



ICPSR 3986

Correlates and Consequences of Juvenile Exposure to Violence in the United States, 1995

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Codebook and Data Collection Instrument

First ICPSR Version
August 2004



National Institute of Justice
Data Resources Program

ICPSR

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Political and Social Research
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Data Collection Description

Principal Investigator(s): Stacey Nofziger

Title: Correlates and Consequences of Juvenile Exposure to Violence in the United States, 1995

ICPSR Study Number: 3986

Funding Agency: United States Department of Justice. National Institute of Justice

Grant Number: 2002-IJ-CX-0004

Summary: This study examined the effect of exposure to violence on juveniles. It was specifically concerned with juveniles' perceptions of violence in schools and communities and how exposure to violence served as a risk factor for juvenile drug and alcohol use and participation in other delinquent activities. It also sought to develop a more complete picture of the context and consequences of violence in schools. The data for this study were drawn from the NATIONAL SURVEY OF ADOLESCENTS IN THE UNITED STATES, 1995 (ICPSR 2833). The data were collected through a national probability telephone sample of 4,023 juveniles and their parents or guardians. The current study drew primarily on the questions that were asked about respondents' experiences witnessing violence, their own victimization, peer and family deviance, their own delinquent activities, and drug and alcohol use.

Universe: Adolescents aged 12-17 in the United States.

Data Source: Data were collected through telephone interviews with adolescents and their parents or guardians.

Sample: The NATIONAL SURVEY OF ADOLESCENTS IN THE UNITED STATES, 1995 (ICPSR 2833) consisted of two subsamples, a national probability household sample of 3,161 adolescents and a probability oversample of 862 adolescents residing in central city areas of the United States, for a total sample of 4,023. Because the parent or guardian interviews were conducted prior to the adolescent interviews, the 4,023 participants in the parent sample were also selected from a national probability sample of households and a probability oversample of central city households. To construct the initial national probability sample, a multistage, stratified, area probability, random-digit-dialing sampling procedure that had four steps was used. First, the United States was stratified geographically by Census region and a population-based subsample allocation was developed for each geographic stratum. In other words, the number of households drawn for the sample from each geographic stratum was allocated in proportion to the actual distribution of the population residing within each stratum, according to the most recent Census estimates. In the second step, telephone banks within each geographic stratum were systematically selected utilizing the comprehensive database of working telephone banks maintained by Schulman, Ronca, and

Bucuvalas, Inc. (SRBI). Third, random-digit-dialing was used to sample telephone households within the telephone banks selected in the second stage. Nonworking household (e.g., business) numbers were immediately replaced by other numbers selected in the same fashion as the initial numbers. Non-answering numbers were called again four times before being replaced. In the fourth step, an adult respondent in each household was screened to determine if there were any adolescents aged 12-17 currently living in the household or if any had lived in the household at least four months during the previous year. In households with multiple eligible adolescents, a systematic selection (i.e., "most recent birthday" technique) was made to determine which eligible individual would be designated as the respondent. Construction of the central city oversample followed the same procedures except for the initial geographic stratification step. This step was replaced using the census classification of counties by types of place and specifying the target population as households located within these urban counties. Adolescents who were potentially excluded from the study included those residing in institutional settings, in households without a parent or guardian (e.g., emancipated minors, married adolescents living on their own) or in a house without telephones, those who did not speak English or Spanish, and those whose parents did not give permission for them to be interviewed.

Date of Collection: January-June 1995

Response Rates: Parents in 90.1 percent of eligible households completed interviews and parents in 78.9 percent of eligible households gave permission for their adolescents to be interviewed. Adolescent interviews were completed in 75 percent of eligible households, 83.2 percent of households with completed parent interviews, and 95 percent of households with parental permission.

Presence of Common Scales: None.

Unit of Observation: Individuals.

Geographic Unit: None.

Data Collection Notes: The user guide, codebook, and data collection instrument are provided by ICPSR as separate 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 Web site.

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

Extent of Processing: ICPSR produced a codebook, generated SAS and SPSS data definition statements, reformatted the data and documentation, checked for undocumented codes, and standardized missing data codes.

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	4,023	280	366	1

Related Publications

Nofziger, Stacey. "Correlates and Consequences of Juvenile Exposure to Violence: A Replication and Extension of Major Findings From the National Survey of Adolescents" (Executive Summary). NCJ 203981. Washington, DC: United States Department of Justice. National Institute of Justice, 2003. <http://www.ncjrs.org/pdffiles1/nij/grants/203981.pdf>

Nofziger, Stacey. "Correlates and Consequences of Juvenile Exposure to Violence: A Replication and Extension of Major Findings From the National Survey of Adolescents" (Final Technical Report). NCJ 203987. Washington, DC: United States Department of Justice. National Institute of Justice, 2003. <http://www.ncjrs.org/pdffiles1/nij/grants/203987.pdf>

Nofziger, Stacey, and Don Kurtz. "Violent Lives: A Lifestyle Model Linking Exposure to Violence to Juvenile Violent Offending." JOURNAL OF RESEARCH IN CRIME AND DELINQUENCY, forthcoming.

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ICPSR CODEBOOK NOTES

1. ICPSR recoded missing data to the nearest 9 code and attached a label of "Unknown."
2. See Appendix A for an explanation of how certain derived variables were calculated.

CODEBOOK FOR ICPSR 3986

CORRELATIONS AND CONSEQUENCES OF JUVENILE EXPOSURE TO VIOLENCE IN THE
UNITED STATES, 1995

PLEASE NOTE: The "M" between the code and the code label indicates
the code has been designated as a missing value.

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
ID	ID	1	4	F4
AGE	AGE	5	6	F2
	99 M Unknown			
SEX	SEX	7	7	F1
	1 Male			
	2 Female			
S4	GRADE	8	9	F2
	5 Fifth			
	6 Sixth			
	7 Seventh			
	8 Eighth			
	9 Ninth/freshman			
	10 Tenth/soph			
	11 Eleventh/junior			
	12 Twelfth/senior			
	13 Don't attend school			
	14 Don't know/refused			
S7	VIOLENCE IN SCHOOL	10	10	F1
	1 Very big problem			
	2 Mid-sized problem			
	3 Fairly small problem			
	4 Not a problem			
	5 Don't know			
	6 Refused			
	9 M Unknown			
S8	VIOLENCE IN COMM	11	11	F1
	1 Very big problem			
	2 Mid-sized problem			
	3 Fairly small problem			
	4 Not a problem			
	5 Don't know			
	6 Refused			
	9 M Unknown			

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
S9	DRUGS IN COMM	12	12	F1
	1 Very big problem			
	2 Mid-sized problem			
	3 Fairly small problem			
	4 Not a problem			
	5 Don't know			
	6 Refused			
	9 M Unknown			
S10	SEX ABUSE IN COMM	13	13	F1
	1 Very big problem			
	2 Mid-sized problem			
	3 Fairly small problem			
	4 Not a problem			
	5 Don't know			
	6 Refused			
	9 M Unknown			
Q1A	SEEN SHOOT	14	14	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q2A	SEEN STAB	15	15	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q3A	SEEN SEX ASSAULTED	16	16	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
Q4A	SEEN MUGGED	17	17	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q5A	SEEN THRE W/GUN KNIFE	18	18	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q6A	SEEN BEATEN PUNCHED	19	19	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
QA1	WITNESSED VIOLENCE	20	20	F1
	1 Shoot somone			
	2 Cut or stab			
	3 Sexually assaulted			
	4 Mugged or robbed			
	5 Threaten w/ weapon			
	6 Beaten badly			
	9 M Unknown			
QA2	WITNESSING VIOLENCE (TYPE)--2ND MEN	21	21	F1
	1 Shoot somone			
	2 Cut or stab			
	3 Sexually assaulted			
	4 Mugged or robbed			
	5 Threaten w/ weapon			
	6 Beaten badly			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG		END	FMT
		COL	COL	COL	
QA3	WITNESSING VIOLENCE (TYPE)--3RD MEN	22	22		F1
	1 Shoot somone				
	2 Cut or stab				
	3 Sexually assaulted				
	4 Mugged or robbed				
	5 Threaten w/ weapon				
	6 Beaten badly				
	9 M Unknown				
QA4	WITNESSING VIOLENCE (TYPE)--4TH MEN	23	23		F1
	1 Shoot somone				
	2 Cut or stab				
	3 Sexually assaulted				
	4 Mugged or robbed				
	5 Threaten w/ weapon				
	6 Beaten badly				
	9 M Unknown				
QA5	WITNESSING VIOLENCE (TYPE)--5TH MEN	24	24		F1
	1 Shoot somone				
	2 Cut or stab				
	3 Sexually assaulted				
	4 Mugged or robbed				
	5 Threaten w/ weapon				
	6 Beaten badly				
	9 M Unknown				
QA6	WITNESSING VIOLENCE (TYPE)--6TH MEN	25	25		F1
	1 Shoot somone				
	2 Cut or stab				
	3 Sexually assaulted				
	4 Mugged or robbed				
	5 Threaten w/ weapon				
	6 Beaten badly				
	9 M Unknown				
QB1	SEEN MORE THAN ONCE--1ST MEN	26	26		F1
	1 Yes				
	2 No				
	3 Don't know				
	9 M Unknown				

-----			BEG	END	
NAME	VARIABLE LABEL		COL	COL	FMT

QB2	SEEN MORE THAN ONCE--2ND MEN		27	27	F1
	1 Yes				
	2 No				
	3 Don't know				
	9 M Unknown				
QB3	SEEN MORE THAN ONCE--3RD MEN		28	28	F1
	1 Yes				
	2 No				
	3 Don't know				
	4 Refused				
	9 M Unknown				
QB4	SEEN MORE THAN ONCE--4TH MEN		29	29	F1
	1 Yes				
	2 No				
	3 Don't know				
	9 M Unknown				
QB5	SEEN MORE THAN ONCE--5TH MEN		30	30	F1
	1 Yes				
	2 No				
	3 Don't know				
	9 M Unknown				
QB6	SEEN MORE THAN ONCE--6TH MEN		31	31	F1
	1 Yes				
	2 No				
	3 Don't know				
	9 M Unknown				

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
QC1	LAST TIME 1ST	32	32	F1
	1 Within past week			
	2 Within last month			
	3 Within past 6 months			
	4 Within a year			
	5 More than one a year			
	6 Don't know			
	7 Refused			
	9 M Unknown			
QC2	LAST TIME 2ND	33	33	F1
	1 Within past week			
	2 Within last month			
	3 Within past 6 months			
	4 Within a year			
	5 More than one a year			
	6 Don't know			
	7 Refused			
	9 M Unknown			
QC3	LAST TIME 3RD	34	34	F1
	1 Within past week			
	2 Within last month			
	3 Within past 6 months			
	4 Within a year			
	5 More than one a year			
	6 Don't know			
	7 Refused			
	9 M Unknown			
QC4	LAST TIME 4TH	35	35	F1
	1 Within past week			
	2 Within last month			
	3 Within past 6 months			
	4 Within a year			
	5 More than one a year			
	6 Don't know			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
QC5	LAST TIME 5TH	36	36	F1
	1 Within past week			
	2 Within last month			
	3 Within past 6 months			
	4 Within a year			
	5 More than one a year			
	6 Don't know			
	9 M Unknown			
QC6	LAST TIME 6TH	37	37	F1
	1 Within past week			
	2 Within last month			
	3 Within past 6 months			
	4 Within a year			
	5 More than one a year			
	6 Don't know			
	9 M Unknown			
QD1	WHERE 1ST	38	38	F1
	1 At home			
	2 In school			
	3 In neighborhood			
	4 Somewhere else			
	5 Don't know			
	6 Refused			
	9 M Unknown			
QD2	WHERE 2ND	39	39	F1
	1 At home			
	2 In school			
	3 In neighborhood			
	4 Somewhere else			
	5 Don't know			
	6 Refused			
	9 M Unknown			
QD3	WHERE 3RD	40	40	F1
	1 At home			
	2 In school			
	3 In neighborhood			
	4 Somewhere else			
	5 Don't know			
	6 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
QD4	WHERE 4TH	41	41	F1
	1 At home			
	2 In school			
	3 In neighborhood			
	4 Somewhere else			
	5 Don't know			
	9 M Unknown			
QD5	WHERE 5TH	42	42	F1
	1 At home			
	2 In school			
	3 In neighborhood			
	4 Somewhere else			
	5 Don't know			
	9 M Unknown			
QD6	WHERE 6TH	43	43	F1
	1 At home			
	2 In school			
	3 In neighborhood			
	4 Somewhere else			
	5 Don't know			
	9 M Unknown			
QF1	WHO WAS ATTACKED 1ST	44	45	F2
	1 Stranger			
	2 Mother			
	3 Stepmother			
	4 Father			
	5 Stepfather			
	6 Brother / step			
	7 Sister / step			
	8 Grandparent			
	9 Oth adult relative			
	10 Oth child relative			
	11 Teacher			
	12 Coach			
	13 Neighbor			
	14 Adult leader youth group			
	15 Minister/priest/rabbi			

-----		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT

QF1 (cont.)

16	Doctor/ health prof
17	Social worker
18	Co-worker
19	Friend
20	Oth child
21	Oth adult
22	Don't know
23	Refused
99 M	Unknown

QF2	WHO WAS ATTACKED 2ND	46	47	F2
-----	----------------------	----	----	----

1	Stranger
2	Mother
3	Stepmother
4	Father
5	Stepfather
6	Brother / step
7	Sister / step
8	Grandparent
9	Oth adult relative
10	Oth child relative
11	Teacher
12	Coach
13	Neighbor
14	Adult leader youth group
15	Minister/priest/rabbi
16	Doctor/ health prof
17	Social worker
18	Co-worker
19	Friend
20	Oth child
21	Oth adult
22	Don't know
23	Refused
99 M	Unknown

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

QF3	WHO WAS ATTACKED 3RD	48	49	F2
	1 Stranger			
	2 Mother			
	3 Stepmother			
	4 Father			
	5 Stepfather			
	6 Brother / step			
	7 Sister / step			
	8 Grandparent			
	9 Oth adult relative			
	10 Oth child relative			
	11 Teacher			
	12 Coach			
	13 Neighbor			
	14 Adult leader youth group			
	15 Minister/priest/rabbi			
	16 Doctor/ health prof			
	17 Social worker			
	18 Co-worker			
	19 Friend			
	20 Oth child			
	21 Oth adult			
	22 Don't know			
	23 Refused			
	99 M Unknown			
QF4	WHO WAS ATTACKED 4TH	50	51	F2
	1 Stranger			
	2 Mother			
	3 Stepmother			
	4 Father			
	5 Stepfather			
	6 Brother / step			
	7 Sister / step			
	8 Grandparent			
	9 Oth adult relative			
	10 Oth child relative			
	11 Teacher			
	12 Coach			
	13 Neighbor			
	14 Adult leader youth group			
	15 Minister/priest/rabbi			
	16 Doctor/ health prof			
	17 Social worker			
	18 Co-worker			
	19 Friend			
	20 Oth child			
	21 Oth adult			


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-----
NAME          VARIABLE LABEL          BEG   END
                                COL   COL   FMT
-----

```

QF4 (cont.)

```

      23      Refused
      99 M     Unknown

```

```

QF5          WHO WAS ATTACKED 5TH          52    53    F2

```

```

      1      Stranger
      2      Mother
      3      Stepmother
      4      Father
      5      Stepfather
      6      Brother / step
      7      Sister / step
      8      Grandparent
      9      Oth adult relative
     10      Oth child relative
     11      Teacher
     12      Coach
     13      Neighbor
     14      Adult leader youth group
     15      Minister/priest/rabbi
     16      Doctor/ health prof
     17      Social worker
     18      Co-worker
     19      Friend
     20      Oth child
     21      Oth adult
     22      Don't know
     99 M     Unknown

```

```

QF6          WHO WAS ATTACKED 6TH          54    55    F2

```

```

      1      Stranger
      2      Mother
      3      Stepmother
      4      Father
      5      Stepfather
      6      Brother / step
      7      Sister / step
      8      Grandparent
      9      Oth adult relative
     10      Oth child relative
     11      Teacher
     12      Coach
     13      Neighbor

```


NAME	VARIABLE LABEL	BEG COL	END COL	FMT
------	----------------	------------	------------	-----

QF6 (cont.)

14	Adult leader youth group
15	Minister/priest/rabbi
16	Doctor/ health prof
17	Social worker
18	Co-worker
19	Friend
20	Oth child
21	Oth adult
22	Don't know
99 M	Unknown

QG1	WHO DID 1ST	56	57	F2
-----	-------------	----	----	----

1	Stranger
2	Mother/step
3	Father/step
4	Brother/step
5	Sister/step
6	Grandparent
7	Oth adult relative
8	Oth child relative
9	Teacher
10	Coach
11	Neighbor
12	Adult leader
13	Minister/priest/rabbi
14	Social worker
15	Co-worker
16	Friend
17	Other child
18	Other adult
19	Don't know
20	Refused
99 M	Unknown

QG2	WHO DID 2ND	58	59	F2
-----	-------------	----	----	----

1	Stranger
2	Mother/step
3	Father/step
4	Brother/step
5	Sister/step
6	Grandparent
7	Oth adult relative

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
------	----------------	------------	------------	-----

QG2 (cont.)

8	Oth child relative
9	Teacher
10	Coach
11	Neighbor
12	Adult leader
13	Minister/priest/rabbi
14	Social worker
15	Co-worker
16	Friend
17	Other child
18	Other adult
19	Don't know
20	Refused
99 M	Unknown

QG3	WHO DID 3RD	60	61	F2
-----	-------------	----	----	----

1	Stranger
2	Mother/step
3	Father/step
4	Brother/step
5	Sister/step
6	Grandparent
7	Oth adult relative
8	Oth child relative
9	Teacher
10	Coach
11	Neighbor
12	Adult leader
13	Minister/priest/rabbi
14	Social worker
15	Co-worker
16	Friend
17	Other child
18	Other adult
19	Don't know
20	Refused
99 M	Unknown

-----			BEG	END	
NAME	VARIABLE LABEL		COL	COL	FMT
-----			-----		
QG4	WHO DID 4TH		62	63	F2
	1 Stranger				
	2 Mother/step				
	3 Father/step				
	4 Brother/step				
	5 Sister/step				
	6 Grandparent				
	7 Oth adult relative				
	8 Oth child relative				
	9 Teacher				
	10 Coach				
	11 Neighbor				
	12 Adult leader				
	13 Minister/priest/rabbi				
	14 Social worker				
	15 Co-worker				
	16 Friend				
	17 Other child				
	18 Other adult				
	19 Don't know				
	20 Refused				
	99 M Unknown				
QG5	WHO DID 5TH		64	65	F2
	1 Stranger				
	2 Mother/step				
	3 Father/step				
	4 Brother/step				
	5 Sister/step				
	6 Grandparent				
	7 Oth adult relative				
	8 Oth child relative				
	9 Teacher				
	10 Coach				
	11 Neighbor				
	12 Adult leader				
	13 Minister/priest/rabbi				
	14 Social worker				
	15 Co-worker				
	16 Friend				
	17 Other child				
	18 Other adult				
	19 Don't know				
	20 Refused				
	99 M Unknown				

-----			BEG	END	
NAME	VARIABLE LABEL		COL	COL	FMT

QG6	WHO DID 6TH		66	67	F2
	1 Stranger				
	2 Mother/step				
	3 Father/step				
	4 Brother/step				
	5 Sister/step				
	6 Grandparent				
	7 Oth adult relative				
	8 Oth child relative				
	9 Teacher				
	10 Coach				
	11 Neighbor				
	12 Adult leader				
	13 Minister/priest/rabbi				
	14 Social worker				
	15 Co-worker				
	16 Friend				
	17 Other child				
	18 Other adult				
	19 Don't know				
	99 M Unknown				
QH1	AFRAID KILLED 1ST		68	68	F1
	1 Feared death				
	2 Feared injury				
	3 Feared both				
	4 Not afraid				
	5 Don't know				
	6 Refused				
	9 M Unknown				
QH2	AFRAID KILLED 2ND		69	69	F1
	1 Feared death				
	2 Feared injury				
	3 Feared both				
	4 Not afraid				
	5 Don't know				
	6 Refused				
	9 M Unknown				

NAME	VARIABLE LABEL	BEG		END	
		COL	COL	FMT	
QH3	AFRAID KILLED 3RD	70	70	F1	
	1 Feared death				
	2 Feared injury				
	3 Feared both				
	4 Not afraid				
	5 Don't know				
	6 Refused				
	9 M Unknown				
QH4	AFRAID KILLED 4TH	71	71	F1	
	1 Feared death				
	2 Feared injury				
	3 Feared both				
	4 Not afraid				
	5 Don't know				
	9 M Unknown				
QH5	AFRAID KILLED 5TH	72	72	F1	
	1 Feared death				
	2 Feared injury				
	3 Feared both				
	4 Not afraid				
	5 Don't know				
	9 M Unknown				
QH6	AFRAID KILLED 6TH	73	73	F1	
	1 Feared death				
	2 Feared injury				
	3 Feared both				
	4 Not afraid				
	5 Don't know				
	9 M Unknown				
Q7U	1 FAILING GRADE	74	74	F1	
	1 Yes				
	2 No				
	3 Don't know				
	9 M Unknown				
Q18A	EVER ATTCKED WEAPON	75	75	F1	
	1 Yes				
	2 No				
	3 Don't know				
	4 Refused				

9 M Unknown

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

Q18B	WITHOUT WEAPON	76	76	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q18C	THREAT GUN/KNIFE	77	77	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q18D	BEATEN OBJECT/ HURT BADLY	78	78	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q18E	BEATEN WITH FIST/HURT BADLY	79	79	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q27A	SMOKING	80	80	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q27B	AGE 1ST WHOLE CIG	81	82	F2
	0 Never smoked			
	18 Don't know			
	19 Refused			
	99 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

Q27C	SMOKE REGULARLY	83	83	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q27D	AGE REGULARLY	84	85	F2
	0 Never smoked regularly			
	18 Don't know			
	19 Refused			
	99 M Unknown			
Q28A	EVER DRINK	86	86	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q28B	PAST YEAR DRINK	87	87	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q28C	HOW OFTEN PAST YEAR	88	89	F2
	1 3 or more a day			
	2 2 times a day			
	3 About once a day			
	4 3 or 4 times a week			
	5 Once or twice a week			
	6 2-3 times a month			
	7 About once a month			
	8 Less thn 1 a month			
	9 Never in past year			
	10 Not sure			
	11 Refused			
	99 M Unknown			

-----			BEG	END	
NAME	VARIABLE LABEL		COL	COL	FMT

Q28D	# DAYS 5 MORE DRINKS		90	92	F3
	0	Never			
	366	Don't know			
	367	Refused			
	999 M	Unknown			
Q28E	AGE 5 MORE		93	94	F2
	0	Less than 1 year old			
	18	Don't know			
	99 M	Unknown			
Q28F	# DAYS PAST YEAR DRUNK		95	97	F3
	0	Never			
	366	Don't know			
	999 M	Unknown			
Q28G	MOST RECENT DRUNK		98	98	F1
	1	W/in past week			
	2	W/in past month			
	3	W/in past 6 months			
	4	6 months to a year			
	5	More than a year			
	6	Not sure			
	7	Refused			
	9 M	Unknown			
Q29A	DRINK MORE TO DRUNK		99	99	F1
	1	Yes			
	2	No			
	3	Don't know			
	4	Refused			
	9 M	Unknown			

NAME	VARIABLE LABEL	BEG		END	
		COL	COL	FMT	
Q29B	LESS EFFECT	100	100	F1	
	1 Yes				
	2 No				
	3 Don't know				
	4 Refused				
	9 M Unknown				
Q29C	DRANK MORE THAN WANTED	101	101	F1	
	1 Yes				
	2 No				
	3 Don't know				
	4 Refused				
	9 M Unknown				
Q29D	WANTED CUT DOWN AMT	102	102	F1	
	1 Yes				
	2 No				
	3 Don't know				
	4 Refused				
	9 M Unknown				
Q29E	TRIED TO CUT DOWN	103	103	F1	
	1 Yes				
	2 No				
	3 Don't know				
	4 Refused				
	9 M Unknown				
Q29F	TIME INVOLVING ALCOHOL	104	104	F1	
	1 Yes				
	2 No				
	3 Don't know				
	4 Refused				
	9 M Unknown				
Q29G	LESS TIME SCH/WORK/FAM	105	105	F1	
	1 Yes				
	2 No				
	3 Don't know				
	4 Refused				
	9 M Unknown				

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

Q29H	DRINKING EVEN WITH PROBLEMS	106	106	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q29I	EVER SUDDENLY STOP DRK	107	107	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q29J1	HEART BEAT FAST/SWEAT	108	108	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29J2	HANDS SHOOK	109	109	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29J3	TROUBLE SLEEPING	110	110	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29J4	UPSET STOMACH/THREW-UP	111	111	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
Q29J5	FELT ANXIOUS	112	112	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29J6	FITS/SEIZURES	113	113	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29J7	THINGS NOT THERE	114	114	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29J8	COULD NOT SIT STILL	115	115	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29K	WAKE-UP DRINK	116	116	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29L	DRINK HANG OVER	117	117	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q29M	DRANK WITHDRAWAL	118	118	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
Q29N	SEVERAL PROBLEMS	119	119	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q29O	AGE PROBLEMS	120	121	F2
	0 Less than 1 year old			
	18 Don't know			
	99 M Unknown			
Q29P	SEVERAL WITHIN LAST YEAR	122	122	F1
	1 Yes			
	2 No			
	3 Don't know			
	9 M Unknown			
Q30A1	TRANQUILIZERS	123	123	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q30B1	# TIMES TRANQ	124	124	F1
	1 1-3 occasions			
	2 4-10 occasions			
	3 More than 10			
	4 Don't know			
	5 Refused			
	9 M Unknown			
Q30C1	AGE 1ST TRANQ	125	126	F2
	0 Less than 1 year			
	18 Don't know			
	19 Refused			
	99 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
Q30A2	SEDATIVES	127	127	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q30B2	# TIMES SED	128	128	F1
	1 1-3 occasions			
	2 4-10 occasions			
	3 more than 10			
	4 Don't know			
	5 Refused			
	9 M Unknown			
Q30C2	AGE 1ST SED	129	130	F2
	0 Less than 1 year			
	18 Don't know			
	19 Refused			
	99 M Unknown			
Q30A3	STIMULANTS	131	131	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q30B3	# TIMES STIM	132	132	F1
	1 1-3 occasions			
	2 4-10 occasions			
	3 More than 10			
	4 Don't know			
	5 Refused			
	9 M Unknown			
Q30C3	AGE 1ST STIM	133	134	F2
	0 Less than 1 year			
	18 Don't know			
	19 Refused			
	99 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
Q30A4	PAIN KILLERS	135	135	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q30B4	# TIMES PAIN	136	136	F1
	1 1-3 occasions			
	2 4-10 occasions			
	3 More than 10			
	4 Don't know			
	5 Refused			
	9 M Unknown			
Q30C4	AGE 1ST PAIN	137	138	F2
	0 Less than 1 year			
	18 Don't know			
	19 Refused			
	99 M Unknown			
Q30A5	STEROIDS	139	139	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q30B5	# TIMES STER	140	140	F1
	1 1-3 occasions			
	2 4-10 occasions			
	3 More than 10			
	4 Don't know			
	5 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG		END	
		COL	COL	FMT	
Q30C5	AGE 1ST STER	141	142	F2	
	0 Less than 1 year				
	18 Don't know				
	19 Refused				
	99 M Unknown				
Q32A1	ILLICIT 1ST MENTION	143	144	F2	
	1 Marijuana				
	2 Cocaine or crack				
	3 Angel dust				
	4 LSD				
	5 Heroin				
	6 Inhalants				
	7 None of these				
	8 Don't know				
	9 Refused				
	99 M Unknown				
Q32A2	ILLICIT 2ND	145	146	F2	
	1 Marijuana				
	2 Cocaine or crack				
	3 Angel dust				
	4 LSD				
	5 Heroin				
	6 Inhalants				
	7 None of these				
	8 Don't know				
	9 Refused				
	99 M Unknown				
Q32A3	ILLICIT 3RD	147	148	F2	
	1 Marijuana				
	2 Cocaine or crack				
	3 Angel dust				
	4 LSD				
	5 Heroin				
	6 Inhalants				
	7 None of these				
	8 Don't know				
	9 Refused				
	99 M Unknown				

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
Q32A4	ILLICIT 4TH	149	150	F2
	1 Marijuana			
	2 Cocaine or crack			
	3 Angel dust			
	4 LSD			
	5 Heroin			
	6 Inhalants			
	7 None of these			
	8 Don't know			
	9 Refused			
	99 M Unknown			
Q32A5	ILLICIT 5TH	151	152	F2
	1 Marijuana			
	2 Cocaine or crack			
	3 Angel dust			
	4 LSD			
	5 Heroin			
	6 Inhalants			
	7 None of these			
	8 Don't know			
	9 Refused			
	99 M Unknown			
Q32A6	ILLICIT 6TH	153	154	F2
	1 Marijuana			
	2 Cocaine or crack			
	3 Angel dust			
	4 LSD			
	5 Heroin			
	6 Inhalants			
	7 None of these			
	8 Don't know			
	9 Refused			
	99 M Unknown			

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
Q32BA	FREQ MARIJUANA	155	155	F1
	1 1-3 occassions			
	2 4-10 occassions			
	3 More than 10			
	4 Don't know			
	5 Refused			
	9 M Unknown			
Q32CA	AGE MARIJUANA	156	157	F2
	0 Less than 1 yr old			
	18 Don't know			
	19 Refused			
	99 M Unknown			
Q32DA	MOST RECENT MARI	158	158	F1
	1 W/in past week			
	2 W/in past month			
	3 W/in past 6 mo			
	4 6 mo to a year			
	5 More than a year			
	9 M Unknown			
Q32BB	FREQ COCAINE	159	159	F1
	1 1-3 occassions			
	2 4-10 occassions			
	3 More than 10			
	4 Don't know			
	5 Refused			
	9 M Unknown			
Q32CB	AGE COC	160	161	F2
	0 Less than 1 yr old			
	18 Don't know			
	19 Refused			
	99 M Unknown			
Q32DB	MOST RECENT COC	162	162	F1
	1 W/in past week			
	2 W/in past month			
	3 W/in past 6 mo			
	4 6 mo to a year			
	5 More than a year			
	9 M Unknown			

-----			BEG	END	
NAME	VARIABLE LABEL		COL	COL	FMT

Q32BC	FREQ ANGEL DUST		163	163	F1
	1 1-3 occassions				
	2 4-10 occassions				
	3 More than 10				
	4 Don't know				
	5 Refused				
	9 M Unknown				
Q32CC	AGE ANGEL		164	165	F2
	0 Less than 1 yr old				
	18 Don't know				
	19 Refused				
	99 M Unknown				
Q32DC	MOST RECENT ANGEL		166	166	F1
	1 W/in past week				
	2 W/in past month				
	3 W/in past 6 mo				
	4 6 mo to a year				
	5 More than a year				
	9 M Unknown				
Q32BD	FREQ LSD		167	167	F1
	1 1-3 occassions				
	2 4-10 occassions				
	3 More than 10				
	4 Don't know				
	5 Refused				
	9 M Unknown				
Q32CD	AGE LSD		168	169	F2
	0 Less than 1 yr old				
	18 Don't know				
	19 Refused				
	99 M Unknown				

NAME		VARIABLE LABEL		BEG COL	END COL	FMT
Q32DD		MOST RECENT LSD		170	170	F1
	1	W/in past week				
	2	W/in past month				
	3	W/in past 6 mo				
	4	6 mo to a year				
	5	More than a year				
	9 M	Unknown				
Q32BE		FREQ HEROIN		171	171	F1
	1	1-3 occassions				
	2	4-10 occassions				
	3	More than 10				
	4	Don't know				
	5	Refused				
	9 M	Unknown				
Q32CE		AGE HER		172	173	F2
	0	Less than 1 yr old				
	18	Don't know				
	19	Refused				
	99 M	Unknown				
Q32DE		MOST RECENT HER		174	174	F1
	1	W/in past week				
	2	W/in past month				
	3	W/in past 6 mo				
	4	6 mo to a year				
	5	More than a year				
	9 M	Unknown				
Q32BF		FREQ INHALANTS		175	175	F1
	1	1-3 occassions				
	2	4-10 occassions				
	3	More than 10				
	4	Don't know				
	5	Refused				
	9 M	Unknown				
Q32CF		AGE INHAL		176	177	F2
	0	Less than 1 yr old				
	18	Don't know				
	19	Refused				
	99 M	Unknown				

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
Q32DF	MOST RECENT INHAL	178	178	F1
	1 W/in past week			
	2 W/in past month			
	3 W/in past 6 mo			
	4 6 mo to a year			
	5 More than a year			
	9 M Unknown			
Q33AA	USED MORE HIGH	179	180	F2
	1 Increased amount			
	2 Less effect			
	3 Took more drugs			
	4 Wanted to cut down			
	5 Tried to cut down			
	6 A lot time w/drugs			
	7 Less time w/school			
	8 Psychological problems			
	9 None			
	10 Not sure			
	11 Refused			
	99 M Unknown			
Q33AB	HAD LESS EFFECT	181	182	F2
	1 Increased amount			
	2 Less effect			
	3 Took more drugs			
	4 Wanted to cut down			
	5 Tried to cut down			
	6 A lot time w/drugs			
	7 Less time w/school			
	8 Psychological problems			
	9 None			
	10 Not sure			
	11 Refused			
	99 M Unknown			

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
Q33AC	USED MORE THAN WANTED	183	184	F2
	1 Increased amount			
	2 Less effect			
	3 Took more drugs			
	4 Wanted to cut down			
	5 Tried to cut down			
	6 A lot time w/drugs			
	7 Less time w/school			
	8 Psychological problems			
	9 None			
	10 Not sure			
	11 Refused			
	99 M Unknown			
Q33AD	WANTED TO CUTDOWN COULDN'T	185	186	F2
	1 Increased amount			
	2 Less effect			
	3 Took more drugs			
	4 Wanted to cut down			
	5 Tried to cut down			
	6 A lot time w/drugs			
	7 Less time w/school			
	8 Psychological problems			
	9 None			
	10 Not sure			
	11 Refused			
	99 M Unknown			
Q33AE	TRIED CUTDOWN BUT COULDN'T	187	188	F2
	1 Increased amount			
	2 Less effect			
	3 Took more drugs			
	4 Wanted to cut down			
	5 Tried to cut down			
	6 A lot time w/drugs			
	7 Less time w/school			
	8 Psychological problems			
	9 None			
	10 Not sure			
	11 Refused			
	99 M Unknown			

-----		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
-----		-----		
Q33AF	TIME INVOLVING DRUGS	189	190	F2
	1 Increased amount			
	2 Less effect			
	3 Took more drugs			
	4 Wanted to cut down			
	5 Tried to cut down			
	6 A lot time w/drugs			
	7 Less time w/school			
	8 Psychological problems			
	9 None			
	10 Not sure			
	11 Refused			
	99 M Unknown			
Q33AG	B/C DRUGS LESS SCH/WORK	191	192	F2
	1 Increased amount			
	2 Less effect			
	3 Took more drugs			
	4 Wanted to cut down			
	5 Tried to cut down			
	6 A lot time w/drugs			
	7 Less time w/school			
	8 Psychological problems			
	9 None			
	10 Not sure			
	11 Refused			
	99 M Unknown			
Q33AH	KEEP USING PROBLEMS	193	194	F2
	1 Increased amount			
	2 Less effect			
	3 Took more drugs			
	4 Wanted to cut down			
	5 Tried to cut down			
	6 A lot time w/drugs			
	7 Less time w/school			
	8 Psychological problems			
	9 None			
	10 Not sure			
	11 Refused			
	99 M Unknown			

NAME	VARIABLE LABEL			
		BEG COL	END COL	FMT
Q33B	EVER SUDDENLY STOP	195	195	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q33C	WITHDRAW FROM STOP	196	196	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q33D1	WHICH DRUG CUASE WITHDRAW	197	198	F2
	1 Tranquilizers			
	2 Sedatives			
	3 Stimulants			
	4 Pain medicines			
	5 Steroids			
	6 Marijuana			
	7 Cocaine			
	8 Angel dust			
	9 LSD			
	10 Heroin			
	11 Inhalants			
	19 Other			
	20 Don't know			
	21 Refused			
	99 M Unknown			
Q33E	USED TO AVOID WITHDRAW	199	199	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

Q33F1	WHICH DRUG WITHDRAW	200	201	F2
	1 Tranquilizers			
	2 Sedatives			
	3 Stimulants			
	4 Pain medicines			
	5 Steroids			
	6 Marijuana			
	7 Cocaine			
	8 Angel dust			
	9 LSD			
	10 Heroin			
	11 Inhalants			
	19 Other			
	20 Don't know			
	21 Refused			
	99 M Unknown			
Q33G	D PROBLEM SAME TIME	202	202	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q33H	AGE SEVERAL PROB SAME YEAR	203	204	F2
	0 Less than 1 yr old			
	18 Don't know			
	19 Refused			
	99 M Unknown			
Q33I	SEV PROBLEM PAST MONTH	205	205	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q34A	TAKEN INTRAVENOUSLY	206	206	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
Q34C	MOST RECENT INJECT	207	207	F1
	1 W/in past week			
	2 W/in past month			
	3 W/in past 6 mo			
	4 6 mo to a year			
	5 More than a year			
	9 M Unknown			
Q34D	SHARED NEEDLE	208	208	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q34E	AGE 1ST SHARED	209	210	F2
	0 Less than 1 yr old			
	18 Don't know			
	19 Refused			
	99 M Unknown			
Q34F	MOST RECENT SHARE	211	211	F1
	1 W/in past week			
	2 W/in past month			
	3 W/in past 6 mo			
	4 6 mo to a year			
	5 More than a year			
	9 M Unknown			
Q35A	USE A/D CAUSE PROB W/FAM	212	212	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

Q35B1	SUB THAT CAUSED PROB	213	214	F2
	1 Alcohol			
	2 Tranquilizers			
	3 Sedatives			
	4 Stimulants			
	5 Pain medicines			
	6 Steroids			
	7 Marijuana			
	8 Cocaine			
	9 Angel dust			
	10 LSD			
	11 Heroin			
	12 Inhalants			
	20 Other			
	21 Don't know			
	22 Refused			
	99 M Unknown			
Q35C	AGE 1ST A/D FAM PROB	215	216	F2
	0 Less than 1 yr old			
	18 Don't know			
	19 Refused			
	99 M Unknown			
Q35D	FAM PROB IN PAST YEAR	217	217	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q35E	HIGH/DRUNK COULD HAVE HURT	218	218	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			

NAME		VARIABLE LABEL		BEG COL	END COL	FMT
Q35F1		WHAT SUBSTANCE		219	220	F2
		1 Alcohol				
		2 Tranquilizers				
		3 Sedatives				
		4 Stimulants				
		5 Pain medicines				
		6 Steroids				
		7 Marijuana				
		8 Cocaine				
		9 Angel dust				
		10 LSD				
		11 Heroin				
		12 Inhalants				
		20 Other				
		21 Don't know				
		22 Refused				
		99 M Unknown				
Q35G		AGE DANGER SIT		221	222	F2
		0 Less than 1 yr old				
		18 Don't know				
		19 Refused				
		99 M Unknown				
Q35H		DANGER SIT LAST YEAR		223	223	F1
		1 Yes				
		2 No				
		3 Don't know				
		4 Refused				
		9 M Unknown				
Q35I		EVER BEEN ARRESTED B/C D/A		224	224	F1
		1 Yes				
		2 No				
		3 Don't know				
		4 Refused				
		9 M Unknown				

NAME		VARIABLE LABEL		BEG COL	END COL	FMT
Q35J1		SUBSTANCE TROUBLE		225	226	F2
	1	Alcohol				
	2	Tranquilizers				
	3	Sedatives				
	4	Stimulants				
	5	Pain medicines				
	6	Steroids				
	7	Marijuana				
	8	Cocaine				
	9	Angel dust				
	10	LSD				
	11	Heroin				
	20	Other				
	21	Don't know				
	22	Refused				
	23	Other				
	99 M	Unknown				
Q35K		AGE 1ST TROUBLE		227	228	F2
	0	Less than 1 yr old				
	18	Don't know				
	19	Refused				
	99 M	Unknown				
Q35L		TROUBLE PAST YEAR		229	229	F1
	1	Yes				
	2	No				
	3	Don't know				
	4	Refused				
	9 M	Unknown				
Q35M		CONTINUE USE D/A		230	230	F1
	1	Yes				
	2	No				
	3	Don't know				
	4	Refused				
	9 M	Unknown				

NAME		VARIABLE LABEL		BEG COL	END COL	FMT
Q35N1		SUBSTANCE CAUSED PROB		231	232	F2
	1	Alcohol				
	2	Tranquilizers				
	3	Sedatives				
	4	Stimulants				
	5	Pain medicines				
	6	Steroids				
	7	Marijuana				
	8	Cocaine				
	9	Angel dust				
	10	LSD				
	11	Heroin				
	12	Inhalants				
	20	Other				
	21	Don't know				
	22	Refused				
	99 M	Unknown				
Q35O		AGE 1ST PROBLEM		233	234	F2
	0	Less than 1 yr old				
	18	Don't know				
	19	Refused				
	99 M	Unknown				
Q35P		PROBLEMS LAST YEAR		235	235	F1
	1	Yes				
	2	No				
	3	Don't know				
	4	Refused				
	9 M	Unknown				
Q36A		EVER TREATMENT		236	236	F1
	1	Yes, drug problem				
	2	Yes, alcohol problem				
	3	Yes, both				
	4	No				
	5	Not sure				
	6	Refused				
	9 M	Unknown				

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
Q36B	RECEIVE IN/OUTPATIENT	237	237	F1
	1 Both			
	2 Inpatient only			
	3 Outpatient			
	5 Never treatment			
	6 Not sure			
	7 Refused			
	9 M Unknown			
Q37A	DRIVEN LAST YEAR	238	238	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q37B	DRIVEN UNDER ALCOHOL	239	240	F2
	1 Daily			
	2 2-6 times a week			
	3 Once a week			
	4 Once every 2 weeks			
	5 Once a month			
	6 4-10 times a year			
	7 2-3 times a year			
	8 Only once			
	9 Never			
	10 Not sure			
	11 Refused			
	99 M Unknown			
Q37C	DRIVEN UNDER DRUGS	241	242	F2
	1 Daily			
	2 2-6 times a week			
	3 Once a week			
	4 Once every 2 weeks			
	5 Once a month			
	6 4-10 times a year			
	7 2-3 times a year			
	8 Only once			
	9 Never			
	10 Not sure			
	11 Refused			
	99 M Unknown			

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
Q39A	TIME SCARED HURT	243	243	F1
	1 All the time			
	2 Often			
	3 Sometimes			
	4 Rarely			
	5 Never			
	6 Not sure			
	7 Refused			
	9 M Unknown			
Q39B	ANYONE CHILDHOOD COUNT ON	244	244	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q39C	TRUE THROUGHOUT	245	245	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q40A	SPANKED NEEDED DR.	246	246	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q40B	SPANKED HARD PAST YEAR	247	247	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q40C	SPANKED MARKS	248	248	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			

		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
Q40D	SPANKED/MARKS PAST YEAR	249	249	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q40E	BURNED	250	250	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q40F	BURNED IN LAST YEAR	251	251	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q41	FAM DRINKING PROB	252	252	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q43	ANYONE IN FAM DRUGS	253	253	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			
Q45A5	TROUBLE W/ LAW	254	254	F1
	1 Yes			
	2 No			
	3 Don't know			
	4 Refused			
	9 M Unknown			

-----		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT
-----		-----		
Q45B5	MOTHER/FATHER	255	255	F1
	1 Father			
	2 Mother			
	3 Both			
	4 Not sure			
	5 Refused			
	9 M Unknown			
Q48AA	FRIENDS DESTROYED PROPERTY	256	256	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	5 Have no friends			
	9 M Unknown			
Q48BA	ALL/MOST/VERY FEW D PROPERTY	257	257	F1
	1 All of them			
	2 Most of them			
	3 Some of them			
	4 Very few of them			
	5 Not sure			
	6 Refused			
	9 M Unknown			
Q48AB	FRIENDS USE MAR/HASH	258	258	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	5 Have no friends			
	9 M Unknown			
Q48BB	ALL/MOST/FEW MAR/HASH	259	259	F1
	1 All of them			
	2 Most of them			
	3 Some of them			
	4 Very few of them			
	5 Not sure			
	6 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

Q48AC	FRIENDS STOLEN LESS \$5	260	260	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	5 Have no friends			
	9 M Unknown			
Q48BC	ALL/MOST/FEW \$5	261	261	F1
	1 All of them			
	2 Most of them			
	3 Some of them			
	4 Very few of them			
	5 Not sure			
	6 Refused			
	9 M Unknown			
Q48AD	FRIENDS HIT/THREAT	262	262	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	5 Have no friends			
	9 M Unknown			
Q48BD	A/M/F HIT/THREAT	263	263	F1
	1 All of them			
	2 Most of them			
	3 Some of them			
	4 Very few of them			
	5 Not sure			
	6 Refused			
	9 M Unknown			
Q48AE	FRIENDS ALCOHOL	264	264	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	5 Have no friends			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG		END	
		COL	COL	FMT	
Q48BE	A/M/F ALCOHOL	265	265	F1	
	1 All of them				
	2 Most of them				
	3 Some of them				
	4 Very few of them				
	5 Not sure				
	6 Refused				
	9 M Unknown				
Q48AF	FRIENDS BROKEN IN STEAL	266	266	F1	
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	5 Have no friends				
	9 M Unknown				
Q48BF	A/M/F BROKEN IN	267	267	F1	
	1 All of them				
	2 Most of them				
	3 Some of them				
	4 Very few of them				
	5 Not sure				
	6 Refused				
	9 M Unknown				
Q48AG	FRIENDS SOLD DRUGS	268	268	F1	
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	5 Have no friends				
	9 M Unknown				

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

Q48BG	A/M/F SOLD DRUGS	269	269	F1
	1 All of them			
	2 Most of them			
	3 Some of them			
	4 Very few of them			
	5 Not sure			
	6 Refused			
	9 M Unknown			
Q48AH	FRIENDS STOLE > \$50	270	270	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	5 Have no friends			
	9 M Unknown			
Q48BH	A/M/F >\$50	271	271	F1
	1 All of them			
	2 Most of them			
	3 Some of them			
	4 Very few of them			
	5 Not sure			
	6 Refused			
	9 M Unknown			
Q48AI	FR SUGGEST AGNTS LAW	272	272	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	5 Have no friends			
	9 M Unknown			
Q48BI	A/M/F SUGGEST ILLEGAL	273	273	F1
	1 All of them			
	2 Most of them			
	3 Some of them			
	4 Very few of them			
	5 Not sure			
	6 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG		END	
		COL	COL	FMT	
Q48AJ	FR DRUNK ONCE IN WHILE	274	274	F1	
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	5 Have no friends				
	9 M Unknown				
Q48BJ	A/M/F ONCE WHILE	275	275	F1	
	1 All of them				
	2 Most of them				
	3 Some of them				
	4 Very few of them				
	5 Not sure				
	6 Refused				
	9 M Unknown				
Q48AK	FR ILLEGALLY USED PRESCR DRUGS	276	276	F1	
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	5 Have no friends				
	9 M Unknown				
Q48BK	A/M/F PRESCR DRUGS	277	277	F1	
	1 All of them				
	2 Most of them				
	3 Some of them				
	4 Very few of them				
	5 Not sure				
	6 Refused				
	9 M Unknown				
Q48AL	FR SOLD/GIVEN ALCOHOL TO LES 18	278	278	F1	
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	5 Have no friends				
	9 M Unknown				

-----			BEG	END	
NAME	VARIABLE LABEL		COL	COL	FMT

Q48BL	A/M/F SOLD/GIVEN 18		279	279	F1
	1 All of them				
	2 Most of them				
	3 Some of them				
	4 Very few of them				
	5 Not sure				
	6 Refused				
	9 M Unknown				
Q48AM	FR FORCED SEX		280	280	F1
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	5 Have no friends				
	9 M Unknown				
Q48BM	A/M/F SEX		281	281	F1
	1 All of them				
	2 Most of them				
	3 Some of them				
	4 Very few of them				
	5 Not sure				
	6 Refused				
	9 M Unknown				
Q49AA	YOU STOLEN MORE \$100		282	282	F1
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	9 M Unknown				
Q49BA	# OF TIMES MORE \$100		283	285	F3
	97 97 or more				
	98 Not sure				
	99 Refused				
	999 M Unknown				

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
Q49CA	HOW OFTEN MORE \$100	286	286	F1
	1 Once a month			
	2 Every 2 to 3 weeks			
	3 Once a week			
	4 2-3 times a week			
	5 Once a day or more			
	6 Not sure			
	7 Refused			
	9 M Unknown			
Q49AB	YOU STOLEN MOTOR VEH	287	287	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	9 M Unknown			
Q49BB	# STOLEN MOTOR	288	290	F3
	97 97 or more			
	98 Not sure			
	99 Refused			
	999 M Unknown			
Q49CB	OFTEN STOLEN MOTOR	291	291	F1
	1 Once a month			
	2 Every 2 to 3 weeks			
	3 Once a week			
	4 2-3 times a week			
	5 Once a day or more			
	6 Not sure			
	7 Refused			
	9 M Unknown			
Q49AC	YOU BROKEN + ENTERING	292	292	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT

Q49BC	# OF TIMES B + E	293	295	F3
	97 97 or more			
	98 Not sure			
	99 Refused			
	999 M Unknown			
Q49CC	OFTEN B +E	296	296	F1
	1 Once a month			
	2 Every 2 to 3 weeks			
	3 Once a week			
	4 2-3 times a week			
	5 Once a day or more			
	6 Not sure			
	7 Refused			
	9 M Unknown			
Q49AD	YOU GANG FIGHT	297	297	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	9 M Unknown			
Q49BD	# OF GANG FIGHTS	298	300	F3
	97 97 or more			
	98 Not sure			
	99 Refused			
	999 M Unknown			
Q49CD	OFTEN GANG FIGHTS	301	301	F1
	1 Once a month			
	2 Every 2 to 3 weeks			
	3 Once a week			
	4 2-3 times a week			
	5 Once a day or more			
	6 Not sure			
	7 Refused			
	9 M Unknown			

NAME	VARIABLE LABEL	BEG		END	
		COL	COL	FMT	
Q49AE	YOU STRONG-ARM ROBBERY	302	302	F1	
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	9 M Unknown				
Q49BE	# OF STRONG-ARM	303	305	F3	
	97 97 or more				
	98 Not sure				
	99 Refused				
	999 M Unknown				
Q49CE	OFTEN STRONG-ARM	306	306	F1	
	1 Once a month				
	2 Every 2 to 3 weeks				
	3 Once a week				
	4 2-3 times a week				
	5 Once a day or more				
	6 Not sure				
	7 Refused				
	9 M Unknown				
Q49AF	YOU SEX AGNST THEIR WILL	307	307	F1	
	1 Yes				
	2 No				
	3 Not sure				
	4 Refused				
	9 M Unknown				
Q49BF	# SEX AGNST THEIR WILL	308	308	F1	
	9 M Unknown				
	97 97 or more				
	98 Not sure				
	99 Refused				

-----		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT

Q49CF	OFTEN SEX AGNST THEIR WILL	309	309	F1
	1 Once a month			
	2 Every 2 to 3 weeks			
	3 Once a week			
	4 2-3 times a week			
	5 Once a day or more			
	6 Not sure			
	7 Refused			
	9 M Unknown			
Q49AG	YOU ATTACK INTENT KILL/MAIM	310	310	F1
	1 Yes			
	2 No			
	3 Not sure			
	4 Refused			
	9 M Unknown			
Q49BG	# TIMES KILL MAIM	311	313	F3
	97 97 or more			
	98 Not sure			
	99 Refused			
	999 M Unknown			
Q49CG	OFTEN ATTACK KILL/MAIM	314	314	F1
	1 Once a month			
	2 Every 2 to 3 weeks			
	3 Once a week			
	4 2-3 times a week			
	5 Once a day or more			
	6 Not sure			
	7 Refused			
	9 M Unknown			
Q62	# IN HOUSEHOLD	315	317	F3
	97 97 or more			
	98 Not sure			
	99 Refused			
	999 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
D11	CITY/SUB/RURAL	318	318	F1
	1 City			
	2 Suburb/large city			
	3 Large town			
	4 Small town			
	5 Rural area			
	6 Refused			
PTSDL	LIFETIME PTSD	319	319	F1
	0 No			
	1 Yes			
PTSDC	CURRENT PTSD	320	320	F1
	0 No			
	1 Yes			
SA	SEXUAL ASSAULT	321	321	F1
	0 No			
	1 Yes			
PA	PHYSICALLY ASS	322	322	F1
	0 No			
	1 Yes			
PAB	PHYSICALLY ABUSIVE PUNISH	323	323	F1
	0 No			
	1 Yes			
INCOME	FAM INCOME	324	325	F2
	1 \$0-\$5k			
	2 \$5k-\$10k			
	3 \$10k-\$20k			
	4 \$20k-\$30k			
	5 \$30k-\$40k			
	6 \$40k-\$50k			
	7 \$50k-\$60k			
	8 \$75k-\$100k			
	9 >\$100k			
	99 M Unknown			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
RACE	RACE	326	326	F1
	1 White			
	2 African American			
	3 Hispanic			
	4 Native American			
	5 Asian			
	6 Other race			
	7 Refused			
ANYVICT	ANY VICTIMIZATION	327	327	F1
	0 No			
	1 Yes			
WT95	WEIGHTING 95	328	333	F6.4
OTHRACE	OTHER RACE W/O REFUSED	334	334	F1
	0 No			
	1 Yes			
	9 M Unknown			
WHITE	WHITE OR ASIAN	335	335	F1
	0 No			
	1 Yes			
	9 M Unknown			
BLACK	BLACK	336	336	F1
	0 No			
	1 Yes			
	9 M Unknown			
HISP	HISPANIC	337	337	F1
	0 No			
	1 Yes			
	9 M Unknown			
FAMDRINK	FAMDRINK	338	338	F1
	0 No			
	1 Yes			
FAMDRUG	FAMDRUG	339	339	F1
	0 No			
	1 Yes			

NAME	VARIABLE LABEL	BEG COL	END COL	FMT
FRDDEVT	FRIEND DEV TOTAL	340	341	F2
	99 M Unknown			
NEPYILL	NON-EXPER PAST YEAR ILLICIT	342	342	F1
NEPYMAR	NON-EXP PAST YEAR MARIJUANA	343	343	F1
NEPYALC	NON-EXP PY ALCOHOL	344	344	F1
MARIJ	MAR AB DEP	345	345	F1
HARDDRUG	HARD DRUG AB DEP	346	346	F1
ALCOHOL	ALCOHOL DEPENDENCE OR ABUSE	347	347	F1
DRINK	MY DRINKING MEASURE	348	348	F1
	0 Any other			
	1 Yes			
EXPMAR	EXPERIMENTAL MARIJUANA	349	349	F1
	0 Any other			
	1 Yes			
NEMAR	NONEXPERIMENTAL MARIJUANA	350	350	F1
	0 Any other			
	1 Yes			
EVERILL	EVER ILLICT W/O MARIJUANA	351	351	F1
	0 Any other			
	1 Yes			
NEILL	NEILL	352	352	F1
WITVIOL	MY CHECK OF WV	353	353	F1
SCHSHOT	SCHOOL SHOOTING	354	354	F1
TSCHCUT	TOTAL SCHOOL CUTTINGS	355	355	F1

-----		BEG	END	
NAME	VARIABLE LABEL	COL	COL	FMT

SCHSEXA	TOTAL SCHOOL SEXUAL ASSAULTS	356	356	F1
SCHMUGT	TOTAL SCHOOL MUGGINGS	357	357	F1
SCHTRHT	TOTAL SCHOOL THREATS	358	358	F1
SCHBEAT	TOTAL SCHOOL BEATINGS	359	359	F1
TWITHOM	TOTAL ACTS AT HOME	360	360	F1
TWIELSE	TOTAL ACTS SOMEWHERE ELSE	361	361	F1
TWITNE	TOTAL ACTS NEIGH	362	362	F1
TWITSCH	TOTAL ACTS AT SCHOOL	363	363	F1
SCHPROB	SCH VIOL PROB	364	364	F1
	0 No/ small problem			
	1 Med/big problem			
	9 M Unknown			
COMMPROB	COMMVIOL PROB	365	365	F1
	0 No/ small problem			
	1 Med/big problem			
	9 M Unknown			
ANYDEV	ANY DEVIANCE	366	366	F1
	0 No			
	1 Yes			
	9 M Unknown			

Data Collection Instrument and
Original Documentation Provided by the Principal Investigator

Any column locations indicated in the original documentation refer to the original data format. The data were restructured, and the new column locations are listed in the ICPSR codebook and data definition statements.

APPENDIX A:

Original Documentation Provided by the Principal Investigator

Appendix A: Measures of Witnessing Violence, Friends' Delinquency, Family Drug or Alcohol Problems, and Juvenile Delinquency

Witnessed violence¹

Have you ever seen (in real life, not on TV or in movies)	Freq	%
(Each item states "not counting incidents you already told me about")		
--someone actually shoot someone else with a gun?	200	5.0
--someone actually cut or stab someone else with a knife?	425	10.6
--someone being sexually assaulted or raped?	111	2.8
--someone being mugged or robbed?	418	10.4
--someone threaten someone else with a knife, a gun, or some other weapon?	1345	33.4
--someone beaten up, hit, punched, or kicked such that they were hurt pretty badly?	2735	68.0

Friends' Delinquency

Coded as an additive scale to indicate the number of different types of deviance juveniles' friends are involved in.

Have your friends ever...	Freq	%
--used marijuana or hashish?	1488	37.0
--used alcohol?	2115	52.6
--sold hard drugs such as heroin, cocaine or LSD?	289	7.2
--gotten drunk once in awhile?	1807	44.9
--used prescription drugs such as amphetamines or barbiturates when there was no medical need for them?	250	6.2
--sold or given alcohol to kids under 18?	667	16.6
--purposely damaged or destroyed property that did not belong to them?	1274	31.7
--stolen something worth less than \$5?	1711	42.5
--broken into a vehicle of building to steal something?	441	11.0
--stolen something worth more than \$50?	604	15.0
--hit or threatened to hit someone without any reason?	811	20.2
--pressured or forced someone to do more sexually than he / she wanted to?	164	4.1
Friend specified as offender in witnessed violence.	547	13.6

Family Drug or Alcohol Problems

Two dichotomous items coded 1=yes, 0=no

Family Drinking and Drugs	Freq	%
Has anyone either in your family or who lived with you, not counting you, drink alcohol so much that it became a problem? (For example, did anyone drink so much they got into fights with other people, or started to beat the kids, or couldn't get out of bed the next day, or had difficulty holding a job?)	528	13.1
Did anyone in your family or who lived with you, not counting yourself, use hard drugs, such as heroin, cocaine, speed or uppers or downers, or have a drug problem?	358	8.9

¹ The statistics for witnessed violence include all types of witnessed violence in all locations.

Appendix A, Cont: Measures of Witnessing Violence, Friends' Delinquency, Family Drug or Alcohol Problems, and Juvenile Delinquency

Juvenile Delinquency:

Coded as a dichotomous variable - 1= ever engage in any of following, 0=none of following

Have you ever...	Freq	%
--stolen or tried to steal something worth more than \$100?	111	2.8
--stolen or tried to steal a motor vehicle such as a car or motorcycle?	68	1.7
--broken or tried to break into a building or vehicle to steal something or just to look around?	185	4.6
--been involved in gang fights?	226	5.6
--used force or strongarm methods to get money or things from people?	84	2.1
--had or tried to have sexual relations with someone against their will?	3	.1
--attacked someone with the idea of seriously hurting or killing that person?	174	4.3

Appendix B: Description of Drug and Alcohol Use Measures

Regular Drinking		
<u>Variable</u>	<u>Description</u>	<u>Coding</u>
q28d	During the past year, on how many days did you have five or more drinks of alcoholic beverages?	Regdrink=1 if q28d ge 12 (once per month)
q28f	During the past year, on how many days have you gotten drunk or very high from alcohol?	mdrunk=1 if q28f ge 12 (once per month)
DRINK	If respondent has either had 5 or more drinks or been drunk at least once per month.	If (mdrunk=1 or regdrink=1)

Marijuana Use		
<u>Variable</u>	<u>Description</u>	<u>Coding</u>
q32ba	Some people nowadays use other drugs that are not prescribed by a doctor, have you ever used Marijuana	1=1-3 times 2=4-10 times 3=more than 10 times
NEMAR	Non-experimental Marijuana Use	If (q32ba=2 or q32ba=3)
EXPMAR	Experimental Marijuana Use	If q32ba=1

Illicit Drug Use		
<u>Variable</u>	<u>Description</u>	<u>Coding</u>
	Some people nowadays use other drugs that are not prescribed by a doctor, have you ever used...	0=Never 1=1-3 times 2=4-10 times 3=more than 10 times
q32bb	Cocaine or crack	
q32bc	Angel dust or PCP	
q32bd	LSD or other hallucinogenics, like peyote, psilocybin or mushrooms	
q32be	Heroin or methadone	
q32bf	Inhalants, like glue, nitrous oxide, amyl nitrate, paint or gasoline	
NEILL	Non-experimental Illicit Drug Use (Any illicit drugs used 4 or more times)	If (q32bb or... q32bf >1)
EVERILL	Ever Used Illicit Drug	If (q32bb or ... q32bf >0)

Appendix C: List of Variables and relationships in Measurement Models

Exposure to Violence → WVSchool²

Exposure to Violence → WVHome

Exposure to Violence → WVNeighborhood

Exposure to Violence → WVSomewhere Else

Exposure to Violence → Sexual Assault

Exposure to Violence → Physical Assault

Peer Deviance → Friends' Violence Crime

Peer Deviance → Friends' Property Crime

Peer Deviance → Friends' Drug Related Crime

Abuse/Dependence → Alcohol Ab/Dep

Abuse/Dependence → Marijuana Ab/Dep

Abuse/Dependence → Hard Drug Ab/Dep

Substance Use → Regular Binge Drinking

Substance Use → Non-Experimental Marijuana Use

Substance Use → Ever Used Hard Drugs

² All measures of witnessing violence count the total number of acts witnessed in each location.

APPENDIX B:

Juvenile Data Collection Instrument from
the NATIONAL SURVEY OF ADOLESCENTS IN THE UNITED STATES, 1995 (ICPSR 2833)

SCHULMAN, RONCA, AND BUCUVALAS, INC.
444 PARK AVENUE SOUTH
NEW YORK, NY 10016

STUDY NO. 6233
January 18, 1995
DRAFT

NATIONAL SURVEY OF ADOLESCENTS

RESP. _____

RESP. TELEPHONE NUMBER: _____

INTERVIEW DATE: __/__/1995

Time Interview Began: __: __AM/PM Time Interview Ended: __: __AM/PM

SCREENER

Hello, I'm _____, with SRBI, the national research organization in New York City. We are conducting the National Survey of Adolescents under a grant from the United States Department of Justice.

I am going to ask you some questions -- about things that happen in your school, in your neighborhood, in your family, and also your opinions -- things you like and don't like. This is part of a national survey of more than 4,000 boys and girls age 12 through 17.

[You were originally chosen completely at random to represent the opinions and experiences of thousands of young people. We did this by dialing random phone numbers until we found someone the right age. You don't have to participate in this interview if you don't want to, but your help will make a big difference.]

The interview will take about a half an hour. I'll be asking you some questions about dangerous situations you may have faced and about some personal situations, where you might have been threatened. You can stop the interview at any time. If this is a bad time to talk, I can call back at a better time for you. To thank you for your help, we will be sending you a check for five dollars.

We would like you to try and answer every question that you can. However, if there is any question that you don't want to answer, that will be OK. Also, if there is any question that you don't understand, please say so. If there are too many people around for you to talk freely, just let me know and I can call back later. We are not going to tell your parents, your school or anyone else anything you told us.

Can we begin now? [IF NO, SCHEDULE CALLBACK]

First, I have a few background questions.

S1. How old are you?

_____AGE (SCREEN OUT IF NOT 12 THRU 17)

S2. What is your date of birth?

____Month____Day____Year____

[CHECKPOINT A: CALCULATE AGE BY (S2- INTERVIEW DATE). IF NEW AGE DOES NOT AGREE WITH S1, ASK RESPONDENT WHICH IS WRONG AND CORRECT.]

S3. Respondent's sex:

Male.....1
Female.....2

S4. What grade or year of school are you currently in?

Fifth.....5
Sixth.....6
Seventh.....7
Eighth.....8
Ninth/Freshman.....9
Tenth/Sophomore.....10
Eleventh/Junior.....11
Twelfth/Senior.....12

S6. What do you consider the biggest problem facing adolescents in your community these days?

S7. How much of a problem is violence in your school?

A very big problem.....1
A middle sized problem.....2
A fairly small problem.....3
Not a problem at all.....4

S8. How much of a problem is violence in your community?

A very big problem.....1
A middle sized problem.....2
A fairly small problem.....3
Not a problem at all.....4

S9. How much of a problem is drug abuse for young people in your community?

A very big problem.....1
A middle sized problem.....2
A fairly small problem.....3
Not a problem at all.....4

S10. How big a problem do you think sexual abuse is for young people in your community? Would you say...?

A very big problem.....1
A middle sized problem.....2
A fairly small problem.....3
Not a problem at all.....4

- 1a. Some young people tell us they have seen one person violently attack another person. By seeing a violent attack, we mean when you have actually seen someone beat up, rob, sexually assault, cut or stab with a knife, shoot at, actually shoot, or even kill another person. The people involved in the attack may have been strangers, friends, neighbors, or even family members.

We would like to find out about any violent attacks you have actually seen, whether it happened at school, in your neighborhood, somewhere else, or even in your home. We mean seeing violent attacks in real life, not on TV or in movies.

Have you ever seen someone actually shoot someone else with a gun?

Yes.....1

No.....2

- 2a. (Not counting any incidents you already told me about,) have you ever seen someone actually cut or stab someone else with a knife?

Yes.....1

No.....2

- 3a. (Not counting any incidents you already told me about,) have you ever seen someone being sexually assaulted or raped?

Yes.....1

No.....2

- 4a. (Not counting any incidents you already told me about,) have you ever seen someone being mugged or robbed?

Yes.....1

No.....2

- 5a. (Not counting any incidents you already told me about,) have you ever seen someone threaten someone else with a knife, a gun, or some other weapon?

Yes.....1

No.....2

- 6a. (Not counting any incidents you already told me about,) have you ever seen someone beaten up, hit, punched, or kicked such that they were hurt pretty badly?

Yes.....1

No.....2

[CHECK POINT: FOR EACH YES IN Q1-6, ASK FOLLOW-UP SERIES B-H. IF ALL NO, SKIP TO Q7A.]

[OBSERVATION OF VIOLENCE SERIES - LOOP B-H FOR EACH YES IN Q1a-Q6a]

b. Have you seen something like this more than once?

YES.....1
NO.....2

c. When was the last time this happened? Was it...?

Within the past week.....1
Within the past month.....2
Within the past six months.....3
Within the past year.....4
More than one year ago.....5

d. Where did this happen?

At home (by "home", I mean inside your house or
in your front or backyard).....1
In school (By "at school," I mean in the school
building, on school grounds, or on a school bus).2
In neighborhood (by "neighborhood", I mean the
area near your home).....3
Somewhere else.....4

f. Who was the person who was attacked? DO NOT READ

IT WAS A STRANGER.....1
MOTHER.....2
STEPMOTHER.....3
FATHER.....4
STEPFATHER.....5
BROTHER/STEPBROTHER.....6
SISTER/STEPSISTER.....7
GRANDPARENT.....8
OTHER ADULT RELATIVE.....9
OTHER CHILD RELATIVE.....10
TEACHER.....11
COACH.....12
NEIGHBOR.....13
ADULT LEADER OF YOUTH GROUP.....14
MINISTER, PRIEST, RABBI.....15
DOCTOR/HEALTH PROFESSIONAL.....16
YOUTH COUNSELOR OR SOCIAL WORKER...17
CO-WORKER.....18
FRIEND.....19
OTHER CHILD.....20
OTHER ADULT.....21

g. Who was the person who did it?

IT WAS A STRANGER.....	1
MOTHER.....	2
STEPMOTHER.....	3
FATHER.....	4
STEPPFATHER.....	5
BROTHER/STEPBROTHER.....	6
SISTER/STEPSISTER.....	7
GRANDPARENT.....	8
OTHER ADULT RELATIVE.....	9
OTHER CHILD RELATIVE.....	10
TEACHER.....	11
COACH.....	12
NEIGHBOR.....	13
ADULT LEADER OF YOUTH GROUP.....	14
MINISTER, PRIEST, RABBI.....	15
DOCTOR/HEALTH PROFESSIONAL.....	16
YOUTH COUNSELOR OR SOCIAL WORKER.....	17
CO-WORKER.....	18
FRIEND.....	19
OTHER CHILD.....	20
OTHER ADULT.....	21

h. During this incident, were you afraid you might be killed or seriously injured?

Afraid of being killed.....	1
Afraid of being injured.....	2
Afraid of both.....	3
Not afraid.....	4

7. Now I am going to read you a list of experiences that happen to some people at one time or another. I'd like you to tell me which of these have happened to you during the last year, since [MONTH] a year ago.

	NO	YES
a. Moving to a new home	0	1
b. Changing to a new school	0	1
c. Serious illness or injury of family member . .	0	1
d. Parents separated or divorced	0	1
e. Mother/father lost job	0	1
f. Death of a family member	0	1
g. Death of a close friend	0	1
j. Serious illness or injury of close friend .	0	1
l. New stepmother or stepfather	0	1
n. Losing a close friend	0	1
o. Having to repeat a school grade	0	1
q. Major personal illness or injury	0	1
t. Being suspended from school	0	1
u. Getting at least one failing grade on a report card	0	1

8a. We've just been talking about events that happen to many people. Now we'd like to talk about events that may be extraordinarily stressful or disturbing -- things that may not happen often but when they do they can be frightening, upsetting, or distressing to almost everyone. During your life, have any of the following types of things happened to you?

8b: (FOR EACH "YES" RECORDED IN Q8A, ASK:) How old were you when this happened (the first time)? (RECORD BELOW)

8c: (FOR EACH "YES" RECORDED IN Q8A, ASK:) How old were you when this happened most recently? (RECORD BELOW)

8d: (FOR EACH "YES" RECORDED IN Q8A, ASK:) Did you ever think you might be killed or seriously injured during this/these event(s) (RECORD BELOW)

EVENT:	8a		8b	8c	8d	
	NO	YES	AGE AT ONSET	AGE AT MOST RECENT EVENT	NO	YES
1. A serious accident at school, in a car or somewhere else?	0	1			0	1
2. A natural disaster such as a tornado, hurricane, flood, major earthquake or similar natural disaster?	0	1			0	1
3. Any other situation in which you were seriously injured or suffered physical damage? SPECIFY: _____	0	1			0	1
4. Any other situation in which you feared you might be killed or seriously injured? . . SPECIFY: _____	0	1			0	1
6. Any other extraordinarily stressful situation or event? SPECIFY: _____	0	1			0	1

- 9a. Now I would like to ask you some questions that are included in surveys of adults when we try to find out about how often sexual abuse and mistreatment happens. But I want to be sure that you would feel comfortable in answering a few questions in this area. Remember you don't have to answer any of the questions that you don't want to answer. Do you mind if I continued?

I don't mind, go ahead.....1 SKIP TO Q.10a
I do mind, don't want questions asked.....2

- 9b. Can you tell me what bothers you about these questions or why you would rather I did not ask you any more questions in this area?

SKIP TO Q.18a

- 10a. Sometimes a person may do sexual things to a young person that the young person doesn't want. These unwanted sexual things can happen to boys as well as girls and to young men as well as young women. People who try to do unwanted sexual things to young people are not always strangers but can be someone you know well like a neighbor, teacher, coach, counselor, boss, baby-sitter, minister or priest. They can even be a family member. People who try to make young people do unwanted sexual things aren't always men or boys - they can also be women or girls. I am talking about any experiences you've had where someone tried to make you do something sexual you didn't want to do, no matter who did it, how long ago it happened, or whether it was reported to police

Has a man or boy ever put a sexual part of his body inside your private sexual parts, inside your rear end or inside your mouth when you didn't want them to?

Yes.....1
No.....2 SKIP TO Q.11A

- 10b. When this happened, did the man or boy use physical force or threaten to hurt you if you didn't do what he wanted?

Yes.....1 SKIP TO Q.11A
No.....2

- 10c. Did he use pressure, trick, bribes or rewards to get you to do what he wanted?

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

11a. (Not counting any incidents you already told me about), has anyone, male or female, ever put fingers or objects inside your private sexual parts or inside your rear end when you didn't want them to?

Yes.....1

No.....2 SKIP TO Q.12A

11b. When this happened, did they use physical force or threaten to hurt you if you didn't do what they wanted?

Yes.....1 SKIP TO Q.12A

No.....2

11c. Did they use pressure, trick, bribes or rewards to get you to do what they wanted?

Yes.....1

No.....2

12a. (Not counting any incidents you already told me about), has anyone, male or female, ever put their mouth on your private sexual parts when you didn't want them to?

Yes.....1

No.....2 SKIP TO Q.13A

12b. Ask girls: Was the private sexual part they put their mouth on above your waist or below your waist? (Just say above or below).

Above.....1

Below.....2

Both.....3

12c. When this happened, did they use physical force or threaten to hurt you if you didn't do what they wanted?

Yes.....1 SKIP TO Q.13A

No.....2

12d. Did they use pressure, trick, bribes or rewards to get you to do what they wanted?

Yes.....1

No.....2

13a. (Not counting any incidents you already told me about), has anyone, male or female, ever touched your private sexual parts when you didn't want them to.

Yes.....1

No.....2 SKIP TO Q.14A

13b. When this happened, did they use physical force or threaten to hurt you if you didn't do what they wanted?

Yes.....1 SKIP TO Q.14A
No.....2

13c. Did they use pressure, trick, bribes or rewards to get you to do what they wanted?

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

14a. (Not counting any incidents you already told me about), has anyone ever made you touch their private sexual parts when you didn't want them to?

Yes.....1
No.....2 SKIP TO Q.15A

14b. When this happened, did they use physical force or threaten to hurt you if you didn't do what they wanted?

Yes.....1 SKIP TO Q.15A
No.....2

14c. Did they use pressure, trick, bribes or rewards to get you to do what they wanted?

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

15a. Ask Boys Only (Not counting any incidents you already told me about), has a women or girl ever put your private sexual part in her mouth or inside her body when you didn't want her to?

Yes.....1
No.....2 SKIP TO Q.16A

15b. When this happened, did they use physical force or threaten to hurt you if you didn't do what they wanted?

Yes.....1 SKIP TO NEXT CHECK POINT
No.....2

15c. Did they use pressure, trick, bribes or rewards to get you to do what they wanted?

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

CHECK POINT TO COUNT SEXUAL ASSAULT INCIDENTS:

- 10. A male put his body inside your sexual parts.....1
- 11. Someone put fingers or objects inside your sexual parts.....2
- 12. Someone put their mouth or your private parts.....3
- 13. Someone touched your private parts.....4
- 14. Someone made you touch their private parts.....5
- 15. A woman put your private parts in her mouth or body.....6

CHECK POINT: FOLLOW-UP TO SEXUAL ASSAULT SCREENERS

IF YES TO Q10a, Q11a, Q12a, OR Q15a, RAPE= YES. IF YES TO Q13a, OR Q14a, MOLEST = YES. IF NO TO ALL, SKIP TO Q26A.

- ** IF RESPONDENT SAID YES TO ONE INCIDENT, ASK Q16A (GO THROUGH ONE LOOP).
- ** IF RESPONDENT SAID YES TO ONE OR TWO INCIDENTS, ASK Q16B ABOUT THOSE INCIDENTS (GO THROUGH TWO LOOPS).
- ** IF RESPONDENT SAID YES TO THREE OR MORE INCIDENTS, ASK Q16D TO DETERMINE FIRST INCIDENT (GO THROUGH 1ST LOOP). THEN GO TO Q16E FOR MOST RECENT INCIDENT (GO THROUGH 2ND LOOP). THEN GO TO Q16F FOR MOST SERIOUS INCIDENT (GO THROUGH 3RD LOOP).

16a. ONLY ONE INCIDENT: You said that... [INCIDENT FROM DUMMY]? I'd like to ask you some questions about that incident. GO TO 17a. THEN GO TO Q18A.

16b. IF ONLY TWO INCIDENTS: Which of these incidents happened to you first? [RECORD FIRST INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about that first incident. GO TO 17a FOR 1ST LOOP. THEN ASK Q16C.

16c. [RECORD SECOND INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about the most recent/other incident. GO TO 17a FOR 2ND LOOP. THEN GO TO Q18a.

16d. IF THREE OR MORE INCIDENTS: Which of these incidents happened to you first? [RECORD FIRST INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about that first incident. GO TO 17a FOR 1ST LOOP. THEN ASK Q16E.

16e. Which of these incidents happened to you most recently? [RECORD MOST RECENT INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about that most recent incident. GO TO 17a FOR 2ND LOOP. THEN ASK Q16F.

16f. Would you consider any of the other incidents that you told me about to be more serious or worse than the two incidents we just talked about?

Yes.....1

No.....2 SKIP TO Q.18a

16g. How many?

One.....1

Two.....2

Three or more...3

16h. Why (was it/were they) more serious or worse?

16i. Which of the incidents was the most serious or worst?
[RECORD INCIDENT FROM DUMMY]? Now I'd like to ask
you some questions about that incident. GO TO 17a FOR
3RD LOOP. THEN GO TO Q18A.

[SEXUAL ASSAULT INCIDENT SERIES LOOP - up to three times]
DUMMY INDICATOR OF TYPE OF INCIDENT BEING REPORTED IN LOOP

17a. How old were you when this happened (the first time)?

AGE
NOT SURE.....98
REFUSED.....99

17b. Was this (most recent incident) a single incident or a series of incidents where the same person did similar things over a period of days, weeks, or months?

Series of events.....1
Single event.....2 SKIP TO Q17d
[VOL] Not sure.....3 SKIP TO Q17d
[VOL] Refused.....4 SKIP TO Q17d

17c. How old were you the last time this occurred?

AGE
NOT SURE.....98
REFUSED.....99

IF EVENT IS 10A OR 11A, ASK 17D. ELSE SKIP TO 17E

17d. Did the person (persons) who did this:
READ AND MULTIPLE RECORD

Put their sexual parts inside your sexual parts.....1
Put their sexual parts inside your rear end.....1
Put their sexual parts inside your mouth.....1
Put their fingers or objects inside your sexual parts..1
Put their fingers or objects inside your rear end.....1
Put their fingers or objects inside your mouth.....1

17e. Where did this incident take place? Was it...?

In your home.....1
At school.....2
In your neighborhood.....3
Somewhere else.....4

SPECIFY: _____

17f. About how old was this person (persons) (IF SERIES: at the time of the first incident)?

AGE
NOT SURE.....98
REFUSED.....99

17g. Had you ever seen (any of) the person(s) who did this to you before?

Yes.....1
No.....2 \ -- SKIP TO Q.17j
[VOL] Not sure.....3
[VOL] Refused.....4 /

17h. Did you know the person(s) fairly well or not?

Yes, knew fairly well.....1
No, did not know well.....2 \ -- SKIP TO Q.17j
[VOL] Not sure.....3
[VOL] Refused.....4 /

17i. What was that person's (those persons) relationship to you -- neighbor, co-worker, boyfriend, cousin or what?
[MULTIPLE RECORD, IF NECESSARY]

[LEAVE BLANK].....1
MOTHER.....2
STEPMOTHER.....3
FATHER.....4
STEPFATHER.....5
BROTHER/STEPBROTHER.....6
SISTER/STEPSISTER.....7
GRANDPARENT.....8
OTHER ADULT RELATIVE.....9
OTHER CHILD RELATIVE.....10
TEACHER.....11
COACH.....12
NEIGHBOR.....13
ADULT LEADER OF YOUTH GROUP.....14
MINISTER, PRIEST, RABBI.....15
DOCTOR/HEALTH PROFESSIONAL.....16
YOUTH COUNSELOR OR SOCIAL WORKER...17
CO-WORKER.....18
FRIEND.....19
OTHER CHILD.....20
OTHER ADULT.....21

17j. During this (these) incident(s) were you ever afraid that you might be seriously injured or even killed?

Yes.....1
No.....2
[VOL] Not sure.....3
[VOL] Refused.....4

17k. Did you suffer serious physical injuries, minor injuries or no injuries, as a result of the incident(s)?

No injuries.....1
Minor injuries.....2
Serious injuries.....3
[VOL] Not sure.....4
[VOL] Refused.....5

17L. Was the person(s) who did this to you under the influence of drugs or alcohol at the time of the incident(s)?

Alcohol.....1
Drugs.....2
Both.....3
Neither.....4
[VOL] Not sure.....5
[VOL] Refused.....6

17m. Were you using drugs or alcohol at the time of the incident(s)?

Alcohol.....1
Drugs.....2
Both.....3
Neither.....4 \ -- SKIP TO Q17o
[VOL] Not sure.....5 /
[VOL] Refused.....6 /

17n. Did the person who did these things to you make you use the alcohol or drugs?

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

17o. Did you ever tell anyone about this/these incident(s)?

Yes.....1
No.....2 SKIP TO Q17r

17p1. How long after the incident did you first tell someone about it?

Less than 24 hours.....	1
One day.....	2
Two days.....	3
Less than a week.....	4
One week.....	5
Less than a month.....	6
Less than six months.....	7
Less than a year.....	8
Less than 2 years.....	9
Less than 3 years.....	10
Less than 4 years.....	11
Less than 5 years.....	12
More than 5 years.....	13

17p2. Who did you tell first?

MOTHER.....	1
STEPMOTHER.....	2
FATHER.....	3
STEPPFATHER.....	4
BROTHER/STEPBROTHER.....	5
SISTER/STEPSISTER.....	6
POLICE.....	7
SOCIAL SERVICE WORKER/AGENCY.....	8
CLERGY/PRIEST/MINISTER/RABBI.....	9
DOCTOR/HEALTH PROFESSIONAL.....	10
CLOSE FRIEND.....	11
OTHER RELATIVE (SPECIFY).....	12
TEACHER.....	13
PRINCIPAL.....	14
SCHOOL NURSE.....	15
SOMEONE ELSE (SPECIFY).....	16
[VOL] DON'T KNOW.....	17
[VOL] REFUSED.....	18

17q. Who else have you ever told about this?

MOTHER.....1
STEPMOTHER.....2
FATHER.....3
STEPFATHER.....4
BROTHER/STEPBROTHER.....5
SISTER/STEPSISTER.....6
POLICE.....7
SOCIAL SERVICE WOKER/AGENCY.....8
CLERGY/PRIEST/MINISTER/RABBI.....9
DOCTOR/HEALTH PROFESSIONAL.....10
CLOSE FRIEND.....11
OTHER RELATIVE (SPECIFY).....12
TEACHER.....13
PRINCIPAL.....14
SCHOOL NURSE.....15
SOMEONE ELSE (SPECIFY).....16
[VOL] DON'T KNOW.....17
[VOL] REFUSED.....18

17r. Was this incident ever reported to someone at school, to the police, to a child protection agency or to any other authority? (MULTIPUNCH)

Yes, school.....1
Yes, police.....1
Yes, child protection....1
Yes, other.....1
(SPECIFY) _____
No, not reported.....1
Not sure.....1

17s. Were you ever interviewed by someone from school, by a police officer, by a social worker or by someone else about this? (MULTIPUNCH)

Yes, school.....1
Yes, police.....1
Yes, social worker.....1
Yes, other.....1 (SPECIFY) _____
No, not reported.....1
Not sure.....1

17t. Was the person (any of the persons) who did this ever arrested for this?

Yes.....1
No.....2 SKIP TO THANKS
Not sure.....3 SKIP TO THANKS

17u. Did you ever have to testify in court about this incident?

Yes.....1

No.....2

Not sure.....3

THANKING RESPONDENT (IF FIRST INCIDENT): "I'd like to thank you for telling me about that. I know sometimes these things are hard to talk about, but what you know can really help other people."

(IF SECOND OR THIRD INCIDENT): "Again, thank you for telling me about that. Your experiences are very important to us."

18. Sometimes young people get hit, beat up or physically assaulted by another person. The person who hits, attacks or beats up a young person isn't always a stranger, but can be someone who the young person knows well, even a family member or friend. The person doing the hitting can be older than the young person, about the same age, or even younger than the young person. Young people tell us they sometimes get hit, attacked or beat up at school, in their neighborhood, or even at home. These types of attacks can even happen to small children sometimes. Many times, young people never tell anyone about these events.

	YES	NO	REFUSED	NOT SURE
a. Has anyone -- including family members or friends -- ever <u>attacked</u> you <u>with</u> a gun, knife or some other weapon, regardless of when it happened or whether you ever reported to police.....1		2	3	4
b. (Not counting any incidents you already told me about), has anyone -- including family members or friends -- ever <u>physically attacked</u> you <u>without</u> a weapon, but you thought they were trying to kill or seriously injure you.....1		2	3	4
c. (Not counting any incidents you already told me about), has anyone -- including family members or friends -- ever <u>threatened</u> you <u>with</u> a gun or knife, but didn't actually shoot or cut you?.....1		2	3	4
d. (Not counting any incidents you already told me about), has anyone -- including family members or friends -- ever <u>beat you up, attacked you, or hit you with</u> something like a stick, club, or bottle so hard that you were hurt pretty bad?....1		2	3	4
e. (Not counting any incidents you already told me about), has anyone -- including family members or friends -- ever <u>beat you up with their fists</u> so hard that you were hurt pretty bad?.....1		2	3	4

CHECK POINT TO TALLY PHYSICAL ASSAULT INCIDENTS:

- | | |
|---|---|
| a. Attacked with a gun, knife weapon.....1 | 1 |
| b. Attacked without weapon, with intent to harm.....2 | 2 |
| c. Attacked over a period of time.....3 | 3 |
| d. Beaten with a stick, bottle, or something else.....4 | 4 |
| e. Beaten up with fists.....5 | 5 |

CHECK POINT: FOLLOW-UP TO PHYSICAL ASSAULT SCREENERS

(* DUMMY INDICATOR OF TYPE OF INCIDENT BEING REPORTED)

IF YES TO Q18a THROUGH Q18e, PHYSICAL ASSAULT= YES. IF NO TO ALL, SKIP TO Q27A.

** IF RESPONDENT SAID YES TO ONE INCIDENT, ASK Q19A (GO THROUGH ONE LOOP).

** IF RESPONDENT SAID YES TO ONE OR TWO INCIDENTS, ASK Q19B ABOUT THOSE INCIDENTS (GO THROUGH TWO LOOPS).

** IF RESPONDENT SAID YES TO THREE OR MORE INCIDENTS, ASK Q19D TO DETERMINE FIRST INCIDENT (GO THROUGH 1ST LOOP). THEN ASK Q19E FOR MOST RECENT INCIDENT (GO THROUGH 2ND LOOP). THEN ASK Q19F FOR MOST SERIOUS INCIDENT (GO THROUGH 3RD LOOP).

19a. ONLY ONE INCIDENT: You said that... [INCIDENT FROM DUMMY]? I'd like to ask you some questions about that incident. GO TO 20a. THEN GO TO Q27A.

19b. IF ONLY TWO INCIDENTS: Which of these incidents happened to you first? [RECORD FIRST INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about that first incident. GO TO 20a FOR 1ST LOOP. THEN ASK Q19C.

19c. [RECORD SECOND INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about the most recent/other incident. GO TO 20a FOR 2ND LOOP. THEN GO TO Q27a.

19d. IF THREE OR MORE INCIDENTS: Which of these incidents happened to you first? [RECORD FIRST INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about that first incident. GO TO 20a FOR 1ST LOOP. THEN ASK Q19E.

19e. Which of these incidents happened to you most recently? [RECORD MOST RECENT INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about that most recent incident. GO TO 20a FOR 2ND LOOP. THEN ASK Q19F.

19f. Would you consider any of the other incidents that you told me about to be more serious or worse than the two incidents we just talked about?

Yes.....1

No.....2 SKIP TO Q.27A

19g. How many?

One.....1

Two.....2

Three or more...3

19h. Why (was it/were they) more serious or worse?

19i. Which of the incidents was the most serious or worst? [RECORD INCIDENT FROM DUMMY]? Now I'd like to ask you some questions about that incident. GO TO 20a FOR 3RD LOOP. THEN GO TO 27A.

[PHYSICAL ASSAULT INCIDENT SERIES LOOP - up to three times]

[* DUMMY INDICATOR OF TYPE OF INCIDENT BEING REPORTED]

20a. How old were you when this happened (the first time)?

AGE
NOT SURE.....98
REFUSED.....99

20b. Was this (most recent incident) a single incident or a series of incidents where the same person did similar things over a period of days, weeks, or months?

Series of events.....1
Single event.....2 SKIP TO Q20d
[VOL] Not sure.....3 SKIP TO Q20d
[VOL] Refused.....4 SKIP TO Q20d

20c. How old were you the last time this occurred?

AGE
NOT SURE.....98
REFUSED.....99

20d. Was the person (were the persons) who did this to you male or female?

Male.....1
Female.....2
Both.....3
[VOL] Not sure.....4

20e. Where did this incident take place? Was it...?

In your home.....1
At school.....2
In your neighborhood.....3
Somewhere else.....4
SPECIFY: _____

20f. About how old was this person (persons) (IF SERIES: at the time of the first incident)?

AGE
NOT SURE.....98
REFUSED.....99

20g. Had you ever seen (any of) the person(s) who did this to you before?

Yes.....1
No.....2 \ -- SKIP TO Q.20j
[VOL] Not sure.....3 /
[VOL] Refused.....4 /

20h. Did you know the person(s) fairly well or not?

Yes, knew fairly well.....1
No, did not know well.....2 \

[VOL] Not sure.....3	-- SKIP TO Q.20j
[VOL] Refused.....4	/

20i. What was that person's (those persons) relationship to you -- friend, neighbor, co-worker, boyfriend, cousin or what? [MULTIPLE RECORD, IF NECESSARY]

[LEAVE BLANK].....1	
MOTHER.....2	
STEPMOTHER.....3	
FATHER.....4	
STEPPFATHER.....5	
BROTHER/STEPBROTHER.....6	
SISTER/STEPSISTER.....7	
GRANDPARENT.....8	
OTHER ADULT RELATIVE.....9	_____
OTHER CHILD RELATIVE.....10	
TEACHER.....11	
COACH.....12	
NEIGHBOR.....13	
ADULT LEADER OF YOUTH GROUP.....14	
MINISTER, PRIEST, RABBI.....15	
DOCTOR/HEALTH PROFESSIONAL.....16	
YOUTH COUNSELOR OR SOCIAL WORKER.....17	
CO-WORKER.....18	
FRIEND.....19	
OTHER CHILD.....20	
OTHER ADULT.....21	_____

20j. During this (these) incident(s) were you ever afraid that you might be seriously injured or even killed?

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

[VOL] Not sure.....3
[VOL] Refused.....4

20k. Did you suffer serious physical injuries, minor injuries or no injuries, as a result of the incident(s)?

No injuries.....1
Minor injuries.....2
Serious injuries.....3

[VOL] Not sure.....4
[VOL] Refused.....5

20L. Was the person(s) who did this to you under the influence of drugs or alcohol at the time of the incident(s)?

Alcohol.....1
Drugs.....2
Both.....3
Neither.....4
 [VOL] Not sure.....5
 [VOL] Refused.....6

20m. Were you using drugs or alcohol at the time of the incident(s)?

Alcohol.....1
Drugs.....2
Both.....3
Neither.....4 \ -- SKIP TO Q20o
 [VOL] Not sure.....5 /
 [VOL] Refused.....6

20n. Did the person who did these things to you make you use the alcohol or drugs?

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

20o. Did you tell anyone about this/these incident(s)?

Yes.....1
No.....2 SKIP TO Q20r

20p. Who did you tell first?

MOTHER.....1
FATHER.....2
BROTHER/STEPBROTHER.....3
SISTER/STEPSISTER.....4
POLICE.....5
SOCIAL SERVICE WOKER/AGENCY.....6
CLERGY/PRIEST/MINISTER/RABBI.....7
DOCTOR/HEALTH PROFESSIONAL.....8
CLOSE FRIEND.....9
OTHER RELATIVE (SPECIFY).....10
TEACHER.....11
PRINCIPAL.....12
SCHOOL NURSE.....13
SOMEONE ELSE (SPECIFY).....14
 [VOL] DON'T KNOW.....15
 [VOL] REFUSED.....16

20q. Who has been the most helpful and supportive person to you concerning this incident?

MOTHER.....1
FATHER.....2
BROTHER/STEPBROTHER.....3
SISTER/STEPSISTER.....4
POLICE.....5
SOCIAL SERVICE WORKER/AGENCY.....6
CLERGY/PRIEST/MINISTER/RABBI.....7
DOCTOR/HEALTH PROFESSIONAL.....8
CLOSE FRIEND.....9
OTHER RELATIVE (SPECIFY).....10
TEACHER.....11
PRINCIPAL.....12
SCHOOL NURSE.....13
SOMEONE ELSE (SPECIFY).....14
[VOL] DON'T KNOW.....15
[VOL] REFUSED.....16

20r. Was this incident ever reported to someone at school, to the police, to a child protection agency or to any other authority? (MULTIPUNCH)

Yes, school.....1
Yes, police.....1
Yes, child protection....1
Yes, other.....1
(SPECIFY) _____
No, not reported.....1
Not sure.....1

20s. Were you ever interviewed by someone from school, by a police officer, by a social worker or by someone else about this? (MULTIPUNCH)

Yes, school.....1
Yes, police.....1
Yes, social worker.....1
Yes, other.....1 (SPECIFY) _____
No, not reported.....1
Not sure.....1

20t. Was the person (any of the persons) who did this ever arrested for this?

Yes.....1
No.....2 SKIP TO THANKS
Not sure.....3 SKIP TO THANKS

20u. Did you ever have to testify in court about this incident?

Yes.....1
No.....2
Not sure.....3

THANKING RESPONDENT (IF FIRST INCIDENT): "I'd like to thank you for telling me about that. I know sometimes these things are hard to talk about, but what you know can really help other people."
(IF SECOND OR THIRD INCIDENT): "Again, thank you for telling me about that. Your experiences are very important to us."

27a. Now I have some questions about lifestyles.
Have you ever tried cigarette smoking, even one or two puffs?

Yes.....1
No.....2 SKIP TO Q.27g
[VOL] Not sure....3 SKIP TO Q.27g
[VOL] Refused.....4 SKIP TO Q.27g

27b. How old were you when you smoked a whole cigarette for the first time?

AGE IN YEARS
Never smoked whole cigarette...97 SKIP TO Q27g
[VOL] Not sure.....98 SKIP TO Q27g
[VOL] Refused.....99 SKIP TO Q27g

27c. Have you ever smoked cigarettes regularly, that is, at least one cigarette every day for 30 days?

Yes.....1
No.....2 SKIP TO Q.27g
[VOL] Not sure....3 SKIP TO Q.27g
[VOL] Refused.....4 SKIP TO Q.27g

27d. How old were you when you first started smoking cigarettes regularly? (At least one cigarette every day for 30 days)

AGE IN YEARS
Never smoked cigarettes regularly.97 SKIP TO Q27g
[VOL] Not sure.....98 SKIP TO Q27g
[VOL] Refused.....99 SKIP TO Q27g

27e. During the past 30 days, on how many days did you smoke cigarettes?

DAYS
No days.....97 SKIP TO Q27g
[VOL] Not sure.....98 SKIP TO Q27g
[VOL] Refused.....99 SKIP TO Q27g

27f. During the past 30 days, on the days you smoked, how many cigarettes did you smoke per day?

CIGARETTES A DAY
None in past 30 days.....97 SKIP TO Q27g
[VOL] Not sure.....98 SKIP TO Q27g
[VOL] Refused.....99 SKIP TO Q27g

27g. During the past 30 days, did you use chewing tobacco, such as Redman, Levi Garrett or Beechnut, or snuff, such as Skoal or Copenhagen?

Yes, chewing tobacco...1
Yes, snuff.....2
Yes, both.....3
No.....4
[VOL] Not sure...5
[VOL] Refused.....6

28a. Have you ever had a drink of beer, wine, liquor, or any alcoholic beverage?

Yes.....1
No.....2 SKIP TO Q.29
[VOL] Not sure...3 SKIP TO Q.29
[VOL] Refused.....4 SKIP TO Q.29

28b. In the past twelve months, have you ever had a drink of beer, wine, liquor, or any alcoholic beverages?

Yes.....1
No.....2 SKIP TO Q.29
[VOL] Not sure..3 SKIP TO Q.29
[VOL] Refused.....4 SKIP TO Q.29

28c. Now I'd like to ask you a few questions about your drinking during the past twelve months. Let's assume that one drink is one can of beer, one 4 oz. Glass of wine, or one shot of liquor, that is whiskey, vodka, gin, mixed drinks, and so forth. During the past twelve months how often have you had any kind of alcoholic beverage? Would you say it (is/was) three or more times a day, twice a day, about once a day, or what?

Three or more times a day.....1
 Two times a day.....2
 About once a day.....3
 Three or four times a week.....4
 Once or twice a week.....5
 Two or three times a month.....6
 About once a month.....7
 Less than once a month, but at
 least once in the past year.....8
 Never in the past year.....9 SKIP TO Q34
 [VOL] Not sure.....10 SKIP TO Q34
 [VOL] Refused.....11 SKIP TO Q34

28d. During the past year, on how many days did you have five or more drinks of alcoholic beverages? [PROBE]: Your best estimate is fine. [IF RESPONDENT SAYS: "Every day," RECORD AS 365; "Once a week," RECORD AS 52; "Once a month," RECORD AS 12.]

_____ Days
 _____ Never.....00 SKIP TO Q.29

28e. How old were you the first time you began drinking five or more drinks of alcohol/beer/wine on a given day?

_____ AGE

28f. During the past year, on how many days have you gotten drunk or very high from alcohol?

_____ DAYS

28g. When was the most recent time you have gotten drunk or very high from alcohol? [READ LIST. SINGLE RECORD]

Within the past week.....1
 Within the past month.....2
 Within the past six months.....3
 Six months to one year ago.....4
 More than one year ago.....5
 [VOL] Not sure.....6
 [VOL] Refused.....7

29. Now I'd like to ask you a few questions about things that sometimes happen to people when they drink alcohol? Have you ever had any of the following experiences since you started drinking alcohol? [READ ITEM]

	NO	YES
a. You had to drink a lot more to get high or to get the same effect than you did when you started taking drinking	0	1
b. When you drank the same amount of alcohol over a long period of time, you got less of an effect than when you first started drinking	0	1
c. You drank more alcohol or drank for a longer period of time than you wanted to	0	1
d. You often wanted to cut down the amount you drink or stop drinking, but weren't able to	0	1
e. You actually tried to cut down or stop drinking but weren't able to	0	1
f. You spent a lot of time trying to get alcohol, drinking alcohol, or trying to feel better after drinking a lot of alcohol	0	1
g. Your drinking caused you to give up or spend less time in school, work, with friends or family, or in recreation activities	0	1
h. You kept drinking even though it caused you psychological problems - like making you feel bad emotionally- or caused problems with your health	0	1

Q29i. Have you ever suddenly stopped or cut down a lot on the amount of alcohol you were drinking when you had been drinking heavily almost every day for a long time?

Yes.....1

No.....2 SKIP TO Q30a

Q29j. People who stop drinking or cut down a lot after drinking for a long period of time often feel sick or have withdrawal symptoms. After you had suddenly stopped or cut down on your drinking, did you ever have any of the following problems? [READ]

	YES	NO
1. Your heart beat fast or you sweat a lot	1	2
2. Your hands shook	1	2
3. You had trouble sleeping	1	2
4. Your stomach was upset or you threw up	1	2
5. You felt anxious	1	2
6. You had fits or seizures	1	2
7. You saw, heard, smelled, or felt things that you knew were not there	1	2
8. You were so tense that you couldn't sit still or you were pacing, fidgeting, wringing your hands, or pulling at your clothes	1	2

[CHECK POINT: IF TWO OR MORE YESES IN Q29J SERIES, ALCOHOL DEPENDENCY = YES.]

- 29k. Sometimes people who have been drinking a lot for a long time need to take a drink to keep themselves from getting a hangover, the shakes, or other withdrawal symptoms. Have you ever taken a drink right after you woke up to keep from having a hangover or the shakes?

Yes.....1
No.....2 SKIP TO NEXT CHECK POINT

- 29l. Have you ever taken a drink any other time to keep from having a hangover, the shakes, or any withdrawal symptoms?

Yes.....1
No.....2 SKIP TO NEXT CHECK POINT

- 29m. Have you ever taken a drink to make withdrawal symptoms go away?

Yes.....1
No.....2 SKIP TO NEXT CHECK POINT

[CHECK POINT: IF THREE OR MORE YESES IN Q29J SERIES, ASK Q28N. ELSE SKIP TO Q30a]

- Q29n. You said you had several of these problems since you started drinking alcohol. Did these problems ever seem to happen at the same time - at least within the same year?

Yes.....1
No.....2 SKIP TO Q30a

- Q29o. How old were you when you had several of these problems during the same year?

_____ AGE

- Q29p. Have you had several of these problems within the past year, that is, since [MONTH]?

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

30a. Doctors sometimes prescribe tranquilizers to calm people down, quiet their nerves, or relax their muscles. They also prescribe medicine to help people sleep, deal with pain, or lose weight. Besides the medical uses, people sometimes take these pills on their own, to help them relax, or just to feel good. Have you ever taken [READ ITEM] "on your own" or non-medically? By non-medically, we mean from a source other than your own prescription, beyond the amount you were told to take, or for some reason other than prescribed.

[IF "YES" IN Q.30a, ASK Q.30b. IF "NO" IN ALL Q.30a CATEGORIES, SKIP TO Q.31a]

30b. Would you say you have taken [READ ITEM] non-medically on 1-3 occasions, 4-10 occasions, or more than ten occasions?

[IF "4 OR MORE" IN Q.30b, ASK Q.30c]

30c. How old were you when you first took [ITEM] on your own or non-medically?

	Q.30a Taken Non-Medically		Q.30b Occasions			Q.30c Age at onset
	Yes	No	1-3	4-10	11 or More	
Tranquilizers, like valium, librium						
1. Tranquilizers, like valium, librium or xanax	1	2	1	2	3	_____
2. Sleeping medicines or sedatives, like barbiturates, seconal, halcion, or quaaludes	1	2	1	2	3	_____
3. Stimulants or diet pills - like amphetamines or speed	1	2	1	2	3	_____
4. Pain medicines, like codeine, darvon, percodan, demerol, morphine, methadone, or dilaudid	1	2	1	2	3	_____
5. Steroid pills or shots	1	2	1	2	3	_____

32a. Some people nowadays use other drugs that are not prescribed by a doctor, have you ever used . . . [READ EACH DRUG TYPE AND RECORD] [MULTIPLE RECORDS]

[IF "YES" IN Q.32a, ASK Q.32b. IF "NO" IN ALL Q.15 CATEGORIES, SKIP TO Q.____ - NEXT SECTION]

32b. Would you say you have used [READ CATEGORY] on 1-3 occasions, 4-10 occasions, or more than ten occasions?

[IF "4 OR MORE TIMES" IN Q.32b, ASK Q.32c. IF "NO" IN ALL Q.32a CATEGORIES, SKIP TO Q.34] 32c. How old were you when you first used...[READ]?

[IF "4 OR MORE TIMES" IN Q.32b, ASK Q.32d. IF "NO" IN ALL Q.32a CATEGORIES, SKIP TO Q.34] 32d. When was the most recent time you used...?[READ CATEGORY]

	Q.32a	Q.32b			Q.32c	Q.32d				
	Yes	1-3 Times	4-10 Times	More Than 10 Times	Age	Within past week	Within past month	Within past 6 months	6 months to 1 year ago	More than 1 year ago
a. Marijuana, (which is sometimes called pot or grass)	1 =>	1	2	3	_____	1	2	3	4	5
b. Cocaine or crack	1 =>	1	2	3	_____	1	2	3	4	5
c. Angel dust or PCP	1 =>	1	2	3	_____	1	2	3	4	5
d. LSD or other hallucinogenics, like peyote, psilocybin, or mushrooms	1 =>	1	2	3	_____	1	2	3	4	5
e. Heroin or methadone	1 =>	1	2	3	_____	1	2	3	4	5
f. Inhalants, like glue, nitrous oxide, amyl nitrate, paint or gasoline	1 =>	1	2	3	_____	1	2	3	4	5
g. None	1									

[IF "4 OR MORE TIMES" IN Q.30b or Q.32b, ASK Q.33a. ELSE SKIP TO Q.34]

33a. Now I'd like to ask you a few questions about things that sometimes happen to people when they use drugs? Have you ever had any of the following experiences since you started using drugs? [READ ITEM]

	NO	YES
a. You had to increase the amount of drug you were taking to get high or to get the same effect than you did when you started taking it	0	1
b. When you took the same amount of drug over a long period of time, you got less of an effect than when you first started taking it	0	1
c. You took more drugs or used them for a longer period of time than you wanted to	0	1
d. You often wanted to cut down the amount of drugs you were taking or stop taking drugs, but were not able to	0	1
e. You actually tried to cut down or stop taking drugs but weren't able to	0	1
f. You spent a lot of time trying to get drugs, taking drugs, or trying to feel better after taking drugs	0	1
g. Your drug use caused you to give up or spend less time in school, work, with friends or family, or in recreation activities	0	1
h. You kept using drugs even though it caused you psychological problems - like making you feel bad emotionally - or caused problems with your health	0	1

33b. Have you ever suddenly stopped or cut down a lot on the amount of drugs you were using when you had been using heavily almost every day for a long time?

Yes.....1

No.....2 SKIP TO Q34a

33c. Did suddenly stopping or cutting down on any drug you've ever taken make you sick or give you withdrawal symptoms?

Yes.....1

No.....2 SKIP TO Q33e

33d. Which drug made you sick or gave you withdrawal symptoms when you stopped taking it or cut down a lot?

33e. Have you ever used a drug to keep you from getting sick or having withdrawal symptoms?

Yes.....1

No.....2 SKIP TO Q34a

33f. Which drug did you take to keep you from getting sick or make your withdrawal symptoms go away?

[CHECK POINT: IF 3 OR MORE YESSES TO Q33A, B, C, D, E, F, G, OR H, AND EITHER 33C OR 33E, SUBSTANCE DEPENDENCE = YES. IF SUBSTANCE DEPENDENCE = YES, ASK Q33G. ELSE SKIP TO Q34A.]

Q33g. You said you had several of these problems since you started using drugs. Did these problems ever seem to happen at the same time - at least within the same year?

Yes.....1

No.....2 SKIP TO Q34a

Q33h. How old were you when you had several of these problems during the same year?

_____ AGE

Q33i. Have you had several of these problems within the past year, that is, since [MONTH]?

Yes.....1

No.....2

34a. Have you ever taken any drugs intravenously, that is, used a needle to inject it into a vein, under the skin or into a muscle?

Yes.....1

No.....2 SKIP TO Q.35a

34c. When was the most recent time you injected any drugs with a needle?

Within the past week.....1

Within the past month.....2

Within the past 6 months.....3

Within the past year.....4

Over a year ago.....5

34d. Have you ever used a needle someone else had used or shared a needle with someone?

Yes.....1

No.....2 SKIP TO Q.35a

34e. How old were you the first (only) time you shared a needle or works?

_____ AGE

34f. When was the most recent time you shared a needle or works? [READ ONLY IF NEEDED]

Within the past week.....1

Within the past month.....2

Within the past 6 months.....3

Within the past year.....4

Over a year ago.....5

[CONDITIONAL: USED PRESCRIPTION DRUGS FOR NON-MEDICAL REASON 4+ TIMES (Q30B1-Q30B5=2) OR USED ILLICIT DRUGS 4+ TIMES (Q32BA-Q32BF=2) OR EVER DRANK ALCOHOL (Q28A=1), ASK Q35A. ELSE SKIP TO Q38a]

35a. Has your use of alcohol or drugs ever caused you major problems with your family, your friends, school, or on the job?

Yes.....1

No.....2 SKIP TO Q35e

35b. Which substance(s) caused that problem?

35c. How old were you when that happened (for the first time)?

AGE AT ONSET

35d. Has this happened in the past 12 months, since this past (MONTH)?

Yes.....1

No.....2

35e. Have you ever been high from drugs or alcohol in a situation where it increased your chances of getting hurt -- like driving a car or boat, swimming, or crossing the street in heavy traffic?

Yes.....1

No.....2 SKIP TO Q35i

35f. In that situation, what substance(s) made you high?

35g. How old were you when that happened (for the first time)?

AGE AT ONSET

35h. Has this happened in the past 12 months, since this past (MONTH)?

Yes.....1

No.....2

35i. Have you ever been arrested or had problems with the police because you were taking alcohol or drugs -- like for driving while intoxicated, for being drunk and disorderly, or for stealing to get drugs?

Yes.....1

No.....2 SKIP TO Q35m

35j. What substance(s) got you in trouble with the police?

35k. How old were you when that happened (for the first time)?

AGE AT ONSET

35l. Has this happened in the past 12 months, since this past (MONTH)?

Yes.....1

No.....2

35m. Have you ever continued to use alcohol or drugs in spite of having a lot of problems with your family about using them -- problems like fights, arguments, or other relationship problems?

Yes.....1

No.....2 SKIP TO Q36a

35n. What substances were you using that caused these problems with family or friends?

35o. How old were you when that happened (for the first time)?

____ AGE AT ONSET

35p. Has this happened in the past 12 months, since this past (MONTH)?

Yes.....1

No.....2

36a. Have you ever sought treatment for a drug or alcohol problem?

Yes, drug problem.....1
Yes, alcohol problem.....2
Yes, both.....3
No.....4 SKIP TO Q37a
[VOL] Not sure.....5 SKIP TO Q37a

36b. Did you receive treatment as an inpatient only, outpatient only, or both?

Inpatient only.....1
Outpatient only.....2
Both.....3
Never treated.....4
[VOL] Not sure.....5
[VOL] Refused.....6

37a. During the past year, have you ever driven a car or truck?

Yes.....1
No.....2 SKIP TO Q.38a

37b. In the past year, how often have you driven while feeling the effects of alcohol?

Daily.....1
2-6 times a week.....2
Once a week.....3
Once every two weeks.....4
Once a month.....5
4-10 times a year.....6
2-3 times a year.....7
Only once.....8
Never.....9
[VOL] Not sure.....10

37c. In the past year, how often have you driven while feeling the effects of drugs?

Daily.....1
2-6 times a week.....2
Once a week.....3
Once every two weeks.....4
Once a month.....5
4-10 times a year.....6
2-3 times a year.....7
Only once.....8
Never.....9
[VOL] Not sure.....10

38a. Now, a few questions about you.
Have you always lived with both your natural mother and father?

Yes.....1 SKIP TO Q.39a
No.....2

38b. Did you ever live with both your natural mother and father?

Yes.....1
No.....2 SKIP TO Q.38e

38c. What happened to keep you from living with both parents?

Placed for adoption.....1
Parents never married, never lived together.....2
Father died.....3
Mother died.....4
Both parents died.....5
Parents separated or divorced; stayed
with mother.....6
Parents separated or divorced; stayed
with father.....7
Parents separated or divorced; both
left home.....8
Parents separated or divorced; sent to live
with someone else.....9
Sent to live with someone else; parent(s)
alive and not separated or divorced.....10
Abandoned (lived some time with
natural parents).....11
Left home; ran away.....12
Other (SPECIFY).....13

38d. How old were you when you first lived apart from either your
natural father or mother?

_____ Years

38e. When you were not living with both your natural parents,
with whom did you live most of the time?

Mother alone.....1
Mother with stepfather(s) including boyfriend(s)...2
Mother with relative(s) or friend(s).....3
Father alone.....4
Father with stepmother(s) including
girlfriend(s).....5
Father with relative(s) or friend(s).....6
Guardian family (including adoptive
parents, grandparents, or other relatives)....7
Single female guardian (including adoptive
mother, grandmother, or other female
relative).....8
Single male guardian (including adoptive
father, grandfather, or other male relative)..9
Foster parents.....10
Orphanage.....11
Other (SPECIFY).....12

38f. How much time do you spend with the parent you are not currently living with? Do you see them...? READ CHOICES

EVERY DAY.....1
SEVERAL TIMES A WEEK.....2
ONCE A WEEK.....3
A FEW TIMES A MONTH.....4
ONCE A MONTH.....5
A FEW TIMES A YEAR.....6
LESS OFTEN.....7
NEVER/NOT ALLOWED TO.....8

39a. When you were growing up, how much of the time did you feel scared or frightened that someone you knew might physically hurt you or someone you cared about? {READ LIST}

All of the time.....1
Often.....2
Sometimes.....3
Rarely.....4
Never.....5

39b. Was there anyone in your childhood that you knew you could count on or depend on to be there when you needed them?

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

39c. Was this true throughout your whole childhood?

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

40a. Families have different ways of punishing young people if they think they have done something wrong. Some families spank young people as a form of punishment. Has a parent or some adult in charge of you ever spanked you so hard that you had to see a doctor because you were hurt so bad?

Yes.....1
No.....2 SKIP TO Q.40C

40b. Has this happened in the past year?

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

40c. Not counting any spanking incidents you already told me about, has a parent or someone in charge of you ever spanked you so hard that you got bad marks, bruises, cuts or welts?

Yes.....1
No.....2 SKIP TO Q.40E

40d. Has this happened in the past year?

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

40e. Not counting any spanking incidents you already told me about, has a parent or someone in charge of you ever punished you by burning you, cutting you, or tying you up?

Yes.....1

No.....2 SKIP TO Q.41

40f. Has this happened in the past year?

Yes.....1

No.....2

41. Has anyone either in your family or who lived with you, not counting you, drink alcohol (beer, wine) so much that it became a problem? (For example, did anyone drink so much they got into fights with other people, or started to beat the kids, or couldn't get out of bed the next day, or had difficulty holding a job?)

Yes.....1
No.....2 SKIP TO Q.43

42. Who was that person?

Natural mother.....1
Natural father.....2
Adopted mother.....3
Adopted father.....4
Stepmother, foster mother.....5
Stepfather, foster father.....6
Other mother substitute.....7
Other father substitute.....8
Brother.....9
Sister.....10
Stepbrother.....11
Stepsister.....12
Other relative.....13
Other nonrelative in household.....14
Other (SPECIFY).....15

43. Did anyone in your family or who lived with you, not counting you, use hard drugs, such as heroin, cocaine, speed, or uppers or downers, or have a drug problem? Again, please include as family not only family members who lived with you but also anyone else who lived in your home as well as parents, brothers, sisters, grandparents not living with you.

Yes.....1
No.....2 SKIP TO 45a

44. Who was that person?

Natural mother.....1
Natural father.....2
Adopted mother.....3
Adopted father.....4
Stepmother, foster mother.....5
Stepfather, foster father.....6
Other mother substitute.....7
Other father substitute.....8
Brother.....9
Sister.....10
Stepbrother.....11
Stepsister.....12
Other relative.....13
Other nonrelative in household.....14
Other (SPECIFY).....15

45a. Did drinking alcohol or the use of drugs cause either of your biological parents to have... (READ ITEM)

45b. [FOR EACH YES, ASK:] Was that your father or mother who had the problem? [RECORD BELOW]

45c. [FOR EACH PROBLEM RESPONDENT SAYS "YES" TO, ASK:] Which substance caused that problem? [RECORD RESPONSE BELOW]

	45a.		45b.		45c.
	HAPPENED?				
	NO	YES	FATHER	MOTHER	SUBSTANCE
1. Problems with family or friends?	0	1 =>	1	2	
2. Problems with work?	0	1 =>	1	2	
3. Injuries or accidents?	0	1 =>	1	2	
4. Problems with their health?	0	1 =>	1	2	
5. Trouble with the law?	0	1 =>	1	2	

48a. Now let's talk about your friends' behavior in the past 12 months since [MONTH] a year ago. I'd like to ask you how many of your close friends have done each thing I will read to you.

Have your friends ever... [READ]? (ASK THESE QUESTIONS FOR ALL RESPONDENTS, UNLESS THEY REITERATE THAT THEY HAVE NO FRIENDS AND CAN'T ANSWER THE QUESTIONS).

[FOR EACH YES IN Q 48A, ASK Q48B]

48b. Would you say all of your friends, most of them, some of them, or very few of them?

	NO	YES	All of Them	Most of Them	Some of Them	Very Few of Them
a. purposely damaged or destroyed property that did not belong to them?	1	2 =>	1	2	3	4
b. used marijuana or hashish?	1	2 =>	1	2	3	4
c. stolen something worth less than \$5?	1	2 =>	1	2	3	4
d. hit or threatened to hit someone without any reason?	1	2 =>	1	2	3	4
e. used alcohol?	1	2 =>	1	2	3	4
f. broken into a vehicle or building to steal something?	1	2 =>	1	2	3	4
g. sold hard drugs such as heroin, cocaine, and LSD?	1	2 =>	1	2	3	4
h. stolen something worth more than \$50?	1	2 =>	1	2	3	4
i. suggested you do something that was against the law?	1	2 =>	1	2	3	4
j. gotten drunk once in awhile?	1	2 =>	1	2	3	4
k. used prescription drugs such as amphetamines or barbiturates when there was no medical need for them?	1	2 =>	1	2	3	4
l. sold or given alcohol to kids under 18?	1	2 =>	1	2	3	4
m. pressured or forced someone to do more sexually than he/she wanted to do?	1	2 =>	1	2	3	4

49a. This section deals with your own behavior. I'd like to remind you that all your answers are confidential. I'll read a series of behaviors to you. Have you ever... [READ]?

49b. [FOR EACH YES, ASK:] How many times in the past 12 months, since [MONTH] a year ago, have you... [READ]? [Please give me your best estimate.]

49c. (IF 10 OR MORE TIMES IN THE LAST YEAR, ASK:) Was that once a month, once every 2 or 3 weeks, once a week, 2-3 times a week, once a day or more?

	Yes	Times in Last Year	Once a month	Every 2-3 Weeks	Once a Week	2-3 Times a week	Once a day
a. Stolen or tried to steal something worth more than \$100?	1	_____	0	1	2	3	4
b. Stolen or tried to steal a <u>motor vehicle</u> such as a car or motorcycle?	1	_____	0	1	2	3	4
c. Broken or tried to break into a building or vehicle to steal something or just look around?	1	_____	0	1	2	3	4
d. Been involved in gang fights?	1	_____	0	1	2	3	4
e. Used force or strongarm methods to get money or things from people?	1	_____	0	1	2	3	4
f. Had or tried to have sexual relations with someone against their will?	1	_____	0	1	2	3	4
g. Attacked someone with the idea of seriously hurting or killing that person?	1	_____	0	1	2	3	4

50. Now I would like to ask you about moods and feelings.
Have you ever had a period of two weeks or longer when you were
feeling depressed, down, or irritable most of the day, nearly
every day?

Yes.....1
No.....2
[VOL] Not sure.....3
[VOL] Refused.....4

51. Has there ever been a time of two weeks or longer when you were
uninterested in most things or unable to enjoy things you used to
do nearly every day?

Yes.....1
No.....2
[VOL] Not sure.....3
[VOL] Refused.....4

52. Have you ever had a period of two weeks or longer when
you... [READ LIST]?

a. Lost weight without dieting.....1
b. Gained weight without dieting.....1
c. Had a significant increase or decrease in appetite..1
d. Slept too much/too little/
less than normal.....1
e. Were so fidgety/restless you
were unable to sit still.....1
f. Felt tired/low in energy all the time.....1
g. Felt worthless/guilty about the past.....1
h. Had a hard time thinking/concentrating/
making decisions.....1
i. Felt things were so bad that
you thought about hurting yourself.....1
j. Thought about death a lot.....1
[VOL] None.....2
[VOL] Refused.....3

IF NUMBER OF "YES" ANSWERS IN Q.50, Q.51, AND Q.52 TOTALS 5 OR MORE,
THEN ASK Q.53. IF 4 OR LESS, SKIP TO Q.55a.

53. How old were you when you first had a lot of these symptoms
for at least two weeks?

AGE:
Not Sure.....98
Refused.....99

54. When was the most recent time you had a lot of these symptoms for at least two weeks: within the past month, the past six months, the past year, or more than a year ago?

Within the past month.....1
The past six months.....2
The past year.....3
More than a year ago.....4
Never.....5
[VOL] Not sure.....6
[VOL] Refused.....7

55a. Has there ever been a period of two weeks or more when you felt like you wanted to die?

Yes.....1
No.....2 SKIP TO Q.56a
[VOL] Not sure.....3 SKIP TO Q.56a
[VOL] Refused.....4 SKIP TO Q.56a

55b. When was that?

— — Month
— — Year
[VOL] Not sure.....98
[VOL] Refused.....99

56a. Have you ever felt so low that you thought of committing suicide?

Yes.....1
No.....2 SKIP TO Q.57a
[VOL] Not sure.....3 SKIP TO Q.57a
[VOL] Refused.....4 SKIP TO Q.57a

56b. When was that?

— — Month
— — Year
[VOL] Not sure.....98
[VOL] Refused.....99

56c. Have you ever attempted suicide?

Yes.....1
No.....2 SKIP TO Q.57a
[VOL] Not sure.....3 SKIP TO Q.57a
[VOL] Refused.....4 SKIP TO Q.57a

56d. When was that?

— — Month
— — Year
[VOL] Not sure.....98
[VOL] Refused.....99

56e. Did that result in an injury or overdose that had to be treated by a doctor or nurse?

Yes.....1
No.....2
[VOL] Not sure.....3
[VOL] Refused.....4

57a. People experience a variety of moods and feelings from time to time. In your case, has there ever been a period of two weeks or more during which? [READ ITEM]

57b. [FOR EACH "YES" IN Q.57a, ASK]: How old were you the first time you...? [READ ITEM] [RECORD ANSWER ABOVE NEXT TO ITEM IN ONSET COLUMN]

57c. [FOR EACH "YES" IN Q.57a., ASK]: When was the last time you [READ ITEM] within the last month, within the past six months, or more than six months ago? [RECORD ANSWER ABOVE NEXT TO ITEM IN RECENCY COLUMN]

	Q57a Yes	Q57b Onset (Age)	Q57c		
			Last Mo.	Past 6 Mo.	6 months or more
1. You had trouble concentrating or keeping you mind on what you were doing, even when you tried to concentrate.....1	_____	_____	1	2	3
2. You lost interest in activities which usually meant a lot to you.....1	_____	_____	1	2	3
3. You felt you had to stay on guard much of the time.....1	_____	_____	1	2	3
4. You deliberately tried very hard not to think about something that had happened to you.....1	_____	_____	1	2	3
5. [If yes in Q.4] What was it you tried not to think about? _____					
6. You had difficulty falling asleep or staying asleep.....1	_____	_____	1	2	3
7. You stopped caring about activities in your life that used to be important to you.....1	_____	_____	1	2	3

	Q57a Yes	Q57b Onset (Age)	Q57c Last Mo.	Past 6 Mo.	6 months or more
8. Unexpected noises startled you more than usual.....1	_____	1	2	3	
9. You kept having unpleasant memories, or seeing them in your mind.....1	_____	1	2	3	
10. [If Yes to Q.9]: What were the memories about?					

11. You had repeated bad dreams or nightmares.....1	_____	1	2	3	
12. [If Yes to Q.11]: What were the dreams about?					

13. You went out of your way to avoid certain places or activities which might remind you of something that happened to you in the past.....1	_____	1	2	3	
14. [If Yes to Q.13]: What did those places or activities remind you of?					

15. You deliberately tried to avoid having any feelings about something that happened to you in the past.....1	_____	1	2	3	
16. [If Yes to Q.15]: What were those feelings about?					

17. You felt cut off from other people or found it difficult to feel close to other people.....1	_____	1	2	3	

	Q57a Yes	Q57b Onset (Age)	Last Mo.	Past 6 Mo.	Q57c 6 months or more
18. It seemed you could not feel things anymore or that you had much less emotion than you used to.....1	_____	1	2	3	
19. You found yourself suddenly feeling very anxious, fearful, or panicky...1	_____	1	2	3	
20. Little things bothered you a lot or could make you very angry.....1	_____	1	2	3	
21. Disturbing memories kept coming into your mind whether you wanted to think of them or not.....1	_____	1	2	3	
22. [If Yes in Q.21]: What were those memories about? _____					
23. You felt a lot worse when you were in a situation that reminded you of something that had happened in the past.....1	_____	1	2	3	
24. [If Yes in Q.23]: What did these things remind you of? _____					
25. You found yourself reacting physically to things that reminded you of something that had happened in the past.....1	_____	1	2	3	
26. [If Yes in Q.25]: What did these things remind you of? _____					

	Yes	Onset (Age)	Last Mo.	Past 6 Mo.	6 months or more
27. The way you think about or plan for the future was changed by something that happened to you in the past...	1	_____	1	2	3

28. [If Yes in Q. 27]: What was that?

29. Have you ever had a "flashback" - that is, have you ever had an experience in which you imagined that something that happened in the past was happening all over again? (Doesn't have to be for two weeks).....	1	_____	1	2	3
---	---	-------	---	---	---

30. [If Yes in Q. 29]: What was the flashback about?

31a. Throughout this interview we've talked about distressing experiences that you may have had. Have you EVER felt that there were parts of any such experience that you couldn't remember?

Yes.....	1	
No.....	2	SKIP TO Q. 60a
[VOL] Not sure.....	3	SKIP TO Q. 60a
[VOL] Refused.....	4	SKIP TO Q. 60a

31b. How old were you the first time you felt there were parts of any such experience that you couldn't remember?

_____ AGE	
[VOL] Not sure.....	98
[VOL] Refused.....	99

31c. When was the last time you felt there were parts of any such experience that you couldn't remember, within the last month, within the past 6 months, or more than six months ago?

Within the past month.....	1
Within the past 6 months.....	2
More than 6 months ago.....	3
[VOL] Not sure.....	4
[VOL] Refused.....	5

*** IF "YES" TO SIX OR MORE IN Q.57a SERIES, PTSD = YES,
CONTINUE WITH Q60a.
IF "NO," "NOT SURE," OR "REFUSED" IN ALL Q.57a SERIES, GO
TO DEMOGRAPHICS.

60a. You said that you've had some of these problems concerning moods and feelings. Did several of these problems ever seem to go together or happen at the same time, at least within the same month?

Yes.....1
No.....2 SKIP TO Q61a
[VOL] Not sure.....3 SKIP TO Q61a
[VOL] Refused.....4 SKIP TO Q61a

60b. How old were you the first time you had several of these problems (feelings, moods) at the same time?

Age
[VOL] Not sure.....98
[VOL] Refused.....99

60c. Did you have those feelings after something in particular had happened to you or not?

Yes, something.....1
No, nothing.....2 SKIP TO Q.60e
[VOL] Not sure.....3 SKIP TO Q.60e
[VOL] Refused.....4 SKIP TO Q.60e

60d. What was it that happened?

60e. When was the last time you had several of these problems (feelings, moods) at the same time?

Within the past month.....1
Within the past 6 months.....2
More than 6 months ago.....3
[VOL] Not sure.....4
[VOL] Refused.....5

60f. What is the longest period of time when you had several of these problems (feelings, moods) at the same time?

Less than 1 month.....1
Less than 6 months.....2
Less than 1 year.....3
More than 1 year.....4
[VOL] Not sure.....5
[VOL] Refused.....6

[IF 'NOT SURE', ASK:]

60g. Was it at least one month?

Yes.....1
No.....2
[VOL] Not sure.....3
[VOL] Refused.....4

61. After people have traumatic events that cause the bad moods, feelings, and emotional problems we have just been talking about, their lives can sometimes be affected in other ways. After the events you told me about that caused bad moods, feelings and emotional problems, did they ever cause:

YES NO

- | | | |
|----|--|---|
| a. | Problems with your schoolwork, including bad grades, having to drop out of school, getting in trouble with your teachers or having to work harder to make the same grades?.....1 | 2 |
| b. | Problems with a job, including not being able to do as well as you could before, having to quit, trouble with you boss or co-workers, or being fired?.....1 | 2 |
| c. | Problems with family members or friends, including getting into more arguments or fights than you sis before, not feeling you could trust them as much, or not feeling as close to them as you did before?.....1 | 2 |

61d. When you had several of these bad moods, feelings and emotional problems after a traumatic event, how distressing was it to you -
- very distressing, a little distressing, or not at all distressing?

- Very distressing.....1
A little distressing.....2
Not at all distressing.....3
[VOL] Not sure.....4
[VOL] Refused.....5

DEMOGRAPHIC QUESTIONS

62. Including yourself, how many people live in this household?

_____ PERSONS IN HOUSEHOLD

63. Are you of Spanish/Hispanic origin?

Yes, Hispanic.....1

No, not Hispanic.....2

64. In which of the following categories do you feel you belong?

Pacific Islander.....1

American Indian or Alaskan native.....2

Asian (Oriental).....3

African-American (Black).....4

White/Caucasian.....5

65. Finally, we'd like to give you the opportunity to tell us what you think the government could do to make things safer for young people?

[IF REFUSED ALL SEXUAL ASSAULT QUESTIONS IN Q9A, ASK Q66A. ELSE SKIP TO Q67A]

66a. Earlier, you told me that you did not want me to ask you any questions about sexual abuse and mistreatment. Now that you have finished the rest of the questionnaire, I wonder if you might have changed your mind about it and would be willing to let me ask you those questions. It very important for our study, but I want to be sure that you would feel comfortable in answering a few questions in this area. Remember you don't have to answer any of the questions that you don't want to answer. Do you mind if I ask those questions now?

I don't mind, go ahead.....1 SKIP TO Q.10a

(ASK SEX ASSAULT QX)

I do mind, don't want questions asked..2

DEBRIEFING

Well, that's about it. We'd like to thank you for helping us in this study. What you've told us is very important, and it will help us to help other kids. We'd also like to remind you that everything you told us is confidential -- no one else is going to know about it.

67a. Were there things that you thought about telling us, but you weren't sure whether it was what we were asking about?

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

67b. Were there things that came to mind that you didn't tell us about because you're not sure of all the details or you don't remember it very well?

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

67c. Were there things that came to mind that you didn't tell us about because you didn't feel comfortable on the phone or because you just didn't want to talk about it?

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

68. We talked a lot about dangerous and difficult situations in this interview. If you are in a situation that is difficult or dangerous, or if you have a friend who is, there is a place you can call to get advice and help. It is a place called Childhelp that helps a lot of kids. The number is toll-free and it won't show up on your phone bill. Would you like that number?

YES.....1 That toll-free number is 1-800
NO.....2

70a. [IF CHILD IS IN CURRENT DANGER: -- IF THE CHILD HAS BEEN SEXUALLY VICTIMIZED BY ANYONE IN THE LAST YEAR, OR HIT BY A FAMILY MEMBER IN THE LAST YEAR, AND HAS NOT TOLD ANYONE ABOUT IT] There is someone else connected with our study who may need to call you again. Is there a time that would be convenient?
[GET TIME]

SKIP TO Q70C

OR...

70B. [IF CHILD IS NOT IN CURRENT DANGER] It is possible that we may want to talk again to all the kids who helped us in this interview. Would it be okay to call you again in about a year to talk a little more?

Yes, okay to call again.....1
No, not okay to call.....2

70C. Do you have any questions?

If you have any other questions about the study later on, you can call us toll-free at 1-800-772-9287.

[ADOLESCENT RECONTACT INFO FROM END OF INTERVIEW]

71. I need your full name, including middle name, for the check?

FIRST MIDDLE LAST

72. Now, I need your mailing address. We will be sending your check to you at this address.

STREET ADDRESS

APARTMENT NUMBER

CITY STATE ZIP

73. Let me confirm that the phone number at which I reached you was:

74. We would like to recontact the parents and adolescents whom we interviewed at some point in the future to see how they are doing. We would not recontact you for at least a year. At that time you could choose whether you wanted to participate or not. However, we will need some information so that we can reach you next year, particularly in case you move.

75. In case you have moved next year, would your grandparents be likely to know where you have moved?

Yes.....1

No.....2 SKIP TO 77

No Grandparents.....3 SKIP TO 77

76. Could you tell me the name and address of the grandparent who would be most likely to know where you had gone, if you moved in the next year?

FULL NAME

STREET ADDRESS

CITY STATE ZIP

PHONE

77. Could you tell me the name of the school that you currently attend. It's one more way we might be able to find you if you move.

NAME OF SCHOOL

CITY/TOWN

78. Thanks, that completes the interview. You should be receiving your check within the next few weeks. We will also include a change of address card for you to send back to us, in case you move in the next year. Thanks again for all of your help.

