f. Alimony or child support?</p>	<p>Yes . . . . . 1 (H68)  No . . . . . 2  RF  <b>DH67f</b> DK</p>	<p><b>DH68ff</b>  \$ _____ .00 RF DK  <b>(H68f) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>DH68f1</b> Total . . . 3  <b>(H68f) (2)</b> _____ Number (wks/mos)  <b>DH68f2WK DH68f2MO</b></p>

<p>g. Any other sources I haven't asked about? (<b>SPECIFY</b>)</p> <p>1= Food Stamps, rent vouchers  2= Recycling (cans, bottles, newspapers)  3= Inheritances, trusts, prizes, settlements, etc.)  4= Other sources of income</p> <p>_____ <b>DH67gVB</b> _____</p>	<p>Yes . . . . . 1 (<b>H68</b>)  No . . . . . 2</p> <p>RF</p> <p><b>DH67g</b> DK</p>	<p><b>DH68gg</b></p> <p>\$ _____ .00 RF DK</p> <p><b>(H68g) (1) CODE:</b> per wk . . . 1 per mo . . . 2</p> <p><b>DH68g1</b> Total . . . 3</p> <p><b>(H68g) (2)</b> _____ Number (wks/mos)  <b>DH68g2WK DH68g2MO</b></p>
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## SECTION K. SEGMENT SAMPLE EPISODE SEGMENT)

Next, I would like to ask what was going on in your life during the time you were in **(PROGRAM)**. **GO TO SECOND SEGMENT OUTLINED IN CALENDAR, THE SAMPLED EPISODE SEGMENT.** You may find it helpful to refer to the calendar when answering the questions. This period of time is from \_\_\_\_\_ 19\_\_\_\_\_ through \_\_\_\_\_ 19\_\_\_\_\_.

**K1. CHECK ROW C OF THE CALENDAR. WAS PAROLE OR PROBATION STATUS NOTED DURING SEGMENT 2 PERIOD?**

**DK1**

YES ..... 1 **(IF MORE THAN ONE, ASK K2 ABOUT THE LAST ONE. IF ON PAROLE AND PROBATION SIMULTANEOUSLY, ASK ABOUT THE ONE WITH THE HIGHEST NUMBER OF CONTACTS.)**

NO ..... 2 **(K4)**

K2. During **(MONTHS)** did you report to or have any contact with your (probation/parole) officer ? **DK2**

Yes ..... 1

No ..... 2 **(K3)**

K2a. During **(MONTHS)**, how often did you have contact with or report to your (probation/parole) officer? **DK2a**  
**ENTER NUMBER AND CODE.**

\_\_\_\_\_ # of times

K2b. CODE: Per Month ..... 1 **DK2b**

Per Year ..... 2

K3. During **(MONTHS)**, were urine tests required as a condition of probation/parole? **DK3**

Yes ..... 1

No ..... 2 **(K4)**

K3a. How many times per month were these tests required? **DK3a**

\_\_\_\_\_ # of times per month

K4. (SHOWCARD). During (MONTHS) when you went to (PROGRAM), which drug or drug combination, including alcohol, was the reason you went there? **CODE ALL THAT APPLY.**

Inhalants . . . . .	1	DK4m1
Marijuana/hashish . . . . .	2	DK4m2
Crack . . . . .	3	DK4m3
Cocaine powder . . . . .	4	DK4m4
PCP or angel dust . . . . .	5	DK4m5
Hallucinogens or Psychedelics/LSD . . . . .	6	DK4m6
Heroin . . . . .	7	DK4m7
Illegal Methadone . . . . .	8	DK4m8
Other Narcotics . . . . .	9	DK4m9
Methamphetamines . . . . .	10	DK4m10
Downers . . . . .	11	DK4m11
Other drug . . . . .	12	DK4m12
(SPECIFY) _____ <b>RECODED</b> _____		
Alcohol . . . . .	13	DK4m13
Ritalin or Preludin . . . . .	14	DK4m14
No Drugs . . . . .	15	DK4m15

K5. During (MONTHS) how important would you say each of the following people was in getting you to go to treatment or counseling at (PROGRAM). Was (your/a) . . . very important, somewhat important, or not important (in getting you to go there)?

	<u>Very</u> <u>Important</u>	<u>Somewhat</u> <u>Important</u>	<u>Not</u> <u>Important</u>	
a. (Wife/husband or other) family member . . . . .	1	2	3	DK5a
b. Friend or associate (co-worker) . . . . .	1	2	3	DK5b
c. Employer . . . . .	1	2	3	DK5c
d. <b>UNDER AGE 18 R ONLY:</b> Teacher, school counselor, or someone else at school . . . . .	1	2	3	DK5d
e. Nurse, doctor, social worker, or somebody like that . . . . .	1	2	3	DK5e
f. Probation or parole officer, judge, attorney, or somebody like that . . . . .	1	2	3	DK5f
g. Anyone else . . . . .	1	2	3	DK5g
<b>Other SPECIFY (God, self)</b> _____				DK5gVB

K6. What were the most important reasons you had for going to treatment or counseling at (PROGRAM NAME), during (MONTHS). **CODE ALL THAT APPLY. PROBE UNTIL NO OTHER REASONS GIVEN. ONLY IF NECESSARY, ASK:** What other reason was important to you?

<u>DRUG AVAILABILITY</u> -- difficulties obtaining drugs or "good" drugs . . . . .	1	<b>DK6m1</b>
<u>FINANCIAL</u> -- couldn't afford to stay on drugs, lost an income source . . . . .	2	<b>DK6m2</b>
<u>PRESSURE FROM</u> criminal justice system, attorney, etc. . . . .	3	<b>DK6m3</b>
<u>PRESSURE TO</u> improve/save close relationship, with spouse, partner, parent . . . . .	4	<b>DK6m4</b>
<u>PRESSURE FROM</u> school teacher, minister, coach, etc. . . . .	5	<b>DK6m5</b>
<u>JOB</u> -- to get, keep or improve job situation . . . . .	6	<b>DK6m6</b>
<u>PARENTING ISSUES</u> -- get or keep custody or become better parent . . . . .	7	<b>DK6m7</b>
<u>HEALTH ISSUES</u> -- too ill to continue; drugs or related diseases are hurting or threaten own health, unborn baby, others . . . . .	8	<b>DK6m8</b>
<u>DESIRE FOR SERVICES</u> -- want to become eligible for some type of services . . . . .	9	<b>DK6m9</b>
<u>GENERAL PERSONAL MOTIVE</u> -- "tired", "disgusted", "want to change", improve lifestyle, "save" self . . . . .	10	<b>DK6m10</b>
<u>OTHER REASON</u> . . . . .	11	<b>DK6m11</b>

DK

- K7. Next I'm going to ask about staff persons that you usually saw for counseling or treatment at **(PROGRAM)** during **(MONTHS)**. Think about the staff person that you talked to the most: In general, how much did you and that person agree about things you might need to change in your life in order to stay drug free or alcohol free, such as changing the place you lived, changing your friends, going back to school or getting a new job? Would you say you agreed ... **DK7**
- Very much, ..... 1
- Somewhat, or ..... 2
- Not at all? ..... 3
- K7a. In general, how well do you feel that person understood the problems you might have had with alcohol or drugs? Would you say ... **DK7a**
- Very much, ..... 1
- Somewhat, or ..... 2
- Not at all ? ..... 3
- K8. What is the main reason or reasons you stopped treatment in **(END MONTH)**? **CODE ALL THAT APPLY. IF NECESSARY, ASK:** What other reason did you have?
- Completed treatment plan, graduated from program ..... 1 **DK8m1**
- Dropped from program by staff, involuntary discharge ..... 2 **DK8m2**
- Did not want to be there in first place ..... 3 **DK8m3**
- Treatment not successful, kept doing drugs, discouraged ..... 4 **DK8m4**
- Transferred to another program because dissatisfied ..... 5 **DK8m5**
- Changes in eligibility, program had to reduce size ..... 6 **DK8m6**
- Became incarcerated ..... 7 **DK8m7**
- Logistical problems, too difficult to get there, child care, conflict on job ..... 8 **DK8m8**
- Couldn't afford it ..... 9 **DK8m9**
- Pressure from family and friends to end treatment ..... 10 **DK8m10**
- Left the area ..... 11 **DK8m11**
- Other (**SPECIFY**)\_\_\_\_\_ **RECODED**\_\_\_\_\_ 12 **DK8m12**
- NO REASON GIVEN ..... 13 **DK8m13**
- Needed hospitalization ..... 14 **DK8m14**

<b>K9. WAS TREATMENT 1 MONTH OR LESS?</b>	<b>DK9</b>
YES .....	1
NO .....	2 (K13)

K10. During (MONTHS), how helpful to you was the treatment or counseling you received at (PROGRAM)? Would you say .

Very helpful, .....	1	<b>DK10</b>
Somewhat helpful, or .....	2	
Not at all helpful .....	3	

K11. During (MONTHS), did the treatment or counseling you received at (PROGRAM) help you . . .

	<u>Yes</u>	<u>No</u>	
a. Get off drugs? .....	1	2	<b>DK11a</b>
b. Stop drinking? .....	1	2	<b>DK11b</b>
c. Improve your health? .....	1	2	<b>DK11c</b>
d. Get help with emotional problems? .....	1	2	<b>DK11d</b>
e. Get a job? .....	1	2	<b>DK11e</b>
f. With financial problems? .....	1	2	<b>DK11f</b>
g. Get housing? .....	1	2	<b>DK11g</b>
h. Get training and education? .....	1	2	<b>DK11h</b>
i. Stop committing crimes? .....	1	2	<b>DK11i</b>
j. With legal problems? .....	1	2	<b>DK11j</b>
k. Improve your family relationships? .....	1	2	<b>DK11k</b>
l. With anything else? .....	1	2	<b>DK11l</b>
<b>SPECIFY</b> _____ (Communication)			<b>DK11lVB</b>

K12. During (MONTHS), did you receive any counseling or attend any classes at (or arranged by) (PROGRAM) to help you plan your future; including how to handle problems after you left treatment?

Yes .....	1	<b>DK12</b>
No .....	2	

**SKIP TO SECTION M**

K13. During (MONTHS), did you use any alcohol or any drugs, including injecting drugs, even one time to get high or for other non-medical effects?

**DK13**

- Yes ..... 1
- No ..... 2 (K22)

K13a. **SHOWCARD.** During (MONTHS), which drug or drug combination, including alcohol, did you use most often? **CODE ALL THAT APPLY.**

- Inhalants ..... 1 **DK13am1**
- Marijuana/Hashish ..... 2 **DK13am2**
- Crack ..... 3 **DK13am3**
- Cocaine Powder ..... 4 **DK13am4**
- PCP or angel dust ..... 5 **DK13am5**
- Hallucinogen or Psychedelics/LSD ..... 6 **DK13am6**
- Heroin ..... 7 **DK13am7**
- Illegal Methadone ..... 8 **DK13am8**
- Other Narcotics ..... 9 **DK13am9**
- Methamphetamines ..... 10 **DK13am10**
- Downers ..... 11 **DK13am11**
- Other drug ..... 12 **DK13am12**
- Alcohol ..... 13 **DK13am13**
- Ritalin or Preludin ..... 14 **DK13am14**

K13b. Looking at the calendar, during (MONTHS), about how many days in a typical month did you use (drugs) (or) (alcohol) to get high or for other non-medical effects? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

**DK13b**

- One or two days ..... 1
- 3-10 days ..... 2
- 11-20 days ..... 3
- 21 days or more ..... 4 **DK**

K14. During (MONTHS), did you ever use a needle to inject drugs to get high or for other non-medical effects?

**DK14**

- Yes ..... 1
- No ..... 2 (K16)

K14a. Looking at the calendar, during (MONTHS), about how many days did you inject drugs to get high or for other non-medical effects in a typical month? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

- One or two days ..... 1 **DK14a**
- 3-10 days ..... 2
- 11-20 days ..... 3
- 21 days or more ..... 4 **DK**

K15. Did you receive any counseling or classes for safe needle use, or dangers of needle sharing?

DK15

- Yes ..... 1
- No ..... 2

**K16. WAS ALCOHOL CODED AT K13a?**

**DK16**

- YES** ..... 1 (**K18**)
- NO** ..... 2

K17. Now I would like to ask about your use of alcoholic beverages. (By alcoholic beverages I mean beer, malt liquors, wine, wine coolers and hard liquor, such as vodka and mixed drinks.) During (**MONTHS**), did you ever have a drink of alcohol? (By a drink, I mean either a can of beer, a glass of wine or a wine cooler, a shot of hard liquor, or a single mixed drink.)

DK17

- Yes ..... 1
- No ..... 2 (**K22**)

K18. During (**MONTHS**), think about the month you were drinking the most. How many days did you drink during that month? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

DK18

- One day ..... 1
- 2-5 days ..... 2
- 6-10 days ..... 3
- 11-20 days ..... 4
- More than 20 days ..... 5      DK      RF

	(1) Beer/Malt Liquor	(2) Wine/Wine Coolers	(3) Liquor
K19. Still think about the month you were drinking the most. On a typical drinking day, did you drink any (TYPE)?	Yes ..... 1 <b>DK19_1</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>DK19_2</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>DK19_3</b> No ..... 2 (K22)
K20. In the month you were drinking the most then, on a typical day, when you were drinking, about how much (TYPE) did you usually drink? ENTER AMOUNT AND CODE.	<p>_____ <b>DK20_1</b> _____ amount</p> <p><b>K20a. CODE:</b> <b>DK20a_1</b></p> <p>Bottles ..... 1</p> <p>Cans ..... 2</p> <p>Glasses ..... 3 (NEXT TYPE)</p> <p>Six packs ..... 4 (NEXT TYPE)</p> <p>1/2 Pints ..... 5 (NEXT TYPE)</p> <p>Pints ..... 6 (NEXT TYPE)</p> <p>Quarts ..... 7 (NEXT TYPE)</p> <p>Fifths ..... 8 (NEXT TYPE)</p> <p>Drinks ..... 9 (NEXT TYPE)</p> <p>Shots ..... 10 (NEXT TYPE)</p> <p>Other (SPECIFY) ... 11</p> <p>_____ <b>RECODED</b> _____ (NEXT TYPE)</p>	<p>_____ <b>DK20_2</b> _____ amount</p> <p><b>K20a. CODE:</b> <b>DK20_a2</b></p> <p>Bottles ..... 1</p> <p>Cans ..... 2</p> <p>Glasses ..... 3 (NEXT TYPE)</p> <p>Six packs ..... 4 (NEXT TYPE)</p> <p>1/2 Pints ..... 5 (NEXT TYPE)</p> <p>Pints ..... 6 (NEXT TYPE)</p> <p>Quarts ..... 7 (NEXT TYPE)</p> <p>Fifths ..... 8 (NEXT TYPE)</p> <p>Drinks ..... 9 (NEXT TYPE)</p> <p>Shots ..... 10 (NEXT TYPE)</p> <p>Other (SPECIFY) ... 11</p> <p>_____ <b>RECODED</b> _____ (NEXT TYPE)</p>	<p>_____ <b>DK20_3</b> _____ amount</p> <p><b>K20a. CODE:</b> <b>DK20_a3</b></p> <p>Bottles ..... 1</p> <p>Cans ..... 2</p> <p>Glasses ..... 3 (NEXT TYPE)</p> <p>Six packs ..... 4 (NEXT TYPE)</p> <p>1/2 Pints ..... 5 (NEXT TYPE)</p> <p>Pints ..... 6 (NEXT TYPE)</p> <p>Quarts ..... 7 (NEXT TYPE)</p> <p>Fifths ..... 8 (NEXT TYPE)</p> <p>Drinks ..... 9 (NEXT TYPE)</p> <p>Shots ..... 10</p> <p>(K22)</p>
K21. What size (bottle/can) was that (in ounces)? RECORD VERBATIM.	_____ <b>DK21_1</b> _____	_____ <b>DK21_2</b> _____	

K22. During (MONTHS), did you take any medicines prescribed for you by a doctor for drug or alcohol problems, such as desipramine or antabuse?

DK22

- Yes ..... 1
- No ..... 2 (K23)

K22a. What prescription medicines did you take for drug or alcohol problems? **RECORD VERBATIM AND CODE ALL THAT APPLY.**

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- Alcohol ..... 1 DK22am1
- Analgesics [Propoxyphene-N (Darvon-N), propoxyphene (Darvon), oxycodone (Percodan), codeine or other pain medications] ..... 2 DK22am2
- Antabuse ..... 3 DK22am3
- Antacids ..... 4 DK22am4
- Antianxiety Medications[Chlordiazepoxide (Librium), diazepam (Valium), alprazolam (Xanax), flurazepam (Dalmane), or other benzodiazepines;] [Chlorpromazine (Thorazine), trifluoperazine (Stelazine) thioridazine (Mellaril), or other anti-psychotics] ..... 5 DK22am5
- Anticonvulsants ..... 6 DK22am6
- Antidepressants [Amtriptyline (Elavil), Desipramine, or any other antidepressants] ..... 7 DK22am7
- Antimanics [Lithium carbonate (Lithium), carbamazepine (Tegretol), valproic acid (Valproate), or other anti-manics] ..... 8 DK22am8
- Methadone ..... 9 DK22am9
- Multivitamins ..... 10 DK22am10
- Narcotic Antagonists [Buprenorphine (Buprenex) Naltrexone (Trexan), Naloxone, or other narcotic antagonists] ..... 11 DK22am11
- Sedatives [Pentobarbital (Nembutal), secobarbital (Seconal), Tuinal, or other barbiturates; Chloral hydrate or other sedatives or hypnotics] ..... 12 DK22am12
- Other ..... 13 DK22am13

<b>K22b. WAS SAMPLE SEGMENT A METHADONE PROGRAM?</b>		
	<b>DK22b</b>	
YES .....		<b>1</b>
NO .....		<b>2 (K23)</b>

K22c. During (MONTHS), in general, would you say that the doses of methadone you were prescribed were too high, the right amount, or too low?

**DK22c**

Too high ..... 1  
 The right amount ..... 2  
 Too low ..... 3

DK

K23. During (MONTHS), did you ever attend any ...

	<u>Yes</u>	<u>No</u>	
a. Alcoholics Anonymous Meetings .....	1	2	<b>DK23a</b>
b. Narcotics Anonymous Meetings .....	1	2	<b>DK23b</b>
c. Cocaine Anonymous Meetings .....	1	2	<b>DK23c</b>

<b>K23a. IS ANY ITEM CODED "1" AT K23?</b>		
	<b>DK23a1</b>	
YES .....		<b>1</b>
NO .....		<b>2 (K24)</b>

K23b. During (MONTHS), did you attend five or more of any of these meetings?

**DK23b1**

Yes ..... 1  
 No ..... 2

K24.		K25.					K26.	
Now I would like to ask about any involvement with the police, the courts, and illegal activities. During (MONTHS), did you ever . . .		During (MONTHS), how many different times did you do that? <b>CODE R'S RESPONSE.</b>					What drugs were you dealing or selling during (MONTHS)? <b>CODE ALL THAT APPLY.</b>	
		<b>1</b>	<b>2-5</b>	<b>6-20</b>	<b>21-100</b>	<b>More</b>		
		<b>Time</b>	<b>Times</b>	<b>Times</b>	<b>Times</b>	<b>than 100</b>		
c.	Sell drugs yourself or helped someone else sell drugs, including cutting, weighting, packaging or manufacturing drugs?	Yes . . 1 (K25)	<b>DK25c</b>					Inhalants . . . . . 1
	No . . . . 2	1	2	3	4	5	<b>DK26cm1</b>	
	RF						Marijuana/Hash . . . . . 2	
	<b>DK24c</b>						<b>DK26cm2</b>	
							Crack . . . . . 3	
							<b>DK26cm3</b>	
							Cocaine powder . . . . . 4	
							<b>DK26cm4</b>	
							PCP/angel dust . . . . . 5	
							<b>DK26cm5</b>	
							Hallucinogen or	
							Psychedelics/LSD . . . . . 6	
							<b>DK26cm6</b>	
							Heroin . . . . . 7	
							<b>DK26cm7</b>	
							Illegal Methadone . . . . . 8	
							<b>DK26cm8</b>	
							Other Narcotics . . . . . 9	
							<b>DK26cm9</b>	
							Methamphetamines . . . . . 10	
							<b>DK26cm10</b>	
							Downers . . . . . 11	
							<b>DK26cm11</b>	
							Other drug . . . . . 12	
							<b>DK26cm12</b>	
							Alcohol . . . . . 13	
							<b>DK26cm13</b>	
							Ritalin or Preludin . . . . . 14	
							<b>DK26cm14</b>	
d.	Have sex for money or drugs (prostitution)?	Yes . . 1 (K25)	<b>DK25d</b>					
	No . . . . 2	1	2	3	4	5		
	RF							
	<b>DK24d</b>							
g.	Break into a house, a business, or a vehicle to take someone else's money or property?	Yes . . 1 (K25)	<b>DK25g</b>					
	No . . . . 2	1	2	3	4	5		
	RF							
	<b>DK24g</b>							
h.	Use a weapon or physical force against someone to steal money or property from them?	Yes . . 1 (K25)	<b>DK25h</b>					
	No . . . . 2	1	2	3	4	5		
	RF							
	<b>DK24h</b>							

<p>n. Do anything else against the law? SPECIFY</p> <p>1= Drug Possession 4= Aggravated assault, Assault with the intent to kill, Other serious intent 5= Forcible rape, Statutory Rape, Sexual assault 6= Murder, Manslaughter, Homicide 7= Other violent offenses (Arson, Damage to or destruction of property, Vandalism, Simple assault, Fighting) 8= Forgery, Passing bad checks, Credit card fraud 9= Motor Vehicle theft 10= Breaking and entering, Burglary 11= Pimping, procuring 12= Other theft (Larceny, Pick pocketing, Purse snatching, Mugging, Receiving, Possession of stolen goods, Shoplifting) 13= Driving while intoxicated (DWI) Driving under the influence (DUI) 15= Violation of parole 16= Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway) 17= Cannot Code Charge</p> <p>_____</p> <p>_____</p> <p><b>DK24nVB</b></p>	<p>Yes . 1 (<b>K25</b>)</p> <p>No . . . 2</p> <p>RF</p> <p><b>DK24n</b></p>	<p style="text-align: center;"><b>DK25n</b></p> <p>1      2      3      4      5</p>
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<p><b>K27. WAS ANY ACTIVITY CODED "1" AT K24?</b></p> <p style="text-align: right;"><b>DK27</b></p> <p>YES ..... 1</p> <p>NO ..... 2 (<b>K29</b>)</p>
---

K28. How many months were you doing any of the activities we just talked about?

**DK28**

\_\_\_\_\_ Number of months

K29. During (MONTHS), did you get help from or arranged by (PROGRAM) with any criminal charges against you, such as seeing a lawyer?

DK29

Yes ..... 1  
No ..... 2

K30. During (MONTHS), were you ever attacked with a weapon such as a knife or a gun?

DK30

Yes ..... 1  
No ..... 2      DK      RF

K31. During (MONTHS), were you ever hit or beaten so seriously that you were badly bruised, had to see a doctor, or had to stay in bed for one day or more?

DK31

Yes ..... 1  
No ..... 2

K32. During (MONTHS), in general, was your health excellent, good, fair, or poor?

DK32

Excellent ..... 1  
Good ..... 2  
Fair ..... 3  
Poor ..... 4

K33. During (MONTHS), did you go to a hospital for more than 24 hours for a physical illness, condition or injury?

DK33

Yes. .... 1  
No. .... 2

K34. During (MONTHS), did (PROGRAM) itself provide any medical care besides an admission physical?

DK34

Yes ..... 1  
No ..... 2

K35. During (MONTHS), did you receive any counseling or treatment at (or arranged by) (PROGRAM) for problems with your emotions, nerves, or mental health?

DK35

Yes. .... 1  
No ..... 2

<b>K36. CHECK ROW D OF THE CALENDAR. HAVE YOU ALREADY ENTERED "A" ON ROW D?</b>	
	<b>DK36</b>
YES .....	1
NO .....	2 (K37)

K36a. During (MONTHS), did you have any condition that was an AIDS-related problem? **DK36a**

Yes ..... 1 (K38)

No ..... 2 (K38)

K37. During (MONTHS), did you have a blood test for AIDS? **DK37**

Yes ..... 1

No ..... 2 (K38) RF (K38)

K37a. Did you find out the results of that test? **DK37a**

Yes ..... 1

No ..... 2

K37b. During (MONTHS), did a doctor or other health professional tell you that you had AIDS or the AIDS virus? **DK37b**

Yes ..... 1 (RECORD "A" IN ROW D OF CALENDAR IN THE LAST MONTH OF SEGMENT 2. THEN ASK K38).

No ..... 2

K38. During (MONTHS), did you receive any counseling or attend any classes at (arranged by) (PROGRAM) to learn about ways not to get or spread AIDS? **DK38**

Yes ..... 1

No ..... 2

K39. The next questions I will be asking are about having sex. During (MONTHS), about how many different people did you have sex with, even if only one time? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.** **DK39**

NONE ..... 1 (K40)

One ..... 2

2-9 ..... 3

10-25 ..... 4

26-100 ..... 5

More than 100 ..... 6 DK RF

K39a. During (MONTHS), did you have sex with someone so they would give you money, drugs, clothes, or a place to sleep? **DK39a**

Yes ..... 1

No ..... 2 DK RF

- K40. **FEMALE R ONLY:** Now, I am going to ask about pregnancy and giving birth. During (MONTHS), were you pregnant at any time? **DK40**
- Yes ..... 1
- No ..... 2 (K41)
- K40a. During (MONTHS), did you ever give birth to a live baby? **DK40a**
- Yes ..... 1
- No ..... 2
- K41. During (MONTHS), how many children under 18 years old were you raising and living with including natural children, adopted children, foster children. **RECORD NUMBER OF CHILDREN. IF KNOWN TO BE NONE, CIRCLE "0."** **DK41**
0. NONE (K43)
- \_\_\_\_\_ Number of Children
- K41a. During (MONTHS), did you lose custody of any children you were raising? **DK41a**
- Yes ..... 1
- No ..... 2 (K43)
- K41b. Did you get custody back during (MONTHS)? **DK41b**
- Yes ..... 1
- No ..... 2
- K42. During (MONTHS), did you receive any kind of counseling or attend any classes at (or arranged by) (PROGRAM) for problems you may have had raising children or to help you to become a better parent? **DK42**
- Yes ..... 1
- No ..... 2
- K43. Now I have some questions about education and employment. During (MONTHS), did you attend school or take any classes (or lessons to get a GED or a high school, technical school, or college diploma)? **DK43**
- Yes ..... 1
- No ..... 2
- K44. During (MONTHS), were you employed full-time at any time? **DK44**
- Yes ..... 1
- No ..... 2 (K47)
- K44a. How many months of that period were you working full-time? **DK44a**
- \_\_\_\_\_ Number of Months

K45. What kind of work did you do at your longest full-time job during (MONTHS)? That is, what was your job title or what was your job called? **RECORD VERBATIM AND ENTER CODE.**

**DK45**

- 
- 
- 1 Clerical Worker; (Ex. Bankteller, receptionist, word processor, office worker)
  - 2 Sales Worker; (Ex. Salesclerk, cashier, gas station attendant, telephone or door-to-door sales)
  - 3 Service Worker; (Ex. Janitor, cook, waitress/waiter, nursing aide, police officer, farm worker)
  - 4 Private HH Worker; (Ex. Maid, housekeeper, childcare worker, private HH cook, gardener)
  - 5 Skilled Worker or Craftsmen; (Ex. Carpenter, electrician, machinist, mechanic)
  - 6 Laborer; (Ex. Construction worker, maintenance worker)
  - 7 Operator or Machine Operator; (Ex. Assembler, machine or textile operator)
  - 8 Transportation Equipment Operator; (Ex. Cab, truck, or bus driver, conductor, fork lift operator)
  - 9 Farm Laborer; (Ex. Farm worker, picker, seasonal farm worker)
  - 10 Farmer or Farm Manager
  - 11 Manager/Administrator; (Ex. Officer manager, inspectors, bank or store administrator)
  - 12 Lay Counselor; (Ex. drug counselor without professional degree, "peer" counselor)
  - 13 Professional/Technical; (Ex. nurse, clinical social worker, teacher, artist, lawyer)
  - 14 Other
  - 15 UNABLE TO CODE
  - 16 Military

K46. Before taxes, what was your highest wage, salary, or rate of pay at that full-time job? **RECORD DOLLARS AND CENTS AND CODE.**

**DK46**

\$ \_\_\_\_\_.

- K46a. CODE:
- Per hour . . . . . 1
  - Every week . . . . . 2
  - Every two weeks . . . . . 3
  - Per month . . . . . 4
  - Per year . . . . . 5
  - OTHER (SPECIFY) \_\_\_\_\_ **RECODED** RF ~~DK~~
  - Day . . . . . 7
  - Unit/Product . . . . . 8
  - Unit/Service . . . . . 9
  - Room & Board . . . . . 10

**DK46a**

K47. During (MONTHS), did you have a part-time job at any time?

**DK47**

- Yes . . . . . 1
- No . . . . . 2 **(K49)**

K47a. How many months were you working part-time?

**DK47a**

\_\_\_\_\_ Number of Months

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K48. Before taxes, what was your highest wage, salary, or rate of pay at the part-time job you had the longest during (MONTHS)? **RECORD DOLLARS AND CENTS AND CODE.**

**DK48**

\$ \_\_\_\_\_.

- K48a. CODE:
- Per hour . . . . . 1
  - Every week . . . . . 2
  - Every two weeks . . . . . 3
  - Per month . . . . . 4
  - Per year 5
  - OTHER (SPECIFY) \_\_\_\_\_ **RECODED** \_\_\_\_\_ 6
  - Day . . . . . 7
  - Unit/Product . . . . . 8
  - Unit/Service . . . . . 9
  - Room & Board . . . . . 10

**DK48a**

RF DK

K49. During (MONTHS), did you get any classes or lessons at (or arranged by) (PROGRAM) to help you get a job, hold a job, or improve your job skills?

**DK49**

- Yes . . . . . 1
- No . . . . . 2

## SECTION M. SEGMENT 3 (POST-SAMPLE EPISODE SEGMENT)

Next, I would like to ask you about what was happening in your life since you left treatment. GO TO THE SEGMENT OUTLINED ON CALENDAR; THE TIME AFTER THE SAMPLE EPISODE TO THE INTERVIEW DATE. You may find it helpful to refer to the calendar when answering the questions. This period of time is from \_\_\_\_\_ to \_\_\_\_\_.

**M1a. CHECK ROW C OF THE CALENDAR. WERE THERE ANY INCARCERATIONS DURING THE SEGMENT 3 PERIOD?**

**DM1a**

YES ..... 1

NO ..... 2 (M6)

**M1b. HOW MANY INCARCERATIONS ARE ON THE CALENDAR FOR SEGMENT 3?**

**DM1b**

\_\_\_\_\_ Number of Incarcerations

**ASK M2-M5 FOR EACH INCARCERATION. USE CODE LIST BELOW TO CODE M3.**

**DRUG OFFENSES**

- Drug Possession ..... 1
- Drug Sale or manufacturing ..... 2

**VIOLENT OFFENSES**

- Armed robbery, Robbery by force ..... 3
- Aggravated assault,  
Assault with the intent to kill,  
Other serious intent ..... 4
- Forcible rape, Statutory Rape, Sexual assault ..... 5
- Murder, Manslaughter, Homicide ..... 6
- Other violent offenses (Arson, Damage  
to or destruction of property,  
Vandalism, Simple assault, Fighting) ..... 7

**PROPERTY OFFENSES**

- Forgery, Passing bad checks, Credit card fraud ..... 8
- Motor Vehicle theft ..... 9
- Breaking and entering, Burglary ..... 10
- Pimping, procuring ..... 11
- Other theft (Larceny, Pick pocketing,  
Purse snatching, Mugging, Receiving,  
Possession of stolen goods, Shoplifting) ..... 12

**PUBLIC ORDER OFFENSES**

- Driving while intoxicated (DWI),  
Driving under the influence (DUI) ..... 13
- Prostitution, solicitation ..... 14
- Violation of parole ..... 15
- Other public order offenses (Bookmaking,  
Numbers, Gambling, Curfew violation,  
Truancy, Being a runaway) ..... 16
- CANNOT CODE CHARGE ..... 17

	PLACE 1      DM2_1	PLACE 2      DM2_2
<p>M2. The next questions are about <b>(PLACE/PRISON/JAIL)</b> you told me about earlier. <b>CODE WITHOUT ASKING IF KNOWN FROM CALENDAR. OTHERWISE ASK:</b> Was <b>(PLACE NAME)</b> the place you went to in <b>(MONTH/YEAR)</b> a . . . <b>RECORD VERBATIM AND CODE.</b></p>	<p>Juvenile hall or county camp, . . . . . 1  a youth authority facility . . . . . 2  a jail, . . . . . 3  a prison, or . . . . . 4  some other place? . . . . . 5  _____  _____  _____</p>	<p>Juvenile hall or county camp, . . . . . 1  a youth authority facility, . . . . . 2  a jail, . . . . . 3  a prison, or . . . . . 4  some other place? . . . . . 5  _____  _____  _____</p>
<p>M3. What was the main charge that you were sentenced for then? <b>RECORD VERBATIM AND CODE FROM CODE LIST. PROBE AS NEEDED USING LIST.</b></p>	<p><input type="checkbox"/> _____  <span style="float: right;">DM3_1</span>  _____  _____</p>	<p><input type="checkbox"/> _____  <span style="float: right;">DM3_2</span>  _____  _____</p>
<p>M4. During the time when you were in <b>(PLACE)</b>, were any drug or alcohol treatment programs offered there, not counting Narcotics Anonymous, Cocaine Anonymous, or Alcoholics Anonymous?</p>	<p style="text-align: right;">DM4_1</p> <p>Yes . . . . . 1  No . . . . . 2  <span style="text-align: center;">(NEXT PLACE OR M6)</span></p>	<p style="text-align: right;">DM4_2</p> <p>Yes . . . . . 1  No . . . . . 2  <span style="text-align: right;">(M6)</span></p>
<p>M5. Did you participate in any of the drug or alcohol treatment programs offered, not counting NA, CA, or AA?</p>	<p style="text-align: right;">DM5_1</p> <p>Yes . . . . . 1  No . . . . . 2</p>	<p style="text-align: right;">DM5_2</p> <p>Yes . . . . . 1  No . . . . . 2</p>

(NEXT PLACE OR M6)

(M6)

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<b>M6. CHECK ROW C OF THE CALENDAR. WAS PAROLE OR PROBATION STATUS NOTED DURING SEGMENT 3 PERIOD?</b>	
	<b>DM6</b>
YES .....	1 (IF MORE THAN ONE, ASK M7 ABOUT THE LAST ONE. IF ON PAROLE AND PROBATION SIMULTANEOUSLY, ASK ABOUT THE ONE WITH THE HIGHEST NUMBER OF CONTACTS.)
NO .....	2 (M9)

M7. Did you report to or have any contact with your (probation/parole) officer since (MONTH)? **DM7**

Yes ..... 1

No ..... 2 (M9)

M7a. How often did you have contact with or report to your (probation/parole) officer since (MONTH)? **DM7a**  
**ENTER NUMBER AND CODE.**

\_\_\_\_\_ # of times

M7b. CODE: Per Month ..... 1 **DM7b**  
Per Year ..... 2

M8. Were urine tests required as a condition of probation/parole since (MONTH)? **DM8**

Yes ..... 1

No ..... 2 (M9)

M8a. How many times per month were these tests required? **DM8a**

\_\_\_\_\_ # of times per month

<b>M9. CHECK ROW C OF THE CALENDAR. WAS R LIVING IN THE COMMUNITY (NOT INCARCERATED) FOR 3 MONTHS OR MORE OF SEGMENT 3?</b>	
	<b>DM9</b>
YES .....	1
NO .....	2 (M42)

M10.		M11.					
Next, I would like to ask some questions about your use of drugs from the street and your use of prescription drugs to get high for non-medical effects, and your use of alcohol since (MONTH). Since (MONTH), did you use (DRUG TYPE) five times or more? <b>READ AND CODE a-m.</b>		Now, please look at the calendar. Since (MONTH). In the month you used (DRUG) the most, about how many days did you use it? <b>CODE; PROBE WITH CATEGORIES AS NEEDED.</b>					
		More					
		1 day	2-5 days	6-10 days	11-20 days	than 20	DK
a. Inhalants <b>DM10a</b>	Yes ..... 1 No ..... 2	<b>DM11a</b>					
		1	2	3	4	5	DK
b. Marijuana/Hashish <b>DM10b</b>	Yes ..... 1 No ..... 2	<b>DM11b</b>					
		1	2	3	4	5	DK
c. Crack <b>DM10c</b>	Yes ..... 1 No ..... 2	<b>DM11c</b>					
		1	2	3	4	5	DK
d. Cocaine powder <b>DM10d</b>	Yes ..... 1 No ..... 2	<b>DM11d</b>					
		1	2	3	4	5	DK
e. PCP or angel dust <b>DM10e</b>	Yes ..... 1 No ..... 2	<b>DM11e</b>					
		1	2	3	4	5	DK
f. Hallucinogens or Psychedelics/LSD <b>DM10f</b>	Yes ..... 1 No ..... 2	<b>DM11f</b>					
		1	2	3	4	5	DK
g. Heroin <b>DM10g</b>	Yes ..... 1 No ..... 2	<b>DM11g</b>					
		1	2	3	4	5	DK
h. Illegal Methadone <b>DM10h</b>	Yes ..... 1 No ..... 2	<b>DM11h</b>					
		1	2	3	4	5	DK
i. Other Narcotics <b>DM10i</b>	Yes ..... 1 No ..... 2	<b>DM11i</b>					
		1	2	3	4	5	DK
j. Methamphetamines <b>DM10j</b>	Yes ..... 1 No ..... 2	<b>DM11j</b>					
		1	2	3	4	5	DK
k. Downers <b>DM10k</b>	Yes ..... 1 No ..... 2	<b>DM11k</b>					
		1	2	3	4	5	DK
l. Other drug (SPECIFY) 12= Other Prescription Drug 14= Ritalin or Preludin <b>DM10l</b> <b>DM10lVB</b>	Yes ..... 1 No ..... 2	<b>DM11l</b>					
		1	2	3	4	5	DK
m. Alcohol <b>DM10m</b>	Yes ..... 1 No ..... 2	<b>DM11m</b>					
		1	2	3	4	5	DK
<b>M10a. WAS AT LEAST ONE DRUG TYPE CODED "1" AT M10?</b>							
<b>DM10a1</b>							
YES ..... 1 (ASK M11-M13 FOR EACH DRUG CODED "1" AT M10)							
NO ..... 2 (M15)							

	M12. Since (MONTH), how many months were you not using (DRUG)? CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.						M13. Again, looking at the calendar, since (DATE 30 DAYS AGO), about how many days did you use (DRUG)? CODE; PROBE WITH CATEGORIES IF NEEDED.						
	USED EVERY MONTH	1-3 months	4-6 months	7-9 months	OVER 9 months	DK	0 days	1 days	2-5 days	6-10 days	More than 20 days	DK	
a.	DM12a						DM13a						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
b.	DM12b						DM13b						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
c.	DM12c						DM13c						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
d.	DM12d						DM13d						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
e.	DM12e						DM13e						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
f.	DM12f						DM13f						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
g.	DM12g						DM13g						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
h.	DM12h						DM13h						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
i.	DM12i						DM13i						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
j.	DM12j						DM13j						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
k.	DM12k						DM13k						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
l.	DM12l						DM13l						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
m.	DM12m						DM13m						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK

<b>M14a. IS ALCOHOL THE ONLY "1" CODE AT M10)</b>	<b>DM14a</b>
YES ..... 1 (M15)	
NO ..... 2	

M14b. During the last 30 days, how much money would you say you spent on the drugs you used to get high or for other non-medical effects? **RECORD DOLLAR AMOUNT AND ROUND TO NEAREST DOLLAR. PROBE FOR R's BEST ESTIMATE. IF NECESSARY, ASK:** How much cash did you spend?

**DM14b**

\$ \_\_\_\_\_ .00                      RF                      DK

M15. Since (MONTH), did you ever go to the hospital because of a drug overdose?

**DM15**

Yes ..... 1  
No ..... 2 (M16)

M15a. Since (MONTH), how many times did you go to the hospital because of a drug overdose?  
**CODE R's RESPONSE.**

**DM15a**

One time ..... 1  
2-3 times ..... 2  
4-10 times ..... 3  
More than 10 times ..... 4

M16. Since (MONTH), did you ever, even one time, use a needle to inject drugs to get high or for other non-medical effects.

**DM16**

Yes ..... 1 (M17)  
No ..... 2

M16a. Did someone else use a needle to inject you with drugs to get high or for other non-medical effects?

**DM16a**

Yes ..... 1  
No ..... 2 (M19)

M17. Since (MONTH), during the month you used needles the most, about how many days did you inject drugs to get high or for other non-medical effects? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED**

**DM17**

One day ..... 1  
2-5 days ..... 2  
6-10 days ..... 3  
11-20 days ..... 4  
more than 20 days? ..... 5                      RF                      DK

M18. Since (MONTH), when you used a needle to inject drugs to get high, about how often did you use it after someone else? Would you say never, less than half of the time, half of the time, more than half of the time, or every time?

**DM18**

Never ..... 1 (M19)  
Less than half of the time ..... 2  
Half of the time ..... 3  
More than half of the time ..... 4  
Every time ..... 5                      RF                      DK

M18a. Since (**MONTH**), when you used a needle after someone else, about how often did you clean it with bleach before you used it? Would you say . . .

**DM18a**

- Never, . . . . . 1
- Less than half of the time, . . . . . 2
- Half of the time, . . . . . 3
- More than half of the time, . . . . . 4
- Every time? . . . . . 5      RF      DK

**M19. WAS ALCOHOL CODED "1" at M10?** **DM19**

**YES** . . . . . 1 (M21)

**NO** . . . . . 2

M20. Now I would like to ask about your use of alcoholic beverages. (By alcoholic beverages I mean beer, malt liquors, wine, wine coolers and hard liquor, such as vodka and mixed drinks.) Since (**MONTH**), did you ever have a drink of alcohol? (By a drink, I mean either a can of beer, a glass of wine or a wine cooler, a shot of hard liquor, or a single mixed drink.)

**DM20**

- Yes . . . . . 1
- No . . . . . 2 (M27)

M21. During the last 30 days, did you drink any alcohol?

**DM21**

- Yes . . . . . 1
- No . . . . . 2

M22. Since (**MONTH**), think about the month you were drinking the most. About how many days did you drink during that month? **CODE R's RESPONSE.**

**DM22**

- One day . . . . . 1
- 2-5 days . . . . . 2
- 6-10 days . . . . . 3
- 11-20 days or . . . . . 4
- More than 20 days . . . . . 5

DK      RF



**INFORMATION FOR M28 NOT INCLUDED IN DATA FILE.**

<p style="text-align: center;">M28.</p> <p>Where did you receive treatment or help the (first/next) time since (MONTH)? <b>RECORD NAME AND CITY.</b></p>	<p style="text-align: center;">M28a.</p> <p>What kind of treatment or help did you receive there? <b>RECORD VERBATIM AND CODE ALL THAT APPLY.</b></p>
<p>1. _____ _____ _____</p> <p style="text-align: right;">(M28a)</p>	<p>_____</p> <p>Inpatient ..... 1 <b>DM28a1m1</b></p> <p>Residential ..... 2 <b>DM28a1m2</b></p> <p>Outpatient (non-methadone) ..... 3 <b>DM28a1m3</b></p> <p>Methadone ..... 4 <b>DM28a1m4</b></p>
<p>2. _____ _____ _____</p> <p style="text-align: right;">(M28a)</p>	<p>_____</p> <p>Inpatient ..... 1 <b>DM28a2m1</b></p> <p>Residential ..... 2 <b>DM28a2m2</b></p> <p>Outpatient (non-methadone) ..... 3 <b>DM28a2m3</b></p> <p>Methadone ..... 4 <b>DM28a2m4</b></p>
<p>3. _____ _____ _____</p> <p style="text-align: right;">(M28a)</p>	<p>_____</p> <p>Inpatient ..... 1 <b>DM28a3m1</b></p> <p>Residential ..... 2 <b>DM28a3m2</b></p> <p>Outpatient (non-methadone) ..... 3 <b>DM28a3m3</b></p> <p>Methadone ..... 4 <b>DM28a3m4</b></p>
<p>4. _____ _____ _____</p> <p style="text-align: right;">(M28a)</p>	<p>_____</p> <p>Inpatient ..... 1 <b>DM28a4m1</b></p> <p>Residential ..... 2 <b>DM28a4m2</b></p> <p>Outpatient (non-methadone) ..... 3 <b>DM28a4m3</b></p> <p>Methadone ..... 4 <b>DM28a4m4</b></p>

M28b. Are you in treatment now?

- Yes ..... 1
- No ..... 2

**DM28b**

M29. Since (MONTH), did you ever attend any . . .

Yes No

- a. Alcohol Anonymous meetings? . . . . . 1 . . . . . 2 **DM29a**
- b. Narcotics Anonymous meetings? . . . . . 1 . . . . . 2 **DM29b**
- c. Cocaine Anonymous meetings? . . . . . 1 . . . . . 2 **DM29c**

**M29a. IS ANY ITEM CODED "1" AT M29?** **DM29a1**

YES . . . . . 1

NO . . . . . 2 (M30)

M29b. Since (MONTH), have you been to five or more of any of these meetings?

**DM29b1**

- Yes . . . . . 1
- No . . . . . 2

M29c. When did you last attend one of these meetings?

\_\_\_\_\_ 19 \_\_\_\_\_  
Mo Yr

**DM29cMO DM29cYR**

M30. Since (MONTH), did you ever have at least two weeks when you felt very sad, blue, or depressed, and you lost interest or pleasure in things you usually cared about?

**DM30**

- Yes . . . . . 1
- No . . . . . 2 (M31)
- DK (M31)

M30a. Since (MONTH), were all, some, or none of the these times caused by drugs or alcohol you took?

**DM30a**

- All of the times . . . . . 1
- Some of the times . . . . . 2
- None of the times . . . . . 3 (M31)

M30b. Since (MONTH), did you have any times like this that were not caused by drugs or alcohol you took?

**DM30b**

- Yes . . . . . 1
- No . . . . . 2

M31. Since (MONTH), did you ever attempt suicide?

**DM31**

- Yes . . . . . 1 (M32)
- No . . . . . 2

M31a. Since (MONTH), did you ever think seriously about committing suicide?

**DM31a**

- Yes . . . . . 1
- No . . . . . 2

M32. Since (MONTH), did you see a doctor, nurse, counselor or social worker for problems with your emotions, nerves, or mental health?

DM32

- Yes ..... 1
- No ..... 2 (M33)

M32a. How many times was that? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

DM32a

- 1-5 times ..... 1
- 6-10 times ..... 2
- 11-30 times ..... 3
- 31 times or more ..... 4 DK

M33. Since (MONTH), did you stay overnight in a hospital or clinic for treatment of problems with your emotions, nerves, or mental health?

DM33

- Yes ..... 1
- No ..... 2

M34.		M35.					M36.
Now I would like to ask about your involvement with the police, the courts, and illegal activities. Since (MONTH), did you ever . . .		Since (MONTH), about how many different times did you do that? <b>CODE R'S RESPONSE.</b> <b>1 2-5 6-20 21-100 More</b> <b>Time Times Times Times than 100</b>					What drugs were you dealing or selling since (MONTH)? <b>CODE ALL THAT APPLY.</b>
c. Sell drugs or help someone else sell drugs, including cutting, weighing, packaging or making drugs?	Yes . . . 1 (M35) No . . . . 2 RF DM34c	DM35c 1 2 3 4 5					Inhalants . . . . . 1 DM36cm1 Marijuana/Hash . . . . 2 DM36cm2 Crack . . . . . 3 DM36cm3 Cocaine powder . . . . 4 DM36cm4 PCP/angel dust . . . . 5 DM36cm5 Hallucinogen or Psychedelics/LSD . . . 6 DM36cm6 Heroin . . . . . 7 DM36cm7 Illegal Methadone . . . 8 DM36cm8 Other Narcotics . . . . 9 DM36cm9 Methamphetamines . 10 DM36cm10 Downers . . . . . 11 DM36cm11 Other drug . . . . . 12 DM36cm12 Alcohol . . . . . 13 DM36cm13 Ritalin or Preludin . . 14 DM36cm14
d. Have sex for money or drugs (prostitution)?	Yes . . . 1 (M35) No . . . . 2 RF DM34d	DM35d 1 2 3 4 5					
g. Break into a house, a business, or a vehicle to take someone else's money or property?	Yes . . . 1 (M35) No . . . . 2 RF DM34g	DM35g 1 2 3 4 5					
h. Use a weapon or physical force against someone to steal money or property from them?	Yes . . . 1 (M35) No . . . . 2 RF DM34h	DM35h 1 2 3 4 5					

n. Do anything else against the law? (SPECIFY) <b>CODE ONE</b> 1= Drug Possession 4= Aggravated assault, Assault with the intent to kill, Other serious intent 5= Forcible rape, Statutory Rape, Sexual assault 6= Murder, Manslaughter, Homicide 7= Other violent offenses (Arson, Damage to or destruction of property, Vandalism, Simple assault, Fighting) 8= Forgery, Passing bad checks, Credit card fraud 9= Motor Vehicle theft 11= Pimping, procuring 12= Other theft (Larceny, Pick pocketing, Purse snatching, Mugging, Receiving, Possession of stolen goods, Shoplifting) 13= Driving while intoxicated (DWI) Driving under the influence (DUI) 15= Violation of parole 16= Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway) 17= Cannot Code Charge  _____	Yes ... 1 (M35) No ..... 2  RF <b>DM34n</b>	<b>DM35n</b> 1      2      3      4      5
	<b>DM34nVB</b>	

<b>M37. WAS ANY ACTIVITY CODED "1" AT M34?</b>	<b>DM37</b>
<b>YES</b> ..... <b>1</b>	
<b>NO</b> ..... <b>2 (M39)</b>	

M38. During (MONTHS), how many months were you doing any of the activities we just talked about?

\_\_\_\_\_ Number of months

**DM38**

M39. **CODE WITHOUT ASKING, IF KNOWN.** Since (MONTH), were you ever arrested and booked or taken into custody? **DM39**

Yes ..... 1

No ..... 2 (M41)

M40. Since (MONTH), how many times altogether were you arrested and booked or taken into custody? **CODE R's RESPONSE. PROBE FOR BEST ESTIMATE.** **DM40**

One time ..... 1

2-3 times ..... 2

4-10 times ..... 3

More than 10 times ..... 4 RF DK

M41. Right now, do you have any (other) criminal charges or criminal cases against you, including a conviction that you are awaiting sentencing for? **DM41**

Yes ..... 1

No ..... 2 RF DK

M42. Since (MONTH), were you ever attacked with a weapon such as a knife or a gun? **DM42**

Yes ..... 1

No ..... 2

M42a. Since (MONTH), were you ever hit or beaten so seriously that you were badly bruised, had to see a doctor, or had to stay in bed for one day or more? **DM42a**

Yes ..... 1

No ..... 2 RF DK

M43. IS "1" CODED AT M42 OR M42a? **DM43**

YES ..... 1

NO ..... 2 (M45)

M44. Since (MONTH), how many times were you attacked with a weapon or seriously hit or beaten? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.** **DM44**

One time ..... 1

2-5 times ..... 2

6-10 times ..... 3

11-20 times ..... 4

21-100 times ..... 5

More than 100 times ..... 6 RF DK

M45. The next questions are about your physical health. Would you say your health is . . . DM45

Excellent, . . . . . 1

Good, . . . . . 2

Fair, or . . . . . 3

Poor? . . . . . 4

M46. Do you have any illness or condition that causes you pain, limits your activities, or causes you problems at work (or in school)? DM46

Yes . . . . . 1

No . . . . . 2 (M47i)

M47. Since (MONTH), have you had any problems with . . . Yes No DK

b. a heart or blood condition, . . . . . 1 . . . . . 2 . . . . . DK DM47b

c. hepatitis or yellow jaundice? . . . . . 1 . . . . . 2 . . . . . DK DM47c

d. an internal condition, such as ulcers, diabetes, or kidney or liver problems? . . . . . 1 . . . . . 2 . . . . . DK DM47d

e. a bone or muscle condition, . . . . . 1 . . . . . 2 . . . . . DK DM47e

f. a nerve condition, such as convulsions, or migraines? . . . . . 1 . . . . . 2 . . . . . DK DM47f

g. **FEMALE R ONLY:** miscarriage, toxemia, bad Pap smear or other serious female condition? . . . . . 1 . . . . . 2 . . . . . DK DM47g

h. any sexually transmitted disease other than AIDS? . . . . . 1 . . . . . 2 . . . . . DK DM47h

i. **CHECK ROW D OF THE CALENDAR. HAVE YOU ALREADY ENTERED "A" ON ROW D?** DM47i

YES . . . . . 1 (M47j)

NO, AND AT LEAST ONE "YES" AT M47 . . . . . 2 (M48)

NO, AND NO "YES" AT M47 . . . . . 3 (M49)

j. any AIDS-related condition? . . . . . 1 . . . . . 2 . . . . . DK DM47j

M48. Did you have any of these problems in the last 30 days? DM48

Yes . . . . . 1

No . . . . . 2

M48a. IS M47i CODED "1"?

YES . . . . . 1 (M51) DM48a

NO . . . . . 2

M49. Since (MONTH), have you had a blood test for AIDS? DM49

Yes . . . . . 1

No . . . . . 2 (M51)

M49a. Do you know the results of that test?

**DM49a**

- Yes ..... 1
- No ..... 2

M50. Since (MONTH), has a doctor or other health professional told you that you are HIV-positive or have the AIDS virus?

**DM50**

- Yes ..... 1
- No ..... 2

M51. Since (MONTH), how many times did you see a doctor for a physical illness, condition or injury? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**DM51**

- Once, ..... 1
- 2-9 times, or ..... 2
- 10 or more times? ..... 3
- NEVER SAW A DOCTOR ..... 4

M52. Since (MONTH), how many times did you go to a hospital emergency room but did not stay overnight? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**DM52**

- Once, ..... 1
- 2-9 times, or ..... 2
- 10 or more times? ..... 3
- NEVER WENT ..... 4

M53. Since (MONTH), did you ever go to a hospital for at least 24 hours for a physical illness, condition or injury?

**DM53**

- Yes ..... 1
- No ..... 2 (M54)

M53a. Since (MONTH), about how many nights did you spend in the hospital for a physical illness, condition, or injury?

**DM53a**

\_\_\_\_\_ nights      DK

M54. **FEMALE R ONLY:** Since (MONTH), have you been pregnant at any time?

**DM54**

- Yes ..... 1
- No ..... 2 (M55)

M54a. Did you give birth to a live baby?

**DM54a**

- Yes ..... 1
- No ..... 2

M55. Since (MONTH), about how many different people have you had sex with, even if only one time? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.** **DM55**

NONE ..... 1 (M56)

One ..... 2

2-9 ..... 3

10-25 ..... 4

26-100 ..... 5

More than 100 ..... 6 RF DK

M55a. Since (MONTH), have you had sex with someone so they would give you money, drugs, clothes or a place to sleep? **DM55a**

Yes ..... 1

No ..... 2 RF DK

**M56. CHECK ROW C OF THE CALENDAR. WAS R LIVING IN THE COMMUNITY (NOT INCARCERATED) FOR 3 MONTHS OR MORE OF SEGMENT 3?**

**DM56**

**YES ..... 1**

**NO ..... 2 (SECTION P)**

M57. Now I have some questions about your past living arrangements. Since (MONTH), did you ever for at least two nights in a row have no place to stay except for a homeless shelter or street? **DM57**

Yes ..... 1

No ..... 2 (M59)

M58. How long were you in a shelter or on the street since (MONTH)? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.** **DM58**

Less than 1 month ..... 1

1-3 months ..... 2

4-6 months ..... 3

7-9 months ..... 4

10-12 months ..... 5

HOMELESS/ON THE STREET ENTIRE TIME ..... 6 (M60)

M59. Since (MONTH), did you live in your own apartment or house at any time, either renting or buying, including living with parents or guardians? **DM59**

Yes ..... 1

No ..... 2 (M60)

M59a. Since (MONTH), how long did you live there? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

DM59a

- Less than 1 month ..... 1
- 1-3 months ..... 2
- 4-6 months ..... 3
- 7-9 months ..... 4
- 10-12 months ..... 5

M60. **CODE WITHOUT ASKING, IF KNOWN.** Since (MONTH), how many children under 18 years old were you raising and living with, including natural children, adopted children, and foster children? **ENTER NUMBER OF CHILDREN. IF NONE, CODE "0."**

DM60

- 0. NONE (M63)
- \_\_\_\_\_ Number of Children

M61. Since (MONTH), did you lose custody of any children you were raising? By custody, I mean being legally in charge of a child.

DM61

- Yes ..... 1
- No ..... 2 (M63)

M62. Did you ever get custody back since (MONTH)?

DM62

- Yes ..... 1
- No ..... 2

M63. Next, I would like to ask about how you support yourself, that is, how you got the money that you used to live on. Since (MONTH), did you get most of your support from illegal activities that you did?

DM63

- Yes ..... 1
- No ..... 2 (M64)

RF (M64)

M63a. Since (MONTH), when you were getting most of your support from illegal activities, what did you do most of the time to get money? **CODE ALL THAT APPLY.**

- Drug dealing ..... 1 DM63am1
- Prostitution ..... 2 DM63am2
- Motor vehicle theft ..... 3 DM63am3
- Shoplifting ..... 4 DM63am4
- Breaking and entering, Burglary ..... 5 DM63am5
- Armed robbery, Robbery by force ..... 6 DM63am6
- Other property crime: Moonshining, boot legging, running liquor, pimping, procuring, forgery, Passing bad checks, credit card fraud, bookmaking, numbers, gambling, receiving, possession of stolen goods, other theft (larceny, pick pocketing, purse snatching, mugging) ..... 7 DM63am7
- Violent crime for pay: Arson, aggravated assault, other serious assault, murder ..... 8 DM63am8
- OTHER ILLEGAL ACTIVITY ..... 9 DM63am9

RF DK

M63b. Since (MONTH), in a typical week, how much money would you say you earned/earn from crimes?

DM63b

\_\_\_\_\_ .00 per week

M64. Now I have some questions about education and employment. Since (MONTH), did you attend (school or take any classes or lessons to get a GED, or a high school, technical school, or college diploma)?

DM64

Yes ..... 1

No ..... 2

M65. Since (MONTH), have you been employed full-time at any time, that is, did you work 35 hours or more a week at any job? (Do not count any job that involved illegal activity.)

DM65

Yes ..... 1

No ..... 2 (M69)

M66. Since (MONTH), how many months have you worked full-time?

DM66

\_\_\_\_\_ Number of months

M67. What kind of work did you do at your longest full-time job? That is, what was your job title or what was your job called?

**RECORD VERBATIM AND ENTER CODE.**

DM67



\_\_\_\_\_  
\_\_\_\_\_

- 1 Clerical Worker; (Ex. Bankteller, receptionist, word processor, office worker)
- 2 Sales Worker; (Ex. Salesclerk, cashier, gas station attendant, telephone or door-to-door sales)
- 3 Service Worker; (Ex. Janitor, cook, waitress/waiter, nursing aide, police officer, farm worker)
- 4 Private HH Worker; (Ex. Maid, housekeeper, childcare worker, private HH cook, gardener)
- 5 Skilled Worker or Craftsmen; (Ex. Carpenter, electrician, machinist, mechanic)
- 6 Laborer; (Ex. Construction worker, maintenance worker)
- 7 Operator or Machine Operator; (Ex. Assembler, machine or textile operator)
- 8 Transportation Equipment Operator; (Ex. Cab, truck, or bus driver, conductor, fork lift operator)
- 9 Farm Laborer; (Ex. Farm worker, picker, seasonal farm worker)
- 10 Farmer or Farm Manager
- 11 Manager/Administrator; (Ex. Officer manager, inspectors, bank or store administrator)
- 12 Lay Counselor; (Ex. drug counselor without professional degree, "peer" counselor)
- 13 Professional/Technical; (Ex. nurse, clinical social worker, teacher, artist, lawyer)
- 14 Other
- 15 UNABLE TO CODE
- 16 Military

M68. Before taxes, what (was your highest/is your) wage, salary, or rate of pay at that full-time job? **RECORD DOLLARS AND CENTS AND CODE.**

DM68

\$ \_\_\_\_\_.

- M68a. CODE:
- Per hour . . . . . 1
  - Every week . . . . . 2
  - Every two weeks . . . . . 3
  - Per month . . . . . 4
  - Per year . . . . . 5
  - OTHER (SPECIFY) \_\_\_\_\_ **RECODED** RF ~~DK~~
  - Day . . . . . 7
  - Unit/Product . . . . . 8
  - Unit/Service . . . . . 9
  - Room & Board . . . . . 10

DM68a

M69. Since (**MONTH**), have you had a part-time job at any time

DM69

- Yes . . . . . 1
- No . . . . . 2 (M72)

M70. Since (**MONTH**), how many months have you worked part-time?

DM70

\_\_\_\_\_ Number of months

M71. Before taxes, what was your highest wage, salary, or rate of pay at the part-time job you had the longest since (**MONTH**)? **RECORD DOLLARS AND CENTS AND CODE.**

DM71

\$ \_\_\_\_\_.

- M71a. CODE:
- Per hour . . . . . 1
  - Every week . . . . . 2
  - Every two weeks . . . . . 3
  - Per month . . . . . 4
  - Per year . . . . . 5
  - OTHER (SPECIFY) \_\_\_\_\_ **RECODED** RF ~~DK~~
  - Day . . . . . 7
  - Unit/Product . . . . . 8
  - Unit/Service . . . . . 9
  - Room & Board . . . . . 10

DM71a

M72. **CODE WITHOUT ASKING, IF KNOWN.** Since (**MONTH**), has anyone you lived with (helped with/paid your) expenses, such as housing, food, clothing, medical costs, (and/or) transportation?

DM72

- Yes . . . . . 1
- No . . . . . 2 (M73)

RF (M73)

M72a. Since (**MONTH**), would you say that this help with your living expenses has paid for less than half, half or more, or all of your living expenses?

DM72a

- Less than half . . . . . 1
- Half or more . . . . . 2
- All . . . . . 3

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M73.		M74.	
<p>Now, I will ask about (other) sources of income you may have had since <b>(MONTH)</b>. (Please do <u>not</u> include income from illegal activities) (or) (help you received with living expenses from someone you lived with)? Since <b>(MONTH)</b>, did you ever personally get any income from . . .</p>		<p>Since <b>(MONTHS)</b> before taxes, about how much income did you personally get from <b>(INCOME SOURCE)</b>? <b>IF YOU CODED "3", SKIP TO THE NEXT INCOME SOURCE. RECORD DOLLAR AMOUNT. ROUND TO NEAREST DOLLAR.</b></p>	
<p>a. <b>CODE WITHOUT ASKING.</b> Your wages or salary, including tips, from all jobs or businesses?</p>	<p>Yes . . . . . 1 (M74) No . . . . . 2 RF DM73a DK</p>	<p><b>DM74a</b> \$ _____ .00 RF DK (M74a) (1) <b>CODE:</b> per wk . . . 1 per mo . . . 2 <b>DM74aa</b> Total . . . 3 (M74a) (2) _____ Number (wks/mos) <b>DM74aWK DM74aMO</b></p>	
<p>b. (Money/Other money) from a (spouse, partner, or other) family member who was <u>not</u> living with you? (Not including the help we've already talked about).</p>	<p>Yes . . . . . 1 (M74) No . . . . . 2 RF DM73b DK</p>	<p><b>DM74b</b> \$ _____ .00 RF DK (M74b) (1) <b>CODE:</b> per wk . . . 1 per mo . . . 2 <b>DM74bb</b> Total . . . 3 (M74b) (2) _____ Number (wks/mos) <b>DM74bWK DM74bMO</b></p>	
<p>c. Welfare, including General Assistance, or Relief or Aid to Dependent Children or to Families with Dependent Children?</p>	<p>Yes . . . . . 1 (M74) No . . . . . 2 RF DM73c DK</p>	<p><b>DM74c</b> \$ _____ .00 RF DK (M74c) (1) <b>CODE:</b> per wk . . . 1 per mo . . . 2 <b>DM74cc</b> Total . . . 3 (M74c) (2) _____ Number (wks/mos) <b>DM74cWK DM74cMO</b></p>	
<p>d. Unemployment compensation, disability pay, or SSI?</p>	<p>Yes . . . . . 1 (M74) No . . . . . 2 RF DM73d DK</p>	<p><b>DM74d</b> \$ _____ .00 RF DK (M74d) (1) <b>CODE:</b> per wk . . . 1 per mo . . . 2 <b>DM74dd</b> Total . . . 3 (M74d) (2) _____ Number (wks/mos) <b>DM74dWK DM74dMO</b></p>	
<p>e. Social Security, pension, annuity, or interest from savings?</p>	<p>Yes . . . . . 1 (M74) No . . . . . 2 RF DM73e DK</p>	<p><b>DM74e</b> \$ _____ .00 RF DK (M74e) (1) <b>CODE:</b> per wk . . . 1 per mo . . . 2 <b>DM74ee</b> Total . . . 3 (M74e) (2) _____ Number (wks/mos) <b>DM74eWK DM74eMO</b></p>	
<p>f. Alimony or child support?</p>	<p>Yes . . . . . 1 (M74) No . . . . . 2 RF DM73f DK</p>	<p><b>DM74f</b> \$ _____ .00 RF DK (M74f) (1) <b>CODE:</b> per wk . . . 1 per mo . . . 2 <b>DM74ff</b> Total . . . 3 (M74f) (2) _____ Number (wks/mos) <b>DM74fWK DM74fMO</b></p>	

<p>g. Any other sources I haven't asked about? (<b>SPECIFY</b>)</p> <p>1= Food Stamps, rent vouchers  2= Recycling (cans, bottles, newspapers)  3= Inheritances, trusts, prices, settlements, etc.)  4= Other sources of income</p> <p>_____</p> <p><b>DM73gCOD</b></p>	<p>Yes . . . . . 1 (M74)  No . . . . . 2</p> <p>RF</p> <p><b>DM73g</b>      DK</p>	<p><b>DM74g</b></p> <p>\$ _____ .00      RF      DK</p> <p>(M74g) (1) <b>CODE:</b> per wk . . . 1    per mo . . . 2</p> <p><b>DM74gg</b>      Total . . . 3</p> <p>(M74g) (2) _____ Number (wks/mos)</p> <p><b>DM74gWK DM74gMO</b></p>
---	--	--

## **SECTION P. PARTICIPANT LOCATING INFORMATION**

Thank you for your time. We may be contacting you again to see how things are going for you. (**ASK FOR LOCATING INFORMATION FOR R AND TWO CONTACTS.**)

**ALL INFORMATION IN SECTION P NOT INCLUDED IN DATA FILE.**

## SECTION R: INTERVIEWER REPORT

(FILL IN THE FOLLOWING ITEMS IMMEDIATELY AFTER THE INTERVIEW HAS BEEN COMPLETED.)

R1. Did any interruption occur during the interview?

**DR1**

- Yes ..... 1 **(R1a)**
- No ..... 2 **(R2)**

R1a. What was the nature of the interruption(s)? **DESCRIBE IN DETAIL:**

---

---

---

R2. Did it appear that R was under the influence of drugs or alcohol?

**DR2**

- Yes, strongly ..... 1
- Yes, moderately ..... 2
- Yes, slightly ..... 3
- No ..... 4

R3. What was R's speech pattern?

**DR3**

- Coherent ..... 1 **(R4)**
- Not completely coherent ..... 2 **(R3a)**
- Definitely not coherent ..... 3 **(R3a)**

R3a. What do you think accounted for this lack of coherence?

---

---

---

R4. Respondent was:

**DR4**

- Black, non-Spanish surname ..... 1
- Spanish surname ..... 2
- Non-black, non-Spanish surname (other white) ..... 3
- Other (**SPECIFY**) \_\_\_\_\_ 4

R5. Where was the interview conducted?

**DR5**

- R's place of residence ..... 1
- A residence of friend or relative of R ..... 2
- Premises of treatment program ..... 3
- Institution (**SPECIFY**)     **RECODE**     ..... 4
- Other (**SPECIFY**)     **RECODE**     ..... 5
- Restaurant/Bar/Fast Food Places ..... 6
- Jail/Prison/Correctional Facility ..... 7
- Place of work/Office/Relatives' place  
of work ..... 8
- Park/Other outside place ..... 9
- Alcohol/Other Drug Treatment/Rehab Center ..... 10
- Shelter/Mission ..... 11
- Interviewer's car/Parking lot ..... 12
- Hospital/Clinic ..... 13
- Shopping Mall/Area (Inside/Outside) ..... 14
- Libraries/Schools/Colleges ..... 15
- Telephone ..... 16
- Health Clubs/Recreational Facilities ..... 17
- Unable to code - Institutions ..... 18
- Unable to code - Other ..... 19

R6. Interest of R during interview:

**DR6**

- Very interested ..... 1
- Somewhat interested ..... 2
- Uninterested ..... 3

R7. Was any other person present during the interview?

**DR7**

- Yes, most of the time ..... 1
- Yes, part of the time ..... 2
- No ..... 3

R8. How honest do you feel R's answers were?

**DR8**

- Extremely honest ..... 1
- Honest ..... 2
- Somewhat honest ..... 3
- Not very honest ..... 4
- Difficult to tell ..... 5



# CALIFORNIA OUTCOMES STUDY

Sponsored by  
HEALTH AND WELFARE AGENCY  
STATE OF CALIFORNIA

## PARTICIPANT QUESTIONNAIRE CONTINUING METHADONE MAINTENANCE

**ANNOTATED  
VERSION**

Date of Interview **MINTMO/MINTDAY19MINTYEAR**

Time Started **MHRSTART:MMINSTAR** am/pm **MBEGAMPM**

Time Finished **MHREND:MMINEND** am/pm **MENDAMPM**

### Interview Status

Partial Complete	60	Spanish In-person (complete or partial complete)	63
In-person Complete	61	Spanish Phone (complete or partial complete)	64
Phone Complete	62		

The information entered on this form will be handled in the strictest confidence and will not be released to unauthorized personnel. The confidentiality of this information is protected by United States Code, Title 42, Sections 241(d) and 290ee-3. This research was reviewed and approved by the Committee on Protection of Human Subjects of the Health and Welfare Agency, State of California, Project No. 92-08-05.

**National Opinion Research Center  
at the University of Chicago  
1155 East 60th Street  
Chicago, Illinois 60637**

**MAILING ADDRESS for the CALIFORNIA OUTCOMES STUDY:  
301 N. Lake Avenue, Suite 330  
Pasadena, California 91101  
1-800-995-8494**



## PRE-INTERVIEW CALENDAR CONSTRUCTION AND INTERVIEW CORRECTIONS

1. TO CONSTRUCT THE METHADONE MAINTENANCE SAMPLE EPISODE SEGMENT, REFER TO Q.18 OF THE PLR. (1) ENTER THE ADMISSION AND CURRENT MONTHS BELOW. (2) DRAW A LINE ACROSS ROW A ON THE CALENDAR FROM ADMISSION MONTH THROUGH CURRENT MONTH, AND WRITE PROGRAM NAME/CITY ABOVE THE LINE. (3) DRAW A LINE THAT OUTLINES ALL THE CALENDAR MONTHS THAT COMPRISE THE SAMPLE EPISODE. (REMEMBER, THERE MAY BE MULTIPLE ADMISSIONS TO THE PROGRAM.) WRITE SEGMENT 2 ON THE CALENDAR.

<b>A.MQ1A1MO</b> 19 <b>MQ1A1YR</b> =ADMISSION MONTH Mo      Yr
---

<b>CORRECTED DATES:</b>
<b>A.MQ1A2MO</b> 19 <b>MQ1A2YR</b> =ADMISSION MONTH Mo      Yr

<b>B.MQ1B1MO</b> 19 <b>MQ1B1YR</b> = CURRENT MONTH Mo      Yr
--

<b>B.MQ1B2MO</b> 19 <b>MQ1B2YR</b> = CURRENT MONTH Mo      Yr
--

TO CONSTRUCT PRE-SAMPLE EPISODE SEGMENT

2. THIS SEGMENT IS FOR THE 12 MONTHS BEFORE THE SAMPLE EPISODE SEGMENT. TO CONSTRUCT THE SEGMENT: (1) ENTER THE START AND END MONTHS BELOW. (2) DRAW A LINE THROUGH ALL THE MONTHS IN SEGMENT ON ROW A AND WRITE SEGMENT 1 ABOVE THE LINE. (3) DRAW A LINE THAT OUTLINES ALL THE CALENDAR MONTHS THAT COMPRISE SEGMENT 1.

<b>A.MQ2A1MO</b> 19 <b>MQ2A1YR</b> = START MONTH Mo      Yr
--

<b>CORRECTED DATES:</b>
<b>A.MQ2A2MO</b> 19 <b>MQ2A2YR</b> = START MONTH Mo      Yr

<b>B.MQ2B1MO</b> 19 <b>MQ2B1YR</b> = END MONTH Mo      Yr
--

<b>B.MQ2B2MO</b> 19 <b>MQ2B2YR</b> = END MONTH Mo      Yr
--

TO CONSTRUCT THE METHADONE MAINTENANCE STATUS SEGMENT

- 3a. IF THE METHADONE MAINTENANCE TREATMENT IN THE SAMPLE EPISODE IS LESS THAN 18 MONTHS, THIS SEGMENT ALSO COVERS THE ENTIRE TREATMENT PERIOD AND IS THE SAME AS SEGMENT 2. WRITE SEGMENT 3 ABOVE THE SAME SEGMENT LINE IN ROW D AND ABOVE SAME OUTLINED MONTHS AS SEGMENT 2.
- 3b. IF THE METHADONE MAINTENANCE TREATMENT IS 18 MONTHS OR LONGER, THIS SEGMENT COVERS THE 12 MONTHS PRIOR TO THE INTERVIEW MONTH, INCLUDING THE INTERVIEW MONTH AS THE 12TH MONTH: (1) ENTER THE START AND CURRENT MONTHS BELOW. (2) DRAW A LINE THROUGH ALL THE MONTHS IN SEGMENT IN ROW A AND WRITE SEGMENT 3 ABOVE THE LINE. (3) DRAW A LINE THAT OUTLINES ALL THE CALENDAR MONTHS THAT COMPRISE SEGMENT 3.

<b>A.MQ3A1MO</b> 19 <b>MQ3A1YR</b> = START MONTH Mo      Yr
--

<b>CORRECTED DATES:</b> <b>A.MQ3A2MO</b> 19 <b>MQ3A2YR</b> = START MONTH Mo      Yr
---

<b>B.MQ3B1MO</b> 19 <b>MQ3B1YR</b> = CURRENT MONTH Mo      Yr
--

<b>B.MQ3B2MO</b> 19 <b>MQ3B2YR</b> = CURRENT MONTH Mo      Yr
--

4. DOES Q.21 ON THE PLR CONTAIN ANY INCARCERATION HISTORY?

YES ..... 1  
 NO ..... 2 (SKIP TO SECTION A)

A. HOW MANY INCARCERATIONS ARE LISTED?

\_\_\_\_\_

5. ENTER PLACE AND DATES FOR EACH INCARCERATION:

A. PLACE NAME	B. ADMISSION DATE	C. RELEASE DATE
(1) _____ _____	____ 19 ____ Mo Yr	____ 19 ____ Mo Yr
(2) _____ _____	____ 19 ____ Mo Yr	____ 19 ____ Mo Yr
(3) _____ _____	____ 19 ____ Mo Yr	____ 19 ____ Mo Yr
(4) _____ _____	____ 19 ____ Mo Yr	____ 19 ____ Mo Yr

6. DID ANY INCARCERATION BEGIN OR END DURING THE 12 MONTHS BEFORE THE SAMPLE EPISODE?

YES ..... 1 (RECORD ON CALENDAR ON  
 ROW C. DRAW A LINE  
 THROUGH MONTHS OF EACH  
 TIME, AND WRITE NAME OF  
 PLACE ABOVE LINE)

NO ..... 2 (SECTION A)

## INTERVIEWER'S INTRODUCTORY SCRIPT

Hello, I am (YOUR NAME), an interviewer with the National Opinion Research Center affiliated with the University of Chicago. (SHOW ID CARD) We are conducting a public health survey. Are you (RESPONDENT'S FULL NAME)?

***PROBE AS NEEDED TO CONFIRM RESPONDENT'S IDENTITY WITHOUT SPECIFYING ANY DETAILS FROM FACE SHEET OR CALENDAR ABOUT RESPONDENT'S HISTORY OR ABOUT THE TOPIC OF THE COS. AFTER CONFIRMING THE RESPONDENT'S IDENTITY AND ASSURING PRIVACY, CONTINUE:***

NORC is a survey research center that has conducted research studies about issues and problems of concern to all Americans for more than 50 years. The University of Chicago's Institutional Review Board has oversight over all research conducted by NORC, and will not permit NORC to conduct any survey that invades the confidentiality or privacy of individuals.

I am contacting you in relation to the California Outcomes Study, a survey NORC is conducting for the Department of Alcohol and Drug Programs. For this study, under U.S. Public Health guidelines, NORC has gathered some information about your treatment for a substance abuse problem in the time period between (DATES) at (SPECIFY FACILITY NAME FROM FACESHEET).

Understanding drug treatment and discovering what works to help drug users is an important goal for the Department of Alcohol and Drug Programs. The California Outcomes Study is designed to collect information that will answer questions about the outcome of treatment for many people.

We hope you can participate in this important survey and want to assure you that, under guidelines of the U.S. Public Health Service and by U.S. law, there are important protections for your confidentiality and privacy. Information that identifies individuals in treatment is disclosed only for research purposes and is never known beyond employees actively engaged in the research. As an NORC employee, I also have signed NORC'S pledge of confidentiality that I will never disclose respondents' identity or information they give in response to survey questions.

Here is a Consent Form that explains the study in more detail. **(SHOW CONSENT FORM TO RESPONDENT AND READ IT ALOUD AS THE RESPONDENT READS IT)** I would be happy to answer any questions you might have. I would then like to conduct an interview at your convenience.

# SECTION A. CALENDAR

## TIME SEGMENT VERIFICATION

Before I start the interview, I would like to explain to you that we will be talking about your life in very specific periods or blocks of time. We are using a calendar to help you remember what was going on in your life during each time period.

To help me prepare the calendar with information that is relevant to your life, first I want to verify information that we have from our records. Then I will ask you for some other information about your life, and record that on the calendar.

A1. Before we begin the interview, first I'd like to verify some information. **(POINT TO MONTH OF ADMISSION FOR SAMPLE EPISODE ON CALENDAR)**. First, my records show that you (entered treatment at/came to) **(PROGRAM NAME)** in **(MONTH OF ADMISSION FOR SAMPLE EPISODE)**. As best as you can remember, is that right?

Yes ..... 1 (A2)  
No ..... 2

DK

A1a. **(POINT TO MONTH OF ADMISSION FOR SAMPLE EPISODE ON CALENDAR)**. Looking at **(MONTH OF ADMISSION FOR SAMPLE EPISODE)** on the calendar, when would you say you (entered treatment at/came to) **(PROGRAM NAME)**? **RECORD AND PROBE FOR MONTH AND YEAR. (REMEMBER THAT MAY BE MULTIPLE TIMES).**

\_\_\_\_\_ 19 \_\_\_\_\_ = NEW MONTH OF ADMISSION FOR SAMPLE EPISODE  
Mo Yr

A2. For the time that started **(ADMISSION MONTH)**, my records show that you are continuing treatment at **(PROGRAM NAME)**. Is that right?

Yes ..... 1 (A4)  
No ..... 2

DK

A2a. Looking at the calendar, when would you say you stopped going to treatment at **(PROGRAM NAME)** (that time)? **RECORD AND PROBE FOR MONTH AND YEAR. (REMEMBER THAT THERE MAY BE MULTIPLE TIMES TO THE PROVIDER).**

\_\_\_\_\_ 19 \_\_\_\_\_ = NEW MONTH OF DISCHARGE FROM SAMPLE EPISODE  
Mo Yr

A3. **IF DISCHARGE DATE IS LESS THAN 30 DAYS AGO, CONTINUE WITH THE METHADONE MAINTENANCE QUESTIONNAIRE. IF DISCHARGE DATE IS 30 DAYS OR MORE AGO, USE THE PARTICIPANT QUESTIONNAIRE AND CORRESPONDING CALENDAR CONSTRUCTION. IF AFTER PROBING AND VERIFICATION, NEW DATES ARE ESTABLISHED, COMPLETE SAMPLE EPISODE CONSTRUCTION ON SPARE CALENDAR. THEN CONSTRUCT NEW PRE-SAMPLE EPISODE AND**

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## MARITAL STATUS

A4. The first questions are about whether you've been married, widowed, separated or divorced, or if you've lived with someone in a marriage-like relationship. First, have you ever been married?

**MA4**

Yes ..... 1 (A5)  
 No ..... 2

A4a. Have you ever lived with someone in a marriage-like relationship?

**MA4a**

Yes ..... 1  
 No ..... 2 (A8)

A5. When did you first (get married/start living with someone in a marriage-like relationship)? Just give me the month and year.

\_\_\_\_\_ 19 \_\_\_\_\_  
 Month      Year

**MA5MO MA5YR**

	(1) First	(2) Next	(3) Next	(4) Next
A6. What was the (first/next) change in your marital status after that?	<b>MA6_1</b>	<b>MA6_2</b>	<b>MA6_3</b>	<b>MA6_4</b>
NO CHANGE	1 (A8)	1 (A8)	1 (A8)	1 (A8)
Married	2	2	2	2
Living with someone in a marriage-like relationship	3	3	3	3
Widowed	4	4	4	4
Separated	5	5	5	5
Divorced	6	6	6	6
A7. In what month and year (were you married/widowed/separated/divorced) (did you begin living with someone in a marriage-like relationship) (that time)?	_____ 19 _____ Mo Yr <b>MA7_1MO</b> <b>MA7_1YR</b> (NEXT COL)	_____ 19 _____ Mo Yr <b>MA7_2MO</b> <b>MA7_2YR</b> (NEXT COL)	_____ 19 _____ Mo Yr <b>MA7_3MO</b> <b>MA7_3YR</b> (NEXT COL)	_____ 19 _____ Mo Yr <b>MA7_4MO</b> <b>MA7_4YR</b> (NEXT COL)

(5) Next	(6) Next	(7) Next	(8) Next	(9) Next	(10) Next	
MA6_5 1 (A8)	MA6_6 1 (A8)	MA6_7 1 (A8)	MA6_8 1 (A8)	MA6_9 1 (A8)	MA6_10 1 (A8)	
2	2	2	2	2	2	Married
3	3	3	3	3	3	Live With
4	4	4	4	4	4	Widowed
5	5	5	5	5	5	Separated
6	6	6	6	6	6	Divorced
____ 19 ____ Mo Yr MA7_5MO MA7_5YR (NEXT COL)	____ 19 ____ Mo Yr MA7_6MO MA7_6YR (NEXT COL)	____ 19 ____ Mo Yr MA7_7MO MA7_7YR (NEXT COL)	____ 19 ____ Mo Yr MA7_8MO MA7_8YR (NEXT COL)	____ 19 ____ Mo Yr MA7_9MO MA7_9YR (NEXT COL)	____ 19 ____ Mo Yr MA7_10MO MA7_10YR (A8)	

**A8. DRAW A LINE ACROSS ROW B ON CALENDAR. ENTER MARITAL STATUS AND STATUS CHANGES (M, L, W, S, D) ON ROW B OF CALENDAR IN APPROPRIATE MONTH. FOR STATUS/CHANGES PRIOR TO CALENDAR PERIOD, ENTER LAST ONE IN FIRST MONTH OF ROW B.**

**A9. The next questions are about being under supervision by the court, the sheriff, or the department of corrections, that is, prison, jail, probation, detention, or parole. CHECK ROW C ON THE CALENDAR FOR INCARCERATIONS DURING SEGMENT 1. IF ANY BEGAN OR ENDED DURING THAT PERIOD, ADD: According to my records, you were in [PLACE(S)] at some time during (MONTHS). I have some questions about that and about other court supervision.**

A10. During (START MONTH SEGMENT 1), were you on probation, detention, parole, (in prison), or in jail (including (all forms) Youth Authority Supervision or facility) for more than one day?

MA\_10

Yes ..... 1  
 No ..... 2 (A12)

A10a. What kind of supervision (by the court, the sheriff, or the department of corrections), were you under during (MONTHS)? **RECORD VERBATIM AND CODE.**

INCARCERATION ..... 1 MA\_10a  
 PAROLE ..... 2  
 PROBATION ..... 3  
 ELECTRONIC SURVEILLANCE ..... 4  
 OTHER SUPERVISION ..... 5

A11. When did (STATUS) begin? Just give me the month and year.

\_\_\_\_\_ 19 \_\_\_\_\_

MA11\_MO MA11\_YR

	(1) First	(2) Next	(3) Next	(4) Next
A12. Did your situation change after that? <b>PROBE FOR CHANGES OF MORE THAN 1 DAY.</b>	Yes ... 1 MA12_1 No ... 2 (A15)	Yes ... 1 MA12_2 No ... 2 (A15)	Yes ... 1 MA12_3 No ... 2 (A15)	Yes ... 1 MA12_4 No ... 2 (A15)
A13. What was that change? (READ CATEGORIES IF NEEDED).	MA13_1	MA13_2	MA13_3	MA13_4
NO SUPERVISION	1	1	1	1
Incarceration	2	2	2	2
Parole	3	3	3	3
Probation	4	4	4	4
Electronic Surveillance	5	5	5	5
Other supervision	6	6	6	6
A14. In what month and year did that (STATUS) begin?	_____ 19 _____ Mo Yr MA14_MO1 MA14_YR1 (NEXT COL)	_____ 19 _____ Mo Yr MA14_MO2 MA14_YR2 (NEXT COL)	_____ 19 _____ Mo Yr MA14_MO3 MA14_YR3 (NEXT COL)	_____ 19 _____ Mo Yr MA14_MO4 MA14_YR4 (NEXT COL)

(5) Next	(6) Next	(7) Next	(8) Next	(9) Next	(10) Next
Yes ... 1 MA12_5 No. 2 (A15)	Yes ... 1 MA12_6 No. 2 (A15)	Yes ... 1 MA12_7 No. 2 (A15)	Yes ... 1 MA12_8 No. 2 (A15)	Yes ... 1 MA12_9 No. 2 (A15)	Yes ... 1 MA12_10 No. 2 (A15)
MA13_5	MA13_6	MA13_7	MA13_8	MA13_9	MA13_10
1	1	1	1	1	1
2	2	2	2	2	2
3	3	3	3	3	3
4	4	4	4	4	4
5	5	5	5	5	5
6	6	6	6	6	6
___ 19 ___ Mo Yr MA14_MO5 MA14_YR5 (NEXT COL)	___ 19 ___ Mo Yr MA14_MO6 MA14_YR6 (NEXT COL)	___ 19 ___ Mo Yr MA14_MO7 MA14_YR7 (NEXT COL)	___ 19 ___ Mo Yr MA14_MO8 MA14_YR8 (NEXT COL)	___ 19 ___ Mo Yr MA14_MO9 MA14_YR9 (NEXT COL)	___ 19 ___ Mo Yr MA14MO10 MA14YR10  (A15)

NO SUPERVISION  
 INCARCERATION  
 PAROLE  
 PROBATION  
 ELECTRONIC SURVEILLANCE  
 OTHER

**A15. DRAW A LINE ACROSS ROW C ON CALENDAR FOR CORRECTIONAL STATUS. ENTER STATUS CHANGES (NS, I, P, PR, ES, O) ON ROW C OF CALENDAR IN APPROPRIATE MONTH.**

## INSTRUCTIONS FOR USING THE CALENDAR DURING THE INTERVIEW

### IF TREATMENT IS LESS THAN 18 MONTHS:

#### SHOW R THE CALENDAR, AND SAY:

The outlined portions are for two time periods: The year before you started treatment at (PROGRAM), and the treatment period through the present month. Row A shows the two time periods. Row B shows your marital status. Row C shows your legal status. Row D is there for us to use if other key events from your life are relevant, or help you recall what was going on in your life during a particular period. Before we talk about the three time periods, I want to ask you some background questions about your life.

### IF TREATMENT IS 18 MONTHS OR LONGER:

#### SHOW R THE CALENDAR, AND SAY:

The outlined portions are for three time periods: The year before you started treatment, the entire treatment period, and the last 12 months of your treatment through the present month. Row A shows the three time periods. Row B shows your marital status. Row C shows your legal status. Row D is there for us to use if other key events from your life are relevant, or help you recall what was going on in your life during a particular period. Before we talk about the three time periods, I want to ask you some background questions about your life.

**SECTION B. BACKGROUND**

**B1. CODE WITHOUT ASKING. VERIFY, IF NEEDED, BY ASKING:**  
I am required to ask--are you male or female"?

- MB1**
- Male ..... 1
- Female ..... 2

**B2. What is your date of birth? RECORD MONTH, DAY AND YEAR.**

\_\_\_\_\_/\_\_\_\_\_/19\_\_\_\_\_  
MO DAY YR

**MB2MO MB2YR**

**B3. So you are (AGE COMPUTED FROM B2) years old?**

- MB3**
- Yes ..... 1
- No ..... 2 (REASK B2)

**B4. Were you born in the United States? IF BORN ON A U.S. MILITARY BASE/LOCATION, CODE "1."**

- MB4**
- Yes ..... 1 (B5)
- No ..... 2

**B4a. Which country were you born in? RECORD VERBATIM.**

- MB4a**
- Canada ..... 1
- Mexico ..... 2
- Other Latin American country ..... 3
- Asian/Pacific Island/  
Pacific Rim ..... 4
- European country ..... 5
- African country ..... 6

**B5. Was your natural mother born in the United States?**

- MB5**
- Yes ..... 1
- No ..... 2 DK

**B6. Was your natural father born in the United States?**

- MB6**
- Yes ..... 1
- No ..... 2 DK

**B7. Are you of Mexican, Puerto Rican, Cuban or any other Spanish-speaking background?**

- MB7**
- Yes ..... 1
- No ..... 2 DK

B8. What best describes you? Are you... **READ CATEGORIES AND CODE ONE.**

**MB8**

- Alaskan Native, ..... 1
- Native American, ..... 2
- Asian or Pacific Islander, ..... 3
- Black or African-American, or ..... 4
- White? ..... 5
- MIXTURE ..... 6
- OTHER ..... 7

B9. (As you were growing up, did/Do) you speak any language besides English with the people you (lived/live) with? **MB9**

- Yes ..... 1
- No ..... 2 **(B10)**

B9a. What language (was/is) that? **CODE ONE.**

**MB9a**

- SPANISH ONLY ..... 1
- OTHER LANGUAGE(S) ONLY ..... 2
- BOTH SPANISH AND OTHER LANGUAGE(S) ..... 3

B10. Would you say your ability to read (English) is ... **READ CATEGORIES AND CODE ONE.**

**MB10**

- Excellent, ..... 1
- Good, ..... 2
- Fair, or ..... 3
- Poor? ..... 4

B11. Are you now in school, or receiving any job or skills training? (This includes vocational or technical schools, colleges, or working for your high school diploma).

**MB11**

- Yes ..... 1
- No ..... 2
- NEVER ATTENDED SCHOOL ..... 3 **(B15)**

B12. Do you have a high school diploma or a GED? (**CODE ONE**)

**MB12**

- Yes, diploma ..... 1
- Yes, GED ..... 2
- No ..... 3 **(B13)**
- NEVER ATTENDED SCHOOL ..... 4 **(B15)**

B12a. In what year did you receive your (high school diploma/GED)?

**MB12a**

19 \_\_\_\_\_

B13. What is the highest grade or year of school you ever attended, even if you did not complete that

grade? **CODE ONE ONLY.**

	<b>MB13</b>
1st Grade .....	01
2nd Grade .....	02
3rd Grade .....	03
4th Grade .....	04
5th Grade .....	05
6th Grade .....	06
7th Grade .....	07
8th Grade .....	08
9th Grade .....	09
10th Grade .....	10
11th Grade .....	11
12th Grade .....	12
1 Year College/Technical School .....	13
2 Years College/Technical School .....	14
3 Years College/Technical School .....	15
4 Years College/Technical School .....	16
Graduate/Professional School .....	17
NEVER ATTENDED SCHOOL .....	18 (B15)

B14. (Were you ever/Have you ever been) expelled or suspended from school for more than a day?

	<b>MB14</b>
Yes .....	1
No .....	2 (B15)

B14a. Were you expelled or suspended from school more than one time?

	<b>MB14a</b>
Yes .....	1
No .....	2

B15. Have you ever belonged to a street gang?

	<b>MB15</b>
Yes .....	1
No .....	2

## SECTION C: HISTORY OF DRUG AND ALCOHOL USE

C1.	C3.																															
<p>Next, I would like to ask you about your past use of street drugs, and your use of prescribed medicines to get high or for other <u>nonmedical effects</u>. <b>(SHOWCARD)</b> Before <b>(START MONTH SEGMENT 1)</b>, did you ever use <b>(DRUG TYPE)</b> five times or more? <b>READ AND CODE a-l.</b></p>	<p>About how old were you the <u>first</u> time you tried <b>(DRUG USED)</b>? <b>PROBE IF NEEDED.</b></p>																															
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">a. Inhalants            <b>MC1a</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">b. Marijuana/Hashish    <b>MC1b</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">c. Crack                    <b>MC1c</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">d. Cocaine powder        <b>MC1d</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">e. PCP or angel dust     <b>MC1e</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">f. Hallucinogens or   Psychedelics/LSD etc. <b>MC1f</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">g. Heroin                  <b>MC1g</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">h. Illegal Methadone     <b>MC1h</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">i. Other Narcotics        <b>MC1i</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">j. Methamphetamines    <b>MC1j</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">k. Downers                <b>MC1k</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> <tr> <td style="padding: 5px;">l. Other (<b>SPECIFY</b>)        <b>MC1l</b>   12= Other prescription drug   13= Alcohol   14= Ritalin or Preludin                                  <b>MC1lVB</b></td> <td style="padding: 5px;">Yes ..... 1 No ..... 2</td> </tr> </table>	a. Inhalants <b>MC1a</b>	Yes ..... 1 No ..... 2	b. Marijuana/Hashish <b>MC1b</b>	Yes ..... 1 No ..... 2	c. Crack <b>MC1c</b>	Yes ..... 1 No ..... 2	d. Cocaine powder <b>MC1d</b>	Yes ..... 1 No ..... 2	e. PCP or angel dust <b>MC1e</b>	Yes ..... 1 No ..... 2	f. Hallucinogens or Psychedelics/LSD etc. <b>MC1f</b>	Yes ..... 1 No ..... 2	g. Heroin <b>MC1g</b>	Yes ..... 1 No ..... 2	h. Illegal Methadone <b>MC1h</b>	Yes ..... 1 No ..... 2	i. Other Narcotics <b>MC1i</b>	Yes ..... 1 No ..... 2	j. Methamphetamines <b>MC1j</b>	Yes ..... 1 No ..... 2	k. Downers <b>MC1k</b>	Yes ..... 1 No ..... 2	l. Other ( <b>SPECIFY</b> ) <b>MC1l</b> 12= Other prescription drug 13= Alcohol 14= Ritalin or Preludin <b>MC1lVB</b>	Yes ..... 1 No ..... 2	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="padding: 5px;"><b>MC3b</b> _____ Years Old            DK</td> </tr> <tr> <td style="padding: 5px;"><b>MC3c</b> _____ Years Old            DK</td> </tr> <tr> <td style="padding: 5px;"><b>MC3d</b> _____ Years Old            DK</td> </tr> <tr> <td style="padding: 5px;"><b>MC3g</b> _____ Years Old            DK</td> </tr> <tr> <td style="padding: 5px;"><b>MC3j</b> _____ Years Old            DK</td> </tr> <tr> <td style="padding: 5px;"><b>MC3k</b> _____ Years Old            DK</td> </tr> <tr> <td style="padding: 5px;"><b>MC3l</b> _____ Years Old            DK</td> </tr> </table>	<b>MC3b</b> _____ Years Old            DK	<b>MC3c</b> _____ Years Old            DK	<b>MC3d</b> _____ Years Old            DK	<b>MC3g</b> _____ Years Old            DK	<b>MC3j</b> _____ Years Old            DK	<b>MC3k</b> _____ Years Old            DK	<b>MC3l</b> _____ Years Old            DK
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<p><b>C2.    WAS AT LEAST ONE DRUG TYPE CODED "1" AT C1?            MC2</b></p> <p style="text-align: center;"><b>YES.... 1 (ASK C3-C4 FOR EACH DRUG CODED "1")</b> <b>NO .... 2 (C5)</b></p>																																

C4.

Before **(START DATE SEGMENT 1)**, in the month you used **(DRUG)** the most, about how many days did you use **(DRUG)**? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

	<b>1 day</b>	<b>2-5 days</b>	<b>6-10 days</b>	<b>11-20 days</b>	<b>More than 20 days</b>	<b>DK</b>	
a.	1	2	3	4	5	DK	<b>MC4_a</b>
b.	1	2	3	4	5	DK	<b>MC4_b</b>
c.	1	2	3	4	5	DK	<b>MC4_c</b>
d.	1	2	3	4	5	DK	<b>MC4_d</b>
e.	1	2	3	4	5	DK	<b>MC4_e</b>
f.	1	2	3	4	5	DK	<b>MC4_f</b>
g.	1	2	3	4	5	DK	<b>MC4_g</b>
h.	1	2	3	4	5	DK	<b>MC4_h</b>
i.	1	2	3	4	5	DK	<b>MC4_i</b>
j.	1	2	3	4	5	DK	<b>MC4_j</b>
k.	1	2	3	4	5	DK	<b>MC4_k</b>
l.	1	2	3	4	5	DK	<b>MC4_l</b>

C5. Before (START MONTH SEGMENT 1), what was the main drug or drug combination, including alcohol, that you used? **USE SHOWCARD: REVIEW CATEGORIES CODED AT C1 AS NEEDED. CODE ALL THAT APPLY.**

Inhalants . . . . .	1	MC5m1
Marijuana/Hashish . . . . .	2	MC5m2
Crack . . . . .	3	MC5m3
Cocaine Powder . . . . .	4	MC5m4
PCP or angel dust . . . . .	5	MC5m5
Hallucinogens or Psychedelics, LSD, etc . . . . .	6	MC5m6
Heroin . . . . .	7	MC5m7
Illegal methadone . . . . .	8	MC5m8
Other narcotics . . . . .	9	MC5m9
Methamphetamines . . . . .	10	MC5m10
Downers . . . . .	11	MC5m11
Other drugs . . . . .	12	MC5m12
Alcohol . . . . .	13	MC5m13
Ritalin or Preludin . . . . .	14	MC5m14

C6. The first time you tried (DRUGS CODED AT C5), were you with . . . **READ AND CODE EACH CHOICE. IF a-g ARE CODED "2", ASK: Were you with anyone the first time you tried (DRUGS CODED AT C5)? IF YES, REASK CATEGORIES.**

	<u>Yes</u>	<u>No</u>	
a. Friends, not including a boyfriend or a girlfriend? . . . . .	1	2	MC6_a
b. Boyfriend or girlfriend? . . . . .	1	2	MC6_b
c. Spouse or partner? . . . . .	1	2	MC6_c
d. Brothers and/or sisters? . . . . .	1	2	MC6_d
e. Parents? . . . . .	1	2	MC6_e
f. Other family members? . . . . .	1	2	MC6_f
g. Someone else? . . . . .	1	2	MC6_g
h. NO ONE . . . . .	1		MC6_h

C7. Before (START MONTH SEGMENT 1), did you ever go to the hospital because of a drug overdose?

**MC7**

Yes ..... 1  
No ..... 2      DK

C8. Before (START MONTH SEGMENT 1) did you ever go to anyone for professional help or treatment for using drugs?

**MC8**

Yes ..... 1  
No ..... 2      (C9)

C8a. How many times did you go for professional help before (START MONTH SEGMENT 1)? ENTER NUMBER. PROBE FOR ESTIMATE.

**MC8\_a**

\_\_\_\_\_ Number of times

C9. Before (START MONTH SEGMENT 1), did you ever, even one time, use a needle to inject drugs to get high or for other non-medical effects?

**MC9**

Yes ..... 1      (C10)  
No ..... 2

C9a. Did someone else ever use a needle to inject you with drugs for you to get high or for other non-medical effects before (START MONTH SEGMENT)?

**MC9\_a**

Yes ..... 1  
No ..... 2      DK

C10. Now I would like to ask about your use of alcoholic beverages. By alcoholic beverages I mean beer, malt liquors, wine, wine coolers and hard liquor, such as vodka and mixed drinks. Before (**START MONTH SEGMENT 1**), did you ever have a drink of alcohol? By a drink, I mean either a can of beer, a glass of wine or a wine cooler, a shot of hard liquor, or a single mixed drink.

Yes ..... 1 **MC10**  
 No ..... 2 (**SECTION D**)

C10a. Before (**START MONTH SEGMENT 1**), think about the month you were drinking the most. How many days did you drink that month? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

One day ..... 2 **MC10\_a**  
 2-5 days ..... 3  
 6-10 days ..... 4  
 11-20 days ..... 5  
 More than 20 days ..... 6

**DK (C14)**

	(1) Beer/Malt Liquor	(2) Wine/Wine Coolers	(3) Liquor
C11. Still think about the month you were drinking the most. On a typical drinking day, did you drink any ( <b>TYPE</b> )?	Yes ..... 1 <b>MC11_1</b> No ..... 2 ( <b>NEXT TYPE</b> )	Yes ..... 1 <b>MC11_2</b> No ..... 2 ( <b>NEXT TYPE</b> )	Yes ..... 1 <b>MC11_3</b> No ..... 2 ( <b>C14</b> )
C12. On a typical drinking day, about how much ( <b>TYPE</b> ) did you <u>usually</u> drink? <b>ENTER AMOUNT AND CODE.</b>	<p>____<b>MC12_1</b>____ amount  <b>C12a. CODE:</b>  <b>MC12_a1</b></p> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 ( <b>NEXT TYPE</b> ) Six packs ..... 4 ( <b>NEXT TYPE</b> ) 1/2 Pints ..... 5 ( <b>NEXT TYPE</b> ) Pints ..... 6 ( <b>NEXT TYPE</b> ) Quarts ..... 7 ( <b>NEXT TYPE</b> ) Fifths ..... 8 ( <b>NEXT TYPE</b> ) Drinks ..... 9 ( <b>NEXT TYPE</b> ) Shots ..... 10 ( <b>NEXT TYPE</b> ) Other ( <b>SPECIFY</b> ) ... 11  ____ <b>RECODED</b> ____ ( <b>NEXT TYPE</b> )	<p>____<b>MC12_2</b>____ amount  <b>C12a. CODE:</b>  <b>MC12_a2</b></p> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 ( <b>NEXT TYPE</b> ) Six packs ..... 4 ( <b>NEXT TYPE</b> ) 1/2 Pints ..... 5 ( <b>NEXT TYPE</b> ) Pints ..... 6 ( <b>NEXT TYPE</b> ) Quarts ..... 7 ( <b>NEXT TYPE</b> ) Fifths ..... 8 ( <b>NEXT TYPE</b> ) Drinks ..... 9 ( <b>NEXT TYPE</b> ) Shots ..... 10 ( <b>NEXT TYPE</b> ) Other ( <b>SPECIFY</b> ) ... 11  ____ <b>RECODED</b> ____ ( <b>NEXT TYPE</b> )	<p>____<b>MC12_3</b>____ amount  <b>C12a. CODE:</b>  <b>MC12_a3</b></p> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 ( <b>NEXT TYPE</b> ) Six packs ..... 4 ( <b>NEXT TYPE</b> ) 1/2 Pints ..... 5 ( <b>NEXT TYPE</b> ) Pints ..... 6 ( <b>NEXT TYPE</b> ) Quarts ..... 7 ( <b>NEXT TYPE</b> ) Fifths ..... 8 ( <b>NEXT TYPE</b> ) Drinks ..... 9 ( <b>NEXT TYPE</b> ) Shots ..... 10  ( <b>C14</b> )
C13. What size (bottle/can) was that (in ounces)? <b>RECORD VERBATIM.</b>	____ <b>MC13_1VB</b> ____	____ <b>MC13_2VB</b> ____	

C14. Before (**START MONTH SEGMENT 1**), did you ever go to the hospital because of your drinking?  
**MC14**  
 Yes ..... 1  
 No ..... 2

C15. Before, (**START MONTH SEGMENT 1**), did you ever go to anyone for professional help for your drinking?  
**MC15**  
 Yes ..... 1  
 No ..... 2 (**C16**)

C15a. How many times did you go for professional help for your drinking? **RECORD NUMBER.**  
**MC15a**  
 \_\_\_\_\_ times

C16. Before (**START MONTH SEGMENT 1**), did you ever attend any ...

	<u>Yes</u>	<u>No</u>	
a. Alcoholics Anonymous meetings	1	2	<b>MC16a</b>
b. Narcotics Anonymous meetings	1	2	<b>MC16b</b>
c. Cocaine Anonymous meetings	1	2	<b>MC16c</b>

**C17. IS ANY ITEM CODED "1" AT C16?** **MC17**

**YES** ..... 1

**NO** ..... 2 (**SECTION D**)

C17a. Before (**START MONTH SEGMENT 1**), did you attend five or more of any of these meetings?  
**MC17a**  
 Yes ..... 1  
 No ..... 2

## SECTION D. MENTAL AND PHYSICAL HEALTH HISTORY

Now I would like to ask you a few questions about any problems you ever had with emotions, nerves, or your mental health during your life before **(START MONTH SEGMENT 1)**.

- D1. Before **(START MONTH/YEAR OF SEGMENT 1)**, did you ever have at least 2 weeks when you felt very sad, blue or depressed, and you lost interest or pleasure in things you usually cared about?

**MD1**

Yes ..... 1

No ..... 2 **(D2)**

- D1a. Were all, some, or none of these times a direct result of your alcohol/drug use?

**MD1a**

All ..... 1 **(D2)**

Some ..... 2

None ..... 3

- D1b. How old were you when you first felt like this when it was not the result of alcohol or drugs?

**MD1b**

\_\_\_\_\_ years old

- D2. Before **(START MONTH SEGMENT 1)**, did you ever attempt suicide?

**MD2**

Yes ..... 1

No ..... 2 **(D3)**

- D2a. How many times did you attempt suicide before **(START MONTH SEGMENT 1)**?

**MD2a**

\_\_\_\_\_ times

- D2b. Were all, some, or none of those attempts the result of the effects of drugs or alcohol?

**MD2b**

All ..... 1

Some ..... 2

None ..... 3

D3. Before (**START MONTH SEGMENT 1**), did you ever have trouble controlling your temper or violent behavior?

**MD3**

Yes ..... 1

No ..... 2 (**D4**)

D3a. Were all, some, or none of the times you had trouble controlling your temper or violent behavior the result of alcohol or drug use?

**MD3a**

All ..... 1

Some ..... 2

None ..... 3

D4. Before (**START MONTH SEGMENT 1**), did you have hallucinations or delusions, that is, did you see or hear things that no one else could see or hear or did you think that someone else controlled your thoughts?

**MD4**

Yes ..... 1

No ..... 2 (**D5**)

D4a. Were all, some, or none of these hallucinations a direct result of your alcohol or drug use?

**MD4a**

All ..... 1

Some ..... 2

None ..... 3

D5. Before (**START MONTH SEGMENT 1**), did you ever stay overnight in a hospital or clinic for treatment of your emotions, nerves, or mental health that wasn't the result of drugs or alcohol use?

**MD5**

Yes ..... 1

No ..... 2 (**D6**)

D5a. How old were you the first time you stayed overnight in a hospital or clinic somewhere for treatment of these problems?

**MD5a**

\_\_\_\_\_ years old

D6. Before (**START MONTH SEGMENT 1**), how many times did you ever stay overnight in a hospital or clinic for treatment of your emotions, nerves, or your mental health?

**MD6**

\_\_\_\_\_ Number of Times

D7. Next, I want to ask you some questions about some physical health problems you may have had. I'm going to read a list of illnesses or conditions that can cause a person pain, limit a person's activities, or cause other health problems. Before (**START MONTH SEGMENT 1**), did you have any problems with . . .

	<u>Yes</u>	<u>No</u>	<u>DK</u>	
a. a serious breathing condition, such as bronchitis or tuberculosis? . . . . .	1	2	DK	<b>MD7a</b>
b. a serious heart or blood condition, including high blood pressure, or anemia? . . . . .	1	2	DK	<b>MD7b</b>
c. hepatitis or yellow jaundice? . . . . .	1	2	DK	<b>MD7c</b>
d. a serious internal condition, such as stomach ulcers, sugar diabetes, or kidney or liver problems? . . . . .	1	2	DK	<b>MD7d</b>
e. a serious bone or muscle condition, such as being paralyzed, bad arthritis, limping, or bursitis? . . . . .	1	2	DK	<b>MD7e</b>
f. a serious nerve condition, such as convulsions, epilepsy, or migraine headaches? Please do not include any mental health problems . . . . .	1	2	DK	<b>MD7f</b>
g. <b>FEMALE R ONLY:</b> Miscarriage, Toxemia, bad Pap smear, or other serious female condition? . . . . .	1	2	DK	<b>MD7g</b>
h. syphilis, gonorrhea, or genital herpes, or any other sexually transmitted disease other than AIDS? . . . . .	1	2	DK	<b>MD7h</b>

D8. Before (**START MONTH SEGMENT 1**), did you ever have a blood test for the AIDS virus?

<b>MD8</b>	
Yes . . . . .	1
No . . . . .	2 ( <b>D10</b> )

D8a. Do you know the results of that (last) test?

<b>MD8a</b>	
Yes . . . . .	1
No . . . . .	2

D9. Before (**START MONTH SEGMENT 1**), did a doctor or other health professional tell you that you were HIV positive or had the AIDS virus?

<b>MD9</b>	
Yes . . . . .	1 ( <b>RECORD "A" IN ROW D OF THE CALENDAR, IN THE MONTH JUST BEFORE SEGMENT 1 STARTS. THEN ASK D10.</b> )
No . . . . .	2

D10. Before (**START MONTH SEGMENT 1**), were you ever hospitalized for physical health problems? Do not include a normal pregnancy, treatment for alcohol or drug use, or detox.

<b>MD10</b>	
Yes . . . . .	1
No . . . . .	2 ( <b>SECTION E</b> )

D10a. How many times?

_____ Number of Times	<b>MD10a</b>
	DK      RF

## SECTION E. ILLEGAL ACTIVITIES HISTORY

Now I would like to ask about any involvement with the police, courts, and illegal activities. Let me remind you that this information will remain confidential and you can refuse to answer any questions.

E1. Before (**START MONTH SEGMENT 1**), were you ever arrested?

- ME1**
- Yes ..... 1
- No ..... 2 (**E2**)

E1a. About how many times were you arrested before (**START MONTH SEGMENT 1**)?

**ME1a**

\_\_\_\_\_ Number of Times

E1b. How old were you the first time you were arrested?

**ME1b**

\_\_\_\_\_ Years old

E1c. What was/were the main charge(s) you were arrested for? **RECORD VERBATIM AND CODE ALL THAT APPLY ON CODE LIST ON NEXT PAGE.**

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<p><b><u>DRUG OFFENSES</u></b></p> <p>Drug Possession ..... 1 <b>ME1cm1</b></p> <p>Drug Sale or manufacturing ..... 2 <b>ME1cm2</b></p> <p><b><u>VIOLENT OFFENSES</u></b></p> <p>Armed robbery, Robbery by force ..... 3 <b>ME1cm3</b></p> <p>Aggravated assault, Assault with the intent to kill, Other serious intent ..... 4 <b>ME1cm4</b></p> <p>Forcible rape, Statutory Rape, Sexual assault ..... 5 <b>ME1cm5</b></p> <p>Murder, Manslaughter, Homicide ..... 6 <b>ME1cm6</b></p> <p>Other violent offenses (Arson, Damage to or destruction of property, Vandalism, Simple assault, Fighting) .... 7 <b>ME1cm7</b></p>	<p><b><u>PROPERTY OFFENSES</u></b></p> <p>Forgery, Passing bad checks, Credit card fraud ..... 8 <b>ME1cm8</b></p> <p>Motor Vehicle theft ..... 9 <b>ME1cm9</b></p> <p>Breaking and entering, Burglary ..... 10 <b>ME1cm10</b></p> <p>Pimping, procuring ..... 11 <b>ME1cm11</b></p> <p>Other theft (Larceny, Pick pocketing, Purse snatching, Mugging, Receiving, Possession of stolen goods, Shoplifting) 12 <b>ME1cm12</b></p> <p><b><u>PUBLIC ORDER OFFENSES</u></b></p> <p>Driving while intoxicated (DWI), Driving under the influence (DUI) .... 13 <b>ME1cm13</b></p> <p>Prostitution, solicitation ..... 14 <b>ME1cm14</b></p> <p>Violation of parole ..... 15 <b>ME1cm15</b></p> <p>Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway) ..... 16 <b>ME1cm16</b></p> <p>CANNOT CODE CHARGE ..... 17 <b>ME1cm17</b></p>
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E2. Before ( <b>START MONTH SEGMENT 1</b> ), did you ever . . . ( <b>IF R WAS 18 YEARS OR OLDER AT START MONTH OF SEGMENT 1, ADD:</b> Include any involvement you had <u>before and after</u> you were 18 years old.		E3. About how old were you when you first did this?
b. Steal a vehicle (car, truck, van or motorcycle)? <b>ME2b</b>	Yes . . . . 1 No . . . . . 2 RF	
c. Sell drugs or help someone else sell drugs, including cutting, weighing, packaging or making drugs? <b>ME2c</b>	Yes . . . . 1 ( <b>E3</b> ) No . . . . . 2 RF	<u>ME3c</u> years old
d. Have sex for money or drugs (prostitution)? <b>ME2d</b>	Yes . . . . 1 No . . . . . 2 RF	
f. Pass bad checks, forge checks, or use a stolen credit card? <b>ME2f</b>	Yes . . . . 1 No . . . . . 2 RF	
g. Break into a house, a business, or a vehicle to take someone else's money or property? <b>ME2g</b>	Yes . . . . 1 ( <b>E3</b> ) No . . . . . 2 RF	<u>ME3g</u> years old
h. Use a weapon or physical force against someone to steal money or property from them? <b>ME2h</b>	Yes . . . . 1 ( <b>E3</b> ) No . . . . . 2 RF	<u>ME3h</u> years old
i. Set fire to a house, building, or vehicle? <b>ME2i</b>	Yes . . . . 1 No . . . . . 2 RF	
j. Threaten or attack someone with a weapon? <b>ME2j</b>	Yes . . . . 1 ( <b>E3</b> ) No . . . . . 2 RF	<u>ME3j</u> years old
k. Force someone to have sex or to do any kind of sex act against their will? <b>ME2k</b>	Yes . . . . 1 No . . . . . 2 RF	
l. Kill someone, other than by accident? <b>ME2l</b>	Yes . . . . 1 No . . . . . 2 RF	

<p>n. Do anything else against the law that I didn't ask about? (<b>SPECIFY</b>)</p> <p><b>CODE ONE</b></p> <p>1= Drug Possession</p> <p>7= Other violent offenses (Arson, Damage or destruction to property, Vandalism, Simple Assault, Fighting)</p> <p>11= Pimping, Procuring</p> <p>12= Other theft (Larceny, Pick pocketing, Purse snatching, Mugging, Receiving, Possession of stolen goods, Shoplifting)</p> <p>13= Driving while intoxicated (DWI), Driving under the influence (DUI)</p> <p>15= Violation of parole</p> <p>16= Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway)</p> <p>17= Cannot code charge <b>ME2n</b></p> <hr/> <p style="text-align: center;"><b>ME2nCODE</b></p>	<p>Yes . . . . . 1</p> <p>No . . . . . 2      RF</p>
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E4. Did you ever support yourself mainly from illegal activity (hustling, dealing, fraud, etc.) for a least one year before (**START MONTH SEGMENT 1**)?

**ME4**

Yes . . . . . 1

No . . . . . 2      RF    DK

E5. The next questions are about any times you may have been attacked with a weapon or seriously hit or beaten. Before (**START MONTH SEGMENT 1**) were you ever attacked with a weapon such as a knife or a gun?

**ME5**

Yes . . . . . 1

No . . . . . 2      RF    DK

E6. Before (**START MONTH SEGMENT 1**), were you ever hit or beaten so seriously that you were badly bruised, had to see a doctor, or had to stay in bed for one day or more?

**ME6**

Yes . . . . . 1

No . . . . . 2      RF    DK

## SECTION F. LIVING ARRANGEMENTS

Next, I would like to ask you about your past living arrangements.

- F1. Before (**START MONTH OF SEGMENT 1**), how old were you when you last lived with your mother, including your natural mother, stepmother, foster mother, or adoptive mother? **RECORD "0" IF NEVER LIVED WITH MOTHER.**

**MF1**

\_\_\_\_\_ years old

- F2. Before (**START MONTH OF SEGMENT 1**), how old were you when you last lived with your father, including your natural father, stepfather, foster father, or adoptive father? **RECORD "0" IF NEVER LIVED WITH FATHER.**

**MF2**

\_\_\_\_\_ years old

- F3. (Before you were 18 years old, did/Have) the courts or a social service agency ever (arrange/arranged) a place for you to live?

**MF3**

Yes ..... 1

No ..... 2

- F4. (Before you were 18 years old, did/Have) you ever run away from home or the place you usually (lived/live)?

**MF4**

Yes ..... 1

No ..... 2 (F5)

- F4a. Altogether, how many times did you run away?

**MF4a**

\_\_\_\_\_ Times

- F5. (At any time before you were 18 years old, were you/Have you ever been) asked to leave home by a parent or guardian?

**MF5**

Yes ..... 1

No ..... 2

**IF RESPONDENT 15 OR YOUNGER, GO TO SECTION H.**

- F6. Altogether, how many natural children did you have before (**START MONTH OF SEGMENT 1**)?

**MF6**

\_\_\_\_\_ Number of children

- F7. At anytime before (**START MONTH OF SEGMENT 1**) did you lose custody (of any of your natural children under age 18, or) of any (other) children you were raising, including adopted children and foster children? By custody, I mean being legally in charge of a child.

**MF7**

Yes ..... 1

No ..... 2

## SECTION G. EMPLOYMENT HISTORY

G1. The next questions are about your employment. Before (**START MONTH SEGMENT 1**), were you ever employed full-time, that is, did you ever work 35 hours or more a week? (Do not count any job that involved illegal activity.)

**MG1**

Yes ..... 1  
 No ..... 2 **(G5)**

G2. Before (**START MONTH SEGMENT 1**), what was the longest time you had any one job where you worked 35 hours a week or more?

**MG2**

Less than one year ..... 1  
 1-2 years ..... 2  
 More than 2 years but less than 5 years ..... 3  
 Five years or more ..... 4

G3. What kind of work did you do at the full-time job that you had the longest? That is, what was your job title or what was your job called? **RECORD VERBATIM AND ENTER CODE.**

**MG3**

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- 1 Clerical Worker; (Ex. Bankteller, receptionist, word processor, office worker)
- 2 Sales Worker; (Ex. Salesclerk, cashier, gas station attendant, telephone or door-to-door sales)
- 3 Service Worker; (Ex. Janitor, cook, waitress/waiter, nursing aide, police officer, farm worker)
- 4 Private HH Worker; (Ex. Maid, housekeeper, childcare worker, private HH cook, gardener)
- 5 Skilled Worker or Craftsmen; (Ex. Carpenter, electrician, machinist, mechanic)
- 6 Laborer; (Ex. Construction worker, maintenance worker)
- 7 Operator or Machine Operator; (Ex. Assembler, machine or textile operator)
- 8 Transportation Equipment Operator; (Ex. Cab, truck, or bus driver, conductor, fork lift operator)
- 9 Farm Laborer; (Ex. Farm worker, picker, seasonal farm worker)
- 10 Farmer or Farm Manager
- 11 Manager/Administrator; (Ex. Officer manager, inspectors, bank or store administrator)
- 12 Lay Counselor; (Ex. drug counselor without professional degree, "peer" counselor)
- 13 Professional/Technical; (Ex. nurse, clinical social worker, teacher, artist, lawyer)
- 14 Other
- 15 UNABLE TO CODE
- 16 Military

G4. Before taxes, what was your highest wage, salary, or rate of pay at that full-time job? **RECORD DOLLARS AND CENTS AND CODE.**

\$ \_\_\_\_\_ **MG4**

G4a. CODE:	Per hour ..... 1		
	Every week ..... 2		
	Every two weeks ..... 3		
	Per month ..... 4		
	Per year ..... 5		<b>MG4a</b>
	OTHER (SPECIFY) _____ <b>RECODED</b> _____ 6	RF	DK
	Day ..... 7		
	Unit/Product ..... 8		
	Unit/Service ..... 9		
	Room & Board ..... 10		

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G5. Before (START MONTH SEGMENT 1), did you ever have a part-time job?

**MG5**

Yes ..... 1

No ..... 2 (G8)

G5a. Before (START MONTH SEGMENT 1), what was the longest time you had any one part-time job?

**MG5a**

Less than one year ..... 1

1-2 years ..... 2

More than 2 years but less than 5 years ..... 3

Five years or more ..... 4

G6. What kind of work did you do at the part-time job that you had the longest? That is, what was your job title or what was your job called? **RECORD VERBATIM AND ENTER CODE FROM CODE LIST.**

**MG6**

\_\_\_\_\_

\_\_\_\_\_

G7. Before taxes, what was your highest wage, salary, or rate of pay at that part-time job? **RECORD DOLLARS AND CENTS AND CODE.**

\$ \_\_\_\_\_.

**MG7**

G7a. CODE: Per hour ..... 1

Every week ..... 2

Every two weeks ..... 3

Per month ..... 4

Per year ..... 5

**MG7a**

OTHER (SPECIFY) \_\_\_\_\_ **RECODED** \_\_\_\_\_ 6

RF

DK

Day ..... 7

Unit/Product ..... 8

Unit/Service ..... 9

Room & Board ..... 10

G8. Before (START MONTH OF SEGMENT 1), what is the longest period of time that you were unemployed, not counting years when you were in school full-time (or in jail)?

**MG8**

Less than one year ..... 1

1-2 years ..... 2

More than 2 years but less than 5 years ..... 3

Five years or more ..... 4

NEVER WORKED ..... 5

## SECTION H. SEGMENT 1 (PRE-SAMPLE EPISODE SEGMENT)

Next, I would like to ask what was going on in your life during the year before you went to (PROGRAM) in (MONTH). **GO TO FIRST SEGMENT OUTLINED IN CALENDAR; THE 12 MONTH PERIOD PRIOR TO THE SAMPLED EPISODE SEGMENT.** You may find it helpful to refer to the calendar when answering the questions. This period of time is from \_\_\_\_\_ through \_\_\_\_\_.

**H1a. CHECK ROW C OF THE CALENDAR. WERE THERE ANY INCARCERATIONS DURING THE SEGMENT 1 PERIOD?**

MH1a

YES ..... 1

NO ..... 2 (H6)

**HOW MANY INCARCERATIONS ARE ON THE CALENDAR FOR SEGMENT 1?**

MH1b

\_\_\_\_\_ Number of Incarceration

**ASK H2-H5 FOR EACH INCARCERATION. USE CODE LIST BELOW TO CODE H3.**

### DRUG OFFENSES

Drug Possession ..... 1  
Drug Sale or manufacturing ..... 2

### VIOLENT OFFENSES

Armed robbery, Robbery by force ..... 3  
Aggravated assault,  
Assault with the intent to kill,  
Other serious intent ..... 4  
Forcible rape, Statutory Rape, Sexual assault ..... 5  
Murder, Manslaughter, Homicide ..... 6  
Other violent offenses (Arson, Damage  
to or destruction of property,  
Vandalism, Simple assault, Fighting) ..... 7

### PROPERTY OFFENSES

Forgery, Passing bad checks, Credit card fraud ..... 8  
Motor Vehicle theft ..... 9  
Breaking and entering, Burglary ..... 10  
Pimping, procuring ..... 11  
Other theft (Larceny, Pick pocketing,  
Purse snatching, Mugging, Receiving,  
Possession of stolen goods, Shoplifting) ..... 12

### PUBLIC ORDER OFFENSES

Driving while intoxicated (DWI),  
Driving under the influence (DUI) ..... 13  
Prostitution, solicitation ..... 14  
Violation of parole ..... 15  
Other public order offenses (Bookmaking,  
Numbers, Gambling, Curfew violation,  
Truancy, Being a runaway) ..... 16  
CANNOT CODE CHARGE ..... 17

	PLACE 1      MH2_1	PLACE 2      MH2_2
<p><b>H2.</b> The next questions are about <b>(PLACE/ PRISON/JAIL)</b> you told me about earlier. <b>CODE WITHOUT ASKING IF KNOWN FROM CALENDAR.</b> <b>OTHERWISE ASK:</b> Was <b>(PLACE NAME)</b> the place you went to in <b>(MONTH/YEAR)</b> a . . . <b>RECORD VERBATIM AND CODE.</b></p>	<p>Juvenile hall or county camp, . . . . . 1</p> <p>a youth authority facility . . . . . 2</p> <p>a jail, . . . . . 3</p> <p>a prison, or . . . . . 4</p> <p>some other place? . . . . . 5</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p>Juvenile hall or county camp, . . . . . 1</p> <p>a youth authority facility, . . . . . 2</p> <p>a jail, . . . . . 3</p> <p>a prison, or . . . . . 4</p> <p>some other place? . . . . . 5</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>H3.</b> What was the main charge that you were sentenced for then? <b>RECORD VERBATIM AND CODE FROM CODE LIST. PROBE AS NEEDED USING LIST.</b></p>	<p><input type="checkbox"/> _____ MH3_1</p> <p>_____</p> <p>_____</p> <p>_____</p>	<p><input type="checkbox"/> _____ MH3_2</p> <p>_____</p> <p>_____</p> <p>_____</p>
<p><b>H4.</b> During the time when you were in <b>(PLACE)</b>, were any drug or alcohol treatment programs offered there, not counting Narcotics Anonymous, Cocaine Anonymous, or Alcoholics Anonymous?</p>	<p style="text-align: right;">MH4_1</p> <p>Yes . . . . . 1</p> <p>No . . . . . 2</p> <p style="text-align: center;"><b>(NEXT PLACE OR H6)</b></p>	<p style="text-align: right;">MH4_2</p> <p>Yes . . . . . 1</p> <p>No . . . . . 2</p> <p style="text-align: right;"><b>(H6)</b></p>
<p>H5. Did you participate in any of the drug or alcohol treatment programs offered, not counting NA, CA, or AA?</p>	<p style="text-align: right;">MH5_1</p> <p>Yes . . . . . 1</p> <p>No . . . . . 2</p>	<p style="text-align: right;">MH5_2</p> <p>Yes . . . . . 1</p> <p>No . . . . . 2</p>

**(NEXT PLACE OR H6)**

**(H6)**

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**H6. CHECK ROW C OF THE CALENDAR. WAS PAROLE OR PROBATION STATUS NOTED DURING SEGMENT 1 PERIOD?**

**MH6**

YES ..... 1 (IF MORE THAN ONE, ASK H7 ABOUT THE LAST ONE. IF ON PAROLE AND PROBATION SIMULTANEOUSLY ASK ABOUT THE ONE WITH THE HIGHEST NUMBER OF CONTACTS.)

NO ..... 2 (H9)

H7. During (MONTHS) did you report to or have any contact with your (probation/parole) officer?  
**MH7**

Yes ..... 1  
 No ..... 2 (H9)

H7a. During (MONTHS) how often did you have contact with or report to your (probation/parole) officer?  
**ENTER NUMBER AND CODE.**

\_\_\_\_\_ # of times **MH7a**

H7b. CODE: Per Month ..... 1 **MH7b**  
 Per Year ..... 2

H8. During (MONTHS) were urine tests required as a condition of (probation/parole)?  
**MH8**

Yes ..... 1  
 No ..... 2 (H9)

H8a. How many times per month were these tests required?  
**MH8a**

\_\_\_\_\_ # of times per month

**H9. CHECK ROW C OF THE CALENDAR. HOW MANY MONTHS WAS R INCARCERATED DURING SEGMENT 1?**

**MH9**

0-9 MONTHS INCARCERATED ..... 1  
 10-12 MONTHS INCARCERATED ..... 2 (H43)

H10.

Next, I would like to ask some questions about your use of drugs from the street and your use of prescription drugs to get high or for other non-medical effects, and your use of alcohol. (**SHOWCARD**) During (**MONTHS**) did you use (**DRUG**) five times or more?  
**READ AND CODE a-m. THEN ASK H11-H12 FOR EACH DRUG CODED "1" AT H10.**

a. Inhalants	<b>MH10a</b>	Yes . . . . . 1 No . . . . . 2
b. Marijuana/Hashish	<b>MH10b</b>	Yes . . . . . 1 No . . . . . 2
c. Crack	<b>MH10c</b>	Yes . . . . . 1 No . . . . . 2
d. Cocaine powder	<b>MH10d</b>	Yes . . . . . 1 No . . . . . 2
e. PCP or angel dust	<b>MH10e</b>	Yes . . . . . 1 No . . . . . 2
f. Hallucinogens or Psychedelics/LSD etc.	<b>MH10f</b>	Yes . . . . . 1 No . . . . . 2
g. Heroin	<b>MH10g</b>	Yes . . . . . 1 No . . . . . 2
h. Illegal Methadone	<b>MH10h</b>	Yes . . . . . 1 No . . . . . 2
i. Other Narcotics	<b>MH10i</b>	Yes . . . . . 1 No . . . . . 2
j. Methamphetamines	<b>MH10j</b>	Yes . . . . . 1 No . . . . . 2
k. Downers	<b>MH10k</b>	Yes . . . . . 1 No . . . . . 2
l. Other drug ( <b>SPECIFY</b> ) 12= Other prescription drug 14= Ritalin or Preludin <b>MH10IVB</b>	<b>MH10l</b>	Yes . . . . . 1 No . . . . . 2
m. Alcohol	<b>MH10m</b>	Yes . . . . . 1 No . . . . . 2

	H11.						H12.					
	Now, please look at the calendar and think about the month when you used (DRUG) the most during (MONTHS). About how many days did you use (DRUG) then? CODE; PROBE WITH CATEGORIES IF NEEDED.						During (MONTHS), how many months were you not using (DRUG)? CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.					
	1 day	2-5 days	6-10 days	More 11-20 days	than 20	DK	USED EVERY MONTH	1-3 months	4-6 months	7-9 months	Over 9 months	DK
a.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11a						MH12a					
b.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11b						MH12b					
c.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11c						MH12c					
d.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11d						MH12d					
e.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11e						MH12e					
f.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11f						MH12f					
g.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11g						MH12g					
h.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11h						MH12h					
i.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11i						MH12i					
j.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11j						MH12j					
k.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11k						MH12k					
l.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11l						MH12l					
m.	1	2	3	4	5	DK	1	2	3	4	5	DK
	MH11m						MH12m					

H13. During (MONTHS), did you ever go to a hospital because of a drug overdose?

**MH13**

Yes ..... 1

No ..... 2

H14. During (MONTHS), did you even one time, use a needle to inject drugs to get high or for other non-medical effects?

**MH14**

Yes ..... 1 (H16)

No ..... 2

H15. During (MONTHS), did someone else ever use a needle to inject you with drugs for you to get high or for other non-medical effects?

**MH15**

Yes ..... 1

No ..... 2 (H17)

H16. During (MONTHS), when you used a needle to inject drugs to get high, about how often did you use it after someone else? Was that ... (READ CHOICES AND CODE ONE)

**MH16**

Never, ..... 1 (H17)

Less than half of the time, ..... 2

Half of the time, ..... 3

More than half of the time, or ..... 4

Every time? ..... 5

RF (H17)

DK (H17)

H16a. During (MONTHS), when you used a needle after someone else, about how often did you clean it with bleach before you used it? Would you say ...

**MH16a**

Never ..... 1

Less than half of the time, ..... 2

Half of the time, ..... 3

More than half of the time, or ..... 4

Every time? ..... 5 RF DK

**H17. WAS ALCOHOL CODED "1" AT H10?**

**MH17**

**YES** ..... 1 (H19)

**NO** ..... 2

H18. Now I would like to ask about your use of alcoholic beverages. (By alcoholic beverages I mean beer, malt liquors, wine, wine coolers and hard liquor, such as vodka and mixed drinks.) During (MONTHS), did you ever have a drink of alcohol? (By a drink, I mean either a can of beer, a glass of wine or a wine cooler, a shot of hard liquor, or a single mixed drink.)

**MH18**

- Yes ..... 1
- No ..... 2 (H24)

H19. During (MONTHS), think about the month you were drinking the most. How many days did you drink during that month?  
**CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

**MH19**

- One day ..... 1
- 2-5 days ..... 2
- 6-10 days ..... 3
- 11-20 days ..... 4
- More than 20 days ..... 5

DK RF

	(1) Beer/Malt Liquor	(2) Wine/Wine Coolers	(3) Liquor
H20. Still think about the month you were drinking the most. On a typical drinking day, did you drink any (TYPE)?	Yes ..... 1 <b>MH20_1</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>MH20_2</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>MH20_3</b> No ..... 2 (H23)
H21. On a typical drinking day, about how much (TYPE) did you <u>usually</u> drink? <b>ENTER AMOUNT AND CODE.</b>	<b>MH21_1</b> _____ amount <b>H21a. CODE:</b> <b>MH21_a1</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10 (NEXT TYPE) Other (SPECIFY) ... 11  _____ <b>RECODED</b> _____ (NEXT TYPE)	<b>MH21_2</b> _____ amount <b>H21a. CODE:</b> <b>MH21_a2</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10 (NEXT TYPE) Other (SPECIFY) ... 11  _____ <b>RECODED</b> _____ (NEXT TYPE)	<b>MH21_3</b> _____ amount <b>H21a. CODE:</b> <b>MH21_a3</b> Bottles ..... 1 Cans ..... 2 Glasses ..... 3 (NEXT TYPE) Six packs ..... 4 (NEXT TYPE) 1/2 Pints ..... 5 (NEXT TYPE) Pints ..... 6 (NEXT TYPE) Quarts ..... 7 (NEXT TYPE) Fifths ..... 8 (NEXT TYPE) Drinks ..... 9 (NEXT TYPE) Shots ..... 10  <b>(H23)</b>
H22. What size (bottle/can) was that (in ounces)? <b>RECORD VERBATIM.</b>	_____ <b>MH22_1</b> _____	_____ <b>MH22_2</b> _____	

H23. During (MONTHS), were you ever in a hospital because of your drinking?

- Yes ..... 1
- No ..... 2

H24. Now I have some questions about your past living arrangements.  
 During (MONTHS), did you ever for at least two nights in a row have no place to stay except for a homeless shelter or street?

**MH24**

- Yes ..... 1
- No ..... 2 (H26)

H25. How long were you in a shelter or on the street during (MONTHS)? CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.

**MH25**

- Less than 1 month ..... 1
- 1-3 months ..... 2
- 4-6 months ..... 3
- 7-9 months ..... 4
- 10-12 months ..... 5
- HOMELESS/ON THE STREET ENTIRE TIME ..... 6 (H31)

H26. During (MONTHS), did you live in your own apartment or house at any time, either renting or buying, including living with parents or guardians?

**MH26**

- Yes ..... 1
- No ..... 2 (H27)

H26a. During (MONTHS), how long did you live there? CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.

**MH26a**

- Less than 1 month ..... 1
- 1-3 months ..... 2
- 4-6 months ..... 3
- 7-9 months ..... 4
- 10-12 months ..... 5

H27.		H28.
During (MONTHS), please tell me if you lived with any of the following people at any time. Did you live with . . .		During (MONTHS), what is the longest time you lived with PERSON? READ CHOICES ONLY AS PROBE.
<b>CODE "1" WITHOUT ASKING, IF KNOWN.</b>  a. Your (wife/husband) or someone who was like a spouse or partner?	<b>MH27a</b>  Yes . . . . . 1 (H28) No . . . . . 2	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5 <div style="text-align: right;"><b>MH28a</b>      DK</div>
b. Your mother, including your natural mother, stepmother, foster mother, or adoptive mother?	<b>MH27b</b>  Yes . . . . . 1 (H28) No . . . . . 2	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5 <div style="text-align: right;"><b>MH28b</b>      DK</div>
c. Your father, including your natural father, stepfather, foster father, or adoptive father?	<b>MH27c</b>  Yes . . . . . 1 (H28) No . . . . . 2	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5 <div style="text-align: right;"><b>MH28c</b>      DK</div>
<b>CODE "3" WITHOUT ASKING, IF KNOWN.</b>  d. Children of yours who were <u>18 years or older</u> ?	<b>MH27d</b>  Yes . . . . . 1 (H28) No . . . . . 2 R HAD NO CHILDREN . 3 (H31)	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5 <div style="text-align: right;"><b>MH28d</b>      DK</div>
e. Children <u>under 18 years old</u> who were your natural children or who you were raising as your own?	<b>MH27e</b>  Yes . . . . . 1 No . . . . . 2 (H31) R HAD NO CHILDREN . 3 (H31)	Less than 1 month . . . . . 1 1-3 months . . . . . 2 4-6 months . . . . . 3 7-9 months . . . . . 4 10-12 months . . . . . 5 <div style="text-align: right;"><b>MH28e</b>      DK</div>

H29. During (MONTHS), how many children under 18 years old were you raising and living with, including natural children, adopted children, and foster children? **ENTER NUMBER OF CHILDREN. IF NONE, CODE "0."**

0. NONE (H31) MH29  
\_\_\_\_\_ Number of Children

H30. During (MONTHS), did you lose custody of any children you were raising? By custody, I mean being legally in charge of a child. MH30

Yes ..... 1  
No ..... 2

H31. Now, I am going to ask about types of alcohol or drug treatment that include professional help such as doctors or counselors. During (MONTHS), did you receive treatment or counseling for drinking or using drugs? MH31

Yes ..... 1  
No ..... 2 (H32)

H31a. What kind of treatment was that? **RECORD VERBATIM AND CODE.** MH31a

\_\_\_\_\_  
Inpatient ..... 1  
Residential ..... 2  
Outpatient (non-methadone) ..... 3  
Methadone ..... 4

H31b. During (MONTHS), how many times did you enter treatment? MH31b

\_\_\_\_\_ Number of Times

H32. During (MONTHS), did you ever attend any ... MH32a

	<u>Yes</u>	<u>No</u>	
a. Alcoholics Anonymous meetings? .....	1	2	MH32a
b. Narcotics Anonymous meetings? .....	1	2	MH32b
c. Cocaine Anonymous meetings? .....	1	2	MH32c

**H32a. IS ANY ITEM CODED "1" AT H32?** MH32a\_1

YES ..... 1

NO ..... 2 (H33)

H32b. During (MONTHS), did you attend five or more of any of these meetings? MH32b\_1

Yes ..... 1  
No ..... 2

H33. During (MONTHS), did you ever have at least two weeks when you felt very sad, blue, or depressed, and you lost interest or pleasure in things you usually cared about? MH33

Yes ..... 1  
No ..... 2 (H34)  
DK .... (H34)

H33a. During (MONTHS), were all, some, or none of these times caused by drugs or alcohol you took?

**MH33a**

- All of the times ..... 1
- Some of the times ..... 2
- None of the times ..... 3 (H34)

H33b. During (MONTHS), did you have any times like this that were not caused by drugs or alcohol you took?

**MH33b**

- Yes ..... 1
- No ..... 2

H34. During (MONTHS) did you ever attempt suicide?

**MH34**

- Yes ..... 1 (H35)
- No ..... 2

H34a. During those 12 months, did you ever think seriously about committing suicide?

**MH34a**

- Yes ..... 1
- No ..... 2

H35. During (MONTHS), did you see a doctor, nurse, counselor or social worker for problems with your emotions, nerves, or mental health?

**MH35**

- Yes ..... 1
- No ..... 2 (H36)

H35a. How many times was that? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

**MH35a**

- 1-5 times ..... 1
- 6-10 times ..... 2
- 11-30 times ..... 3
- 31 times or more ..... 4 DK

H36. During (MONTHS), did you stay overnight in a hospital or clinic for treatment of problems with your emotions, nerves, or mental health?

**MH36**

- Yes ..... 1
- No ..... 2

<p style="text-align: center;">H37.</p> <p>Now I would like to ask about your involvement with the police, the courts, and illegal activities. During (MONTHS), did you ever . . .</p>	<p style="text-align: center;">H38.</p> <p>During (MONTHS), how many different times did you do that? <b>CODE R'S RESPONSE.</b></p> <p style="text-align: center;"><b>1      2-5      6-20      21-100      More</b> <b>Time    Times    Times    Times    than 100</b></p>	<p style="text-align: center;">H39.</p> <p>What drugs were you dealing or selling during (MONTHS)? <b>CODE ALL THAT APPLY.</b></p>	
<p>a. Drive a vehicle (car, truck, van or motorcycle) while you were drunk or high?</p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p style="text-align: center;">RF <b>MH37a</b></p>	<p style="text-align: center;"><b>MH38a</b></p> <p style="text-align: center;">1    2            3    4    5</p>	
<p>b. Steal a vehicle (car, truck, van or motorcycle)?</p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p style="text-align: center;">RF <b>MH37b</b></p>	<p style="text-align: center;"><b>MH38b</b></p> <p style="text-align: center;">1    2            3    4    5</p>	
<p>c. Sell drugs or help someone else sell drugs, including cutting, weighing, packaging or making drugs?</p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p style="text-align: center;">RF <b>MH37c</b></p>	<p style="text-align: center;"><b>MH38c</b></p> <p style="text-align: center;">1    2            3    4    5</p>	
<p>d. Have sex for money or drugs (prostitution)?</p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p style="text-align: center;">RF <b>MH37d</b></p>	<p style="text-align: center;"><b>MH38d</b></p> <p style="text-align: center;">1    2            3    4    5</p>	
<p>e. Take something from a store without paying for it, that is, shoplifted?</p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p style="text-align: center;">RF <b>MH37e</b></p>	<p style="text-align: center;"><b>MH38e</b></p> <p style="text-align: center;">1    2            3    4    5</p>	

<p>g. Break into a house, a business, or a vehicle to take someone else's money or property?</p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p>RF MH37g</p>	<p style="text-align: center;"><b>MH38g</b></p> <p style="text-align: center;">1    2    3    4    5</p>
<p>h. Use a weapon or physical force against someone to steal money or property from them?</p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p>RF MH37h</p>	<p style="text-align: center;"><b>MH38h</b></p> <p style="text-align: center;">1    2    3    4    5</p>
<p>m. Do any other things to make money that are against the law?</p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p>RF MH37m</p>	<p style="text-align: center;"><b>MH38m</b></p> <p style="text-align: center;">1    2    3    4    5</p>
<p>n. Do any thing else against the law that I didn't ask about? <b>(SPECIFY)</b> <b>CODE ONE</b> 1= Drug Possession 4= Aggravated assault, Assault with the intent to kill, Other serious intent 5= Forcible rape, Statutory Rape, Sexual assault 6= Murder, Manslaughter, Homicide 7= Other violent offenses (Arson, Damage to or destruction of property, Vandalism, Simple assault, Fighting) 15= Violation of parole 16= Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway) 17= Cannot code charge <b>MH37nVB</b></p>	<p>Yes . . 1 (H38) No . . . . 2</p> <p>RF MH37n</p>	<p style="text-align: center;"><b>MH38n</b></p> <p style="text-align: center;">1    2    3    4    5</p>

**H40. WAS ANY ACTIVITY CODED "1" AT H37?**

**MH40**

YES ..... 1

NO ..... 2 (H43)

H41. During (MONTHS), how many months were you doing any of the activities we just talked about?

**MH41**

\_\_\_\_\_ Number of Months

H41a. In a typical week, during (MONTHS), about how much money would you say you earned from these activities?

\$ \_\_\_\_\_.00 per week

**MH41a**

H42. **CODE WITHOUT ASKING, IF KNOWN.** During (MONTHS), were you ever arrested and booked or taken into custody?

**MH42**

Yes ..... 1

No ..... 2 (H43)

H42a. About how many times were you arrested and booked (or taken into custody) during (MONTHS)?

\_\_\_\_\_ Number of Times

**MH42a**

H42b. What was/were the main charge(s)? **RECORD VERBATIM AND CODE ALL THAT APPLY.**

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**DRUG OFFENSES**

- Drug Possession ..... 1 **MH42bm1**
- Drug Sale or manufacturing ..... 2 **MH42bm2**

**VIOLENT OFFENSES**

- Armed robbery, Robbery by force ..... 3 **MH42bm3**
- Aggravated assault,  
Assault with the intent to kill,  
Other serious intent ..... 4 **MH42bm4**
- Forcible rape, Statutory Rape, Sexual assault ..... 5 **MH42bm5**
- Murder, Manslaughter, Homicide ..... 6 **MH42bm6**
- Other violent offenses (Arson, Damage  
to or destruction of property,  
Vandalism, Simple assault, Fighting) ..... 7 **MH42bm7**

**PROPERTY OFFENSES**

- Forgery, Passing bad checks, Credit card fraud ..... 8 **MH42bm8**
- Motor Vehicle theft ..... 9 **MH42bm9**
- Breaking and entering, Burglary ..... 10 **MH42bm10**
- Pimping, procuring ..... 11 **MH42bm11**
- Other theft (Larceny, Pick pocketing,  
Purse snatching, Mugging, Receiving,  
Possession of stolen goods, Shoplifting) ..... 12 **MH42bm12**

**PUBLIC ORDER OFFENSES**

- Driving while intoxicated (DWI),  
Driving under the influence (DUI) ..... 13 **MH42bm13**
- Prostitution, solicitation ..... 14 **MH42bm14**
- Violation of parole ..... 15 **MH42bm15**
- Other public order offenses (Bookmaking,  
Numbers, Gambling, Curfew violation,  
Truancy, Being a runaway) ..... 16 **MH42bm16**
- CANNOT CODE CHARGE ..... 17 **MH42bm17**

H43. During (**MONTHS**), were you ever attacked with a weapon such as a knife or a gun?

**MH43**

- Yes ..... 1
- No ..... 2      RF      DK

H44. During (**MONTHS**), were you ever hit or beaten so seriously that you were badly bruised, had to see a doctor, or had to stay in bed for one day or more?

**MH44**

Yes ..... 1

No ..... 2      RF      DK

**H45. IS "1" CODED AT H43 OR H44?**

**MH45**

YES ..... 1

NO ..... 2 (H47)

H46. During (MONTHS), how many times were you attacked with a weapon or seriously hit or beaten? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

**MH46**

One time ..... 1

2-5 times ..... 2

6-10 times ..... 3

11-20 times ..... 4

21-100 times ..... 5

More than 100 times ..... 6      RF      DK

H47. The next questions are about your physical health. During (MONTHS), would you say your health was . . .

**MH47**

Excellent, ..... 1

Good, ..... 2

Fair, or ..... 3

Poor? ..... 4

H48. During (MONTHS), did you have any illness or condition that caused you pain, limited your activities, or caused you problems at work (or in school)?

**MH48**

Yes ..... 1

No ..... 2 (H49i)

- H49. During (MONTHS), did you have any problems with . . .
- |  | <u>Yes</u> | <u>No</u> | <u>DK</u> |              |
|--|------------|-----------|-----------|--------------|
| b. a heart or blood condition, . . . . .   | 1          | 2         | DK        | <b>MH49b</b> |
| c. hepatitis or yellow jaundice? . . . . .   | 1          | 2         | DK        | <b>MH49c</b> |
| d. an internal condition, such as ulcers, diabetes,<br>or kidney or liver problems? . . . . .                | 1          | 2         | DK        | <b>MH49d</b> |
| e. a bone or muscle condition, . . . . .   | 1          | 2         | DK        | <b>MH49e</b> |
| f. a nerve condition, such as convulsions,<br>or migraines? . . . . .  | 1          | 2         | DK        | <b>MH49f</b> |
| g. <b>FEMALE R ONLY:</b> miscarriage, toxemia,<br>bad Pap smear or other serious female condition? . . . . . | 1          | 2         | DK        | <b>MH49g</b> |
| h. any sexually transmitted disease other than AIDS? . . . . .   | 1          | 2         | DK        | <b>MH49h</b> |

**i. CHECK ROW D OF THE CALENDAR. HAVE YOU ALREADY ENTERED "A" ON ROW D?**  
**MH49i**

YES . . . . . 1 (ASK H49j)

NO . . . . . 2 (H50)

- j. any AIDS-related condition? . . . . . 1(H52) . . . . 2(H52) . . . . DK (H52) **MH49j**

- H50. During (MONTHS), did you have a blood test for AIDS? **MH50**
- Yes . . . . . 1
- No . . . . . 2 (H52)

- H50a. Did you find out the results of that test? **MH50a**
- Yes . . . . . 1
- No . . . . . 2

- H51. During (MONTHS), did a doctor or other health professional tell you that you were HIV-positive or had the AIDS virus? **MH51**
- Yes . . . . . 1 **(RECORD "A" IN ROW D OF THE CALENDAR, IN THE LAST MONTH OF SEGMENT 1. THEN ASK H52)**
- No . . . . . 2

H52. During (MONTHS), about how many times did you see a doctor for a physical illness, condition or injury? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**MH52**

- Once, ..... 1
- 2-9 times, or ..... 2
- 10 or more times? ..... 3
- NEVER SAW A DOCTOR ..... 4

H53. During (MONTHS), how many times did you go to a hospital emergency room but did not stay overnight? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**MH53**

- Once, ..... 1
- 2-9 times, or ..... 2
- 10 or more times? ..... 3
- NEVER WENT ..... 4

H54. During (MONTHS), did you ever go to a hospital for at least 24 hours for a physical illness, condition or injury?

**MH54**

- Yes ..... 1
- No ..... 2 (H55)

H54a. During (MONTHS), about how many nights did you spend in the hospital for a physical illness, condition, or injury?

\_\_\_\_\_ nights      DK      **MH54a**

H55. **FEMALE R ONLY:** Now, I am going to ask about pregnancy and giving birth. During (MONTHS), were you pregnant at any time?

**MH55**

- Yes ..... 1
- No ..... 2 (H56)

H55a. Did you give birth to a live baby?

**MH55a**

- Yes ..... 1
- No ..... 2

H56. During (MONTHS), about how many different people did you have sex with, even if only one time? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**MH56**

- NONE ..... 1 (H57)
- One ..... 2
- 2-9 ..... 3
- 10-25 ..... 4
- 26-100 ..... 5
- More than 100 ..... 6      RF      DK

H56a. During those 12 months, did you have sex with someone so they would give you money, drugs, clothes or a place to sleep?

**MH56a**

- Yes ..... 1
- No ..... 2      RF      DK

**H57. CHECK ROW C OF THE CALENDAR. HOW MANY MONTHS WAS R  
INCARCERATED DURING SEGMENT 1?**

**MH57**

**0-9 MONTHS ..... 1**

**10-12 MONTHS ..... 2 (SECTION K)**

H58. Next, I would like to ask about how you supported yourself during (**MONTHS**), that is, how you got the money that you used to live on. During (**MONTHS**), did you get most of your support from illegal activities that you did?

**MH58**

Yes ..... 1

No ..... 2 (**H59**)

**RF (H59)**

H58a. During (**MONTHS**), when you were getting most of your support from illegal activities, what did you do most of the time to get money? **CODE ALL THAT APPLY.**

Drug dealing ..... 1 **MH58am1**

Prostitution ..... 2 **MH58am2**

Motor vehicle theft ..... 3 **MH58am3**

Shoplifting ..... 4 **MH58am4**

Breaking and entering, Burglary ..... 5 **MH58am5**

Armed robbery, Robbery by force ..... 6 **MH58am6**

Other property crime: Moonshining, boot legging,  
running liquor, pimping, procuring, forgery,  
Passing bad checks, credit card fraud,  
bookmaking, numbers, gambling, receiving,  
possession of stolen goods, other theft (larceny,  
pick pocketing, purse snatching, mugging) ..... 7 **MH58am7**

Violent crime for pay: Arson, aggravated assault,  
other serious assault, murder ..... 8 **MH58am8**

OTHER ILLEGAL ACTIVITY ..... 9 **MH58am9**

RF DK

H59. The next questions are about your employment. During (**MONTHS**), were you employed full-time at any time, that is, did you work 35 hours or more a week at any job? (Do not count any job that involved illegal activity.)

**MH59**

Yes ..... 1

No ..... 2 (**H63**)

H60. During (MONTHS), how many months did you work full-time? MH60  
 \_\_\_\_\_ number of months

H61. What kind of work did you do at your longest full-time job? That is, what was your job title or what was your job called? **RECORD VERBATIM AND ENTER CODE.**

\_\_\_\_\_ MH61  
 \_\_\_\_\_

- 1 Clerical Worker; (Ex. Bankteller, receptionist, word processor, office worker)
- 2 Sales Worker; (Ex. Salesclerk, cashier, gas station attendant, telephone or door-to-door sales)
- 3 Service Worker; (Ex. Janitor, cook, waitress/waiter, nursing aide, police officer, farm worker)
- 4 Private HH Worker; (Ex. Maid, housekeeper, childcare worker, private HH cook, gardener)
- 5 Skilled Worker or Craftsmen; (Ex. Carpenter, electrician, machinist, mechanic)
- 6 Laborer; (Ex. Construction worker, maintenance worker)
- 7 Operator or Machine Operator; (Ex. Assembler, machine or textile operator)
- 8 Transportation Equipment Operator; (Ex. Cab, truck, or bus driver, conductor, fork lift operator)
- 9 Farm Laborer; (Ex. Farm worker, picker, seasonal farm worker)
- 10 Farmer or Farm Manager
- 11 Manager/Administrator; (Ex. Officer manager, inspectors, bank or store administrator)
- 12 Lay Counselor; (Ex. drug counselor without professional degree, "peer" counselor)
- 13 Professional/Technical; (Ex. nurse, clinical social worker, teacher, artist, lawyer)
- 14 Other
- 15 UNABLE TO CODE
- 16 Military

H62. Before taxes, what was your highest wage, salary, or rate of pay at that full-time job? **RECORD DOLLARS AND CENTS AND CODE.** MH62  
 \$ \_\_\_\_\_

- |             |   |    |       |
|-------------|---|----|-------|
| H62a. CODE: | Per hour . . . . .  | 1  |       |
|             | Every week . . . . .  | 2  |       |
|             | Every two weeks . . . . .                                   | 3  | MH62a |
|             | Per month . . . . .   | 4  |       |
|             | Per year . . . . .  | 5  |       |
|             | OTHER (SPECIFY) _____ <b>RECODED</b> _____ RF <del>DK</del> |    |       |
|             | Day . . . . .   | 7  |       |
|             | Unit/Product . . . . .                                      | 8  |       |
|             | Unit/Service . . . . .                                      | 9  |       |
|             | Room & Board . . . . .                                      | 10 |       |

H63. During (MONTHS), did you have a part-time job at any time? MH63

Yes . . . . .		1	
No . . . . .		2	(H66)

H64. During (MONTHS), how many months did you work part-time? MH64  
 \_\_\_\_\_ number of months

H65. Before taxes, what was your highest wage, salary, or rate of pay at the part-time job you had the longest during (MONTHS)? **RECORD DOLLARS AND CENTS AND CODE.**

**MH65**

\$ \_\_\_\_\_.

- H65a. CODE:
- Per hour . . . . . 1
  - Every week . . . . . 2
  - Every two weeks . . . . . 3
  - Per month . . . . . 4
  - Per year . . . . . 5
  - OTHER (SPECIFY) \_\_\_\_\_ **RECODED** \_\_\_\_\_ 6
  - Day . . . . . 7
  - Unit/Product . . . . . 8
  - Unit/Service . . . . . 9
  - Room & Board . . . . . 10

**MH65a**

RF DK

H66. **CODE WITHOUT ASKING, IF KNOWN.** During (MONTHS), did anyone you lived with (help with/pay your) expenses, such as housing, food, clothing, medical costs, (and/or) transportation?

**MH66**

- Yes . . . . . 1
- No . . . . . 2 (H67)
- RF . . . . . (H67)

H66a. During (MONTHS), would you say that this help with your living expenses paid for less than half, half or more, or all of your living expenses?

**MH66a**

- Less than half . . . . . 1
- Half or more . . . . . 2
- All . . . . . 3

H67.		H68.
<p>Now, I will ask about (other) sources of income you may have had during (MONTHS). (Please do <u>not</u> include income from illegal activities) (or help you received with living expenses from someone you lived with.)</p> <p>During (MONTHS), did you ever <u>personally</u> get any income from . . .</p>		<p>During (MONTHS), <u>before taxes</u>, about how much income did you personally get from (INCOME SOURCE). <b>IF YOU CODE "3", SKIP TO NEXT INCOME SOURCE. RECORD DOLLAR AMOUNT. ROUND TO NEAREST DOLLAR.</b></p>
<p>a. <b>CODE WITHOUT ASKING IF KNOWN.</b> Your wages or salary, including tips, (from all jobs or businesses)?</p>	<p>Yes . . . . 1 (H68)  No . . . . . 2  RF  <b>MH67a</b> DK</p>	<p><b>MH68aa</b>  \$ _____ .00 RF DK  <b>(H68a) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>MH68a1</b> Total . . . 3  <b>(H68a) (2)</b> _____ <b>MH68a2WK MH68a2MO</b></p>
<p>b. (Money/Other money) from a (spouse, partner, or other) family member who was <u>not</u> living with you? (Not including the help we've already talked about).</p>	<p>Yes . . . . 1 (H68)  No . . . . . 2  RF  <b>MH67b</b> DK</p>	<p><b>MH68bb</b>  \$ _____ .00 RF DK  <b>(H68b) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>MH68b1</b> Total . . . 3  <b>(H68b) (2)</b> _____ Number (wks/mos)  <b>MH68b2WK MH68b2MO</b></p>
<p>c. Welfare, including General Assistance, or Relief or Aid to Dependent Children or to Families with Dependent Children?</p>	<p>Yes . . . . 1 (H68)  No . . . . . 2  RF  <b>MH67c</b> DK</p>	<p><b>MH68cc</b>  \$ _____ .00 RF DK  <b>(H68c) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>MH68c1</b> Total . . . 3  <b>(H68c) (2)</b> _____ Number (wks/mos)  <b>MH68c2WK MH68c2MO</b></p>
<p>d. Unemployment compensation, disability pay, or SSI?</p>	<p>Yes . . . . 1 (H68)  No . . . . . 2  RF  <b>MH67d</b> DK</p>	<p><b>MH68dd</b>  \$ _____ .00 RF DK  <b>(H68d) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>MH68d1</b> Total . . . 3  <b>(H68d) (2)</b> _____ Number (wks/mos)  <b>MH68d2WK MH68d2MO</b></p>
<p>e. Social Security, pension, annuity, or interest from savings?</p>	<p>Yes . . . . 1 (H68)  No . . . . . 2  RF  <b>MH67e</b> DK</p>	<p><b>MH68ee</b>  \$ _____ .00 RF DK  <b>(H68e) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>MH68e1</b> Total . . . 3  <b>(H68e) (2)</b> _____ Number (wks/mos)  <b>MH68e2WK MH68e2MO</b></p>
<p>f. Alimony or child support?</p>	<p>Yes . . . . 1 (H68)  No . . . . . 2  RF  <b>MH67f</b> DK</p>	<p><b>MH68ff</b>  \$ _____ .00 RF DK  <b>(H68f) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>MH68f1</b> Total . . . 3  <b>(H68f) (2)</b> _____ Number (wks/mos)  <b>MH68f2WK MH68f2MO</b></p>

<p>g. Any other sources I haven't asked about? (<b>SPECIFY</b>)</p> <p>1=Food stamps, rent vouchers  2=Recycling (cans, bottles, newspapers)  3=Inheritances, trusts, prizes settlements, etc.  4=Other sources of income</p> <p>_____ <b>MH67gVB</b> _____</p>	<p>Yes . . . . . 1 (<b>H68</b>)  No . . . . . 2</p> <p>RF</p> <p><b>MH67g</b> DK</p>	<p><b>MH68gg</b></p> <p>\$ _____ .00 RF DK</p> <p><b>(H68g) (1) CODE:</b> per wk . . . 1 per mo . . . 2</p> <p><b>MH68g1</b> Total . . . 3</p> <p><b>(H68g) (2)</b> _____ Number (wks/mos)  <b>MH68g2WK MH68g2MO</b></p>
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**SECTION K. SEGMENT 2 (METHADONE MAINTENANCE TREATMENT)**

Next, I would like to ask what was going on in your life during the time you were in **(PROGRAM)**. **GO TO SECOND SEGMENT OUTLINED IN CALENDAR, THE SAMPLED EPISODE SEGMENT.** You may find it helpful to refer to the calendar when answering the questions. This period of time is from \_\_\_\_\_ 19\_\_\_\_\_ through \_\_\_\_\_ 19\_\_\_\_\_. Some questions will refer to the last 12 months.

**K1. CHECK ROW C OF THE CALENDAR. WAS PAROLE OR PROBATION STATUS NOTED DURING SEGMENT 2 PERIOD?**

**MK1**

YES ..... 1 (IF MORE THAN ONE, ASK K2 ABOUT THE LAST ONE. IF ON PAROLE AND PROBATION SIMULTANEOUSLY, ASK ABOUT THE ONE WITH THE HIGHEST NUMBER OF CONTACTS.)

NO ..... 2 (K4)

K2. During **(MONTHS)** you were in **(PROGRAM NAME)** did you report to or have any contact with your (probation/parole) officer ?

**MK2**

Yes ..... 1

No ..... 2 (K3)

K2a. During **(MONTHS)**, how often did you have contact with or report to your (probation/parole) officer? **ENTER NUMBER AND CODE.**

**MK2a**

\_\_\_\_\_ # of times

K2b. CODE: Per Month ..... 1

**MK2b**

Per Year ..... 2

K3. During **(MONTHS)**, were urine tests required as a condition of probation/parole?

**MK3**

Yes ..... 1

No ..... 2 (K4)

K3a. How many times per month were these tests required?

**MK3a**

\_\_\_\_\_ # of times per month

K4. (SHOWCARD). During (MONTHS) when you went to (PROGRAM), which drug or drug combination, including alcohol, was the reason you went there? **CODE ALL THAT APPLY.**

Inhalants .....	1	MK4m1
Marijuana/hashish .....	2	MK4m2
Crack .....	3	MK4m3
Cocaine powder .....	4	MK4m4
PCP or angel dust .....	5	MK4m5
Hallucinogens or Psychedelics/LSD .....	6	MK4m6
Heroin .....	7	MK4m7
Illegal Methadone .....	8	MK4m8
Other Narcotics .....	9	MK4m9
Methamphetamines .....	10	MK4m10
Downers .....	11	MK4m11
Other drug .....	12	MK4m12
(SPECIFY) _____ <b>RECODED</b> _____		
Alcohol .....	13	MK4m13
Ritalin or Preludin .....	14	MK4m14
No Drug .....	15	MK4m15

K5. During (MONTHS) how important would you say each of the following people was in getting you to go to treatment or counseling at (PROGRAM). Was (your/a) . . . very important, somewhat important, or not important (in getting you to go there)?

	<u>Very</u> <u>Important</u>	<u>Somewhat</u> <u>Important</u>	<u>Not</u> <u>Important</u>	
a. (Wife/husband or other) family member .....	1	2	3	MK5a
b. Friend or associate (co-worker) .....	1	2	3	MK5b
c. Employer .....	1	2	3	MK5c
d. <b>UNDER AGE 18 R ONLY:</b> Teacher, school counselor, or someone else at school .....	1	2	3	MK5d
e. Nurse, doctor, social worker, or somebody like that .....	1	2	3	MK5e
f. Probation or parole officer, judge, attorney, or somebody like that .....	1	2	3	MK5f
g. Anyone else .....	1	2	3	MK5g
(SPECIFY) _____ <b>God, self</b> _____				MK5gVB

K6. What were the most important reasons you had for going to treatment or counseling at (**PROGRAM NAME**), during (**MONTHS**). **CODE ALL THAT APPLY. PROBE UNTIL NO OTHER REASONS GIVEN. ONLY IF NECESSARY, ASK:** What other reason was important to you?

- DRUG AVAILABILITY -- difficulties obtaining drugs or "good" drugs . . . . . 1 **MK6m1**
- FINANCIAL -- couldn't afford to stay on drugs, lost an income source . . . . . 2 **MK6m2**
- PRESSURE FROM criminal justice system, attorney, etc. . . . . 3 **MK6m3**
- PRESSURE TO improve/save close relationship, with spouse, partner, parent . . . . . 4 **MK6m4**
- PRESSURE FROM school teacher, minister, coach, etc. . . . . 5 **MK6m5**
- JOB -- to get, keep or improve job situation . . . . . 6 **MK6m6**
- PARENTING ISSUES -- get or keep custody or become better parent . . . . . 7 **MK6m7**
- HEALTH ISSUES -- too ill to continue; drugs or related diseases are hurting or threaten own health, unborn baby, others . . . . . 8 **MK6m8**
- DESIRE FOR SERVICES -- want to become eligible for some type of services . . . . . 9 **MK6m9**
- GENERAL PERSONAL MOTIVE -- "tired", "disgusted", "want to change", improve lifestyle, "save" self . . . . . 10 **MK6m10**
- OTHER REASON . . . . . 11 **MK6m11**

DK

K7. Next I'm going to ask about staff persons that you usually saw for counseling or treatment at (**PROGRAM**) during (**MONTHS**). Think about the staff person that you talked to the most: In general, how much did you and that person agree about things you might need to change in your life in order to stay drug free or alcohol free, such as changing the place you lived, changing your friends, going back to school or getting a new job? Would you say you agreed . . .

- Very much, . . . . . 1 **MK7**
- Somewhat, or . . . . . 2
- Not at all? . . . . . 3

K7a. In general, how well do you feel that person understood the problems you might have had with alcohol or drugs? Would you say . . .

- Very much, . . . . . 1 **MK7a**
- Somewhat, or . . . . . 2
- Not at all ? . . . . . 3

K7b. **ASK IF TREATMENT PERIOD IS 18 MONTHS OR LONGER.** During the last 12 months, is that the staff member you talked to most often?

**MK7b**

Yes ..... 1

No ..... 2

K8. During (**MONTHS**), did you receive any counseling or classes for safe needle use, or dangers of needle sharing?

**MK8**

Yes ..... 1

No ..... 2

**(K9)**

K8a. **ASK ONLY IF RESPONDENT WAS IN TREATMENT 18 MONTHS OR LONGER:** Did you receive any of this counseling or classes during the last 12 months?

**MK8a**

Yes ..... 1

No ..... 2

K9. During (MONTHS), did you take any medicines besides methadone that were prescribed for you by a doctor for drug or alcohol problems, such as desipramine or antabuse?

**MK9**

- Yes ..... 1
- No ..... 2 **(K9c)**

K9a. What prescription medicines did you take for drug or alcohol problems? **RECORD VERBATIM AND CODE ALL THAT APPLY.**

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- Alcohol ..... 1 **MK9am1**
- Analgesics [Propoxyphene-N (Darvon-N),  
propoxyphene (Darvon), oxycodone  
(Percodan), codeine or other pain medications] ..... 2 **MK9am2**
- Antabuse ..... 3 **MK9am3**
- Antacids ..... 4 **MK9am4**
- Antianxiety Medications[Chlordiazepoxide  
(Librium), diazepam (Valium), alprazolam (Xanax),  
flurazepam (Dalmane), or other benzodiazepines;]  
[Chlorpromazine (Thorazine), trifluoperazine  
(Stelazine) thioridazine (Mellaril), or  
other anti-psychotics] ..... 5 **MK9am5**
- Anticonvulsants ..... 6 **MK9am6**
- Antidepressants [Amtriptyline (Elavil),  
Desipramine, or any other antidepressants] ..... 7 **MK9am7**
- Antimanics [Lithium carbonate (Lithium),  
carbamazepine (Tegretol), valproic acid  
(Valproate), or other anti-manics] ..... 8 **MK9am8**
- Multivitamins ..... 10 **MK9am10**
- Narcotic Antagonists [Buprenorphine  
(Buprenex) Naltrexone (Trexan),  
Naloxone, or other narcotic antagonists] ..... 11 **MK9am11**
- Sedatives [Pentobarbital (Nembutal),  
secobarbital (Seconal), Tuinal, or  
other barbiturates; Chloral hydrate  
or other sedatives or hypnotics] ..... 12 **MK9am12**
- Other ..... 13 **MK9am13**

K9b. **ASK ONLY IF TREATMENT WAS 18 MONTHS OR LONGER:** Did you take these medicines in the last 12 months?

**MK9b**

Yes ..... 1

No ..... 2

K9c. During (**MONTHS**), in general, would you say that the doses of methadone you were prescribed were too high, the right amount, or too low?

**MK9c**

Too high ..... 1

The right amount ..... 2

Too low ..... 3

DK

K9d. **ASK ONLY IF TREATMENT WAS 18 MONTHS OR LONGER:** During the last 12 months specifically, would you say that the doses of methadone you were prescribed were too high, the right amount, or too low?

**MK9d**

Too high ..... 1

The right amount ..... 2

Too low ..... 3

DK

K10. During (**MONTHS**), did you ever attend any . . .

	<u>Yes</u>	<u>No</u>	
a. Alcoholics Anonymous Meetings . . . . .	1	2	<b>MK10a</b>
b. Narcotics Anonymous Meetings . . . . .	1	2	<b>MK10b</b>
c. Cocaine Anonymous Meetings . . . . .	1	2	<b>MK10c</b>

**K10a. IS ANY ITEM CODED "1" AT K10?**

**MK10a1**

**YES** ..... 1

**NO** ..... 2 (**K11**)

K10b. During (**MONTHS**), did you attend five or more of any of these meetings?

**MK10b1**

Yes ..... 1

No ..... 2

K11. During (MONTHS), did you get help from or arranged by (PROGRAM) with any criminal charges against you, such as seeing a lawyer?

**MK11**

Yes ..... 1  
No ..... 2 (K12)

K11a. **ASK ONLY IF TREATMENT WAS 18 MONTHS OR LONGER:** Was this during the last 12 months?

**MK11a**

Yes ..... 1  
No ..... 2

K12. During (MONTHS), did you receive any counseling or attend any classes at (arranged by) (PROGRAM) to learn about ways not to get or spread AIDS?

**MK12**

Yes ..... 1  
No ..... 2 (K13)

K12a. **ASK ONLY IF TREATMENT WAS 18 MONTHS OR LONGER:** Did you receive this counseling or attend other classes during the last 12 months?

**MK12a**

Yes ..... 1  
No ..... 2

K13. During (MONTHS), did you receive any kind of counseling or attend any classes at (or arranged by) (PROGRAM) for problems you may have had raising children or to help you to become a better parent?

**MK13**

Yes ..... 1  
No ..... 2 (K14)

K13a. **ASK ONLY IF TREATMENT WAS 18 MONTHS OR LONGER:** Did you receive counseling or attend classes in the last 12 months?

**MK13a**

Yes ..... 1  
No ..... 2

K14. During (MONTHS), did you get any classes or lessons at (or arranged by) (PROGRAM) to help you get a job, hold a job, or improve your job skills?

**MK14**

Yes ..... 1  
No ..... 2 (SECTION M)

K14a. Did you receive these classes or lessons during the last 12 months?

**MK14a**

Yes ..... 1  
No ..... 2

**SECTION M. SEGMENT 3 (METHADONE MAINTENANCE STATUS)**

**IF TREATMENT PERIOD IS LESS THAN 18 MONTHS:** Next, I would like to ask you about what was happening in your life since you started treatment. **GO TO THE SEGMENT OUTLINED ON CALENDAR; THE TIME FROM THE START OF SAMPLE EPISODE TO THE INTERVIEW DATE.** You may find it helpful to refer to the calendar when answering the questions. **THIS PERIOD OF TIME IS FROM \_\_\_\_\_ TO \_\_\_\_\_.**

**IF TREATMENT PERIOD IS 18 MONTHS OR LONGER:** Next, I would like to ask you about what was happening in your life during the past year. **GO TO THE SEGMENT OUTLINED ON CALENDAR; THE 12 MONTHS PERIOD PRIOR TO THE INTERVIEW DATE.** You may find it helpful to refer to the calendar when answering the questions. This period of time is from \_\_\_\_\_ to \_\_\_\_\_.

M1.		M2.					
First, I would like to ask some questions about your use of drugs from the street and your use of prescription drugs to get high for non-medical effects, and your use of alcohol since (MONTH). Since (MONTH), did you use (DRUG TYPE) five times or more? <b>READ AND CODE a-m.</b>		Now, please look at the calendar. Since (MONTH). In the month you used (DRUG) the most, about how many days did you use it? <b>CODE; PROBE WITH CATEGORIES AS NEEDED.</b>					
		More					
		1 day	2-5 days	6-10 days	11-20 days	than 20	DK
a. Inhalants <b>MM1a</b>	Yes ..... 1 No ..... 2	<b>MM2a</b>					
		1	2	3	4	5	DK
b. Marijuana/Hashish <b>MM1b</b>	Yes ..... 1 No ..... 2	<b>MM2b</b>					
		1	2	3	4	5	DK
c. Crack <b>MM1c</b>	Yes ..... 1 No ..... 2	<b>MM2c</b>					
		1	2	3	4	5	DK
d. Cocaine powder <b>MM1d</b>	Yes ..... 1 No ..... 2	<b>MM2d</b>					
		1	2	3	4	5	DK
e. PCP or angel dust <b>MM1e</b>	Yes ..... 1 No ..... 2	<b>MM2e</b>					
		1	2	3	4	5	DK
f. Hallucinogens or Psychedelics/LSD <b>MM1f</b>	Yes ..... 1 No ..... 2	<b>MM2f</b>					
		1	2	3	4	5	DK
g. Heroin <b>MM1g</b>	Yes ..... 1 No ..... 2	<b>MM2g</b>					
		1	2	3	4	5	DK
h. Illegal Methadone <b>MM1h</b>	Yes ..... 1 No ..... 2	<b>MM2h</b>					
		1	2	3	4	5	DK
i. Other Narcotics <b>MM1i</b>	Yes ..... 1 No ..... 2	<b>MM2i</b>					
		1	2	3	4	5	DK
j. Methamphetamines <b>MM1j</b>	Yes ..... 1 No ..... 2	<b>MM2j</b>					
		1	2	3	4	5	DK
k. Downers <b>MM1k</b>	Yes ..... 1 No ..... 2	<b>MM2k</b>					
		1	2	3	4	5	DK
l. Other drug (SPECIFY) 12= Other prescription drug 14= Ritalin or Preludin <b>MM1l</b> <b>MM1lVB</b>	Yes ..... 1 No ..... 2	<b>MM2l</b>					
		1	2	3	4	5	DK
m. Alcohol <b>MM1m</b>	Yes ..... 1 No ..... 2	<b>MM2m</b>					
		1	2	3	4	5	DK
<b>WAS AT LEAST ONE DRUG TYPE CODED "1" AT M1?</b>							<b>MM1a1</b>
YES ..... 1 (ASK M2-M4 FOR EACH DRUG CODED "1" AT M1)							
NO ..... 2 (M6)							

M3. Since (MONTH), how many months were you not using (DRUG)? CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.							M4. Again, looking at the calendar, since (DATE 30 DAYS AGO), about how many days did you use (DRUG)? CODE; PROBE WITH CATEGORIES IF NEEDED.						
USED EVERY MONTH	1-3 months	4-6 months	7-9 months	OVER 9 months	DK		0 days	1 days	2-5 days	6-10 days	More than 20 days	DK	
a.	MM3a						MM4a					1	2
	1	2	3	4	5	DK	3	4	5	6	DK		
b.	MM3b						MM4b						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
c.	MM3c						MM4c						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
d.	MM3d						MM4d						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
e.	MM3e						MM4e						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
f.	MM3f						MM4f						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
g.	MM3g						MM4g						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
h.	MM3h						MM4h						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
i.	MM3i						MM4i						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
j.	MM3j						MM4j						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
k.	MM3k						MM4k						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
l.	MM3l						MM4l						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK
m.	MM3m						MM4m						
	1	2	3	4	5	DK	1	2	3	4	5	6	DK

<p><b>M5a. IS ALCOHOL THE ONLY "1" CODE AT M1?</b></p> <p style="text-align: right;">MM5a</p> <p>YES ..... 1 (M6)</p> <p>NO ..... 2</p>
---

M5b. During the last 30 days, how much money would you say you spent on the drugs you used to get high or for other non-medical effects? **RECORD DOLLAR AMOUNT AND ROUND TO NEAREST DOLLAR. PROBE FOR R's BEST ESTIMATE. IF NECESSARY, ASK:** How much cash did you spend?

MM5b

\$ \_\_\_\_\_ .00      RF      DK

- M6. Since (MONTH), did you ever go to the hospital because of a drug overdose? **MM6**
- Yes ..... 1
- No ..... 2 (M7)
- M6a. Since (MONTH), how many times did you go to the hospital because of a drug overdose?  
**CODE R's RESPONSE.**
- MM6a**
- One time ..... 1
- 2-3 times ..... 2
- 4-10 times ..... 3
- More than 10 times ..... 4
- M7. Since (MONTH), did you ever, even one time, use a needle to inject drugs to get high or for other non-medical effects. **MM7**
- Yes ..... 1 (M8)
- No ..... 2
- M7a. Did someone else use a needle to inject you with drugs to get high or for other non-medical effects? **MM7a**
- Yes ..... 1
- No ..... 2 (M10)
- M8. Since (MONTH), during the month you used needles the most, about how many days did you inject drugs to get high or for other non-medical effects? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED**
- MM8**
- One day ..... 1
- 2-5 days ..... 2
- 6-10 days ..... 3
- 11-20 days ..... 4
- more than 20 days? ..... 5 RF DK
- M9. Since (MONTH), when you used a needle to inject drugs to get high, about how often did you use it after someone else? Would you say never, less than half of the time, half of the time, more than half of the time, or every time? **MM9**
- Never ..... 1 (M10)
- Less than half of the time ..... 2
- Half of the time ..... 3
- More than half of the time ..... 4
- Every time ..... 5 RF DK

M9a. Since (**MONTH**), when you used a needle after someone else, about how often did you clean it with bleach before you used it? Would you say . . .

- MM9a**
- Never, . . . . . 1
- Less than half of the time, . . . . . 2
- Half of the time, . . . . . 3
- More than half of the time, . . . . . 4
- Every time? . . . . . 5      RF      DK

**M10. WAS ALCOHOL CODED "1" at M1?**

**MM10**

**YES** . . . . . **1 (M12)**

**NO** . . . . . **2**

M11. Now I would like to ask about your use of alcoholic beverages. (By alcoholic beverages I mean beer, malt liquors, wine, wine coolers and hard liquor, such as vodka and mixed drinks.) Since (**MONTH**), did you ever have a drink of alcohol? (By a drink, I mean either a can of beer, a glass of wine or a wine cooler, a shot of hard liquor, or a single mixed drink.)

- MM11**
- Yes . . . . . 1
- No . . . . . 2      (**M18**)

M12. During the last 30 days, did you drink any alcohol?

- MM12**
- Yes . . . . . 1
- No . . . . . 2

M13. Since (**MONTH**), think about the month you were drinking the most. About how many days did you drink during that month? **CODE R's RESPONSE.**

- MM13**
- One day . . . . . 1
- 2-5 days . . . . . 2
- 6-10 days . . . . . 3
- 11-20 days or . . . . . 4
- More than 20 days . . . . . 5

DK      RF

	(1) Beer/Malt Liquor	(2) Wine/Wine Coolers	(3) Liquor
M14. Still think about the month you were drinking the most. On a typical drinking day, did you drink any (TYPE)?	Yes ..... 1 <b>M14_1</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>M14_2</b> No ..... 2 (NEXT TYPE)	Yes ..... 1 <b>M14_3</b> No ..... 2 (M17)
M15. On a typical drinking day, about how much (TYPE) did you usually drink? ENTER AMOUNT AND CODE.	<p>_____MM15_1_____ amount</p> <p><b>M15a. CODE:</b> <b>M15a_1</b></p> <p>Bottles ..... 1</p> <p>Cans ..... 2</p> <p>Glasses ..... 3 (NEXT TYPE)</p> <p>Six packs ..... 4 (NEXT TYPE)</p> <p>1/2 Pints ..... 5 (NEXT TYPE)</p> <p>Pints ..... 6 (NEXT TYPE)</p> <p>Quarts ..... 7 (NEXT TYPE)</p> <p>Fifths ..... 8 (NEXT TYPE)</p> <p>Drinks ..... 9 (NEXT TYPE)</p> <p>Shots ..... 10 (NEXT TYPE)</p> <p>Other (SPECIFY) ... 11</p> <p>_____RECODED_____</p> <p>(NEXT TYPE)</p>	<p>_____MM15_2_____ amount</p> <p><b>M15a. CODE:</b> <b>M15a_2</b></p> <p>Bottles ..... 1</p> <p>Cans ..... 2</p> <p>Glasses ..... 3 (NEXT TYPE)</p> <p>Six packs ..... 4 (NEXT TYPE)</p> <p>1/2 Pints ..... 5 (NEXT TYPE)</p> <p>Pints ..... 6 (NEXT TYPE)</p> <p>Quarts ..... 7 (NEXT TYPE)</p> <p>Fifths ..... 8 (NEXT TYPE)</p> <p>Drinks ..... 9 (NEXT TYPE)</p> <p>Shots ..... 10 (NEXT TYPE)</p> <p>Other (SPECIFY) ... 11</p> <p>_____RECODED_____</p> <p>(NEXT TYPE)</p>	<p>_____MM15_3_____ amount</p> <p><b>M15a. CODE:</b> <b>M15a_3</b></p> <p>Bottles ..... 1</p> <p>Cans ..... 2</p> <p>Glasses ..... 3 (NEXT TYPE)</p> <p>Six packs ..... 4 (NEXT TYPE)</p> <p>1/2 Pints ..... 5 (NEXT TYPE)</p> <p>Pints ..... 6 (NEXT TYPE)</p> <p>Quarts ..... 7 (NEXT TYPE)</p> <p>Fifths ..... 8 (NEXT TYPE)</p> <p>Drinks ..... 9 (NEXT TYPE)</p> <p>Shots ..... 10</p> <p>(M17)</p>
M16. What size (bottle/can) was that (in ounces)? RECORD VERBATIM.	_____MM16_1_____	_____MM16_2_____	

M17. Since (MONTH), have you ever been in a hospital because of your drinking?

**MM17**

Yes ..... 1

No ..... 2

M18. Since (MONTH), have you received any treatment or help for drinking?

**MM18**

Yes ..... 1

No ..... 2 (M20)

**INFORMATION IN M19 NOT INCLUDED IN THE DATA FILE.**

<p>M19.</p> <p>Where did you receive treatment or help the (first/next) time since (MONTH)? <b>RECORD NAME AND CITY.</b></p>	<p>M19a.</p> <p>What kind of treatment or help did you receive there? <b>RECORD VERBATIM AND CODE ALL THAT APPLY.</b></p>
<p>1. _____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;"><b>(M19a)</b></p>	<p>_____</p> <p>Inpatient ..... 1</p> <p style="text-align: center;"><b>MM19a1m1</b></p> <p>Residential ..... 2</p> <p style="text-align: center;"><b>MM19a1m2</b></p> <p>Outpatient (non-methadone) ..... 3</p> <p style="text-align: center;"><b>MM19a1m3</b></p> <p>Methadone ..... 4</p> <p style="text-align: center;"><b>MM19a1m4</b></p>
<p>2. _____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;"><b>(M19a)</b></p>	<p>_____</p> <p>Inpatient ..... 1</p> <p style="text-align: center;"><b>MM19a2m1</b></p> <p>Residential ..... 2</p> <p style="text-align: center;"><b>MM19a2m2</b></p> <p>Outpatient (non-methadone) ..... 3</p> <p style="text-align: center;"><b>MM19a2m3</b></p> <p>Methadone ..... 4</p> <p style="text-align: center;"><b>MM19a2m4</b></p>
<p>3. _____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;"><b>(M19a)</b></p>	<p>_____</p> <p>Inpatient ..... 1</p> <p style="text-align: center;"><b>MM19a3m1</b></p> <p>Residential ..... 2</p> <p style="text-align: center;"><b>MM19a3m2</b></p> <p>Outpatient (non-methadone) ..... 3</p> <p style="text-align: center;"><b>MM19a3m3</b></p> <p>Methadone ..... 4</p> <p style="text-align: center;"><b>MM19a3m4</b></p>
<p>4. _____</p> <p>_____</p> <p>_____</p> <p style="text-align: right;"><b>(M19a)</b></p>	<p>_____</p> <p>Inpatient ..... 1</p> <p style="text-align: center;"><b>MM19a4m1</b></p> <p>Residential ..... 2</p> <p style="text-align: center;"><b>MM19a4m2</b></p> <p>Outpatient (non-methadone) ..... 3</p> <p style="text-align: center;"><b>MM19a4m3</b></p> <p>Methadone ..... 4</p> <p style="text-align: center;"><b>MM19a4m4</b></p>

M20. Since (MONTH), did you ever attend any . . .

	<u>Yes</u>	<u>No</u>	
a. Alcohol Anonymous meetings? . . . . .	1	2	<b>MM20a</b>
b. Narcotics Anonymous meetings? . . . . .	1	2	<b>MM20b</b>
c. Cocaine Anonymous meetings? . . . . .	1	2	<b>MM20c</b>

**M20a. IS ANY ITEM CODED "1" AT M20?**

**MM20a1**

- YES** ..... **1**
- NO** ..... **2 (M21)**

M20b. Since (MONTH), have you been to five or more of any of these meetings?

**MM20b1**

- Yes ..... 1
- No ..... 2

M20c. When did you last attend one of these meetings?

\_\_\_\_\_ 19 \_\_\_\_\_  
Mo Yr

**MM20cMO MM20cYR**

M21. Since (MONTH), did you ever have at least two weeks when you felt very sad, blue, or depressed, and you lost interest or pleasure in things you usually cared about?

**MM21**

- Yes ..... 1
- No ..... 2 (M22)
- DK ..... (M22)

M21a. Since (MONTH), were all, some, or none of the these times caused by drugs or alcohol you took?

**MM21a**

- All of the times ..... 1
- Some of the times ..... 2
- None of the times ..... 3 (M22)

M21b. Since (MONTH), did you have any times like this that were not caused by drugs or alcohol you took?

**MM21b**

- Yes ..... 1
- No ..... 2

M22. Since (MONTH), did you ever attempt suicide?

**MM22**

- Yes ..... 1 (M23)
- No ..... 2

M22a. Since (MONTH), did you ever think seriously about committing suicide?

**MM22a**

- Yes ..... 1
- No ..... 2

M23. Since (**MONTH**), did you see a doctor, nurse, counselor or social worker for problems with your emotions, nerves, or mental health?

**MM23**

Yes ..... 1

No ..... 2 (**M24**)

M23a. How many times was that? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

**MM23a**

1-5 times ..... 1

6-10 times ..... 2

11-30 times ..... 3

31 times or more ..... 4 DK

M24. Since (**MONTH**), did you stay overnight in a hospital or clinic for treatment of problems with your emotions, nerves, or mental health?

**MM24**

Yes ..... 1

No ..... 2

<p style="text-align: center;">M25.</p> <p>Now I would like to ask about your involvement with the police, the courts, and illegal activities. Since (MONTH), did you ever . . .</p>	<p style="text-align: center;">M26.</p> <p>Since (MONTH), about how many different times did you do that? <b>CODE R'S RESPONSE.</b>  <b>1      2-5      6-20      21-100      More</b>  <b>Time    Times    Times    Times    than 100</b></p>	<p style="text-align: center;">M27.</p> <p>What drugs were you dealing or selling since (MONTH)? <b>CODE ALL THAT APPLY.</b></p>	
<p>c. Sell drugs or help someone else sell drugs, including cutting, weighing, packaging or making drugs?</p>	<p>Yes . . . 1 (M26)  No . . . . 2    RF  <b>MM25c</b></p>	<p style="text-align: center;"><b>MM26c</b></p> <p>1      2      3      4      5</p>	<p>Inhalants . . . . . 1  <b>MM27cm1</b>  Marijuana/Hash . . . . . 2  <b>MM27cm2</b>  Crack . . . . . 3  <b>MM27cm3</b>  Cocaine powder . . . . . 4  <b>MM27cm4</b>  PCP/angel dust . . . . . 5  <b>MM27cm5</b>  Hallucinogen or  Psychedelics/LSD . . . . . 6  <b>MM27cm6</b>  Heroin . . . . . 7  <b>MM27cm7</b>  Illegal Methadone . . . . . 8  <b>MM27cm8</b>  Other Narcotics . . . . . 9  <b>MM27cm9</b>  Methamphetamines . . . . . 10  <b>MM27cm10</b>  Downers . . . . . 11  <b>MM27cm11</b>  Other drug . . . . . 12  <b>MM27cm12</b>  Alcohol . . . . . 13  <b>MM27cm13</b>  Ritalin or Preludin . . . . . 14  <b>MM27cm14</b></p>
<p>d. Have sex for money or drugs (prostitution)?</p>	<p>Yes . . . 1 (M26)  No . . . . 2    RF  <b>MM25d</b></p>	<p style="text-align: center;"><b>MM26d</b></p> <p>1      2      3      4      5</p>	
<p>g. Break into a house, a business, or a vehicle to take someone else's money or property?</p>	<p>Yes . . . 1 (M26)  No . . . . 2    RF  <b>MM25g</b></p>	<p style="text-align: center;"><b>MM26g</b></p> <p>1      2      3      4      5</p>	
<p>h. Use a weapon or physical force against someone to steal money or property from them?</p>	<p>Yes . . . 1 (M26)  No . . . . 2    RF  <b>MM25h</b></p>	<p style="text-align: center;"><b>MM26h</b></p> <p>1      2      3      4      5</p>	

n. Do anything else against the law? ( <b>SPECIFY</b> ) <b>CODE ONE</b> 1= Drug Possession 4= Assault with the intent to kill, Other serious intent 5= Forcible rape, Statutory Rape, Sexual assault 6= Murder, Manslaughter, Homicide 7= Other violent offenses (Arson, Damage to or destruction of property, Vandalism, Simple assault, Fighting) 8= Forgery, Passing bad checks, Credit card fraud 11= Pimping, procuring 15= Violation of parole 16= Other public order offenses (Bookmaking, Numbers, Gambling, Curfew violation, Truancy, Being a runaway) 17= Cannot code charge <u>MM25nVB</u>	Yes ... 1 ( <b>M26</b> ) No ..... 2	<b>MM26n</b>				
	RF <b>MM25n</b>	1	2	3	4	5

<b>M28. WAS ANY ACTIVITY CODED "1" AT M25?</b>		<b>MM28</b>
YES .....		<b>1</b>
NO .....		<b>2 (M30)</b>

M29. During (**MONTHS**), how many months were you doing any of the activities we just talked about?  
\_\_\_\_\_ Number of months **MM29**

M30. **CODE WITHOUT ASKING, IF KNOWN.** Since (**MONTH**), were you ever arrested and booked or taken into custody?  
**MM30**  
Yes ..... 1  
No ..... 2 (**M32**)

M31. Since (MONTH), how many times altogether were you arrested and booked or taken into custody? **CODE R's RESPONSE. PROBE FOR BEST ESTIMATE.**

- MM31**
- One time ..... 1
- 2-3 times ..... 2
- 4-10 times ..... 3
- More than 10 times ..... 4      RF      DK

M32. Right now, do you have any (other) criminal charges or criminal cases against you, including a conviction that you are awaiting sentencing for?

- MM32**
- Yes ..... 1
- No ..... 2      RF      DK

M33. Since (MONTH), were you ever attacked with a weapon such as a knife or a gun?

- MM33**
- Yes ..... 1
- No ..... 2

M33a. Since (MONTH), were you ever hit or beaten so seriously that you were badly bruised, had to see a doctor, or had to stay in bed for one day or more?

- MM33a**
- Yes ..... 1
- No ..... 2      RF      DK

**M34. IS "1" CODED AT M33 OR M33a?**

**MM34**

**YES** ..... 1

**NO** ..... 2 (M36)

M35. Since (MONTH), how many times were you attacked with a weapon or seriously hit or beaten? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

- MM35**
- One time ..... 1
- 2-5 times ..... 2
- 6-10 times ..... 3
- 11-20 times ..... 4
- 21-100 times ..... 5
- More than 100 times ..... 6      RF      DK

M36. The next questions are about your physical health. Would you say your health is . . . **MM36**

- Excellent, ..... 1
- Good, ..... 2
- Fair, or ..... 3
- Poor? ..... 4

M37. Do you have any illness or condition that causes you pain, limits your activities, or causes you problems at work (or in school)?

MM37

Yes ..... 1  
 No ..... 2 (M38i)

M38. Since (MONTH), have you had any problems with . . .

	<u>Yes</u>	<u>No</u>	<u>DK</u>	
b. a heart or blood condition, . . . . .	1	2	DK	MM38b
c. hepatitis or yellow jaundice? . . . . .	1	2	DK	MM38c
d. an internal condition, such as ulcers, diabetes, or kidney or liver problems? . . . . .	1	2	DK	MM38d
e. a bone or muscle condition, . . . . .	1	2	DK	MM38e
f. a nerve condition, such as convulsions, or migraines? . . . . .	1	2	DK	MM38f
g. <b>FEMALE R ONLY:</b> miscarriage, toxemia, bad Pap smear or other serious female condition? . . . . .	1	2	DK	MM38g
h. any sexually transmitted disease other than AIDS? . . . . .	1	2	DK	MM38h

i. **CHECK ROW D OF THE CALENDAR. HAVE YOU ALREADY ENTERED "A" ON ROW D?**

YES ..... 1 (M38j) MM38i

NO, AND AT LEAST ONE "YES" AT M38 ..... 2 (M39)

NO, AND NO "YES" AT M38 ..... 3 (M40)

j. any AIDS-related condition? . . . . . 1 . . . . . 2 . . . . . DK MM38j

M39. Did you have any of these problems in the last 30 days?

MM39

Yes ..... 1  
 No ..... 2

M39a. IS M38i CODED "1"?

YES ..... 1 (M42) MM39a

NO ..... 2

M40. Since (MONTH), have you had a blood test for AIDS? **MM40**

- Yes ..... 1
- No ..... 2 (M42)

M40a. Do you know the results of that test?

**MM40a**

- Yes ..... 1
- No ..... 2

M41. Since (MONTH), has a doctor or other health professional told you that you are HIV-positive or have the AIDS virus?

**MM41**

- Yes ..... 1
- No ..... 2

M42. Since (MONTH), how many times did you see a doctor for a physical illness, condition or injury? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**MM42**

- Once, ..... 1
- 2-9 times, or ..... 2
- 10 or more times? ..... 3
- NEVER SAW A DOCTOR ..... 4

M43. Since (MONTH), how many times did you go to a hospital emergency room but did not stay overnight? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**MM43**

- Once, ..... 1
- 2-9 times, or ..... 2
- 10 or more times? ..... 3
- NEVER WENT ..... 4

M44. Since (MONTH), did you ever go to a hospital for at least 24 hours for a physical illness, condition or injury?

**MM44**

- Yes ..... 1
- No ..... 2 (M45)

M44a. Since (MONTH), about how many nights did you spend in the hospital for a physical illness, condition, or injury?

**MM44a**

\_\_\_\_\_ nights      DK

M45. **FEMALE R ONLY:** Since (MONTH), have you been pregnant at any time?

**MM45**

Yes ..... 1  
No ..... 2 (M46)

M45a. Did you give birth to a live baby?

**MM45a**

Yes ..... 1  
No ..... 2

M46. Since (MONTH), about how many different people have you had sex with, even if only one time? **CODE R's RESPONSE; PROBE WITH CATEGORIES IF NEEDED.**

**MM46**

NONE ..... 1 (M48)  
One ..... 2  
2-9 ..... 3  
10-25 ..... 4  
26-100 ..... 5  
More than 100 ..... 6 RF DK

M47. Since (MONTH), have you had sex with someone so they would give you money, drugs, clothes or a place to sleep?

**MM47**

Yes ..... 1  
No ..... 2 RF DK

M48. Now I have some questions about your past living arrangements.

Since (MONTH), did you ever for at least two nights in a row have no place to stay except for a homeless shelter or street?

**MM48**

Yes ..... 1  
No ..... 2 (M50)

M49. How long were you in a shelter or on the street since (MONTH)? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

**MM49**

Less than 1 month ..... 1  
1-3 months ..... 2  
4-6 months ..... 3  
7-9 months ..... 4  
10-12 months ..... 5  
HOMELESS/ON THE STREET ENTIRE TIME ..... 6 (M51)

M50. Since (MONTH), did you live in your own apartment or house at any time, either renting or buying, including living with parents or guardians?

**MM50**

Yes ..... 1  
No ..... 2 (M51)

M50a. Since (MONTH), how long did you live there? **CODE R's RESPONSE. PROBE WITH CATEGORIES IF NEEDED.**

**MM50a**

- Less than 1 month . . . . . 1
- 1-3 months . . . . . 2
- 4-6 months . . . . . 3
- 7-9 months . . . . . 4
- 10-12 months . . . . . 5

M51. **CODE WITHOUT ASKING, IF KNOWN.** Since (MONTH), how many children under 18 years old were you raising and living with, including natural children, adopted children, and foster children? **ENTER NUMBER OF CHILDREN. IF NONE, CODE "0."**

**MM51**

- 0. NONE (M54)
- \_\_\_\_\_ Number of Children

M52. Since (MONTH), did you lose custody of any children you were raising? By custody, I mean being legally in charge of a child.

**MM52**

- Yes . . . . . 1
- No . . . . . 2 (M54)

M53. Did you ever get custody back since (MONTH)?

**MM53**

- Yes . . . . . 1
- No . . . . . 2

M54. Next, I would like to ask about how you support yourself, that is, how you got the money that you used to live on. Since (MONTH), did you get most of your support from illegal activities that you did?

**MM54**

- Yes . . . . . 1
- No . . . . . 2 (M55)

**RF (M55)**

M54a. Since (MONTH), when you were getting most of your support from illegal activities, what did you do most of the time to get money? **CODE ALL THAT APPLY.**

- Drug dealing . . . . . 1 **MM54am1**
- Prostitution . . . . . 2 **MM54am2**
- Motor vehicle theft . . . . . 3 **MM54am3**
- Shoplifting . . . . . 4 **MM54am4**
- Breaking and entering, Burglary . . . . . 5 **MM54am5**
- Armed robbery, Robbery by force . . . . . 6 **MM54am6**
- Other property crime: Moonshining, boot legging, running liquor, pimping, procuring, forgery, Passing bad checks, credit card fraud, bookmaking, numbers, gambling, receiving, possession of stolen goods, other theft (larceny, pick pocketing, purse snatching, mugging) . . . . . 7 **MM54am7**
- Violent crime for pay: Arson, aggravated assault, other serious assault, murder . . . . . 8 **MM54am8**
- OTHER ILLEGAL ACTIVITY . . . . . 9 **MM54am9**

RF DK

M54b. Since (MONTH), in a typical week, how much money would you say you earned/earn from crimes?

\_\_\_\_\_ .00 per week

**MM54b**

M55. Now I have some questions about education and employment. Since (MONTH), did you attend school or take any classes or lessons to get a (GED, or a high school, technical school, or college) diploma?

**MM55**

Yes ..... 1

No ..... 2

M56. Since (MONTH), have you been employed full-time at any time, that is, did you work 35 hours or more a week at any job? (Do not count any job that involved illegal activity.)

**MM56**

Yes ..... 1

No ..... 2 (M60)

M57. Since (MONTH), how many months have you worked full-time?

**MM57**

\_\_\_\_\_ Number of months

M58. What kind of work did you do at your longest full-time job? That is, what was your job title or what was your job called?

**RECORD VERBATIM AND ENTER CODE.**

\_\_\_\_\_  
\_\_\_\_\_

**MM58**

- 1 Clerical Worker; (Ex. Bankteller, receptionist, word processor, office worker)
- 2 Sales Worker; (Ex. Salesclerk, cashier, gas station attendant, telephone or door-to-door sales)
- 3 Service Worker; (Ex. Janitor, cook, waitress/waiter, nursing aide, police officer, farm worker)
- 4 Private HH Worker; (Ex. Maid, housekeeper, childcare worker, private HH cook, gardener)
- 5 Skilled Worker or Craftsmen; (Ex. Carpenter, electrician, machinist, mechanic)
- 6 Laborer; (Ex. Construction worker, maintenance worker)
- 7 Operator or Machine Operator; (Ex. Assembler, machine or textile operator)
- 8 Transportation Equipment Operator; (Ex. Cab, truck, or bus driver, conductor, fork lift operator)
- 9 Farm Laborer; (Ex. Farm worker, picker, seasonal farm worker)
- 10 Farmer or Farm Manager
- 11 Manager/Administrator; (Ex. Officer manager, inspectors, bank or store administrator)
- 12 Lay Counselor; (Ex. drug counselor without professional degree, "peer" counselor)
- 13 Professional/Technical; (Ex. nurse, clinical social worker, teacher, artist, lawyer)
- 14 Other
- 15 UNABLE TO CODE
- 16 Military

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M59. Before taxes, what (was your highest/is your) wage, salary, or rate of pay at that full-time job? **RECORD DOLLARS AND CENTS AND CODE.**

\$ \_\_\_\_\_.

**MM59**

- M59a. CODE:
- Per hour . . . . . 1
  - Every week . . . . . 2
  - Every two weeks . . . . . 3
  - Per month . . . . . 4
  - Per year . . . . . 5
  - OTHER (SPECIFY) \_\_\_\_\_ **RECODED** RF ~~DK~~
  - Day . . . . . 7
  - Unit/Product . . . . . 8
  - Unit/Service . . . . . 9
  - Room & Board . . . . . 10

**MM59a**

M60. Since (**MONTH**), have you had a part-time job at any time?

**MM60**

- Yes . . . . . 1
- No . . . . . 2 (**M63**)

M61. Since (**MONTH**), how many months have you worked part-time?

\_\_\_\_\_ Number of months

**MM61**

M62. Before taxes, what was your highest wage, salary, or rate of pay at the part-time job you had the longest since (**MONTH**)? **RECORD DOLLARS AND CENTS AND CODE.**

\$ \_\_\_\_\_.

**MM62**

- M62a. CODE:
- Per hour . . . . . 1
  - Every week . . . . . 2
  - Every two weeks . . . . . 3
  - Per month . . . . . 4
  - Per year . . . . . 5
  - OTHER (SPECIFY) \_\_\_\_\_ **RECODED** RF ~~DK~~
  - Day . . . . . 7
  - Unit/Product . . . . . 8
  - Unit/Service . . . . . 9
  - Room & Board . . . . . 10

**MM62a**

M63. **CODE WITHOUT ASKING, IF KNOWN.** Since (**MONTH**), has anyone you lived with (helped with/paid your) expenses, such as housing, food, clothing, medical costs, (and/or) transportation?

**MM63**

- Yes . . . . . 1
- No . . . . . 2 (**M64**)

RF (**M64**)

M63a. Since (**MONTH**), would you say that this help with your living expenses has paid for less than half, half or more, or all of your living expenses?

**MM63a**

- Less than half . . . . . 1
- Half or more . . . . . 2
- All . . . . . 3

M64.		M65.	
<p>Now, I will ask about (other) sources of income you may have had since (MONTH). (Please do <u>not</u> include income from illegal activities) (or) (help you received with living expenses from someone you lived with)? Since (MONTH), did you ever personally get any income from . . .</p>		<p>Since (MONTHS) before taxes, about how much income did you personally get from (INCOME SOURCE)? IF YOU CODE "3", SKIP TO THE NEXT INCOME SOURCE. RECORD DOLLAR AMOUNT. ROUND TO NEAREST DOLLAR.</p>	
<p>a. <b>CODE WITHOUT ASKING.</b> Your wages or salary, including tips, from all jobs or businesses?</p>	<p>Yes . . . . . 1 (M65) No . . . . . 2 RF MM64a DK</p>	<p><b>MM65a</b> \$ _____ .00 RF DK (M65a) (1) CODE: per wk . . . 1 per mo . . . 2 MM65aa Total . . . 3 (M65a) (2) _____ Number (wks/mos) MM65aWK MM65aMO</p>	
<p>b. (Money/Other money) from a (spouse, partner, or other) family member who was <u>not</u> living with you? (Not including the help we've already talked about).</p>	<p>Yes . . . . . 1 (M65) No . . . . . 2 RF MM64b DK</p>	<p><b>MM65b</b> \$ _____ .00 RF DK (M65b) (1) CODE: per wk . . . 1 per mo . . . 2 MM65bb Total . . . 3 (M65b) (2) _____ Number (wks/mos) MM65bWK MM65bMO</p>	
<p>c. Welfare, including General Assistance, or Relief or Aid to Dependent Children or to Families with Dependent Children?</p>	<p>Yes . . . . . 1 (M65) No . . . . . 2 RF MM64c DK</p>	<p><b>MM65c</b> \$ _____ .00 RF DK (M65c) (1) CODE: per wk . . . 1 per mo . . . 2 MM65cc Total . . . 3 (M65c) (2) _____ Number (wks/mos) MM65cWK MM65cMO</p>	
<p>d. Unemployment compensation, disability pay, or SSI?</p>	<p>Yes . . . . . 1 (M65) No . . . . . 2 RF MM64d DK</p>	<p><b>MM65d</b> \$ _____ .00 RF DK (M65d) (1) CODE: per wk . . . 1 per mo . . . 2 MM65dd Total . . . 3 (M65d) (2) _____ Number (wks/mos) MM65dWK MM65dMO</p>	
<p>e. Social Security, pension, annuity, or interest from savings?</p>	<p>Yes . . . . . 1 (M65) No . . . . . 2 RF MM64e DK</p>	<p><b>MM65e</b> \$ _____ .00 RF DK (M65e) (1) CODE: per wk . . . 1 per mo . . . 2 MM65ee Total . . . 3 (M65e) (2) _____ Number (wks/mos) MM65eWK MM65eMO</p>	
<p>f. Alimony or child support?</p>	<p>Yes . . . . . 1 (M65) No . . . . . 2 RF MM64f DK</p>	<p><b>MM65f</b> \$ _____ .00 RF DK (M65f) (1) CODE: per wk . . . 1 per mo . . . 2 MM65ff Total . . . 3 (M65f) (2) _____ Number (wks/mos) MM65fWK MM65fMO</p>	

<p>g. Any other sources I haven't asked about? (<b>SPECIFY</b>)</p> <p>1=Food stamps, rent vouchers, etc.  2=Rcylcing (cans, bottles, newspapers, etc.)  3=Inheritances, trusts, prizes, settlements, etc.)  4=Other sources of income</p> <p>_____ <b>MM64gCOD</b> _____</p>	<p>Yes . . . . . 1 (<b>M65</b>)  No . . . . . 2</p> <p>RF  <b>MM64g</b> DK</p>	<p><b>MM65g</b>  \$ _____ .00 RF DK  <b>(M65g) (1) CODE:</b> per wk . . . 1 per mo . . . 2  <b>MM65gg</b> Total . . . 3  <b>(M65g) (2)</b> _____ Number (wks/mos)  <b>MM65gWK MM65gMO</b></p>
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66. **ASK IF R WAS DISCHARGED FROM TREATMENT.**

What is the main reason you stopped treatment in (**END MONTH**)? **CODE ALL THAT APPLY. IF NECESSARY**

**ASK:** What other reason did you have?

- |   |    |                |
|---|----|----------------|
| Completed treatment plan, graduated from program . . . . .                                | 1  | <b>MM66m1</b>  |
| Dropped from program by staff, involuntary discharge . . . . .                            | 2  | <b>MM66m2</b>  |
| Did not want to be there in first place . . . . .   | 3  | <b>MM66m3</b>  |
| Treatment not successful, kept doing drugs, discouraged . . . . .                         | 4  | <b>MM66m4</b>  |
| Transferred to another program because dissatisfied . . . . .                             | 5  | <b>MM66m5</b>  |
| Changes in eligibility, program had to reduce size . . . . .                              | 6  | <b>MM66m6</b>  |
| Became incarcerated . . . . .   | 7  | <b>MM66m7</b>  |
| Logistical problems, too difficult to get there, child<br>care, conflict on job . . . . . | 8  | <b>MM66m8</b>  |
| Couldn't afford it . . . . .  | 9  | <b>MM66m9</b>  |
| Pressure from family and friends to end treatment . . . . .                               | 10 | <b>MM66m10</b> |
| Left the area . . . . .   | 11 | <b>MM66m11</b> |
| Other ( <b>SPECIFY</b> ) _____ <b>RECODED</b> _____                                       | 12 | <b>MM66m12</b> |
| NO REASON GIVEN . . . . .   | 13 | <b>MM66m13</b> |
| Needed hospitalization . . . . .  | 14 | <b>MM66m14</b> |

## **SECTION P. PARTICIPANT LOCATING INFORMATION**

**ALL INFORMATION IN SECTION P NOT INCLUDED IN DATA FILE.**

## SECTION R: INTERVIEWER REPORT

(FILL IN THE FOLLOWING ITEMS IMMEDIATELY AFTER THE INTERVIEW HAS BEEN COMPLETED.)

R1. Did any interruption occur during the interview?

- |           |            |
|-----------|------------|
|           | <b>MR1</b> |
| Yes ..... | 1 (R1a)    |
| No .....  | 2 (R2)     |

R1a. What was the nature of the interruption(s)? **DESCRIBE IN DETAIL:**

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R2. Did it appear that R was under the influence of drugs or alcohol?

- |                       |            |
|-----------------------|------------|
|                       | <b>MR2</b> |
| Yes, strongly .....   | 1          |
| Yes, moderately ..... | 2          |
| Yes, slightly .....   | 3          |
| No .....              | 4          |

R3. What was R's speech pattern?

- |                               |            |
|-------------------------------|------------|
|                               | <b>MR3</b> |
| Coherent .....                | 1 (R4)     |
| Not completely coherent ..... | 2 (R3a)    |
| Definitely not coherent ..... | 3 (R3a)    |

R3a. What do you think accounted for this lack of coherence?

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R4. Respondent was:

- |  |            |
|--|------------|
|  | <b>MR4</b> |
| Black, non-Spanish surname .....                   | 1          |
| Spanish surname .....                              | 2          |
| Non-black, non-Spanish surname (other white) ..... | 3          |
| Other ( <b>SPECIFY</b> )_____ .....                | 4          |

R5. Where was the interview conducted?

**MR5**

R's place of residence .....	1
A residence of friend or relative of R .....	2
Premises of treatment program .....	3
Institution ( <b>SPECIFY</b> ) <b>RECODED</b> .....	4
Other ( <b>SPECIFY</b> ) <b>RECODED</b> .....	5
Restaurant/Bar/Fast Food Places .....	6
Jail/Prison/Correctional Facility .....	7
Place of work/Office/Relatives' place of work .....	8
Park/Other outside place .....	9
Alcohol/Other Drug Treatment/Rehab Center .....	10
Shelter/Mission .....	11
Interviewer's car/Parking lot .....	12
Hospitals/Clinics .....	13
Shopping Mall/Area (Inside/Outside) .....	14
Libraries/Schools/Colleges .....	15
Telephone .....	16
Health Clubs/Recreational Facilities .....	17
Unable to code - Institutions .....	18
Unable to code - Other .....	19

R6. Interest of R during interview:

**MR6**

Very interested .....	1
Somewhat interested .....	2
Uninterested .....	3

R7. Was any other person present during the interview?

**MR7**

Yes, most of the time .....	1
Yes, part of the time .....	2
No .....	3

R8. How honest do you feel R's answers were?

**MR8**

Extremely honest .....	1
Honest .....	2
Somewhat honest .....	3
Not very honest .....	4
Difficult to tell .....	5