The National Survey of American Life:

Coping with Stress in the 21st Century

ADOLESCENT INTERVIEW

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# National Survey of American Life: Adolescent Questionnaire

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DEMOGRAPHICS (DM)

DM1. (READ SLOWLY) This interview asks about your physical and emotional well-being and about areas of your life that could affect your physical and emotional well-being. It is important for us to get accurate information. In order to do this, you will need to think carefully before answering the following questions.

Are you willing to do this?

INTERVIEWER: PROBE NEGATIVE RESPONSES BY ASKING IF THERE IS A BETTER TIME TO COME BACK FOR THE INTERVIEW. REPEAT *SC19 AS NECESSARY. R MUST ANSWER AFFIRMATIVELY TO CONTINUE WITH THE INTERVIEW. TERMINATE IF R DOES NOT ANSWER AFFIRMATIVELY.

1 – Yes

5 – No ➔ RCIntro2. “Thank you for your time, one of our supervisors may call or write to you to verify this interview. We would also like to send you a summary of the study results. For these reasons, I would like to get your name, address and your telephone number.”

GO TO RC1 - RECONTACT SHEET

General Life Satisfaction

DM2. First, how satisfied with your life as a whole would you say you are these days? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

1 – Very Satisfied
2 – Somewhat satisfied
3 – Somewhat Dissatisfied
4 – Very Dissatisfied

DM3. The next few questions are for background purposes. How old are you now?

_________ YEARS OLD

DM4. Are you Black, Caribbean or another race?

1 – Black
2 – Caribbean
3 – Other (SPECIFY) _________________

DM5. INTERVIEWER QUERY

1 - R IS A MALE
2 - R IS A FEMALE

DM5_1 WOMEN: Do you have any children?
MEN: Have you ever fathered any children?

1 – Yes
5 – No GO TO DM6
DM5_1a  How many children do you have? _______ NUMBER  ➔ IF=0 GO TO DM6
                     IF=1 GO TO DM5_1c

DM5_1b  How many of them live with you? _______NUMBER  ➔ GO TO DM6

DM5_1c  Does that child live with you?
        1 – Yes
        5 – No

DM6.  How long have you lived at your current address?
        _______ MONTHS _______ YEARS

DM7.  About how many years have you lived in this state?
        __________ YEARS

        LESS THAN 1 YEAR.. 887
        WHOLE LIFE ...............888

DM8.  How many different houses or apartments have you ever lived in?
        __________ HOUSES AND APARTMENTS

DM9.  What woman mostly raised you? (OPEN ENDED) _______________________________

        USE THESE CODES:
        1 – Mother
        2 – Stepmother
        3 – Grandmother
        4 – Aunt
        5 – Someone Else  SPECIFY: __________
        6 – No Woman  GO TO DM10

DM9a.  Is she still living?
        1 – YES  GO TO DM10
        5 - NO

DM9b.  How old was she when she died?
        _________________ AGE
DM10. What man mostly raised you? (OPEN ENDED) ________________________________

USE THESE CODES:
1 – Father
2 – Stepfather
3 – Grandfather
4 – Uncle
5 – Someone Else SPECIFY: __________
6 – No Man GO TO DM11

DM10a. Is he still living?

1 – YES GO TO DM11
5 - NO

DM10b. How old was he when he died?

_______________ AGE

DM11. In general, would you say you and your family living here have more money than you need, just enough for your needs, or not enough to meet your needs?

1 – More Than Need
2 – Just Enough
3 – Not Enough
ACTIVITIES & SCHOOL (AS)

Now I would like to ask you some questions about your experiences in school and any activities you may have participated in.

AS1. Are you still in school full-time or have you graduated or quit school?

1 - Still In School  
2 - Graduated  
3 - Quit/Dropped Out  
4 - (IF VOL) Temporarily Stopped, But Plan To Return  
5 - (IF VOL) In School Part-Time

AS2. What grade (are you in now/did you last complete)? _____ NUMBER (5-13)

5 - Fifth Grade  
6 - Sixth Grade  
7 - Seventh Grade  
8 - Eighth Grade  
9 - High School Freshman  
10 - High School Sophomore  
11 - High School Junior  
12 - High School Senior  
13 - Post High School

AS3. (RB PG 38) What best describes the type of program you (are/were) taking in school? Would you say vocational or technical, academic or college prep, commercial or business, general, remedial or basic skills, special education or some other type of program?

1 - Vocational or Technical  
2 - Academic or College Prep  
3 - Commercial or Business  
4 - General  
5 - Remedial or Basic Skills  
6 - Special Education  
7 - Other (SPECIFY) ____________________

AS4. What kind of grades (do/did) you usually get? Would you say that you (get/got) mostly A’s, mostly B’s, mostly C’s, mostly D’s, or mostly failing grades?

1 – A’s  
2 – B’s  
3 – C’s  
4 – D’s  
5 – Failing Grades
**AS5.** How many years have you been involved in each of the following activities at school:  
[IF NEC: How many years were you involved in (ACTIVITY) at school?] IF NONE, RECORD ‘0’.

<table>
<thead>
<tr>
<th>Activity</th>
<th>Number (0-10)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Sports teams other than gym?</td>
<td></td>
</tr>
<tr>
<td>b. Band, orchestra, or chorus?</td>
<td></td>
</tr>
<tr>
<td>c. Student newspaper or yearbook?</td>
<td></td>
</tr>
<tr>
<td>d. Student council or honor society?</td>
<td></td>
</tr>
<tr>
<td>e. Any other school clubs, teams, or organizations?</td>
<td></td>
</tr>
</tbody>
</table>

**AS6.** Other than school activities, are there any youth groups in this community such as (Boys/Girls) Club, YMCA, sports leagues or others like that?

1 - Yes  
5 – No → GO TO AS7  
9 – Don’t Know → GO TO AS7

**AS6a.** Are you involved with any of these groups?

1 – Yes  
5 – No

**AS7.** (Since you’re on school vacation, please think about your activities during a normal school day.)  
How many hours a week outside of school (do/did) you usually spend doing the following? (ASK FOR HOURS, THEN ENTER IN CORRECT COLUMN BELOW)

<table>
<thead>
<tr>
<th>Activity</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Homework?</td>
<td></td>
</tr>
<tr>
<td>b) Taking part in an after school academic program?</td>
<td></td>
</tr>
<tr>
<td>c) Participating in sports, athletics or exercise?</td>
<td></td>
</tr>
<tr>
<td>d) Taking part in an after school non-academic program?</td>
<td></td>
</tr>
</tbody>
</table>
**School Bonding – NSHS Adolescent Interview**

<table>
<thead>
<tr>
<th>AS7_5. How true (is/was) each of the following statements about you (when you were in school)—very true, somewhat true, not very true, or not at all true?</th>
<th>Very True (1)</th>
<th>Somewhat True (2)</th>
<th>Not Very True (3)</th>
<th>Not At All True (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Most of my teachers treat(ed) me fairly.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) I (care/cared) a lot about what my teachers (think/thought) of me.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) I (like/liked) school.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) Getting good grades (is/was) important to me.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e) Homework (is/was) a waste of time.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f) I (like/liked) my teachers.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>g) I (try/tried) hard at school.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h) I (feel/felt) as if I (don’t/didn’t) belong at school.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>i) Most of the things I learn(ed) in school are unimportant.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

AS8. Think about the other students in most of your classes. Would you say that almost all, very many, some, a few, or (none/ no other) (are/were) Black/ African American? What about Latinos or Hispanic students? -- Are there almost all, very many, some, a few or none?

<table>
<thead>
<tr>
<th></th>
<th>Almost All (1)</th>
<th>Very Many (2)</th>
<th>Some (3)</th>
<th>A Few (4)</th>
<th>None (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) Black/ African American students</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) Latino/ Hispanic students</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) White students</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) Asian students</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
AS9. (RB, PG1) From the list on page 1 in your booklet, please tell me how far would you like to go in school? [IF NEC: Would you say: less than high school graduation; graduate from high school but not any further; vocational, trade or business school after high school; junior college or part of a four year college program; graduate from a four year college; higher level of school after graduating from college; or some other type of education?]

1 - Not Graduate High School
2 - High School Graduation
3 - Technical, Trade Or Vocational School (Above High School Level)
4 - Community College
5 - University Degree
6 - Graduate/Professional Degree
7 – Other ( SPECIFY):__________________

AS10. (RB PG 1) As things stand now, how far in school do you think you will get? [IF NEC: Would you say you: won’t finish high school; will graduate from high school but won’t go any further; go to vocational, trade or business school after high school; will attend junior college or part of a four year college program; will graduate from a four year college; will attend a higher level of school after graduation from college; or some other type of education?]

1 - Not Graduate High School
2 - High School Graduation
3 - Technical, Trade Or Vocational School (Above High School Level)
4 - Community College
5 - University Degree
6 - Graduate/Professional Degree
7 – Other ( SPECIFY):__________________

AS11. Did you ever stay back or repeat a grade in school?

1 – Yes
5 – No ➔ GO TO AS12

AS11a. How many times did you fail a grade in school? ________ TIMES

AS11b. What was the earliest grade you failed? ________ GRADE

AS12. Were you ever suspended from school for a day or longer?

1 – Yes
5 – No ➔ GO TO AS13

AS12a. How many times were you suspended? ________ TIMES

AS12b. What was the longest time you were ever suspended? ________ DAYS (1-100)
AS13. Were you ever expelled from school?

1 – Yes
5 – No  ➔ GO TO AS14

AS13a. How many times were you expelled? _________ TIMES

AS14. Have you ever spent time in a reform school, detention center, jail, or prison?

1 – Yes
5 – No  ➔ GO TO AS15

AS14a. Which ones? (CHECK ALL THAT APPLY)

1 – Reform School
2 – Detention Center
3 – Jail
4 – Prison

AS14b. How many times altogether (did you spend time in one of these facilities)?

___________ NUMBER

AS14c. How old were you (the first time you were sent to one of these facilities)?

___________ AGE

AS14d. How long altogether were you in any of these places?

_________ MONTHS __________ YEARS

AS15. (RB PG 39) If you had to guess, how many of your best friends do you think will end up graduating from high school—none, only a few, about half, most, or almost all?

1 – None
2 – A few
3 – Half
4 – Most
5 – Almost all
6 – (IF VOL) All
7 – (IF VOL) No friends
AS16. (RB PG 39) How many of your best friends do you think will graduate from college (none, a few, about half, most, or almost all)?

1 – None
2 – A few
3 – Half
4 – Most
5 – Almost all
6 – (IF VOL) All
7 – (IF VOL) No friends

AS17. INTERVIEWER CHECKPOINT (Refer to AS1)

☐ 1 - R SAID “3 – QUIT/DROPPED OUT” IN AS1 ➔ GO TO AS18
☐ 2 – ALL OTHERS ➔ GO TO NEXT SECTION

AS18. (RB PG 40) What were your main reasons for stopping full-time school?

(CHECK ALL THAT APPLY)

1 - Not Interested/Don’t Like School
2 - Problems With School Work
3 - Problems With Teachers
4 - Problems With Other Students
5 - Kicked Out/Expelled
6 - Not Worth Continuing/Do Not See Future Benefits
7 - Health Problems
8 - Pregnancy/Caring For Own Children
9 - Problems At Home
10 - Had To Work/Money Problems
11 - Wanted Work
12 - OTHER (SPECIFY) ____________________________
**EMPLOYMENT (EM)**

EM1. Do you have a job?

1 – Yes
5 - No **GO TO EM2**

EM1a. (During the school year) About how many hours do you work on your job in an average week?

__________HOURS (1-97)

EM1b. How much are you paid?

__________ DOLLAR AMOUNT PER HOUR/WEEK/MONTH/YEAR

<table>
<thead>
<tr>
<th></th>
<th>All (1)</th>
<th>Most (2)</th>
<th>About Half (3)</th>
<th>Some (4)</th>
<th>None (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) How much do you save?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) [IF EM1 = ‘NO’, GO TO EM2c] How much do you give to your family to help with living expenses?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) How much do you give to your church or place of worship?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) How much do you spend on cigarettes, alcohol, or drugs?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) How much do you spend on things for yourself, like clothes or going out?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Rosenberg’s Self Esteem - NSAA

**PC1.** (RB PG 3) Now I’d like to know how strongly you agree or disagree with these statements about you. Please tell me if you strongly agree, somewhat agree, somewhat disagree or strongly disagree with each of the following.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree (1)</th>
<th>Somewhat Agree (2)</th>
<th>Somewhat Disagree (3)</th>
<th>Strongly Disagree (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) I feel that I'm a person of worth, at least on an equal basis with others.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) I feel that I have a number of good qualities.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) All in all, I feel that I am a failure.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) I am able to do things as well as most other people.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) I feel I do not have much to be proud of.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) I take a positive (good) attitude toward myself.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g) On the whole, I am satisfied with myself.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h) I wish I could have more respect for myself.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) I certainly feel useless at times.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j) At times I think I am no good at all.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### John Henryism

**PC2.** (RB PG 4) Now I am going to read you several statements about how you feel about your efforts in life. Please tell me if each statement is completely true, somewhat true, somewhat false, or completely false for you?

<table>
<thead>
<tr>
<th>Statement</th>
<th>Completely True (1)</th>
<th>Somewhat True (2)</th>
<th>Somewhat False (3)</th>
<th>Completely False (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) I’ve always felt that I could make of my life pretty much what I wanted to make of it.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) Once I make up my mind to do something, I stay with it until the job is completely done.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) I don’t let my personal feelings get in the way of getting a job done.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) It’s important for me to be able to do things in the way I want to do them rather than in the way other people want me to do them.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e) Sometimes I feel that if anything is going to be done right, I have to do it myself.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f) I like doing things that other people thought could not be done.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>g) I feel that I am the kind of individual who stands up for what he believes in, regardless of the consequences.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h) Hard work has really helped me to get ahead in life.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>i) When things don’t go the way I want them to, that just makes me work even harder.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>j) It’s not always easy, but I manage to find a way to do the things I really need to get done.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>k) Very seldom have I been disappointed by the results of my hard work.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>Question</td>
<td>Completely True (1)</td>
<td>Somewhat True (2)</td>
<td>Somewhat False (3)</td>
<td>Completely False (4)</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>---------------------</td>
<td>-------------------</td>
<td>--------------------</td>
<td>----------------------</td>
</tr>
<tr>
<td>1) In the past, even when things got really tough, I never lost sight of my goals.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CESD-12**

<table>
<thead>
<tr>
<th>PC3.</th>
<th>Now I would like to ask you some questions about ways you might have felt or behaved. Please tell me how often you have felt this way during the past week.</th>
<th>Rarely or none of the time (less than 1 day) (0)</th>
<th>Some or a little of the time (1-2 days) (1)</th>
<th>Occasionally or a moderate amount of the time (3-4 days) (2)</th>
<th>Most or all of the time(5-7 days) (3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>I felt that I was just as good as other people</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>b)</td>
<td>I had trouble keeping my mind on what I was doing</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>c)</td>
<td>I felt depressed</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>d)</td>
<td>I felt that everything I did was an effort</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>e)</td>
<td>I felt hopeful about the future</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>f)</td>
<td>My sleep was restless</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>g)</td>
<td>I was happy</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>h)</td>
<td>People were unfriendly</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>i)</td>
<td>I enjoyed life</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>j)</td>
<td>I had crying spells</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>k)</td>
<td>I felt that people disliked me</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>l)</td>
<td>I could not get “going”</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>
Cohen’s Perceived Stress Scale

PC4. (RB PG 6) In the next series of questions I will ask you about your feelings and thoughts during the last month. For each question, please indicate how often you felt or thought that way.

<table>
<thead>
<tr>
<th>In the last month, how often have you...</th>
<th>Never (1)</th>
<th>Almost Never (2)</th>
<th>Sometimes (3)</th>
<th>Fairly Often (4)</th>
<th>Very Often (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) ...been upset because of something that happened that you didn’t expect?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) ...felt that you were in control of your life?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) ...felt nervous and stressed out?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) ...dealt successfully with daily hassles?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) ...felt that you were able to successfully handle the important changes occurring in your life?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) ...felt able to handle your personal problems?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>g) ...felt that things were going your way?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>h) ...found that you could not deal with all the things that you had to do?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>i) ...been able to control hassles in your life?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>j) ...felt that you were on top of things?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>k) ...gotten angry because of things that happened that were outside of your control?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>l) ...found yourself thinking about things you need to do?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>m) ...been able to control the way you spend your time?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>n) ...felt that you had so many problems that you could not deal with them?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Pearlin’s Mastery

PC5. (RB PG7) Now I’d like to know how strongly you agree or disagree with these other statements about yourself.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Strongly Agree (1)</th>
<th>Somewhat Agree (2)</th>
<th>Somewhat Disagree (3)</th>
<th>Strongly Disagree (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) There is really no way I can solve some of the problems I have.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) Sometimes I feel that I’m being pushed around in life.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>c) I have little control over the things that happen to me.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>d) I can do just about anything I really set my mind to.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>e) I often feel helpless in dealing with the problems of life.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>f) What happens to me in the future mostly depends on me.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>g) There is little I can do to change many of the important things in my life.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>h) I look to God for strength, support and guidance.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>i) Other people determine most of what I can and cannot do.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>j) What happens in my life is often beyond my control.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>k) There are many things that interfere with what I want to do.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>l) Whether or not I am able to get what I want is in my own hands.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>
RELIGION (RE)

Now I would like to ask a few questions about your religion and place of worship, by that I mean your church, mosque, temple, synagogue, kingdom hall and so on.

RE1. How religious would you say you are - very religious, fairly religious, not too religious, or not religious at all?

    1 – Very religious
    2 – Fairly religious
    3 – Not too religious
    4 – Not religious at all

Organizational Participation -NSBA

RE3. (RB PG 41) How often do you usually attend religious services? Would you say nearly everyday, at least once a week, a few times a month, a few times a year, or less than once a year?

    1 - Nearly everyday - 4 or more times a week
    2 - At least once a week - 1 to 3 times
    3 - A few times a month - 1 to 3 times
    4 - A few times a year
    5 - Less than once a year  ⇒ GO TO RE11
    6 – Never  ⇒ GO TO RE11

RE4. Do you go to religious services because you want to, or because your (parents/guardians) make you go? [IWR: IF R SAYS ‘BOTH’ PROBE ONCE ONLY “Which one is more likely—you go because you choose to go or because your parents make you go?” . IF R STILL SAYS ‘BOTH’ ENTER 3]

    1 – Choose
    2 – Parents/Guardians Make You Go
    3 – IF VOL: Both

RE5. Do you do things like sing in the choir, read scripture or other things like that during service?

    1 – Yes
    5 – No
RE6. (RB PG 42) Besides regular services, how often do you take part in other activities at your place of worship? Would you say nearly everyday, at least once a week, a few times a month, a few times a year, or never?

1 – Nearly everyday - 4 or more times a week
2 – At least once a week - 1 to 3 Times
3 - A few times a month - 1 to 3 Times
4 - A few times a year
5 – Never

RE6.1 INTERVIEWER CHECKPOINT

☐ 1 – R SAID ‘NO’ TO RE5 AND ‘NEVER’ TO RE6  ➔ GO TO RE7
☐ 2 – ALL OTHERS ➔ GO TO RE6_2

RE6_2 Do you go to these other activities because you want to or because your (parents/guardians) make you go? [IWR: IF R SAYS ‘BOTH’ PROBE ONCE ONLY “Which is more likely – you go because you choose to go or because your parents make you go?” IF R STILL SAYS ‘BOTH’ ENTER 3]

1 – Choose
2 – Parents/Guardians Make You
3 – IF VOL: Both

Support Network NSBA Panel

RE7. How often do people in your place of worship help you out? Would you say very often, fairly often, not too often, or never? [IWR PROBE: IF “NEVER” ASK - Is that because you never needed help?]

1 – Very often
2 – Fairly often
3 – Not too often
4 – Never
6 – Never needed help

NSBA

RE8. How often do you help out people in your place of worship? Would you say very often, fairly often, not too often, or never? [IWR PROBE: IF “NEVER” ASK - Is that because they never needed help?]

1 – Very often
2 – Fairly often
3 – Not too often
4 – Never
6 – Never needed help
### Religious Support Fetzer — Neal Krause

#### Received Emotional and Tangible Support

<table>
<thead>
<tr>
<th>RE9.</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not too Often (3)</th>
<th>Never (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) How often do the people in your place of worship make you feel loved and cared for? Would you say very often, fairly often, not too often, or never?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) How often do they listen to you talk about your private problems and concerns?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>c) … express interest and concern in your well-being?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>d) … help you financially? [IWR PROBE: IF “NEVER” ASK – Was that because you never needed help?]</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

---

#### Provided Tangible Support

<table>
<thead>
<tr>
<th>RE10.</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not too Often (3)</th>
<th>Never (4)</th>
<th>Never Needed Help (6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) How often do you help the people in your place of worship with regular chores, such as shopping, cleaning or yard work? [IWR PROBE: IF “NEVER” ASK – Was that because no one ever asked for help?]</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) … help when they are sick or ill? [IWR PROBE: IF “NEVER” ASK – Was that because no one ever asked for help?]</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

---

#### Non-Organizational Private Participation – NSBA Expanded Response Categories

<table>
<thead>
<tr>
<th>RE11.</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not Too Often (3)</th>
<th>Never (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) How often do you read religious books or other religious materials -- very often, fairly often, not too often, or never?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) How often do you watch or listen to religious programs on TV or radio?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>
Subjective Religiosity – NSBA

RE12. Please tell me how important the following things have been to you.

<table>
<thead>
<tr>
<th></th>
<th>Often (1)</th>
<th>Often (2)</th>
<th>Often (3)</th>
<th>(4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>c) … listen to religious music?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) … pray?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e) … ask someone to pray for you?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

NSBA

RE13. Would you say your religion provides some guidance in your day-to-day living, quite a bit of guidance, or a great deal of guidance in day-to-day living?

1 – Some  
2 – Quite a bit  
3 – A great deal  
4 – (R VOLUNTEERS:) None at all
## Religious Socialization

<table>
<thead>
<tr>
<th>RE14. The next few questions are about messages you might have received about religion. How often do the following people talk with you about religion? Would you say very often, fairly often, sometimes, rarely, or never?</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Sometimes (3)</th>
<th>Rarely (4)</th>
<th>Never (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) How often do your parents or the people who raised you talk with you about religion? [Would you say very often, fairly often, sometimes, rarely, never?]</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) What is the most important thing they have told you about religion? (OPEN ENDED) [IWR: IF R GIVES MORE THAN ONE RESPONSE PROBE: Which one was the most important?] (ENTER MOST IMPORTANT)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Not including your parents or the people who raised you, how often do other close relatives such as your brothers, sisters, aunts, uncles, and grandparents talk with you about religion?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) Not including your parents or the people who raised you who was the main person (who talked to you about religion)?</td>
<td>1 – Brother</td>
<td>2 – Sister</td>
<td>3 – Aunt</td>
<td>4 – Uncle</td>
<td>5 – Grandmother</td>
</tr>
<tr>
<td>e) What is the most important thing (he/she) has told you about religion? (OPEN ENDED) [IWR: IF R GIVES MORE THAN ONE RESPONSE PROBE: Which one was the most important?] (ENTER MOST IMPORTANT)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**RE15.** What is your current religion? (IF R SAYS PROTESTANT: What church or denomination is that?)
PROTESTANTISM
01. PROTESTANT, NO DENOMINATION MENTIONED
02. PROTESTANT, INTERDENOMINATIONAL (IF YOU GO TO TWO OR MORE PROTESTANT CHURCHES)
03. APOSTOLIC
04. ASSEMBLY OF GOD
05. BAPTIST (ALL TYPES)
06. BORN-AGAIN CHRISTIAN
07. BRETHREN
08. DISCIPLES OF CHRIST / CHRISTIAN CHURCH
09. CHRISTIAN REFORMED
10. CHURCH OF GOD
11. CONGREGATIONAL
12. EPISCOPALIAN OR ANGLICAN/CHURCH OF ENGLAND
13. EVANGELICAL
14. HOLINESS
15. JEHOVAH’S WITNESS
16. LUTHERAN
17. MENNONITE
18. METHODIST (AL TYPES, INCLUDING UNITED BRETHREN)
19. MORMON, LATTER DAY SAINTS
20. NAZARENE
21. PENTECOSTAL
22. PRESBYTERIAN
23. QUAKER, SOCIETY OF FRIENDS
24. SALVATION ARMY
25. SANCTIFIED
26. SEVENTH DAY ADVENTIST
27. SPIRITUAL
28. UNITARIAN
29. UNITED CHURCH OF CHRIST
30. PROTESTANT, OTHER (PLEASE SPECIFY:)

JUDAISM
31. JEWISH, NO DENOMINATION MENTIONED
32. JEWISH ORTHODOX
33. JEWISH CONSERVATIVE
34. JEWISH REFORM
35. JEWISH RECONSTRUCTIONIST
36. JEWISH (ALL OTHERS)

EASTERN
42. BUDDHIST (ALL TYPES, INCLUDING ZEN)
43. HINDU
44. MUSLIM

OTHERS
45. RASTAFARIAN
46. SCIENTOLOGIST
47. AGNOSTIC OR ATHEIST
48. NO RELIGIOUS PREFERENCE
49. NO RELIGION
50. OTHER (SPECIFY):

CATHOLICISM
31. CATHOLIC, NO DENOMINATION MENTIONED
32. CATHOLIC, ROMAN
33. CATHOLIC, UKRAINIAN
34. ORTHODOX (RUSSIAN, GREEK, SERBIAN)
35. CATHOLIC (ALL OTHERS)
SOCIAL SUPPORT (SS)

Now, I’d like to ask you some questions about your family relationships and about your friends.

Social Support NSBA Frequency of Support Received and Given

SS1. How often do people in your family -- including parents, grandparents, brothers and sisters, aunts, uncles, cousins and so on -- help you out? Would you say very often, fairly often, not too often, or never? [IWR PROBE: IF “NEVER” ASK – Is that because you never needed help?]

1 - Very often
2 - Fairly often
3 - Not too often
4 - Never   GO TO SS1c
6 - Never needed help   GO TO SS1c

SS1a. How much help are they to you? Would you say a great deal of help, some help, only a little help, or not very helpful at all?

1 - A great deal of help
2 - Some help
3 - Only a little help
4 - Not very helpful at all

SS1b. In what way are they most helpful to you?

SS1c. What type of help would you like from them that you are not getting?

Anticipated Support-Family

SS2.

<table>
<thead>
<tr>
<th></th>
<th>A Great Deal (1)</th>
<th>Some (2)</th>
<th>A Little (3)</th>
<th>None (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) If you were sick, how much would the people in your family be willing to help out? Would you say a great deal, some, a little, or none?</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>b) If you had a problem or were faced with a difficult situation, how much comfort would they be willing to give you?</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
<tr>
<td>c) If you needed to know where to go to get help with a problem you were having, how much would they be willing to help out?</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
<td>[ ]</td>
</tr>
</tbody>
</table>
SS3. How often do you help out people in your family -- including parents, brothers and sisters, grandparents, aunts, uncles, cousins and so on? Would you say very often, fairly often, not too often, or never? [IWR PROBE: IF “NEVER” ASK – Is that because they never needed help?]

1 - Very often  
2 - Fairly often  
3 - Not too often  
4 - Never    GO TO SS4  
5 - Never needed help   GO TO SS4

SS3a. How much help are you to them? Would you say a great deal of help, some help, only a little help, or not very helpful at all?

1 - A great deal of help  
2 - Some help  
3 - Only a little help  
4 - Not very helpful at all

SS3b. In what ways are you most helpful?

Family Network  NSBA and NSBA Panel

SS4. (RB PG 43) How often do you see, write, talk on the telephone with, or e-mail family or relatives who do not live with you? Would you say nearly everyday, at least once a week, a few times a month, at least once a month, a few times a year, hardly ever or never?

1 - Nearly everyday (4 or more times a week)  
2 - At least once a week (1 to 3 times)  
3 - A few times a month (2 to 3 times)  
4 - At least once a month  
5 - A few times a year  
6 - Hardly ever  
7 – Never

SS5. How close do you feel towards your family members—very close, fairly close, not too close or not close at all?

1 - Very close  
2 - Fairly close  
3 - Not too close  
4 - Not close at all
SS6. Would you say your family members are very close in their feelings toward each other, fairly close, not too close, or not close at all?

1 - Very close  
2 - Fairly close  
3 - Not too close  
4 - Not close at all

SS7. How satisfied are you with the quality of the relationships you have with the people in your family? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

1 - Very satisfied  
2 - Somewhat satisfied  
3 - Somewhat dissatisfied  
4 - Very dissatisfied

SS8. Think about the things you do for people in your family and the things they do for you, would you say you give more, you get more, or is it about the same?

1 - Give more  
2 – Get more  
3 – About the same

Receive Emotional and Tangible Support

<table>
<thead>
<tr>
<th>SS9.</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not too Often (3)</th>
<th>Never (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>How often do your family members make you feel loved and cared for? Would you say very often, fairly often, not too often, or never?</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>b)</td>
<td>… listen to you talk about your private problems and concerns?</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>c)</td>
<td>… express interest and concern in your well-being?</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>d)</td>
<td>… provide you with transportation? [IWR PROBE: IF “NEVER” ASK – Was that because you never needed transportation?]</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>e)</td>
<td>… help you financially? [IWR PROBE: IF “NEVER” ASK – Was that because you never needed help?]</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>Question</td>
<td>Very Often (1)</td>
<td>Fairly Often (2)</td>
<td>Not too Often (3)</td>
<td>Never (4)</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>----------------</td>
<td>------------------</td>
<td>-------------------</td>
<td>-----------</td>
</tr>
<tr>
<td>f) (IF R HAS CHILD)… help you with child care or babysitting? [IWR PROBE: IF “NEVER” ASK – Was that because you never needed help?]</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Provide Emotional and Tangible Support**

<table>
<thead>
<tr>
<th>SS10. How about the things you do for your immediate and extended family members. How often do you…</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not too Often (3)</th>
<th>Never (4)</th>
<th>Never Needed Help (6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) … make your family feel loved and cared for?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) … listen to them about their private problems and concerns?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) … express interest and concern in their well-being.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) … help them with regular chores such as shopping, cleaning or yard work? [IWR PROBE: IF “NEVER” ASK – Was that because they never needed help?]</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e) … give them financial assistance? [IWR PROBE: IF “NEVER” ASK – Was that because they never needed help?]</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f) … help them with childcare or babysitting? [IWR PROBE: IF “NEVER” ASK – Was that because they never needed help?)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

**Negative Support – Burden, Interaction**

<table>
<thead>
<tr>
<th>SS11. Now some other questions about your immediate and extended family. How often do your family members…</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not too Often (3)</th>
<th>Never (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) … make too many demands on you?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) … criticize you and the things you do?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) … try to take advantage of you?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
**SS11_5. INTERVIEWER CHECKPOINT** (Refer to DM9)

- ☐ 1 - R’s Mother/Woman who raised R is still living, DM9a equals 1  ➔ GO TO SS12
- ☐ 2 - All Others  ➔ GO TO SS12_5

**Teen Mom Study**

<table>
<thead>
<tr>
<th>SS12. (RB PG 8) Please indicate the extent to which you agree or disagree with the following statements.</th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Neither Agree Nor Disagree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) My (FILL DM9) is always there when I need her.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) I feel that I can tell my (FILL DM9) just about everything.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) I feel that my (FILL DM9) and I can share our problems with each other.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) I feel that my (FILL DM9) and I can share our feelings with each other.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e) My (FILL DM9) and I are much closer than most mothers and (daughters/sons).</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f) I have a lot of respect for my (FILL DM9).</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>g) My (FILL DM9) and I have a good relationship.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h) My (FILL DM9) is often critical of me.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>i) I sometimes fight or argue with my (FILL DM9).</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>j) My relationship with my (FILL DM9) sometimes makes me feel tense.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>k) My (FILL DM9) often criticizes my friends.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>l) (IF R HAS CHILD) My (FILL DM9) often criticizes my baby's (father/mother).</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>m) (IF R HAS CHILD) My (FILL DM9) and I often disagree about raising the baby.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
SS12_5. INTERVIEWER CHECKPOINT (Refer to DM10)

☐ 1 – R’s Father/Man who raised R is still living, DM10a equals 1 ➔ GO TO SS13

☐ 2 – All Others ➔ GO TO SS14

<table>
<thead>
<tr>
<th>SS13. (RB PG 8) Please indicate the extent to which you agree or disagree with the following statements.</th>
<th>Strongly Agree (1)</th>
<th>Agree (2)</th>
<th>Neither Agree Nor Disagree (3)</th>
<th>Disagree (4)</th>
<th>Strongly Disagree (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) My (FILL DM10) is always there when I need him.</td>
<td>☐</td>
<td>☐</td>
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<td>☐</td>
<td>☐</td>
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<tr>
<td>b) I feel that I can tell my (FILL DM10) just about everything.</td>
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<td>☐</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>c) I feel that my (FILL DM10) and I can share our problems with each other.</td>
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<td>☐</td>
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<td>☐</td>
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<tr>
<td>d) I feel that my (FILL DM10) and I can share our feelings with each other.</td>
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</tr>
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<td>e) My (FILL DM10) and I are much closer than most fathers and (daughters/sons).</td>
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<td>f) I have a lot of respect for my (FILL DM10).</td>
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<td>g) My (FILL DM10) and I have a good relationship.</td>
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<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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<td>☐</td>
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<td>j) My relationship with my (FILL DM10) sometimes makes me feel tense.</td>
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<td>☐</td>
<td>☐</td>
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<td>k) My (FILL DM10) often criticizes my friends.</td>
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<td>m) (IF R HAS CHILD) My (FILL DM10) and I often disagree about raising the baby.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
**Foster Care History: Bill Wilson's Survey**

SS14. Do you currently live in foster care?

1 – Yes  **GO TO SS14b**
5 – No

SS14a. Did you ever live in foster care or in a group home?

1 - Yes  **GO TO SS15**
5 – No

SS14b. How old were you when you started living in foster care for the first time?

_______________________________ AGE IN YEARS

SS14c. How many years were you in foster care?

_______________________________ NUMBER OF YEARS

**Friendship Network NSBA and NSBA Panel**

SS15. (RB PG 43) How often do you see, write, talk on the telephone with, or e-mail your friends? Would you say nearly everyday, at least once a week, a few times a month, at least once a month, a few times a year, hardly ever, or never?

1 - Nearly everyday (4 or more times a week)
2 - At least once a week (1 to 3 times)
3 - A few times a month (2 to 3 times)
4 - At least once a month
5 - A few times a year
6 - Hardly ever
7 – Never
9 – (R VOLUNTEERED) “I have no friends”  **GO TO SS27**

SS16. How often do your friends help you out? Would you say very often, fairly often, not too often, or never? [IWR PROBE: IF “NEVER” ASK – Was that because you never needed help?]

1 – Very often
2 - Fairly often
3 – Not too often
4 – Never
6 – Never needed help

SS17. How often do you help out your friends? Would you say very often, fairly often, not too often, or never? [IWR PROBE: IF “NEVER” ASK – Was that because they never needed help?]

1 – Very often
2 – Fairly often
3 – Not too often
4 – Never
6 – Never needed help
SS18. How close do you feel towards your friends? Would you say very close, fairly close, not too close or not close at all?

1 – Very close
2 – Fairly close
3 – Not too close
4 – Not close at all

SS19. Would you say your friends are very close in their feelings toward each other, fairly close, not too close, or not close at all?

1 – Very close
2 – Fairly close
3 – Not too close
4 – Not close at all

SS20. How satisfied are you with the quality of the relationships you have with your friends? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

1 - Very satisfied
2 - Somewhat satisfied
3 - Somewhat dissatisfied
4 - Very dissatisfied

SS21. Think about the things you do for your friends and the things they do for you. Would you say you give more, you get more, or is it about the same?

1 - Give more
2 - Get more
3 - About the same

**Received Emotional and Tangible Support**

<table>
<thead>
<tr>
<th>SS22.</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not too Often (3)</th>
<th>Never (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) How often do your friends make you feel loved and cared for? Would you say very often, fairly often, not too often, or never?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) How often do they listen to you talk about your private problems and concerns?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>c) … express interest and concern in your well-being?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>d) … provide you with transportation? [IWR PROBE: IF “NEVER” ASK – Why was that?] CODE REFUSED TO GIVE HELP AS ‘4’ AND COULDN’T PROVIDE OR NEVER NEEDED AS ‘6’</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

Never Needed Help (6)
### Provided Emotional and Tangible Support

**SS23. How about the things you may do for your friends.**

<table>
<thead>
<tr>
<th>a) How often do you make your friends feel loved and cared for?</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not too Often (3)</th>
<th>Never (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>b) … listen to them about their private problems and concerns?</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>c) … express interest and concern in their well-being.</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
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<tr>
<td>d) … provide them with transportation? [IWR PROBE: IF “NEVER” ASK – Why was that?] CODE REFUSED TO GIVE HELP AS ‘4’ AND COULDN’T PROVIDE OR NEVER NEEDED AS ‘6’</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>e) … give them financial assistance? [IWR PROBE: IF “NEVER” ASK – Was that because no one ever asked for help?)</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
</tbody>
</table>

### Negative Interaction – Burden, Interaction

**SS24. Now some other questions about your friends. How often do your friends…**

<table>
<thead>
<tr>
<th>a) … make too many demands on you?</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Not too Often (3)</th>
<th>Never (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>b) … criticize you and the things you do?</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
<tr>
<td>c) … try to take advantage of you?</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
<td>❑</td>
</tr>
</tbody>
</table>
**Anticipated Support-Friends**

<table>
<thead>
<tr>
<th>SS25.</th>
<th>A Great Deal (1)</th>
<th>Some (2)</th>
<th>A Little (3)</th>
<th>None (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) If you were sick, how much would your friends be willing to help out? Would you say a great deal, some, a little, or none?</td>
<td>□</td>
<td></td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) If you had a problem or were faced with a difficult situation, how much comfort would they be willing to give you?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>c) If you needed to know where to go to get help with a problem you were having, how much would they be willing to help out?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

**Peer Deviance – NSHS Adolescent Interview**

<table>
<thead>
<tr>
<th>SS26.</th>
<th>All (1)</th>
<th>Most (2)</th>
<th>Some (3)</th>
<th>None (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) …smoke cigarettes?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) …drink alcohol?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>c) …use marijuana or other drugs?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>d) …ever carry a knife, gun or weapon?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>e) …ever get into physical fights?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>f) …get involved in school activities like school clubs, teams, or projects?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>g) …ever steal things?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>h) …ever sell drugs?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>i) …ever on purpose destroy other people’s property?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>j) …ever get really sad or depressed for two weeks or longer?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>k) …are very nervous or anxious people?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>l) …have failed a grade at school?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>m) …have dropped out of school?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>n) …were ever arrested?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>
**Fictive Kin -- NSBA**

**SS27.** How many people are close to your family who are not really blood or marriage related but who are treated just like a relative?

_________NUMBER ➔ IF NUMBER =0 GO TO SS28

**SS27a.** How often do they help you out? (Would you say very often, fairly often, not too often or never?)

1 – Very Often  
2 – Fairly Often  
3 – Not Too Often  
4 – Never  
6 – (R VOLUNTEERED): Never Needed Help

**SS28.** Are you currently married, living with a partner, separated, divorced, widowed or have you never been married?

1 - Married  
2 - Living with a Partner  
3 - Separated ➔ GO TO SS29  
4 - Divorced ➔ GO TO SS29  
5 - Widowed ➔ GO TO SS29  
6 - Never Married ➔ GO TO SS29

**SS28a.** How long have you been (married/living with a partner)? _____ MOS _____ YRS  
GO TO SS30

**SS29.** Do you have a (boyfriend/girlfriend) at this time?

1 - Yes  
5 – No ➔ GO TO SS33

**SS29a.** How long? _____ MOS _____ YRS

**SS30.** (RB PG 44) What racial group best describes your (spouse/boyfriend/girlfriend)?

1 – Black/African American  
2 – Caribbean Black  
3 – White  
4 – Hispanic  
5 – Asian  
6 – American Indian  
7 – Other (Specify)_______________
### SS31. (IF NEC: a lot, some, a little, or not at all?)

<table>
<thead>
<tr>
<th>Question</th>
<th>A Lot (1)</th>
<th>Some (2)</th>
<th>Little (3)</th>
<th>Not At All (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) How much does your (spouse/partner) really care about you – a lot, some, a little, or not at all?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) How much does your (spouse/partner) understand the way you feel about things?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) How much can you rely on your (spouse/partner) for help if you have a serious problem?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) How much can you share secrets and private feelings or open up to your (spouse/partner) if you need to talk about your worries?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

### SS32. (IF NEC: often, sometimes, not very often, or never?)

<table>
<thead>
<tr>
<th>Question</th>
<th>Often (1)</th>
<th>Some (2)</th>
<th>Not Very Often (3)</th>
<th>Never (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) How often does your (spouse/partner) make too many demands on you – often, sometimes, not very often, or never?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) How often does your (spouse/partner) criticize you?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) How often does your (spouse/partner) let you down when you are counting on (him/her)?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) How often does your (spouse/partner) get on your nerves?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e) How often do the two of you argue or fight?</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

### SS32_1 INTERVIEWER CHECKPOINT

- ☐ 1 – DM5_1 EQUALS 1 ‘YES’ ➔ GO TO SS36
- ☐ 2 – DM5_1 EQUALS 5 ‘NO’ ➔ GO TO SS33
**Fertility # of Births DAS**

SS33. Have you ever (been pregnant/fathered any children)?

1 – Yes
2 – No ➔ **GO TO NEXT SECTION**

SS34. How many living children do you have?

_________________________ NUMBER

SS35. **INTERVIEWER CHECKPOINT** (Refer to SS34)

- [ ] 1 - SS34 equals 0 ➔ **GO TO NEXT SECTION**
- [ ] 2 - All others ➔ **GO TO SS36**

SS36. Now I want to ask you a few questions about your (child/children). How old were you when your first child was born?

_________________________ AGE IN YEARS

SS37. How old was the (mother/father) of your first child when the child was born? _____ AGE

SS38. **INTERVIEWER CHECKPOINT**

- [ ] 1 - Respondent is Female/Mother ➔ **GO TO SS39**
- [ ] 2 - Respondent is Male/Father ➔ **GO TO SS46**

**Non-Residential Fathers Bill Wilson**

(ASK WOMEN ONLY)

SS39. Do you have any children living with you whose biological father is alive but not living with you?

1 – Yes
5 – No ➔ **GO TO NEXT SECTION**

**IF DM5.1a = 1** ➔ **GO TO SS40**

SS39a. How many? _________(NUMBER)
For the following questions please think about your youngest child whose father is alive and does not live with you.

SS40. Where does your child’s father live? __________________________

(IWR: IF R GIVES STREET NAME OR CITY PROBE: “DOES HE LIVE ALL ALONE OR WITH PARENTS”)

OPEN ENDED PRE-CODED RESPONSES

1 – On Own
2 – Parents/Family
3 – School/College
4 – Military
5 – Jail
6 – Homeless
7 – Other SPECIFY:_______________

SS41. (RB PG 45) How often does that child spend time with (his/her) biological father? Would you say nearly everyday, at least once a week, a few times a month, a few times a year or never?

1 – Nearly everyday
2 – At least once a week
3 - A few times a month
4 - A few times a year
5 – Never

GO TO SS43

SS42. In the past twelve months, has the child’s father taken care of the child for two weeks or more at any time, such as during the summer?

1 – Yes
5 – No

SS43. (RB PG 45) In the past twelve months, how often did you see, write, talk on the telephone with or email the father? Would you say nearly everyday, at least once a week, a few times a month, a few times a year, or never?

1 – Nearly everyday
2 – At least once a week
3 - A few times a month
4 - A few times a year
5 – Never

GO TO SS43

SS44. (RB PG 45) How often do the child’s father’s relatives see or take care of the child now? (Would you say nearly everyday, at least once a week, a few times a month, a few times a year, or never?)

1 – Nearly everyday
2 – At least once a week
3 - A few times a month
4 - A few times a year
5 - Never
SS45. How well do you and the child’s father get along together? Would you say very well, pretty well, not very well, not well at all or do you never see him?

1 – Very well
2 – Pretty well
3 – Not very well
4 – Not well at all
6 – Never see him

GO TO NEXT SECTION

**Non-Residential Fathers Bill Wilson (Ask Men Only)**

SS46. Do you have any children who do not live with you?

1 – Yes
5 – No

GO TO NEXT SECTION

SS46a. How many? ________(NUMBER)

I would like to ask about your (youngest) child who does not live with you.

SS47. (RB PG 45) How often do you spend time with this child? Would you say nearly everyday, at least once a week, a few times a month, a few times a year, or never?

1 – Nearly everyday
2 – At least once a week
3 - A few times a month
4 - A few times a year
5 – Never

SS48. (RB PG 45) In the past twelve months, how often did you see, write, talk on the telephone with or email the mother of your child? Would you say nearly everyday, at least once a week, a few times a month, a few time a year, or never?

1 – Nearly everyday
2 – At least once a week
3 - A few times a month
4 - A few times a year
5 - Never

SS49. (RB PG 45) How often do your relatives see or take care of the child now?

1 – Nearly everyday
2 – At least once a week
3 - A few times a month
4 - A few times a year
5 – Never
SS50. How well do you and the child’s mother get along together? Would you say very well, pretty well, not very well, not well at all or do you never see her?

1 – Very well
2 – Pretty well
3 – Not very well
4 – Not well at all
6 – Never see her

SS51. In the past twelve months, have you taken care of the child for two weeks or more at any time, such as during the summer?

1 – Yes
5 – No
Now I would like to ask you about some different experiences you may or may not have had.

<table>
<thead>
<tr>
<th>INTERVIEWER: READ FOLLOWING QUESTIONS SLOWLY</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SC20. Have you ever in your life had an attack of fear or panic when all of a sudden you felt very frightened, nervous, or uneasy?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>
| *SC20a. Have you ever had an attack when all of a sudden  
  • you became very uncomfortable,  
  • you became short of breath, dizzy, sick to your stomach, or your heart beat very fast,  
  • or you thought that you might lose control, die, or go crazy? | 1       | 5      | 9      | 8      |
| *SC20_1 Have you ever in your life had attacks of anger when all of a sudden you lost control and broke or smashed something worth more than a few dollars? | 1       | 5      | 9      | 8      |
| *SC20_2 Have you ever had attacks of anger when all of a sudden you lost control and hit or tried to hurt someone? | 1       | 5      | 9      | 8      |
| *SC20_3 Have you ever had attacks of anger when all of a sudden you lost control and threatened to hit or hurt someone? | 1       | 5      | 9      | 8      |
| *SC21. Have you ever in your life had a time lasting a few days or longer when most of the day you felt sad, empty or depressed? | 1       | 5      | 9      | 8      |
| *SC22. Have you ever had a time lasting a few days or longer when most of the day you felt very discouraged or hopeless about how things were going in your life? | 1       | 5      | 9      | 8      |
| *SC23. Have you ever had a time lasting a few days or longer when you lost interest and became bored with most things you usually enjoy like work, hobbies, and personal relationships? | 1       | 5      | 9      | 8      |
| *SC24. Some people have times lasting anywhere between a few hours and a few weeks when they feel much more excited and full of energy than usual. Their minds go too fast. They talk a lot. They are very restless or unable to sit still and they sometimes do things that are unusual for them, such as taking many risks or spending too much money. Have you ever had a time like this lasting several hours or longer? | 1       | 5      | 9      | 8      |
| *SC25. Have you ever had a time lasting a few days or longer when most of the time you were very irritable, grouchy, or in a cranky mood? | 1       | 5      | 9      | 8      |
| *SC25a. Have you ever had a time lasting anywhere between a few hours and a few weeks when most of the time you were so irritable or grouchy that you either started arguments, shouted a lot, or hit people? | 1       | 5      | 9      | 8      |
| *SC26. Did you ever have a time in your life when you were a “worrier” – that is, when you worried a lot more about things other people with the same problems as you? | 1       | 5      | 9      | 8      |
| *SC26a. Did you ever have a time in your life when you were much more nervous or anxious than most other people with the same problems as you? | 1       | 5      | 9      | 8      |
| *SC26b. Did you ever have a time lasting one month or longer when you were anxious and worried most days? | 1       | 5      | 9      | 8      |
INTELLIGER: READ FOLLOWING QUESTIONS SLOWLY.

*SC27. (RB, PG 9) The next questions are about things that make some people afraid even though they know there is no real danger. Looking at page 9 in your booklet, was there ever a time in your life when you felt a lot more afraid than most people of any of the following things?

<table>
<thead>
<tr>
<th>Question</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (8)</th>
<th>RF (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SC27a. First, bugs, snakes, dogs, or any other animals?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(KEY PHRASE: animals)</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SC27b. Second, still water, like in a swimming pool or a lake, or weather events, like storms, thunder, or lightning?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(KEY PHRASE: storms or still water)</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SC27c. Third, going to the dentist or doctor, getting a shot or injection, seeing blood or injury, or being in a hospital or doctor’s office?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(KEY PHRASE: blood, injuries, or medical experiences)</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SC27d. Fourth, closed spaces, like caves, tunnels, closets, or elevators?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(KEY PHRASE: closed spaces)</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SC27e. Fifth, high places like roofs, balconies, bridges, or staircases?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(KEY PHRASE: high places)</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SC27f. Sixth, fear of flying or of airplanes?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(KEY PHRASE: flying)</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>

*SC27_1. INTERVIEWER CHECKPOINT (SEE *SC27 SERIES):

AT LEAST ONE RESPONSE CODED ‘1’ .................. 1
ALL OTHERS .............................................................. 5  GO TO *SC29

*SC27_2. You feared (KEY PHRASE OF ENDORSED ITEMS IN *SC27 SERIES). Was there ever a time in your life when you became very upset or nervous whenever you were faced with (this situation/one of these situations)?

YES ................................................. 1
NO ................................................... 5
DON’T KNOW ........................................ 9
REFUSED ............................................. 8

*SC27_3. Did you ever stay away from (the situation/these situations) whenever you could because of your fear?

YES ................................................. 1
NO ................................................... 5
DON’T KNOW ........................................ 9
REFUSED ............................................. 8

*SC28. INTERVIEWER CHECKPOINT: (SEE *SC27_2, SC27_3)

*SC27_2 EQUALS ‘1’ OR *SC27_3 EQUALS ‘1’ ........................................... 1
ALL OTHERS .......................................................... 2
**INTERVIEWER: READ FOLLOWING QUESTIONS SLOWLY.**

<table>
<thead>
<tr>
<th>SC29. (RB, PG 10) Looking at page 10 in your booklet, was there ever a time in your life when you felt very afraid or really, really shy with people, like meeting new people, going to parties, going on a date, or using a public bathroom?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (8)</th>
<th>RF (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SC29a. Was there ever a time in your life when you felt very afraid or uncomfortable when you had to do something in front of a group of people, like giving a speech or speaking in class?</td>
<td>YES (1)</td>
<td>NO (5)</td>
<td>DK (8)</td>
<td>RF (9)</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>

*SC29_1. Was there ever a time in your life when you became very upset or nervous (IF *SC29* EQUALS ‘1’: whenever you were in a social situation/ ALL OTHERS: when you had to do something in front of a group)?

- YES ................................................. 1
- NO ................................................... 5
- DON’T KNOW ........................................ 9
- REFUSED .......................................... 8

*SC29_2. Did you ever stay away from (IF *SC29* EQUALS ‘1’: social situations/ ALL OTHERS: situations where you had to do something in front of a group) whenever you could because of your fear?

- YES ................................................. 1
- NO ................................................... 5
- DON’T KNOW ........................................ 9
- REFUSED .......................................... 8

**SC30. (RB, PG 3) Looking at the bottom of page 3 in your booklet, was there ever a time in your life when you felt afraid of either being in crowds, going to public places, traveling by yourself, or traveling away from home?**

<table>
<thead>
<tr>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (8)</th>
<th>RF (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>8</td>
</tr>
</tbody>
</table>

*SC30_1. Was there ever a time in your life when you became very upset or nervous whenever you were in crowds, public places, or traveling?

- YES ................................................. 1
- NO ................................................... 5
- DON’T KNOW ...................................... 9
- REFUSED .......................................... 8

*SC30_2. Did you ever stay away from these situations whenever you could because of your fear?

- YES ................................................. 1
- NO ................................................... 5
- DON’T KNOW ...................................... 9
- REFUSED .......................................... 8
*SC31. The next question is about concentration problems that usually start before the age of seven. These problems include not being able to keep your mind on what you are doing, losing interest very quickly in games or work, trouble finishing what you started without being distracted, and not listening when people spoke to you. During your first years at school—say between the ages of kindergarten and second grade -- was there ever a period lasting six months or longer when you had a lot more trouble with problems of this sort than most children?

YES ..................................................................1
NO ....................................................................5
DON'T KNOW ...............................................9
REFUSED........................................................8

*SC32. Some young kids are very restless and fidgety and so impatient that they often interrupt people and have trouble waiting their turn. Did you ever have a time before the age of seven lasting six months or longer when you were like that?

YES ..................................................................1
NO ....................................................................5
DON'T KNOW ...............................................9
REFUSED........................................................8

*SC33. Did you ever have a period lasting six months or longer when you often did things that got you in trouble with adults such as losing your temper, arguing or talking back to adults, refusing to do what your teachers or parents asked you to do, annoying people on purpose, or being grouchy or irritable?

YES ..................................................................1
NO ....................................................................5
DON'T KNOW ...............................................9
REFUSED........................................................8

*SC33_1. Many children and teenagers go through periods when they do things adults don’t want them to do, like lying, stealing, or breaking rules. Did you ever go through a period during your childhood or teenage years when you did any of these things?

YES ..................................................................1 GO TO *SC34
NO ....................................................................5
DON'T KNOW ...............................................9
REFUSED........................................................8

*SC33_2. Did you ever go through a period where you either broke into cars, set fires, or destroyed property on purpose?

YES ..................................................................1 GO TO *SC34
NO ....................................................................5
DON'T KNOW ...............................................9
REFUSED........................................................8

*SC33_3. Did you ever run away from home, or repeatedly play hooky from school, or often stay out much later at night than you were supposed to?

YES ..................................................................1
NO ....................................................................5
DON'T KNOW ...............................................9
REFUSED........................................................8
*SC34. Some young kids get very upset when they are separated from their mother or the person who is most important to them. Examples include getting very upset when they are away from these people, worrying a lot that something bad will happen to separate these people from them, or wanting to stay home from school or not go other places without them. Did you ever feel this way for a month or longer when you were more than five years old?

INTERVIEWER: IF ONLY WHEN 5 OR YOUNGER, CODE “NO”.

YES ................................................................. 1  
NO ............................................................... 5  
DON’T KNOW ............................................. 9  
REFUSED ....................................................... 8


FOLLOW SKIP FOR FIRST ENDORSED ITEM.

*SC21 EQUALS ‘1’ ................................................................. 1  GO TO *D1, NEXT SECTION
*SC22 EQUALS ‘1’ ................................................................. 2  GO TO *D2
*SC23 EQUALS ‘1’ ................................................................. 3  GO TO *D9
*SC24 EQUALS ‘1’ ................................................................. 4  GO TO *M1
*SC25a EQUALS ‘1’ ............................................................... 5  GO TO *M5
*SC25 EQUALS ‘1’ ................................................................. 6  GO TO *IR1 INTRO 2
*SC20 EQUALS ‘1’ ............................................................... 7  GO TO *PD1 INTRO 1
*SC20a EQUALS ‘1’ ............................................................... 8  GO TO *PD1 INTRO 2

*SC29 EQUALS ‘1’ OR *SC29a EQUALS ‘1’ .......................... 10  GO TO *SO1
*SC30 EQUALS ‘1’ ............................................................... 11  GO TO *AG1
*SC26 EQUALS ‘1’ .............................................................. 12  GO TO *G1 INTRO 1
*SC26a EQUALS ‘1’ .......................................................... 13  GO TO *G1 INTRO 2
*SC26b EQUALS ‘1’ ......................................................... 14  GO TO *G1 INTRO 3
ALL OTHERS ....................................................................... 15  GO TO *IED1
DEPRESSION (*D)

*D1. Earlier in the interview, you mentioned having periods of time that lasted several days or longer when you felt sad, empty, or depressed most of the day. During times of this sort, did you ever feel discouraged about how things were going in your life?

YES.................................1
NO.................................5  GO TO *D1b
DON’T KNOW.....................9  GO TO *D1b
REFUSED..........................8  GO TO *D1b

*D1a. During the times of being sad, empty, or depressed, did you ever lose interest and become really bored with most things like school, work, hobbies, and other things that are usually fun for you, like listening to music, watching TV, movies, or sports, playing computer games, or going out with friends?

YES .........................1  GO TO *D3
NO ...........................5  GO TO *D4
DON’T KNOW ...............9  GO TO *D4
REFUSED ......................8  GO TO *D4

*D1b. During the times of being sad, empty, or depressed, did you ever lose interest and become really bored with most things like school, work, hobbies, and other things that are usually fun for you, like listening to music, watching TV, movies, or sports, playing computer games, or going out with friends?

YES .........................1  GO TO *D5
NO ...........................5  GO TO *D6
DON’T KNOW ...............9  GO TO *D6
REFUSED ......................8  GO TO *D6

*D2. Earlier in the interview you mentioned having periods of time that lasted several days or longer when you felt discouraged about how things were going in your life. During times like this, did you ever lose interest and become really bored with most things like school, work, hobbies, and other things that are usually fun for you, like listening to music, watching TV, movies, or sports, playing computer games, or going out with friends?

YES.................................1  GO TO *D7
NO.................................5  GO TO *D8
DON’T KNOW.....................9  GO TO *D8
REFUSED..........................8  GO TO *D8

*D3. INTERVIEWER INSTRUCTION:

USE KEY PHRASE “SAD, DISCOURAGED, OR REALLY BORED” THROUGHOUT THE SECTION
GO TO *D12

*D4. INTERVIEWER INSTRUCTION:

USE KEY PHRASE “SAD OR DISCOURAGED” THROUGHOUT THE SECTION
GO TO *D12
**D5.** INTERVIEWER CHECKPOINT: USE KEY PHRASE “SAD OR REALLY BORED” THROUGHOUT THE SECTION
GO TO *D12

**D6.** INTERVIEWER CHECKPOINT:

USE KEY PHRASE “SAD” THROUGHOUT THE SECTION
GO TO *D12

**D7.** INTERVIEWER CHECKPOINT:

USE KEY PHRASE “DISCOURAGED OR REALLY BORED” THROUGHOUT THE SECTION
GO TO *D12

**D8.** INTERVIEWER CHECKPOINT:

USE KEY PHRASE “DISCOURAGED” THROUGHOUT THE SECTION
GO TO *D12

**D9.** Earlier in the interview, you mentioned having periods of time that lasted several days or longer when you lost interest and became really bored with most things like school, work, hobbies, and other things you usually enjoy. Was there ever a time when you felt this way most of the day almost every day for two weeks or longer?

YES .................................................... 1  GO TO *D11
NO...................................................... 5
DON'T KNOW ................................. 9
REFUSED .................................  8

**D9a.** What is the longest period of time you ever had when you became really bored with most things you usually enjoy?

INTERVIEWER: “LESS THAN ONE DAY” CODE 0

_________ NUMBER

CIRCLE UNIT
OF TIME:      DAYS ... 1       WEEKS ....2       MONTHS ....3       YEARS .... 4

PROBE DK: Was it three days or longer?

DON’T KNOW ................................. 999
REFUSED ................................. 998

USE THE KEY PHRASE “REALLY BORED” THROUGHOUT THE SECTION  GO TO *D10

**D10.** INTERVIEWER CHECKPOINT: (SEE *D9a)

DURATION OF 3 DAYS OR LONGER ................................................ 1  GO TO *D14
ALL OTHERS ........................................................................... 2  GO TO *D88

44
*D11. INTERVIEWER INSTRUCTION: USE KEY PHRASE “REALLY BORED” THROUGHOUT THE SECTION
GO TO *D16

*D12. Did you ever have a period of time when you felt (sad/or/discouraged/or/bored) that lasted most of the day, almost every day, for two weeks or longer?

YES................................................. 1 GO TO *D16
NO .................................................. 5
DON'T KNOW .............................. 9
REFUSED ................................. 8

*D12a. How long was the longest period of time you ever had when you were (sad/or/discouraged/or/bored) most of the day?
INTERVIEWER: “LESS THAN ONE DAY” CODE 0

____________________ DAYS

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

*D13. INTERVIEWER CHECKPOINT: (SEE *D12a)

DURATION OF 3 DAYS OR LONGER.............................................. 1
ALL OTHERS....................................................................................... 2 GO TO *D88

*D14. Did you ever have a year or more in your life when just about every month you had a time lasting several days or longer when you felt (sad/or/discouraged/or/bored)?

YES...................................1
NO ....................................5 GO TO *D88
DON'T KNOW ............. 9 GO TO *D88
REFUSED .................... 8 GO TO *D88

*D15. Think of times lasting several days or longer when (this problem/these problems) with your mood (was/were) most severe and frequent. During those times, did your feelings of (sadness/or/discouragement/or/lack of interest) usually last less than one hour a day, between 1 and 3 hours, between 3 and 5 hours, or more than 5 hours?

LESS THAN 1 HOUR ......................... 1 GO TO *D88
BETWEEN 1 AND 3 HOURS ............. 2
BETWEEN 3 AND 5 HOURS ............. 3
MORE THAN 5 HOURS .................. 4
DON'T KNOW ............................. 9
REFUSED ................................. 8

INTERVIEWER: ASK ABOUT PERIODS LASTING "SEVERAL DAYS OR LONGER" FOR THE REMAINDER OF THE SECTION.
GO TO *D17
*D16. Think of times lasting two weeks or longer when (this problem/these problems) with your mood (was/were) most severe and frequent. During those times, did your feelings of (sadness/or/discouragement/or/lack of interest) usually last less than one hour a day, between 1 and 3 hours, between 3 and 5 hours, or more than 5 hours?

LESS THAN 1 HOUR ....................... 1 GO TO *D88
BETWEEN 1 AND 3 HOURS ............... 2
BETWEEN 3 AND 5 HOURS ............... 3
MORE THAN 5 HOURS .................... 4
DON’T KNOW ............................... 9
REFUSED ................................. 8

INTERVIEWER: ASK ABOUT PERIODS LASTING "TWO WEEKS OR LONGER" FOR THE REMAINDER OF THE SECTION.

*D17. How strong were your bad feelings during those times -- mild, moderate, severe, or very severe?

MILD ........................................... 1
MODERATE ................................. 2
SEVERE ....................................... 3
VERY SEVERE .............................. 4
DON’T KNOW ............................... 9
REFUSED ................................. 8

*D18. How often, during those times, did you feel so bad that nothing could cheer you up -- often, sometimes, not very often, or never?

OFTEN ........................................ 1
SOMETIMES ............................... 2
NOT VERY OFTEN ....................... 3
NEVER ....................................... 4
DON’T KNOW ............................... 9
REFUSED ................................. 8

*D19. How often, during those times, did you feel so bad that you could not carry out your daily activities -- often, sometimes, not very often, or never?

OFTEN ........................................ 1
SOMETIMES ............................... 2
NOT VERY OFTEN ....................... 3
NEVER ....................................... 4
DON’T KNOW ............................... 9
REFUSED ................................. 8

*D20. INTERVIEWER CHECKPOINT: (SEE *D17, *D18, *D19)

*D17 EQUALS ‘1’ AND *D18 EQUALS ‘4’ AND *D19 EQUAL ‘4’ .......... 1 GO TO *D88
ALL OTHERS........................................ 2
*D21. People who have times of feeling (sad/or/discouraged/or/bored) often have other problems at the same time. These include things like changes in sleep, eating, energy, the ability to keep their mind on things, feeling badly about themselves, and other problems. Did you ever have any of these problems during a time when you were (sad/or/discouraged/or/bored)?

YES ......................................................... 1
NO ........................................................... 5  GO TO *D88
DON'T KNOW ......................................... 9  GO TO *D88
REFUSED ................................................... 8  GO TO *D88

*D22. (READ SLOWLY) Can you think of the worst time when you felt (sad/or/discouraged/or/bored) for (several days/two weeks) or longer and also had these other problems at the same time?

YES .............................................................................. 1
NO ............................................................................... 5  GO TO *D22c
DON'T KNOW ........................................................... 9  GO TO *D22c
REFUSED .................................................................. 8  GO TO *D22c

*D22a. How old were you at that time?

__________ YEARS OLD
DON'T KNOW ....................... 999
REFUSED ......................... 998

*D22b. How long did that time last?

__________ NUMBER  GO TO *D24
CIRCLE UNIT OF TIME:  DAYS ......1    WEEKS...... 2    MONTHS..... 3    YEARS ...... 4
DON'T KNOW ................. 99  GO TO *D24
REFUSED ......................... 98  GO TO *D24

*D22c. Then think of the last time you felt (sad/or/discouraged/or/bored) and had other problems for (several days/two weeks) or longer. How old were you then?

__________ YEARS OLD
DON'T KNOW ....................... 999
REFUSED .............................. 998

*D22d. How long did that time last?

__________ NUMBER
CIRCLE UNIT OF TIME:  DAYS ......1    WEEKS...... 2    MONTHS..... 3    YEARS ...... 4
DON'T KNOW ................. 99
REFUSED ......................... 98
**D24.** (RB, PG 11. FOR EACH ITEM ENDORSED, ASK R TO MARK IT IN THE RB.) Look at page 4 in your booklet. In answering the next questions, think about the time of (several days/two weeks) or longer during that episode when your (sadness/or/discouragement/or/boredom) and other problems were worst. During that time, which of the following problems did you have most of the day almost every day:

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>D24a.</strong> Did you feel sad, empty, or depressed for most of the day?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>D24b.</strong> Did you feel so sad that nothing could cheer you up?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>D24c.</strong> During that time, did you feel discouraged about how things were going in your life?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>D24d.</strong> Did you feel hopeless about the future nearly every day?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>D24e.</strong> During that time, did you become bored with almost everything like school, work, hobbies, and things you like to do for fun?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>D24f.</strong> Did you feel like nothing was fun even when good things were happening?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**D25.** INTERVIEWER CHECKPOINT: (SEE *D24a-*D24f)

ONE OR MORE RESPONSES CODED ‘1’ .........................1
ALL OTHERS.........................................................2   GO TO *D88
<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*D26a. Did you eat much less than usual almost every day during that time?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>GO TO *D26e</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*D26b. Did you eat much more than usual almost every day?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26c. Did you gain weight without trying to during that time?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>IF R REPORTS BEING PREGNANT OR GROWING, CODE &quot;NO&quot; AND GO TO *D26g</td>
<td>GO TO *D26e</td>
<td>GO TO *D26e</td>
<td>GO TO *D26e</td>
<td></td>
</tr>
<tr>
<td>*D26d. How much did you gain?</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>__________ NUMBER</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CIRCLE UNIT OF MASS: POUNDS..............1</td>
<td>GO TO *26g</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KILOS..............2</td>
<td>GO TO *26g</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*D26e. Did you lose weight without trying to?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>IF R REPORTS BEING ON A DIET OR PHYSICALLY ILL, CODE &quot;NO&quot; AND GO TO *D26g</td>
<td>GO TO *D26g</td>
<td>GO TO *D26g</td>
<td>GO TO *D26g</td>
<td></td>
</tr>
<tr>
<td>*D26f. How much did you lose?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>__________ NUMBER</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CIRCLE UNIT OF MASS: POUNDS........1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>KILOS........2</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*D26g. Did you have a lot more trouble than usual either falling asleep or staying asleep most nights or waking too early most mornings?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>GO TO *D26i</td>
<td></td>
<td></td>
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<tr>
<td>*D26h. Did you sleep a lot more than usual?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>GO TO *D26j</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*D26i. Did you sleep much less than usual and still not feel tired or sleepy?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>YES (1)</td>
<td>NO (5)</td>
<td>DK (9)</td>
<td>RF (8)</td>
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<tr>
<td>*D26j. On most days, did you feel that you didn’t have much energy?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26k. During that time, did you have a lot more energy than usual most days?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26l. Did you feel as though you were talking or moving more slowly than usual on most days during that time?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26m. Did anyone else notice that you were talking or moving more slowly than usual?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26n. Were you so restless or jittery that you walked up and down or couldn't sit still?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26o. Did anyone else notice that you couldn’t sit still?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26p. On most days, did your thinking seem slower than usual or seem confusing?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26q. Did your thoughts seem to jump from one thing to another or to race through your head so fast that you couldn't keep track of them?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26r. On most days, did you have a lot more trouble keeping your mind on things than is normal for you?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26s. Were you unable to make decisions about things you ordinarily have no trouble deciding about?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26t. Did you lose your self-confidence?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26u. Did you feel that you were not as good as other people nearly every day?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26v. Did you feel totally worthless nearly every day?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26w. Did you feel guilty or blame yourself for things nearly every day?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Question</td>
<td>YES (1)</td>
<td>NO (5)</td>
<td>DK (9)</td>
<td>RF (8)</td>
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<tr>
<td>------------------------------------------------------------------------</td>
<td>---------</td>
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</tr>
<tr>
<td>*D26x. Did you feel irritable, grouchy, or in a bad mood almost every day?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26y. Did you feel nervous or worried on most days?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26z. During that time, did you have any sudden attacks of intense fear or panic?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26aa. Did you often think a lot about death, either your own, someone else’s, or death in general?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26bb. During that time, did you ever think that it would be better if you were dead?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26cc. Did you think about killing yourself?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26dd. Did you make a plan to kill yourself?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26ee. Did you make a suicide attempt or try to kill yourself?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26ff. Did you feel that you could not cope with your everyday responsibilities?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26gg. Did you feel like you wanted to be alone rather than spend time with friends or relatives?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26hh. Did you feel less talkative than usual?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*D26ii. Did you cry a lot?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**D27.** INTERVIEWER CHECKPOINT: (SEE **D24** - **D26ee**)  
TWO OR MORE RESPONSES CODED ‘1’ ........................................ 1  
ALL OTHERS......................................................................................... 2   GO TO *D88
*D28. You mentioned having (two of/a number of) the problems I just asked you about. How much did your (sadness/or/discouragement/or/boredom) interfere or cause problems with your school work, your job, or your relationships with family and friends— not at all, a little, some, a lot, or extremely?

NOT AT ALL................................. 1   GO TO *D29a
A LITTLE ................................... 2
SOME......................................... 3
A LOT ........................................ 4
EXTREMELY .............................. 5
DON’T KNOW ............................ 9
REFUSED ................................. 8

*D28a. How often during that time were you unable to carry out your daily activities or to take care of yourself because of your (sadness/or/discouragement/or/boredom) – often, sometimes, not very often, or never?

OFTEN............................... 1
SOMETIMES .................... 2
NOT VERY OFTEN .......... 3
NEVER ..................... 4
DON’T KNOW .............. 9
REFUSED ................. 8

*D29a. Times of feeling (sadness/or/discouragement/or/boredom) sometimes occur as a result of physical causes such as physical illness or injury or the use of medication, drugs, or alcohol. Do you think your times of this sort ever occurred as the result of such physical causes?

YES .................................... 1
NO...................................... 5   GO TO *D37
DON’T KNOW .............. 9   GO TO *D37
REFUSED ................. 8   GO TO *D37

*D29b. Do you think your times of feeling (sadness/or/discouragement/or/boredom) were always the result of physical causes?

YES .................................... 1
NO...................................... 5   GO TO *D37
DON’T KNOW .............. 9   GO TO *D37
REFUSED ................. 8   GO TO *D37

*D29c. Briefly, what were the physical causes?

_________________________________________________________
_________________________________________________________
_________________________________________________________
Think of the very first time in your life you had a period of time lasting several days or longer when you felt (sad/or/discouraged/or/really bored) and also had some of the other problems we just reviewed. Can you remember your exact age?

YES................................................. 1
NO ................................................. 5  GO TO *D37b
DON’T KNOW ................................. 9  GO TO *D37b
REFUSED ......................................... 8  GO TO *D37b

* D37a. (IF NEC: How old were you?)

__________ YEARS OLD  GO TO *D37b_1
DON’T KNOW ................. 999  GO TO *D37b_1
REFUSED ......................... 998  GO TO *D37b_1

* D37b. About how old were you (the first time)?

__________ YEARS OLD  GO TO *D37b_1
DON’T KNOW ................. 999  GO TO *D37b1
REFUSED ......................... 998  GO TO *D37b3
ALL MY LIFE..................... 997  GO TO *D37b3
AS LONG AS I CAN REMEMBER .......... 997  GO TO *D37b3

* D37b1. Can you remember what grade you were in at school?

YES ..................................... 1
NO ........................................... 5  GO TO *D37b3
DON’T KNOW .............................. 9  GO TO *D37b3
REFUSED ............................... 8  GO TO *D37b3

* D37B2. What grade was that?

KINDERGARTEN......0  7TH GRADE..............................7
1ST GRADE..............1  8TH GRADE..............................8
2ND GRADE................2  HIGH SCHOOL FRESHMAN ....9
3RD GRADE..............3  HIGH SCHOOL SOPHOMORE ....10
4TH GRADE..............4  HIGH SCHOOL JUNIOR........11
5TH GRADE..............5  HIGH SCHOOL SENIOR........12
6TH GRADE ..............6  ANY COLLEGE......................13

* D37b3. Was it before you first started school?

YES........................................1  GO TO *D37b_1
NO .......................................... 5
DON’T KNOW .................... 9
REFUSED ............................... 8

BEFORE STARTED SCHOOL.........4
BEFORE TEENAGER..................12
NOT BEFORE TEENAGER...............13
DON’T KNOW ..........................999
REFUSED ..............................998

* D37b4. Was it before you were a teenager?

YES ..................................... 1
NO ........................................... 5
DON’T KNOW .............................. 9
REFUSED ............................... 8
*D37b_1. Was that first time brought on by some stressful experience? Or did it happen out of the blue?

- BROUGHT ON BY STRESS .........................1
- OUT OF THE BLUE................................2
- DON’T REMEMBER ..................................5
- DON’T KNOW .......................................9
- REFUSED .............................................8

*D37c. About how long did that first time go on?

___________ NUMBER

CIRCLE UNIT OF TIME:  DAYS ......1  WEEKS...... 2  MONTHS..... 3  YEARS ...... 4

- DON’T KNOW ....................................99
- REFUSED ..........................................98
**D38.** Did you have an a time of being (sad/or/discouraged/or/bored) with some of the other problems lasting (several days or longer/two weeks or longer) in the past 12 months?

YES................................................. 1
NO.................................................. 5  GO TO *D38c
DON’T KNOW .................................... 9  GO TO *D38c
REFUSED......................................... 8  GO TO *D38c

*D38a. How recently – in the past month, two to six months ago, or more than six months ago?

PAST MONTH .......................................... 1
2-6 MONTHS AGO................................. 2
MORE THAN 6 MONTHS AGO............... 3
DON’T KNOW................................. 9
REFUSED......................................... 8

*D38a_1. When I use the word “episode” in the next questions, I mean a time lasting (several days/two weeks) or longer when nearly every day you were (sad/or/discouraged/or/bored) and also had some of the other problems we just reviewed. The episode ends when you no longer have the problems for two weeks in a row. With this definition in mind, how many different episodes did you have in the past 12 months?

____________NUMBER

DON’T KNOW.............................. 999
REFUSED...................................... 998

*D38a_2. INTERVIEWER CHECKPOINT: (SEE *D38a_1)

*D38a_1 EQUALS ‘1’.............................................................................. 1
ALL OTHERS....................................................................................... 2  GO TO *D38a_7

*D38a_3. In what month did that episode start?

__/____

MONTH   YEAR

DON’T KNOW.............................. 999
REFUSED...................................... 998

*D38a_4. How long did that episode last (IF *D38a EQUALS ‘1’ : so far)?

____________NUMBER

CIRCLE UNIT OF TIME:      DAYS.......1      WEEKS......2      MONTHS..... 3      YEARS.......4

DON’T KNOW.............................. 999
REFUSED...................................... 998

*D38a_5. INTERVIEWER CHECKPOINT (SEE *D38a):

*D38a EQUALS ‘1’...................................................................................... 1
ALL OTHERS....................................................................................... 2  GO TO *D39
*D38a_6. Has this episode ended or is it still going on?

ENDED.................................................................................................... 1
STILL GOING ON........................................................................................... 5
DON’T KNOW............................................................................................... 9
REFUSED..................................................................................................... 8

GO TO *D39

*D38a_7. In what month did the first of these episodes start?

________/________
MONTH    YEAR

DON’T KNOW.......................... 999
REFUSED................................. 998

*D38a_7a. How long did the first of these (NUMBER FROM *D38a_1) episodes last?

____________    NUMBER

CIRCLE UNIT OF TIME:    DAYS ......1    WEEKS...... 2    MONTHS..... 3    YEARS ...... 4

DON’T KNOW.......................... 999
REFUSED................................. 998

*D38a_8. INTERVIEWER CHECKPOINT (SEE *D38a):

*D38a EQUALS ‘1’................................................................................ 1
ALL OTHERS............................................................................................... 2

GO TO *D38b

*D38a_9. Has the most recent episode ended or is it still going on?

ENDED.................................................................................................... 1
STILL GOING ON........................................................................................... 5
DON’T KNOW............................................................................................... 9
REFUSED..................................................................................................... 8

*D38b. About how many days out of the last 365 were you in an episode?

___________ DAYS

GO TO *D39

DON’T KNOW................. 999
REFUSED......................... 998

*D38c. How old were you the last time you had one of these episodes?

_____________ YEARS OLD

DON’T KNOW................. 999
REFUSED......................... 998
*D39. What is the longest episode you ever had when you were (sad/or/discouraged/or/bored) and also had some of the other problems most of the day nearly every day?

_________ NUMBER

CIRCLE UNIT OF TIME: DAYS ......1 WEEKS......2 MONTHS.....3 YEARS ......4

DON’T KNOW ..............................99
REFUSED .................................98

*D40. INTERVIEWER CHECKPOINT: (SEE *D39)

LONGEST EPISODE WAS LESS THAN 14 DAYS .......................1
ALL OTHERS...............................................................2 \ GO TO *D52

*D41. Did you ever have at least one full year with episodes lasting several days or more just about every month?

YES............................................1
NO ........................................5 \ GO TO *D88
DON’T KNOW ..............................9 \ GO TO *D88
REFUSED .................................8 \ GO TO *D88

*D42. How old were you the first time you had a year of this sort (when you had an episode just about every month)?

__________ YEARS OLD

DON’T KNOW ..............................999
REFUSED .................................998

*D42_1. How many of these episodes were brought on by some stressful experience - - all, most, some, or none?

ALL .................................................1
MOST ............................................2
SOME ...........................................3
NONE ............................................4
DON’T KNOW ..............................9
REFUSED .................................8

*D43. About how many different years in your life did you have an episode [of being (sad/or/discouraged/or/bored)] just about every month?

__________ YEARS

DON’T KNOW ..............................999
REFUSED .................................998

*D46. Did you ever have a full year or longer when you were in an episode most days?

YES .............................................1
NO ........................................5 \ GO TO *D62_1
DON’T KNOW ..............................9 \ GO TO *D62_1
REFUSED .....................................8 \ GO TO *D62_1
*D47. And how old were you the first time you had a year when you were in an episode most days?

__________ YEARS OLD

DON’T KNOW ......................... 999
REFUSED .............................. 998

*D48. About how many different years in your life were you in an episode [of being (sad/or/discouraged/or/bored)] most days?

__________ YEARS

DON’T KNOW ......................... 999
REFUSED .............................. 998

*D49. INTERVIEWER CHECKPOINT: (SEE *D48)

*D48 EQUALS ‘1’ ................................................................. 1    GO TO *D62_1
ALL OTHERS ................................................................. 2

*D50. What is the longest continuous number of years in a row in which you were in an episode most days?

__________ YEARS    GO TO *D62_1

DON’T KNOW ......................... 999    GO TO *D62_1
REFUSED .............................. 998    GO TO *D62_1

*D52. How many episodes of feeling (sad/or/discouraged/or/bored) with some other problems lasting two weeks or longer have you ever had in your life?

__________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998

*D53. INTERVIEWER CHECKPOINT: (SEE *D52)

*D52 EQUALS ‘1’ ................................................................. 1    GO TO *D62_1
ALL OTHERS ................................................................. 2

*D53_1. How many of these episodes were brought on by some stressful experience?

__________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998
**D54.** How many different years in your life did you have at least one episode?

_____________ YEARS

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

**D55.** INTERVIEWER CHECKPOINT: (SEE *D54)

*D54 EQUALS ‘1’.......................... 1   GO TO *D62_1
ALL OTHERS.......................... 2

**D56.** What is the longest continuous number of years in a row in which you had at least one episode per year?

_____________ YEARS

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

**D57.** INTERVIEWER CHECKPOINT: (SEE *D39)

*D39 EQUALS ‘12’ MONTHS OR LONGER ...................................... 1   GO TO *D59
ALL OTHERS.......................... 2

**D58.** Did you ever have a period lasting a full year or longer when you were in an episode most days?

YES ........................................... 1
NO ............................................ 5   GO TO *D62_1
DON'T KNOW ............................ 9   GO TO *D62_1
REFUSED ................................. 8   GO TO *D62_1

**D59.** About how many years in your life were you in an episode most days?

_____________ YEARS

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

*D59a.** And how old were you the first time you had a year of this sort (when you were in an episode most days)?

_____________ YEARS OLD

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

**D60.** INTERVIEWER CHECKPOINT: (SEE *D59)

*D59 EQUALS ‘1’........................................ 1   GO TO *D62_1
ALL OTHERS.......................... 2
*D61. What is the longest continuous number of years in a row in which you were in an episode most days?

____________ YEARS

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

*D62_1. INTERVIEWER CHECKPOINT: (SEE *D38)

*D38 EQUALS ‘1’ ......................... 1
ALL OTHERS ........................... 2  GO TO *D72

*D62_2. INTERVIEWER CHECKPOINT

R CAN READ .............................. 1
ALL OTHERS .............................. 2  GO TO *D64

*D62_3. (RB, PG 13-14) For the next questions I need you to think about the (several days/two weeks) or more during the past 12 months when your (sadness/or/discouragement/or/boredom) was the worst. Please read each of the nine sets of statements on page 6-7 in your booklet and circle the one response for each of the nine that best describes how you were during those (several days/two weeks). Let me know when you have finished.

GO TO *D66

*D64. For the next questions I need you to think about the (several days/two weeks) or more during the past 12 months when your (sadness/or/discouragement/or/boredom) was worst. I’m going to read nine series of statements. Please pick the one statement in each series that comes closest to your experience during that worst (several days/two weeks).

*D64a. Here’s the first series, which deals with problems falling asleep:

One: You never took longer than 30 minutes to fall asleep.
Two: You took at least 30 minutes to fall asleep, less than half the time.
Three: You took at least 30 minutes to fall asleep, more than half the time.
Four: You took more than 60 minutes to fall asleep, more than half the time.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

____________ NUMBER

DON'T KNOW ......................... 999
REFUSED .............................. 998
D64b. Here’s the next series, which deals with waking up at night:

One: You did not wake up at night.
Two: You had a restless, light sleep with few brief awakenings each night.
Three: You woke up at least once a night, but you got back to sleep easily.
Four: You woke up more than once a night and stayed awake for 20 minutes or more, more than half the time.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

____________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998

D64c. Here’s the next series, which deals with waking up too early in the morning:

One: Most of the time, you woke up no more than 30 minutes before you needed to get up.
Two: More than half the time, you woke up more than 30 minutes before you needed to get up.
Three: You almost always woke up at least one hour or so before you needed to, but you went back to sleep eventually.
Four: You woke up at least one hour before you needed to and couldn’t get back to sleep.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

____________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998

D64d. Here’s the next series, which deals with the amount of sleep you got each night:

One: You slept no longer than 7-8 hours/night, without napping during the day.
Two: You slept no longer than 10 hours in a 24-hour period including naps.
Three: You slept no longer than 12 hours in a 24-hour period including naps.
Four: You slept longer than 12 hours in a 24-hour period including naps.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

____________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998
Here’s the next series, which deals with feeling sad:

One: You did not feel sad.
Two: You felt sad less than half the time.
Three: You felt sad more than half the time.
Four: You felt sad nearly all the time.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

______________ NUMBER
DON’T KNOW ......................... 999
REFUSED ............................... 998

Here’s the next series, which deals with your ability to concentrate and make decisions:

One: There was no change in your usual capacity to concentrate or make decisions.
Two: You occasionally felt indecisive or found that your attention wandered.
Three: Most of the time, you struggled to focus your attention or to make decisions.
Four: You couldn’t concentrate well enough to read or you couldn’t make even minor decisions.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

______________ NUMBER
DON’T KNOW ......................... 999
REFUSED ............................... 998

Here’s the next series, which deals with feeling down on yourself:

One: You saw yourself as equally worthwhile and deserving as other people.
Two: You were more self-blaming than usual.
Three: You largely believed that you caused problems for others.
Four: You thought almost constantly about things you don’t like about yourself.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

______________ NUMBER
DON’T KNOW ......................... 999
REFUSED ............................... 998

Here’s the next series, which deals with your interest in daily activities:

One: There was no change from usual in how interested you were in other people or activities.
Two: You noticed that you were less interested in people or activities.
Three: You found you had interest in only one or two of your usual activities.
Four: You had virtually no interest in your usual activities.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

______________ NUMBER
DON’T KNOW ......................... 999
REFUSED ............................... 998
D64i. Here’s the next series, which deals with your energy:

One: There was no change in your usual level of activity.
Two: You got tired more easily than usual.
Three: You had to make a big effort to start or finish your usual daily activities (for example, homework, chores, sports or going to school).
Four: You really couldn’t carry out most of your usual daily activities because you just didn’t have the energy.

(IF NEC: Which of these four statements was most true of you during your worst (several days/two weeks) of being (sad/or/discouraged/or/bored) in the past 12 months?)

_____________________ NUMBER

DON’T KNOW ......................... 999
REFUSED ............................ 998
*D66. (RB, PG 55) Think about the time lasting one month or longer in the past 12 months when your (sadness/or/discouragement/or/boredom) was worst. Using the 0 to 10 scale on page 55 of your booklet, where 0 means no problems and 10 means very severe problems, what number describes how much your (sadness/or/discouragement/or/boredom) caused problems with each of the following activities during that time?

(IF NEC: How much did your (sadness/or/discouragement/or/boredom) cause problems with (ACTIVITY) during that time?)

(IF NEC: You can use any number between 0 and 10 to answer.)

NUMBER (0-10)

*D66a. Your chores at home?  

_________________

DOES NOT APPLY ..........97
DON'T KNOW .................99
REFUSED ......................98

*D66b. Your ability to do well at school or work?  

_________________

DOES NOT APPLY ..........97
DON'T KNOW .................99
REFUSED ......................98

*D66c. Your ability to get along with your family?  

_________________

DOES NOT APPLY ..........97
DON'T KNOW .................99
REFUSED ......................98

*D66d. Your social life?  

_________________

DOES NOT APPLY ..........97
DON'T KNOW .................99
REFUSED ......................98

*D67. INTERVIEWER CHECKPOINT: (SEE *D66a - *D66d)

ALL RESPONSES EQUAL ‘0’ .............................................................. 1  
GO TO *D72

ALL OTHERS ......................................................................................... 2
*D68. About how many days out of 365 in the past 12 months were you totally unable to go to school or work or carry out your normal activities because of your (sadness/or/discouragement/or/boredom)?

(IF NEC: You can use any number between 0 and 365 to answer.)

_________ NUMBER OF DAYS

DON’T KNOW ...............999
REFUSED ...................998

*D72. Did you ever in your life talk to a medical doctor or other professional about your (sadness/or/discouragement/or/boredom)? (By professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES ........................................................ 1
NO ......................................................... 5 \GO TO *D87_1
DON’T KNOW .............................8 \GO TO *D87_1
REFUSED ...............................9 \GO TO *D87_1

*D72a. How old were you the first time [you talked to a professional about your (sadness/or/discouragement/or/boredom)]?

__________ YEARS OLD

DON’T KNOW .....................999
REFUSED ..............................998

*D84. Did you ever get treatment for your (sadness/or/discouragement/or/boredom) that you considered helpful or effective?

YES........................................................ 1
NO ......................................................... 5 \GO TO *D84c
DON’T KNOW .............................9 \GO TO *D84c
REFUSED ...............................8 \GO TO *D84c

*D84a. How old were you the first time [you got helpful treatment for your (sadness/or/discouragement/or/boredom)]?

__________ YEARS OLD

DON’T KNOW .....................999
REFUSED ..............................998

*D84b. How many professionals did you ever talk to about your (sadness/or/discouragement/or/boredom), up to and including the first time you got helpful treatment?

__________ NUMBER OF PROFESSIONALS \GO TO *D86

DON’T KNOW .............99 \GO TO *D86
REFUSED .......................98 \GO TO *D86

*D84c. How many professionals did you ever talk to about your (sadness/or/discouragement/or/boredom)?

__________ NUMBER OF PROFESSIONALS

DON’T KNOW .................99
REFUSED .........................98
*D86. Did you receive professional treatment for your (sadness/or/discouragement/or/boredom) at any time in the past 12 months?

YES...............................1
NO.................................5
DON'T KNOW...............9
REFUSED......................8

*D87. Were you ever hospitalized overnight for your (sadness/or/discouragement/or/boredom)?

YES ................................................. 1
NO ................................................... 5
GO TO *D87_1
DON'T KNOW ...................... 9
GO TO *D87_1
REFUSED....................................... 8
GO TO *D87_1

*D87a. How old were you the first time [you were hospitalized overnight because of your (sadness/or/discouragement/or/boredom)]?

______________ YEARS OLD

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

*D87_1. How many of your close relatives – including your biological parents, brothers and sisters, and children – ever had episodes of (sadness/or/discouragement/or/boredom)?

__________ NUMBER

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


*SC24 EQUALS ‘1’ .................................................................1 GO TO *M1, NEXT SECTION
*SC25a EQUALS ‘1’ ..............................................................2 GO TO *M5
*SC25 EQUALS ‘1’ .................................................................3 GO TO *M53_1
*SC20 EQUALS ‘1’ .................................................................4 GO TO *PD1 INTRO 1
*SC20a EQUALS ‘1’ ...............................................................5 GO TO *PD1 INTRO 2

*SC29 EQUALS ‘1’ OR *SC29a EQUALS ‘1’ ...............................7 GO TO *SO1
*SC30 EQUALS ‘1’ .................................................................8 GO TO *AG1
*SC26 EQUALS ‘1’ .................................................................9 GO TO *G1 INTRO 1
*SC26a EQUALS ‘1’ .............................................................10 GO TO *G1 INTRO 2
*SC26b EQUALS ‘1’ .............................................................11 GO TO *G1 INTRO 3
ALL OTHERS .....................................................................12 GO TO *IED1
MANIA (M)

*M1. Earlier in the interview you mentioned having episodes lasting between a few hours and a few weeks when you felt much more excited and full of energy than usual and your mind went too fast. (READ SLOWLY) People who have episodes like this often have changes in their thinking and behavior at the same time, like being more talkative, needing very little sleep, being very restless, getting involved in many more activities than usual, and behaving in ways they would normally think are inappropriate. Did you ever have any of these changes during your episodes of being excited and full of energy?

YES................................................. 1  GO TO *M3
NO .................................................. 5
DON'T KNOW .............................. 9
REFUSED: ................................. 8

*SC25 EQUALS ‘1’................................................................. 1  GO TO *M53_1
ALL OTHERS................................................................. 2  GO TO *M54

*M2. INTERVIEWER CHECKPOINT: (SEE *SC25)

*M3. Please think of the one episode when you were very excited and full of energy and you had the largest number of changes like these at the same time. Is there one episode of this sort that stands out in your mind?

YES................................................. 1  GO TO *M3
NO .................................................. 5  GO TO *M3c
DON'T KNOW .............................. 9  GO TO *M3c
REFUSED: ................................. 8  GO TO *M3c

*M3a. How old were you at that time?

__________ YEARS OLD

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

*M3b. How long did that episode last?

__________ NUMBER  GO TO *M4

CIRCLE UNIT OF TIME: HOURS..... 1  DAYS ......2  WEEKS..... 3  MONTHS....4  YEARS…5

DON'T KNOW .............. 999  GO TO *M4
REFUSED..................... 998  GO TO *M4
*M3c. Then think of the most recent time you had an episode like this. How old were you then?

_________ YEARS OLD

DON’T KNOW ................. 999
REFUSED ..................... 998

*M3d. How long did that episode last?

_________ NUMBER

CIRCLE UNIT OF TIME:  HOURS....1  DAYS ....2  WEEKS....3  MONTHS....4  YEARS....5

DON’T KNOW ................. 999
REFUSED ..................... 998

*M4. During that time, which of the following changes did you experience: were you so irritable or grouchy that you started arguments, shouted at people, or hit people?

YES.............................. 1
NO .............................. 5
DON’T KNOW ................. 9
REFUSED ......................  8

INTERVIEWER INSTRUCTION: USE THE PHRASE “HAPPY OR EXCITED” THROUGHOUT THIS SECTION

GO TO *M7a

*M5. Earlier in the interview you mentioned having episodes lasting between a few hours and a few weeks when you became so irritable or grouchy that you started arguments, shouted at people, or hit people.

(READ SLOWLY) People who have episodes of irritability like this often have changes in their thinking and behavior at the same time, like being more talkative, needing very little sleep, being very restless, going on buying sprees and behaving in ways they would normally think are inappropriate. Did you ever have any of these changes during your episodes of being very irritable or grouchy?

YES.............................. 1
NO .............................. 5  GO TO *M49
DON’T KNOW ................. 9  GO TO *M49
REFUSED ...................... 8  GO TO *M49
*M6. Please think of the episode when you were very irritable or grouchy and you had the largest number of changes like these at the same time. Is there one episode of this sort that stands out in your mind?

YES..............................1
NO..............................5   GO TO *M6c
DON'T KNOW..................9   GO TO *M6c
REFUSED........................8   GO TO *M6c

*M6a. How old were you then?

__________ YEARS OLD

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

*M6b. How long did that episode last?

__________ NUMBER       GO TO *M7

CIRCLE UNIT OF TIME: HOURS....1   DAYS ....2   WEEKS ....3   MONTHS....4   YEARS....5
DON'T KNOW ..................999   GO TO *M7
REFUSED........................998   GO TO *M7

INTERVIEWER INSTRUCTION: USE THE PHRASE “IRRITABLE OR GROUCHY” THROUGHOUT THIS SECTION

*M6c. Then think of the last time you had an episode like this. How old were you then?

__________ YEARS OLD

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

*M6d. How long did that episode last?

__________ NUMBER

CIRCLE UNIT OF TIME: HOURS....1   DAYS ....2   WEEKS ....3   MONTHS....4   YEARS....5
DON'T KNOW ..................999
REFUSED........................998

INTERVIEWER INSTRUCTION: USE THE PHRASE “IRRITABLE OR GROUCHY” THROUGHOUT THIS SECTION
<table>
<thead>
<tr>
<th>M7.</th>
<th>During that time, which of the following changes did you experience:</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
</table>
| M7a. | Did you become so restless that you had to keep walking around or be on the move all the time?  
(KEY PHRASE: being restless) | 1      | 5      | 9      | 8      |
| M7b. | Were you a lot more interested in sex than usual, or did you want to have sexual relationships with people you wouldn’t ordinarily be interested in?  
(KEY PHRASE: having a lot more interest in sex than usual) | 1      | 5      | 9      | 8      |
| M7c. | Did you try to make friends with people you wouldn’t normally have spoken to?  
(KEY PHRASE: trying to make friends with strangers) | 1      | 5      | 9      | 8      |
| M7d. | Did you do anything else that wasn’t usual for you - - like talking about things you would normally keep private, or acting in ways that you’d usually find embarrassing?  
(KEY PHRASE: behaving inappropriately) | 1      | 5      | 9      | 8      |
| M7e. | Did you try to do things that were impossible to do, like taking on large amounts of work?  
(KEY PHRASE: trying to accomplish unrealistic goals) | 1      | 5      | 9      | 8      |
| M7f. | Did you talk a lot more than usual or feel a need to keep talking all the time?  
(KEY PHRASE: talking a lot more than usual) | 1      | 5      | 9      | 8      |
| M7g. | Did you constantly keep changing your plans or activities?  
(KEY PHRASE: constantly changing plans) | 1      | 5      | 9      | 8      |
| M7h. | Did you find it hard to keep your mind on what you were doing?  
(KEY PHRASE: hard to keep your mind on things) | 1      | 5      | 9      | 8      |
| M7i. | Did your thoughts seem to jump from one thing to another or race through your head so fast you couldn’t keep track of them?  
(KEY PHRASE: thoughts jumping from one thing to another) | 1      | 5      | 9      | 8      |
| M7j. | Did you sleep a lot less than usual and still not feel tired or sleepy?  
(KEY PHRASE: sleeping a lot less than usual) | 1      | 5      | 9      | 8      |
| M7k. | Did you get involved in foolish schemes for making money?  
(KEY PHRASE: getting involved in foolish schemes) | 1      | 5      | 9      | 8      |
<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*M7l. Did you spend too much money or buy things you couldn’t afford?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: buy things you couldn’t afford)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*M7m. Did you do reckless things like driving too fast, staying out all night, or having casual or unsafe sex?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: doing risky things)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*M7n. Did you have much more confidence than usual or believe you could do things you really couldn’t do?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: having too much self-confidence)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*M7o. Did you have the idea that you were actually someone else, or that you had a special connection with a famous person that you really didn’t have?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: believing you were someone else or somehow connected to a famous person)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*M7p. Did you get so angry that you either lost control, put your fist through the wall, or smash something worth a lot of money?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: getting so angry and losing control)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*M7q. Did you threaten, attack, or try to hurt anyone?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: threatening to hurt someone)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*M8. INTERVIEWER CHECK POINT: (SEE *M7a-o)

THREE OR MORE RESPONSES CODED ‘1’ ............... 1
ALL OTHERS ................................................................. 2  GO TO *M54
**M9.** Let me review. You had episodes when you were very (excited and full of energy/irritable or grouchy) and also had some problems like (KEY PHRASE OF 3 “YES” RESPONSES IN *M7 SERIES). How much did these episodes ever interfere or cause problems with either your school work, your job, or your relationships with family or friends – not at all, a little, some, a lot, or extremely?

- NOT AT ALL ......................... 1  GO TO *M54
- A LITTLE ......................... 2  GO TO *M54
- SOME ................................. 3
- A LOT ................................. 4
- EXTREMELY ....................... 5
- DON’T KNOW ..................... 9
- REFUSED ............................. 8

**M9a.** How often during these episodes were you unable to carry out your normal daily activities – often, sometimes, not very often, or never?

- OFTEN ................................. 1
- SOMETIMES .......................... 2
- NOT VERY OFTEN ................. 3
- NEVER ................................. 4
- DON’T KNOW ..................... 9
- REFUSED ............................. 8

**M9b.** Did other people say anything or worry about the way you were acting?

- YES ................................. 1
- NO ................................. 5
- DON’T KNOW ................. 9
- REFUSED ............................. 8

**M10a.** Episodes of being very (excited and full of energy/irritable or grouchy) and having other changes sometimes occur as a result of physical causes such as being sick or injured or the use of medication, drugs, or alcohol. Do you think your episodes of this sort ever occurred as the result of such physical causes?

- YES ................................. 1
- NO ................................. 5  GO TO *M18
- DON’T KNOW ................. 9  GO TO *M18
- REFUSED ............................. 8  GO TO *M18

**M10b.** Do you think all of your episodes of being very (excited and full of energy/irritable or grouchy) were the result of physical causes?

- YES ................................. 1
- NO ................................. 5  GO TO *M18
- DON’T KNOW ................. 9  GO TO *M18
- REFUSED ............................. 8  GO TO *M18

**M10c.** Briefly, what were the physical causes?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
*M18. Think of the very first time in your life you had an episode when you became very (excited and full of energy/irritable or grouchy) and also had some of the changes you just reported. Can you remember your exact age?

YES.............................. 1
NO ...................................... 5  GO TO *M18b
DON’T KNOW ....................... 9  GO TO *M18b
REFUSED ........................... 8  GO TO *M18b

*M18a. (IF NEC: How old were you?)

__________ YEARS OLD  GO TO *M18c
DON’T KNOW ....................... 999  GO TO *M18c
REFUSED ........................... 998  GO TO *M18c

*M18b. About how old were you the first time?

__________ YEARS OLD  GO TO *M18c
DON’T KNOW ....................... 999  GO TO *M18b1
REFUSED ........................... 998  GO TO *M18b3
ALL MY LIFE ..................... 997  GO TO *M18b3
AS LONG AS I CAN REMEMBER ....... 997  GO TO *M18b3

*M18b1. Can you remember what grade you were in at school?

YES.............................. 1
NO ...................................... 5  GO TO *M18b3
DON’T KNOW ....................... 9  GO TO *M18b3
REFUSED ........................... 8  GO TO *M18b3

*M18b2. What grade was that?

KINDERGARTEN............. 0  7TH GRADE................................. 7
1ST GRADE...................... 1  8TH GRADE................................. 8
2ND GRADE...................... 2  HIGH SCHOOL FRESHMAN ......... 9
3RD GRADE...................... 3  HIGH SCHOOL SOPHOMORE ....... 10
4TH GRADE...................... 4  HIGH SCHOOL JUNIOR .......... 11
5TH GRADE...................... 5  HIGH SCHOOL SENIOR .......... 12
6TH GRADE...................... 6  ANY COLLEGE........................... 13

*M18b3. Was it before you first started school?

YES.............................. 1  GO TO *M18c
NO ...................................... 5
DON’T KNOW ....................... 9
REFUSED ........................... 8

*M18b4. Was it before you were a teenager?

YES.............................. 1
NO ...................................... 5
DON’T KNOW ....................... 9
REFUSED ........................... 8
*M18c. Was that episode of being (excited and full of energy/irritable or grouchy) brought on by some stressful experience? Or did it happen out of the blue?

BROUGHT ON BY STRESS .........................1
OUT OF THE BLUE ...............................2
DON’T REMEMBER .............................5
DON’T KNOW ....................................999
REFUSED ..............................................998

*M18d. About how long did that episode of being very (excited and full of energy/irritable or grouchy) go on?

__________  NUMBER

CIRCLE UNIT OF TIME:  HOURS ....1  DAYS ....2  WEEKS ...3  MONTHS ...4  YEARS ...5
DON’T KNOW ....................................99
REFUSED ..........................................98

*M19. Did you have one of these episodes of being very (excited and full of energy/irritable or grouchy) at any time in the past 12 months?

YES ..............................................1
NO ....................................5  GO TO *M19d
DON’T KNOW ..................9  GO TO *M19d
REFUSED ..........................8  GO TO *M19d

*M19a. How recently – in the past month, two to six months ago, or more than six months ago?

PAST MONTH .....................................1
2-6 MONTHS AGO ..............................2
MORE THAN 6 MONTHS AGO .............3
DON’T KNOW .................................9
REFUSED ........................................8

*M19b. How many episodes of being very (excited and full of energy/irritable or grouchy) did you have in the past 12 months that lasted each of the following amounts of time – less than one day, between one and three days, between four and six days, and more than six days?

[IF NEC: How many episodes did you have lasting (less then one day/between one and three days/between four and six days/more than six days)]?

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<tr>
<td>*M19b_1.  Less than one day</td>
<td>__________</td>
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<tr>
<td>*M19b_2.  1 – 3 Days</td>
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<tr>
<td>*M19b_3.  4 – 6 Days</td>
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<tr>
<td>*M19b_4. More than 6 days</td>
<td>__________</td>
<td>999</td>
<td>998</td>
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</tbody>
</table>
*M19d. How old were you when you last had one of these episodes?

__________ YEARS OLD

DON’T KNOW .......... 999
REFUSED .............. 998

*M20. How many episodes of being very (excited and full of energy/irritable or grouchy) have you ever had in your entire life lasting each of the following amounts of time – less than one day, between one and three days, between four and six days, and more than six days?

[IF NEC: How many did you ever have lasting (less than one day/ between one and three days/between four and six days/more than six days)?]

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<th>DON’T KNOW (999)</th>
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<tr>
<td>*M19b_2. 1 – 3 Days</td>
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<tr>
<td>*M19b_3. 4 – 6 Days</td>
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<td>998</td>
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<tr>
<td>*M19b_4. More than 6 days</td>
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<td>998</td>
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</table>

*M22. How long was the longest episodes you ever had when you were very (excited and full of energy/irritable or grouchy)?

__________ NUMBER

CIRCLE UNIT OF TIME: HOURS.....1 DAYS....2 WEEKS......3 MONTHS.....4 YEARS...5

DON’T KNOW ..............999
REFUSED ..................998

*M23. How many different years in your life did you have at least one episodes of being very (excited and full of energy/irritable or grouchy)?

__________ YEARS OLD

DON’T KNOW .............999
REFUSED ..................998
*M26. INTERVIEWER CHECKPOINT: (SEE *M19)

*M19 EQUALS ‘1’ ................................................................. 1
ALL OTHERS........................................................................... 5  GO TO *M33
### *M27.* (RB, PG 37) Think about the time in the past 12 months when your being very (excited and full of energy/irritable or grouchy) was worst. Using the 0 to 10 scale on page 37 of your booklet, where 0 means no problems and 10 means very severe problems, what number describes how much your being very (excited and full of energy/irritable or grouchy) caused problems with each of the following activities during that time?

(IF NEC: How much did your being very (excited and full of energy/irritable or grouchy) cause problems with (ACTIVITY) during that time?)

(IF NEC: You can use any number between 0 and 10 to answer.)

<table>
<thead>
<tr>
<th>NUMBER (0-10)</th>
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</table>

#### *M27a.* Your chores at home?

| DOES NOT APPLY | 97 |
| DON’T KNOW | 99 |
| REFUSED | 98 |

#### *M27b.* Your ability to do well at school or work?

| DOES NOT APPLY | 97 |
| DON’T KNOW | 99 |
| REFUSED | 98 |

#### *M27c.* Your ability to get along with your family?

| DOES NOT APPLY | 97 |
| DON’T KNOW | 99 |
| REFUSED | 98 |

#### *M27d.* Your social life?

| DOES NOT APPLY | 97 |
| DON’T KNOW | 99 |
| REFUSED | 98 |

**M28. INTERVIEWER CHECKPOINT:** (SEE *M27a - *M27d)

ALL RESPONSES EQUAL ‘0’ ................................................................. 1  GO TO *M30
ALL OTHERS .................................................................................. 2

77
*M29. About how many days out of 365 in the past 12 months were you **totally unable** to go to school or work or carry out your normal activities because of being very (excited and full of energy/irritable or grouchy)?

(If NEC: You can use any number between 0 and 365 to answer.)

_________ NUMBER OF DAYS

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

*M29_1. INTERVIEWER CHECKPOINT

R CAN READ .........................1
ALL OTHERS .........................2  GO TO *M30

*M29_2. (RB, PG 15-18) For the next questions I need you to think about the time during the past 12 months when you were in the most severe episode of being very (excited and full of energy/irritable or grouchy). Please read each of the eleven sets of statements on pages 15-18 in your booklet and circle the one response for each of the eleven that comes closest to your experience during that worst episode. Let me know when you have finished.

GO TO *M33

*M30. For the next questions I need you to think about the time during the past 12 months when you were in the most severe episode of being very (excited and full of energy/irritable or grouchy). I’m going to read eleven series of statements. Please pick the one statement in each series that comes closest to your experience during that worst episode.

*M30a. Here’s the first series, which deals with your mood during that episode:

One: Your mood was no more high than usual in terms of things like being happy, self-confident, or optimistic
Two: Your mood was a little more high than usual.
Three: Your mood was quite a bit more high than usual, but never over the edge or inappropriate.
Four: Your mood was over the edge in terms of things like being unrealistically self-confident or optimistic or very happy even when bad things were happening.
Five: You were uncontrollably high in terms of things like laughing out loud without cause or singing loudly in public places.

(If NEC: Which of these five statements was most true of you during your worst episode of being very (excited and full of energy/irritable or grouchy) in the past 12 months?)

_________ NUMBER

DON'T KNOW .........................999
REFUSED ..............................998
*M30b. Here’s the next series, which deals with physical arousal:

One: You had no increase in physical arousal in terms of things like energy or restlessness or difficulty sitting still.
Two: You had some increase in arousal, but not enough for most people to notice.
Three: You had a big enough increase in arousal for most people to notice, with things like increases in hand gestures, loudness, or being a lot more animated than usual.
Four: You were so highly aroused that you felt agitated or restless or hyper, but not enough to be out of control.
Five: You were uncontrollably agitated or restless or hyper.

(If NEC: Which of these five statements was most true of you during your worst episode of being very (excited and full of energy/irritable or grouchy) in the past 12 months?)

_________ NUMBER

DON’T KNOW ......................... 999
REFUSED ................................. 998

*M30c. Here’s the next series, which deals with sexual interest:

One: You had no increase in sexual interest.
Two: You had a mild increase in sexual interest.
Three: You had a strong increase in sexual thoughts without talking about it or doing anything.
Four: You talked a lot more about sex than usual without doing anything about it.
Five: You inappropriately propositioned people or touched people sexually or engaged in other sexual behaviors you wouldn’t normally do.

(If NEC: Which of these five statements was most true of you during your worst episode of being very (excited and full of energy/irritable or grouchy) in the past 12 months?)

_________ NUMBER

DON’T KNOW ......................... 999
REFUSED ................................. 998

*M30d. Here’s the next series, which deals with how much sleep you got:

One: You experienced no decrease in sleep.
Two: You slept less than normal by up to one hour.
Three: You slept less than normal by more than one hour.
Four: You slept less than usual and didn’t feel the need for more sleep.
Five: You didn’t feel the need for any sleep at all.

(If NEC: Which of these five statements was most true of you during your worst episode of being very (excited and full of energy/irritable or grouchy) in the past 12 months?)

_________ NUMBER

DON’T KNOW ......................... 999
REFUSED ................................. 998
**M30e.** Here’s the next series, which deals with how irritable you were:

One: You experienced no increase in irritability, in terms of things like feeling grumpy or acting annoyed or angry.
Two: You experienced some increase in irritability, but not enough for most people to notice.
Three: You experienced a big enough increase in irritability for most people to notice, with things like sometimes being short or snappy with people or having occasional outbursts of anger.
Four: You were very irritable most of the time.
Five: You were so hostile or uncooperative that it was impossible for people to be around you.

(IF NEC: Which of these five statements was most true of you during your worst episode of being very excited and full of energy/irritable or grouchy) in the past 12 months?)

___________ NUMBER

DON’T KNOW ............................. 999
REFUSED ................................. 998

**M30f.** Here’s the next series, which deals with how talkative you were:

One: You experienced no increase in talkativeness.
Two: You wanted to be more talkative, but didn’t actually talk a lot more than usual.
Three: At times you talked a lot more than usual or a lot more than the situation required.
Four: You often talked a lot more than the situation required or talked so much that it was hard for other people to interrupt you.
Five: You talked nonstop or so much that no one could interrupt you even when they tried.

(IF NEC: Which of these five statements was most true of you during your worst episode of being very excited and full of energy/irritable or grouchy) in the past 12 months?)

___________ NUMBER

DON’T KNOW ............................. 999
REFUSED ................................. 998

**M30g.** Here’s the next series, which deals with racing thoughts or disorganized thinking:

One: Your thoughts did not come more quickly or seem more confused or escape you more than usual.
Two: Your thoughts came somewhat more quickly than usual, or seemed a bit more confused than usual, or you lost your train of thought somewhat more than usual.
Three: Your thoughts raced through your mind, or you easily lost your train of thought, or your mind kept jumping from one topic to another.
Four: Your thoughts jumped around so much that people had a hard time following you or you couldn’t keep yourself on track in a conversation.
Five: Your thoughts were going so fast or you were so confused that it was impossible for anyone to follow you or for you to make yourself understood.

(IF NEC: Which of these five statements was most true of you during your worst episode of being very excited and full of energy/irritable or grouchy) in the past 12 months?)

___________ NUMBER

DON’T KNOW ............................. 999
REFUSED ................................. 998
*M30h. Here’s the next series, which deals with thinking about impractical or unrealistic things:

One: You didn’t think or talk about anything different than usual
Two: You thought a lot about new interests or new plans that were not very practical or realistic.
Three: You thought a lot about really strange unrealistic things like very religious ideas or totally unrealistic plans.
Four: You had a lot of grandiose ideas about being able to do things you can’t really do, or paranoid ideas about plots or conspiracies that don’t really exist, or ideas about you being at the center of things that really don’t have much to do with you.
Five: Your mind was so confused that you were having delusions or hearing voices or seeing things.

(IF NEC: Which of these five statements was most true of you during your worst episode of being very (excited and full of energy/irritable or grouchy) in the past 12 months?)

____________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998

*M30i. Here’s the next series, which deals with disruptive or aggressive behavior:

One: You were no more disruptive or aggressive in your behavior than usual.
Two: You were often loud or sarcastic with people, but never threatened or got physical.
Three: You sometimes threatened people or made hostile demands, but never got physical.
Four: You frequently threatened or shouted at people, but without getting physical.
Five: You physically assaulted someone or destroyed property.

(IF NEC: Which of these five statements was most true of you during your worst episode of being very (excited and full of energy/irritable or grouchy) in the past 12 months?)

____________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998

*M30j. Here’s the next series, which deals with your appearance:

One: You dressed the same as always.
Two: You had a big reduction in neatness of dressing or grooming, but not so much that most people would get worried about you.
Three: You had a big change in dressing and grooming, either due to looking like a mess in terms of clothes and grooming or due to being very overdressed.
Four: You had an extreme change in dressing or grooming, like being only partly clothed or wearing wild make-up or looking like a total mess.
Five: You were completely un-groomed or disorganized in clothing or wore bizarre clothes.

(IF NEC: Which of these five statements was most true of you during your worst episode of being very (excited and full of energy/irritable or grouchy) in the past 12 months?)

____________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998
*M30k. Here’s the next series, which deals with whether you thought you had a problem:

One: You recognized that you were sick and needed help.
Two: You realized that you might have a problem.
Three: You recognized that your behavior had changed a great deal, but didn’t think it was a problem.
Four: You realized that there had been some change in your behavior, but didn’t really appreciate how great it had been.
Five: You had times when you were totally unaware that your behavior was different from normal.

(IF NEC: Which of these five statements was most true of you during your worst episode of being very (excited and full of energy/irritable or grouchy) in the past 12 months?)

____________ NUMBER

DON’T KNOW ......................... 999
REFUSED .............................. 998

*M33. Did you ever in your life talk to a medical doctor or other professional about your being very (excited and full of energy/irritable or grouchy)? (By professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES................................. 1
NO ................................. 5   GO TO *M48_1
DON’T KNOW .................. 9   GO TO *M48_1
REFUSED ......................... 8  GO TO *M48_1

*M33a. How old were you the first time [you talked to a professional about being very (excited and full of energy/irritable or grouchy)]?

__________ YEARS OLD

DON’T KNOW .................. 999
REFUSED ......................... 998

*M45. Did you ever get treatment for being very (excited and full of energy/irritable or grouchy) that you considered helpful or effective?

YES................................. 1
NO ................................. 5   GO TO *M45c
DON’T KNOW .................. 9   GO TO *M45c
REFUSED ......................... 8  GO TO *M45c

*M45a. How old were you the first time [you got helpful treatment for being very (excited and full of energy/irritable or grouchy)]?

__________ YEARS OLD

DON’T KNOW .................. 999
REFUSED ......................... 998
**M45b.** How many professionals did you *ever* talk to about being very (excited and full of energy/irritable or grouchy)?

_________ NUMBER OF PROFESSIONALS

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GO TO *M47

**M45c.** How many professionals did you *ever* talk to about being very (excited and full of energy/irritable or grouchy)?

_________ NUMBER OF PROFESSIONALS

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**M47.** Did you receive professional treatment for being very (excited and full of energy/irritable or grouchy) at any time in the past 12 months?

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**M48.** Were you ever hospitalized overnight for being very (excited and full of energy/irritable or grouchy)?

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**M48a.** How old were you the first time [you were hospitalized overnight because of being very (excited and full of energy/irritable or grouchy)]?  

_________ YEARS OLD

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**M48_1.** How many of your close relatives – including your biological parents, brothers and sisters, and children – ever had episodes of being very (excited and full of energy/irritable or grouchy)?

_________ NUMBER

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GO TO *M54
*M49. INTERVIEWER CHECKPOINT: (SEE *D26x)

*D26x EQUALS ‘1’................................................................. 1 GO TO *M54
ALL OTHERS................................................................. 2 GO TO *IR1 INTRO 1

*M53_1 INTERVIEWER CHECKPOINT: (SEE *D26x)

*D26x EQUALS ‘1’................................................................. 1 GO TO *IR1 INTRO 2, NEXT SECTION
ALL OTHERS................................................................. 2


FOLLOW SKIP FOR FIRST ENDORSED ITEM.

*SC20 EQUALS ‘1’................................................................. 1 GO TO *PD1 INTRO 1
*SC20a EQUALS ‘1’............................................................. 2 GO TO *PD1 INTRO 2

*SC29 EQUALS ‘1’ OR *SC29a EQUALS ‘1’.............................. 4 GO TO *SO1
*SC30 EQUALS ‘1’............................................................. 5 GO TO *AG1
*SC26 EQUALS ‘1’............................................................. 6 GO TO *G1 INTRO 1
*SC26a EQUALS ‘1’........................................................... 7 GO TO *G1 INTRO 2
*SC26b EQUALS ‘1’........................................................... 9 GO TO *G1 INTRO 3
ALL OTHERS................................................................... 8 GO TO *IED1
**IRritable Depression (IR)**

---

**IR1 INTRO 1.**

Other problems that often happen during periods of feeling irritable or grouchy include things like changes in sleeping, eating, energy, being able to keep your mind on things and remember things, and feeling badly about yourself. Did you ever have any of these problems during one of the times you were irritable or grouchy?

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<td>REFUSED</td>
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**IR1 INTRO 2.**

Earlier in the interview, you mentioned having periods that lasted several days or longer when most of the day you were very irritable, grouchy, or in a bad mood. People with times like this often have other problems at the same time. These include things like changes in sleeping, eating, energy, being able to keep your mind on things and remember things, and feeling badly about yourself. Did you ever have any of these problems during one of the times you were irritable or grouchy?

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**IR2.** Did you ever have a time of being very irritable or grouchy and some of these other problems that lasted most of the day, nearly every day for two weeks or longer?

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**IR2a.** What is the longest number of days in a row you ever had when you were very irritable and had some of these other problems most of the day?

IF VOL “LESS THAN ONE DAY,” CODE 0

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<thead>
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<th>NUMBER OF DAYS</th>
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**IR3.** INTERVIEWER CHECKPOINT: (SEE *IR2a)

<table>
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<th>DURATION OF 3 DAYS OR LONGER</th>
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<tr>
<td>ALL OTHERS</td>
<td>2</td>
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**IR4.** Did you ever have a year or more in your life when just about every month you were very irritable or grouchy and had some of these other problems for several days or more in a row?

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<th>GO TO *IR72</th>
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**IR7.** Please think of the worst time when you were very irritable or grouchy for (several days/ two weeks) or longer and you also had the largest number of other problems. Is there one particular time of this sort that stands out in your mind as the worst you ever had?
*IR7a. How old were you when that worst time happened?

_______________ YEARS OLD

DON’T KNOW ...........999
REFUSED ...............998

*IR7b. How long did that time last?

______________ NUMBER    GO TO *IR8

CIRCLE UNIT OF TIME:    DAYS ......1     WEEKS.......2     MONTHS.....3     YEARS ......4

DON’T KNOW .............999    GO TO *IR8
REFUSED ..................998    GO TO *IR8

*IR7c. Then think of the last time you were very irritable or grouchy for (several days/two weeks) or longer and also had other problems. During that time which of the following experiences did you have most of the day nearly every day? GO TO *IR8a
<table>
<thead>
<tr>
<th>Question</th>
<th>Response Options</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*IR8a. Did you feel discouraged about how things were going in your life most of the day, nearly every day?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8b. Did you feel like nothing was fun even when good things happened?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8c. During that time, did you eat much more than usual almost every day?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8d. Did you eat much less than usual almost every day?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8e. During that time, did you have a lot more trouble either falling asleep, staying asleep, or waking up too early most nights?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8f. Did you sleep too much most nights?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8g. On most days, did you have a lot more energy than usual?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8h. Did you have a lot less energy than usual almost every day during that time?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8i. Were you so restless or jittery that you walked up and down and couldn’t sit still?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8j. On most days, did you have a lot more trouble keeping your mind on things than is normal for you?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8k. Did you feel that you were no good?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8l. Did you think about killing yourself?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR8m. Did you think about harming someone else?</td>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*IR9. INTERVIEWER CHECKPOINT: (SEE *IR8a-m)

TWO OR MORE “YES” RESPONSES IN *IR8a-m......................... 1
ALL OTHERS............................................................................. 2  GO TO *IR72
*IR10. How much did your irritability and these other problems interfere with either your school work, your job, or your relationships with family and friends during that time – not at all, a little, some, a lot, or extremely?

NOT AT ALL ................................. 1  GO TO *IR11
A LITTLE ..................................... 2
SOME ........................................... 3
A LOT .......................................... 4
EXTREMELY ................................. 5
DON’T KNOW ............................... 9
REFUSED ........................................ 8

*IR10a. How often during that time were you unable to carry out your daily activities because of your irritability and these other problems – often, sometimes, not very often, or never?

OFTEN ................................. 1
SOMETIMES ............................. 2
NOT VERY OFTEN .................... 3
NEVER ...................................... 4
DON’T KNOW ............................ 9
REFUSED ................................. 8

*IR11. During those times, did your feeling irritable or grouchy usually last all day long, most of the day, about half the day, or less than half the day?

ALL DAY LONG ................................. 1
MOST OF THE DAY .......................... 2
ABOUT HALF THE DAY ................. 3
LESS THAN HALF THE DAY .......... 4  GO TO *IR72
DON’T KNOW ............................... 9  GO TO *IR72
REFUSED ........................................ 8

*IR11_1. How severe were your feelings of irritability during that time -- mild, moderate, severe, or very severe?

MILD ........................................... 1
MODERATE .................................. 2
SEVERE ....................................... 3
VERY SEVERE ............................... 4
DON’T KNOW ............................... 9
REFUSED ........................................ 8

*IR11_2. How often, during that time, were you so irritable or grouchy that nothing could get you into a good mood -- often, sometimes, not very often, or never?

OFTEN ......................................... 1
SOMETIMES .................................. 2
NOT VERY OFTEN ....................... 3
NEVER ......................................... 4
DON’T KNOW ............................... 9
REFUSED ........................................ 8

*IR11_4. INTERVIEWER CHECKPOINT: (SEE *IR10, *IR10a, *IR11_1, *IR11_2)

*IR10 EQUALS ‘3’ - ‘5’ OR *IR10a EQUALS ‘1’ - ‘3’ OR
*IR11_1 EQUALS ‘2’ - ‘4’ OR *IR11_2 EQUALS ‘1’ - ‘3’ ........................................ 1
ALL OTHERS ...................................................... 2  GO TO *IR72
*IR12a. Times of being very irritable or grouchy sometimes occur as a result of physical causes such as being sick or injured or the use of medication, drugs, or alcohol. Do you think your times of being very irritable or grouchy ever occurred as the result of such physical causes?

YES .................................... 1
NO ...................................... 5 GO TO *IR20
DON’T KNOW ..................... 9 GO TO *IR20
REFUSED ......................... 8 GO TO *IR20

*IR12b. Do you think your times of being very irritable or grouchy were always the result of physical causes?

YES .................................... 1
NO ...................................... 5 GO TO *IR20
DON’T KNOW ..................... 9 GO TO *IR20
REFUSED ......................... 8 GO TO *IR20

*IR12c. Briefly, what were the physical causes?

________________________________________________________________________
________________________________________________________________________

*IR20. Think of the very first time in your life you had several days or longer when you were irritable or grouchy and also had some other problems like changes in sleep, appetite, energy or concentration most of the day nearly every day. Can you remember your exact age that first time?

YES................................................. 1
NO .................................................. 5 GO TO *IR20b
DON’T KNOW .............................. 9 GO TO *IR20b
REFUSED .............................. 8 GO TO *IR20b

*IR20a. (IF NEC: How old were you?)

__________ YEARS OLD ...................... 1 GO TO *IR20c
DON’T KNOW .................. 999 GO TO *IR20c
REFUSED ................. 998 GO TO *IR20c

*IR20b. About how old were you the first time?

__________ YEARS OLD ...................... 1 GO TO *IR20c
DON’T KNOW .................. 999 GO TO *IR20b1
REFUSED ................. 998 GO TO *IR20b3
ALL MY LIFE .............. 997 GO TO *IR20b3
AS LONG AS I CAN REMEMBER.......... 997 GO TO *IR20b3

*IR20b1. Can you remember what grade you were in school?

YES................................................. 1
NO .................................................. 5 GO TO *IR20b3
DON’T KNOW .................. 9 GO TO *IR20b3
REFUSED ................. 8 GO TO *IR20b3
*IR20b2. What grade was that?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kindergarten</td>
<td>0</td>
</tr>
<tr>
<td>1st Grade</td>
<td>1</td>
</tr>
<tr>
<td>2nd Grade</td>
<td>2</td>
</tr>
<tr>
<td>3rd Grade</td>
<td>3</td>
</tr>
<tr>
<td>4th Grade</td>
<td>4</td>
</tr>
<tr>
<td>5th Grade</td>
<td>5</td>
</tr>
<tr>
<td>6th Grade</td>
<td>6</td>
</tr>
<tr>
<td>7th Grade</td>
<td>7</td>
</tr>
<tr>
<td>8th Grade</td>
<td>8</td>
</tr>
<tr>
<td>9th Grade</td>
<td>9</td>
</tr>
<tr>
<td>10th Grade</td>
<td>10</td>
</tr>
<tr>
<td>11th Grade</td>
<td>11</td>
</tr>
<tr>
<td>12th Grade</td>
<td>12</td>
</tr>
<tr>
<td>Any College</td>
<td>13</td>
</tr>
</tbody>
</table>

*IR20b3. Was it before you first started school?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
</tr>
<tr>
<td>Don't Know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

*IR20b4. Was it before you were a teenager?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
</tr>
<tr>
<td>Don't Know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

*IR20c. Was that first time brought on by some stressful experience? Or did it happen out of the blue?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brought on by stress</td>
<td>1</td>
</tr>
<tr>
<td>Out of the blue</td>
<td>2</td>
</tr>
<tr>
<td>Don't remember</td>
<td>5</td>
</tr>
<tr>
<td>Don't know</td>
<td>999</td>
</tr>
<tr>
<td>Refused</td>
<td>998</td>
</tr>
</tbody>
</table>

*IR20d. About how long did that first time go on?

<table>
<thead>
<tr>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>_______</td>
</tr>
</tbody>
</table>

Circle unit of time: Days ......1  Weeks ......2  Months ......3  Years ......4

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Don't know</td>
<td>99</td>
</tr>
<tr>
<td>Refused</td>
<td>98</td>
</tr>
</tbody>
</table>

*IR21. Did you have a time of being very irritable or grouchy lasting (several days/two weeks) or longer in the past 12 months?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
</tr>
<tr>
<td>Don't know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

*IR21a. When was the last time – in the past month, two to six months ago, or more than six months ago?

<table>
<thead>
<tr>
<th>Period</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Past month</td>
<td>1</td>
</tr>
<tr>
<td>2-6 months ago</td>
<td>2</td>
</tr>
<tr>
<td>More than 6 months ago</td>
<td>3</td>
</tr>
<tr>
<td>Don't know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>
*IR21a_1. When I use the word “episode” in the next questions, I mean a time lasting (several days/two weeks) or longer when nearly every day you were irritable or grouchy and also had some of the other problems we just reviewed like changes in sleep, appetite, energy and concentration. The episode ends when you no longer have the problems for two weeks in a row. With this definition in mind, how many different episodes of being irritable or grouchy did you have in the past 12 months?

_________NUMBER

DON’T KNOW.................................999
REFUSED......................................998

*IR21a_2. INTERVIEWER CHECKPOINT: (SEE *IR21a)

*IR21a_1 EQUALS ‘1’........................................................................................................... 1  GO TO *IR21a_3
ALL OTHERS................................................................................................................... 2  GO TO *IR21a_7
*IR21a_3. In what month did that episode start?

\[
\begin{array}{c}
\text{MONTH} / \text{YEAR} \\
\hline
\text{DON'T KNOW} & 999 \\
\text{REFUSED} & 998 \\
\end{array}
\]

*IR21a_4. How long did that episode last (IF *IR21a EQUALS ‘1’ : so far)?

\[
\begin{array}{c}
\text{NUMBER} \\
\hline
\text{CIRCLE UNIT OF TIME:} & \text{DAYS} \ldots 1 & \text{WEEKS} \ldots 2 & \text{MONTHS} \ldots 3 & \text{YEARS} \ldots 4 \\
\text{DON'T KNOW} & 999 \\
\text{REFUSED} & 998 \\
\end{array}
\]

*IR21a_5. INTERVIEWER CHECKPOINT (SEE *IR21a):

\[
\begin{array}{c}
\text{*IR21a EQUALS ‘1’} & \text{................................. 1} \\
\text{ALL OTHERS} & \text{................................. 2} & \text{GO TO *IR21b} \\
\end{array}
\]

*IR21a_6. Has this episode ended or is it still going on?

\[
\begin{array}{c}
\text{ENDED} & \text{................................. 1} \\
\text{STILL GOING ON} & \text{................................. 5} \\
\text{DON'T KNOW} & \text{................................. 9} \\
\text{REFUSED} & \text{................................. 8} \\
\end{array}
\]

\text{GO TO *IR21b}

*IR21a_7. How long did the first of these (NUMBER FROM *IR21a_1) episodes last?

\[
\begin{array}{c}
\text{NUMBER} \\
\hline
\text{CIRCLE UNIT OF TIME:} & \text{DAYS} \ldots 1 & \text{WEEKS} \ldots 2 & \text{MONTHS} \ldots 3 & \text{YEARS} \ldots 4 \\
\text{DON'T KNOW} & 999 \\
\text{REFUSED} & 998 \\
\end{array}
\]

*IR21a_8. INTERVIEWER CHECKPOINT (SEE *IR21a):

\[
\begin{array}{c}
\text{*IR21a EQUALS ‘1’} & \text{................................. 1} \\
\text{ALL OTHERS} & \text{................................. 2} & \text{GO TO *IR21b} \\
\end{array}
\]

*IR21a_9. Has the most recent episode ended or is it still going on?

\[
\begin{array}{c}
\text{ENDED} & \text{................................. 1} \\
\text{STILL GOING ON} & \text{................................. 5} \\
\text{DON'T KNOW} & \text{................................. 9} \\
\text{REFUSED} & \text{................................. 8} \\
\end{array}
\]
*IR21b. About how many days out of 365 were you in an episode of being irritable or grouchy?


DON'T KNOW .............. 999  GO TO *IR35
REFUSED .................. 998  GO TO *IR35

*IR21c. How old were you the last time you had one of these episodes?


DON’T KNOW ................ 999
REFUSED .................... 998

*IR35. How many episodes of being irritable or grouchy lasting (IF *IR23 EQUALS ‘1’: several days or longer/IF *IR23 EQUALS ‘2’: two weeks or longer) have you ever had in your life?


DON’T KNOW ............... 999
REFUSED ................... 998

*IR36. INTERVIEWER CHECKPOINT: (SEE *IR35)

*IR35 EQUALS ‘1’ ....................................................1
ALL OTHERS......................................................2  GO TO *IR47

*IR36_1. How many of these episodes were brought on by some stressful experience?


DON’T KNOW ............... 999
REFUSED ................... 998

*IR38. How long did the longest of these episodes last?


CIRCLE UNIT OF TIME: DAYS ......1 WEEKS...... 2 MONTHS..... 3 YEARS ......4

DON’T KNOW ............... 999
REFUSED ................... 998
*IR39. How many different years in your life did you have at least one episode of being irritable (IF *IR23 EQUALS ‘1’: nearly every month? IF *IR23 EQUALS ‘2’: that lasted two weeks or longer)?

____________ YEARS

DON’T KNOW ....................... 999
REFUSED ......................... 998

*IR47. INTERVIEWER QUERY: (SEE *IR21)

*IR21 EQUALS ‘1’ ..................... 1
ALL OTHERS ......................... 2 GO TO *IR56

*IR48. For the next questions I need you to think about the month during the past 12 months when your irritability or grumpiness was worst. How often did you have each of the following feelings during that month?

<table>
<thead>
<tr>
<th></th>
<th>OFTEN</th>
<th>SOME</th>
<th>OCCAS</th>
<th>NEVER</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*IR48a. How often did you feel cheerful – often, sometimes, occasionally, or never?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR48b. How often during that time did you feel as if you were slowed down – often, sometimes, occasionally, or never?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR48c. How often could you enjoy reading, listening to the radio, or watching a TV program?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>AS MUCH AS USUAL</th>
<th>NOT QUITE AS MUCH</th>
<th>A LITTLE</th>
<th>NOT AT ALL</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*IR49. How often during that time did you still enjoy the things you used to – as much as usual, not quite as much, only a little, or not at all?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR49a. How often could you laugh and see the funny side of things – as much as usual, not quite as much, only a little, or not at all?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR49b. How often did you take interest in how you looked – as much as usual, not quite as much, only a little, or not at all?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*IR49c. How often did you look forward to having fun – as much as usual, not quite as much, only a little, or not at all?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>
*IR50. (RB, PG 37) Think about the one month or longer in the past 12 months when your irritability and related problems were worst. Using the 0 to 10 scale on page 37 in your booklet, where 0 means no problems and 10 means very severe problems, what number describes how much your irritability caused problems with each of the following activities during that time?

(IF NEC: How much did your irritability cause problems with (ACTIVITY) during that time?)

(IF NEC: You can use any number between 0 and 10 to answer.)

NUMBER (0-10)

*IR50a. Your chores at home?

__________

DOES NOT APPLY ..............97
DON’T KNOW ....................99
REFUSED ..........................98

*IR50b. Your ability to do well at school or work?

__________

DOES NOT APPLY ..............97
DON’T KNOW ....................99
REFUSED ..........................98

*IR50c. Your ability to get along with your family

__________

DOES NOT APPLY ..............97
DON’T KNOW ....................99
REFUSED ..........................98

*IR50d. Your social life?

__________

DOES NOT APPLY ..............97
DON’T KNOW ....................99
REFUSED ..........................98

*IR51. INTERVIEWER CHECKPOINT: (SEE *IR50a - *IR50d)

ALL RESPONSES EQUAL “0” ............................................................................1 GO TO *IR56

ALL OTHERS ........................................................................................................2

*IR52. About how many days out of 365 in the past 12 months were you totally unable to go to school or work or carry out your normal activities because of feeling irritable or grouchy?

(IF NEC: You can use any number between 0 and 365 to answer.)

__________ NUMBER OF DAYS

DON’T KNOW ....................999
REFUSED ..........................998
*IR56. Did you ever in your life talk to a medical doctor or other professional about being irritable or grouchy? (By professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES................................................. 1
NO .............................................. 5 GO TO *IR71_1
DON’T KNOW ......................... 9 GO TO *IR71_1
REFUSED ............................... 8 GO TO *IR71_1

*IR56a. How old were you the first time (you talked to a professional about being irritable or grouchy)?

___________ YEARS OLD

DON’T KNOW ................... 999
REFUSED .......................... 998

*IR68. Did you ever get treatment for your irritability or grouchiness that you considered helpful or effective?

YES................................................. 1
NO ............................................. 5 GO TO *IR68c
DON’T KNOW ......................... 9 GO TO *IR68c
REFUSED ............................... 8 GO TO *IR68c

*IR68a. How old were you the first time (you got helpful treatment for your irritability or grouchiness)?

___________ YEARS OLD

DON’T KNOW ................... 999
REFUSED .......................... 998

*IR68b. How many professionals did you ever talk to about your irritability or grouchiness?

___________ NUMBER OF PROFESSIONALS GO TO *IR70

DON’T KNOW ................... 99 GO TO *IR70
REFUSED .......................... 98 GO TO *IR70

*IR68c. How many professionals did you ever talk to about your irritability or grouchiness?

___________ NUMBER OF PROFESSIONALS

DON’T KNOW ................... 99
REFUSED .......................... 98

*IR70. Did you receive professional treatment for your irritability or related problems at any time in the past 12 months?

YES................................................. 1
NO ............................................. 5
DON’T KNOW ......................... 9
REFUSED ............................... 8
*IR71. Were you ever hospitalized overnight for your irritability or related problems?

YES........................................ 1
NO ........................................ 5  GO TO *IR71_1
DON’T KNOW ......................... 9  GO TO *IR71_1
REFUSED ................................. 8  GO TO *IR71_1

*IR71a. How old were you the first time (you were hospitalized overnight because of your irritability or related problems)?

_____________________ YEARS OLD

DON’T KNOW .............. 999
REFUSED .......................... 998

*IR71_1. How many of your close relatives – including your biological parents, brothers and sisters, and children – ever had episodes of being irritable or grouchy?

__________ NUMBER

DON’T KNOW .............. 999
REFUSED .......................... 998


*SC20 EQUALS ‘1’.................................................................1  GO TO *PD1 INTRO 1, NEXT SECTION
*SC20a EQUALS ‘1’............................................................2  GO TO *PD1 INTRO 2, NEXT SECTION
*SC28 EQUALS ‘1’..............................................................3  GO TO *SP1
*SC29_1 EQUALS ‘1’ OR *SC29_2 EQUALS ‘1’ .......................4  GO TO *SO1
*SC30_1 EQUALS ‘1’ OR *SC30_2 EQUALS ‘1’ .......................5  GO TO *AG1
*SC26 EQUALS ‘1’..............................................................6  GO TO *G1, INTRO 1
*SC26a EQUALS ‘1’............................................................7  GO TO *G1 INTRO 2
*SC26b EQUALS ‘1’............................................................9  GO TO *G1 INTRO 3
ALL OTHERS.................................................................8  GO TO *IED1
Earlier you mentioned having attacks of fear or panic when all of a sudden you felt very scared, anxious, or uneasy. Think of a bad attack like that. During that attack, which of the following problems did you have?

**PD1a.** Did your heart beat too fast? *(KEY PHRASE: heart racing)*
**PD1b.** Were you short of breath? *(KEY PHRASE: being short of breath)*
**PD1c.** Did you feel sick to your stomach or have a stomachache? *(KEY PHRASE: stomach problems)*
**PD1d.** Did you feel dizzy or faint? *(KEY PHRASE: feeling dizzy)*
**PD1e.** Did you sweat? *(KEY PHRASE: sweating)*
**PD1f.** Did you tremble or shake? *(KEY PHRASE: trembling)*
**PD1g.** Did your mouth feel dry? *(KEY PHRASE: having a dry mouth)*
**PD1h.** Did you feel like you were choking? *(KEY PHRASE: choking)*
**PD1i.** Did you have pain in your chest or did your chest feel tight? *(KEY PHRASE: having discomfort in your chest)*
**PD1j.** Were you afraid that you might lose control of yourself or go crazy? *(KEY PHRASE: fearing that you might lose control of yourself)*
**PD1k.** Did you feel like you were “not really there”, like you were watching a movie of yourself? *(KEY PHRASE: feeling “no really there”)*
**PD1l.** Did you feel that things around you were not real or like a dream? *(KEY PHRASE: feeling that things around you were unreal)*
**PD1m.** Were you afraid that you might pass out? *(KEY PHRASE: fearing that you might pass out)*
**PD1n.** Were you afraid that you might die? *(KEY PHRASE: fearing that you might die)*
**PD1o.** Did you suddenly feel very hot or have chills? *(KEY PHRASE: having hot flushes)*
**PD1p.** Did your fingers or toes tingle or feel numb? *(KEY PHRASE: having numbness)*

**PD1 Intro 1**

**PD1 Intro 2**

Earlier you mentioned having attacks when all of a sudden you had several problems like being short of breath, your heart beating too fast or feeling dizzy, and being afraid you would die or go crazy. Think of a bad attack like that. During that attack, which of the following problems did you have?

<table>
<thead>
<tr>
<th>Question</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*PD1a. Did your heart beat too fast? <em>(KEY PHRASE: heart racing)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1b. Were you short of breath? <em>(KEY PHRASE: being short of breath)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1c. Did you feel sick to your stomach or have a stomachache? <em>(KEY PHRASE: stomach problems)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1d. Did you feel dizzy or faint? <em>(KEY PHRASE: feeling dizzy)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1e. Did you sweat? <em>(KEY PHRASE: sweating)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1f. Did you tremble or shake? <em>(KEY PHRASE: trembling)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1g. Did your mouth feel dry? <em>(KEY PHRASE: having a dry mouth)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1h. Did you feel like you were choking? <em>(KEY PHRASE: choking)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1i. Did you have pain in your chest or did your chest feel tight? <em>(KEY PHRASE: having discomfort in your chest)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1j. Were you afraid that you might lose control of yourself or go crazy? <em>(KEY PHRASE: fearing that you might lose control of yourself)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1k. Did you feel like you were “not really there”, like you were watching a movie of yourself? <em>(KEY PHRASE: feeling “no really there”)</em></td>
<td>1uitive</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1l. Did you feel that things around you were not real or like a dream? <em>(KEY PHRASE: feeling that things around you were unreal)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1m. Were you afraid that you might pass out? <em>(KEY PHRASE: fearing that you might pass out)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1n. Were you afraid that you might die? <em>(KEY PHRASE: fearing that you might die)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1o. Did you suddenly feel very hot or have chills? <em>(KEY PHRASE: having hot flushes)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PD1p. Did your fingers or toes tingle or feel numb? <em>(KEY PHRASE: having numbness)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>
*PD2. INTERVIEWER CHECKPOINT: (SEE *PD1 SERIES)

ZERO TO THREE RESPONSES CODED ‘1’ ..................... 1  GO TO *PD66
ALL OTHERS.......................................................... 2

*PD3. During your attacks did the problems like (PARENTHEtical PHRASE OF FIRST THREE YES RESPONSES IN *PD1 SERIES) begin suddenly?

(IF NEC: Did they begin within ten minutes after the start of the attack?)

YES............................................................... 1
(IF VOL) SOMETIMES........... 3
NO .............................................. 5  GO TO *PD66
DON’T KNOW ...................... 9  GO TO *PD66
REFUSED ............................... 8  GO TO *PD66

*PD3a. Did these problems reach their peak within ten minutes after the attacks began?

YES ...................................... 1  GO TO *PD4
(IF VOL) SOMETIMES .. 3  GO TO *PD4
NO ...................................... 5
DON’T KNOW ...................... 9  GO TO *PD66
REFUSED ............................... 8  GO TO *PD66

*PD3b. How long did it usually take for these problems to reach their peak?

________ NUMBER
CIRCLE UNIT OF TIME:  MINUTES............ 1  HOURS ............ 2
DON’T KNOW ...................... 999
REFUSED ............................... 998

*PD4. About how many of these sudden attacks have you had in your entire lifetime?

_______ NUMBER OF ATTACKS

IF R REPORTS MORE THAN 900...........................................900
IF R REPORTS “MORE THAN I CAN REMEMBER”.............995
DON’T KNOW .........................................................999
REFUSED ..............................................................998

*PD5. INTERVIEWER CHECKPOINT: (SEE *PD4)

*PD4 EQUALS ‘1’ ............................... 1
ALL OTHERS................................. 2  GO TO *PD9

*PD6. When did you have the attack – in the past month, two to six months ago, seven to twelve months ago, or more than twelve months ago?
PAST MONTH............................................. 1  GO TO *PD8
TWO TO SIX MONTHS ............................. 2  GO TO *PD8
SEVEN TO TWELVE MONTHS ............... 3  GO TO *PD8
MORE THAN TWELVE MONTHS ........... 4  GO TO *PD8
DON’T KNOW ............................................ 9
REFUSED .................................................... 8

*PD7.  Can you remember your exact age when the attack occurred?

YES.............................................. 1
NO ............................................ 5  GO TO *PD7b
DON’T KNOW ......... 9  GO TO *PD7b
REFUSED .............. 8  GO TO *PD7b

*PD7a.  (IF NEC: How old were you?)

________ YEARS OLD  GO TO *PD8

DON’T KNOW ............. 999  GO TO *PD8
REFUSED .............. 998  GO TO *PD8

*PD7b.  About how old were you the first time?

________ YEARS OLD  GO TO *PD8

DON’T KNOW ............. 999  GO TO *PD7b1
REFUSED .............. 998  GO TO *PD7b3
ALL MY LIFE ............. 997  GO TO *PD7b3
AS LONG AS I CAN REMEMBER ......... 997  GO TO *PD7b3

*PD7b1.  Can you remember what grade you were in at school?

YES .............................................. 1
NO ............................................ 5  GO TO *PD7b3
DON’T KNOW ......... 9  GO TO *PD7b3
REFUSED .............. 8  GO TO *PD7b3

*PD7b2.  What grade was that?

KINDERGARTEN ............. 0  7TH GRADE ............. 7
1ST GRADE .............. 1  8TH GRADE ............. 8
2ND GRADE ............. 2  HIGH SCHOOL FRESHMAN .......... 9
3RD GRADE ............. 3  HIGH SCHOOL SOPHOMORE ... 10
4TH GRADE ............. 4  HIGH SCHOOL JUNIOR .......... 11
5TH GRADE ............. 5  HIGH SCHOOL SENIOR .......... 12
6TH GRADE ............. 6  ANY COLLEGE ............. 13
*PD7b3. Was it before you first started school?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*PD7b4. Was it before you were a teenager?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*PD8. Attacks of this sort can occur in three different situations. The first are when the attacks occur unexpectedly “out of the blue.” The second are when a person has an unreasonably strong fear. For example, some people have a terrible fear of bugs or of heights or of being in a crowd. The third are when a person is in real danger, like a car accident or a bank robbery.

Which of these three describes your attack – did it occur unexpectedly “out of the blue,” in a situation that you strongly fear, or in a situation of real danger?

IF R THOUGHT THERE WAS REAL DANGER EVEN THOUGH IT TURNED OUT NOT TO BE DANGEROUS, CODE “REAL DANGER.”

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>OUT OF THE BLUE</td>
<td>1</td>
</tr>
<tr>
<td>STRONG FEAR</td>
<td>2</td>
</tr>
<tr>
<td>REAL DANGER</td>
<td>3</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *PD66

*PD9. Can you remember your exact age the very first time you had one of these attacks?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*PD9a. (IF NEC: How old were you?)

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YEARS OLD</td>
<td></td>
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</tbody>
</table>

GO TO *PD10

*PD9b. About how old were you the first time?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YEARS OLD</td>
<td></td>
</tr>
</tbody>
</table>

GO TO *PD10
*PD9b1. Can you remember what grade you were in at school?

YES ........................................ 1
NO ........................................ 5   GO TO *PD9b3
DON’T KNOW ......................... 9   GO TO *PD9b3
REFUSED ............................... 8   GO TO *PD9b3

*PD9b2. What grade was that?

KINDERGARTEN.................. 0    7TH GRADE.............................. 7
1ST GRADE......................... 1    8TH GRADE.............................. 8
2ND GRADE.......................... 2    HIGH SCHOOL FRESHMAN....... 9
3RD GRADE........................... 3    HIGH SCHOOL SOPHOMORE..... 10
4TH GRADE............................ 4    HIGH SCHOOL JUNIOR......... 11
5TH GRADE............................. 5    HIGH SCHOOL SENIOR....... 12
6TH GRADE............................. 6    ANY COLLEGE................... 13

*PD9b3. Was it before you first started school?

YES ........................................ 1   GO TO *PD10
NO .......................................... 5
DON’T KNOW ............................ 9
REFUSED ...................................... 8

*PD9b4. Was it before you were a teenager?

YES ........................................ 1
NO .......................................... 5
DON’T KNOW ............................ 9
REFUSED ...................................... 8

*PD10. Did you have one of these attacks at any time in the past 12 months?

YES....................................... 1
NO .......................................... 5   GO TO *PD10d
DON’T KNOW ............................ 9   GO TO *PD10d
REFUSED ...................................... 8   GO TO *PD11

*PD10a. When was the last time – in the past month, between two and six months ago, or more than six months ago?

PAST MONTH................................................. 1
BETWEEN TWO AND SIX MONTHS AGO ...... 2
MORE THAN SIX MONTHS AGO.................. 3
DON’T KNOW ............................................ 9
REFUSED ...................................................... 8

*PD10b. How many weeks in the past 12 months did you have at least one attack?

______ NUMBER

DON’T KNOW .................. 99
REFUSED ....................... 98
*PD10c. And how many attacks in all did you have in the past 12 months?

_________ NUMBER GO TO *PD11

DON’T KNOW ............ 99   GO TO *PD11
REFUSED.................. 98   GO TO *PD11

*PD10d. How old were you the last time you had one of these attacks?

_________ YEARS OLD

DON’T KNOW ...............999
REFUSED.....................998

*PD11. What is the largest number of attacks you ever had in any single year of your life?

_________ NUMBER OF ATTACKS

DON’T KNOW ............999
REFUSED.....................998

*PD12. About how many different years in your life did you have at least one attack?

_______ YEARS

DON’T KNOW ...............999
REFUSED.....................998
**PD13.** After having one of these attacks, did you ever have a month or more when any of the following things happened:

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>PD13a. A month or more when you often worried that you might have another attack?</td>
<td>1 GO TO *PD15</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>PD13b. A month or more when you worried that something terrible might happen because of the attacks, like having a car accident, having a heart attack, or losing control?</td>
<td>1 GO TO *PD15</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>PD13c. A month or more when you changed your regular activities because of the attacks?</td>
<td>1 GO TO *PD15</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>PD13d. A month or more when you stayed away from certain situations because of fear about having another attack?</td>
<td>1 GO TO *PD15</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**PD14.** INTERVIEWER CHECKPOINT: (SEE **PD13a-d**)

AT LEAST ONE RESPONSE CODED ‘1’ ......................... 1
ALL OTHERS...................................................... 2  GO TO *PD17

**PD15.** How old were you the first time you had a month when you either worried a lot, changed your everyday activities, or stayed away from certain situations because of the attacks?

_______ YEARS OLD

DON’T KNOW ................. 999
REFUSED ......................... 998
**PD16.** Did you have a month of worry or change in activity like that in the past 12 months?

YES...............................1
NO.................................5  GO TO **PD16e**
DON’T KNOW.............9  GO TO **PD16e**
REFUSED.....................8  GO TO **PD16e**

**PD16a.** How recently – in the past month, between two and six months ago, or more than six months ago?

PAST MONTH........................................................1
BETWEEN TWO AND SIX MONTHS .................2
MORE THAN SIX MONTHS ..............................3
DON’T KNOW ...................................................9
REFUSED..........................................................8

**PD16b.** How many months of worry or change in activity did you have in the past 12 months?

________ NUMBER OF MONTHS

DON’T KNOW ................. 99
REFUSED................................................. 98

**PD16c.** Think of the time in the past 12 months when your worry about having another attack was the worst. Did you worry nearly all the time, most of the time, often, sometimes, or not very often?

NEARLY ALL THE TIME ......................................... 1
MOST OF THE TIME ................................................. 2
OFTEN ............................................................... 3
SOMETIMES ............................................................. 4
NOT VERY OFTEN .................................................... 5
DON’T KNOW ......................................................9
REFUSED..........................................................8

**PD16d.** And how bad was the worry during this time -- mild, moderate, severe, or so severe that you were unable to carry out important tasks?

MILD................................................................. 1
MODERATE .......................................................... 2
SEVERE............................................................ 3
SO SEVERE ............................................................ 4
DON’T KNOW ......................................................9
REFUSED..........................................................8

GO TO **PD17**

**PD16e.** About how old were you the last time you had a month like this when you worried about having another attack?

________ YEARS OLD

DON’T KNOW............. 999
REFUSED..................... 998
*PD17. Attacks of this sort can occur in three different situations. The first is when the attacks occur unexpectedly “out of the blue.” The second is when a person has an unreasonably strong fear. For example, some people have a terrible fear of bugs or of heights or of being in a crowd. The third is when a person is in real danger, like a car accident or a bank robbery.

The next question is about how many of your attacks occurred in each of these three kinds of situations. Did you ever have an attack that occurred unexpectedly “out of the blue?”

YES................................................. 1
NO .................................................. 5  GO TO *PD18
DON’T KNOW .............................. 9  GO TO *PD18
REFUSED ................................. 8  GO TO *PD18

*PD17a. About how many attacks in your lifetime happened unexpectedly “out of the blue?”

_________ NUMBER OF ATTACKS

IF R REPORTS MORE THAN 900 .................................................. 900
IF R REPORTS “MORE THAN I CAN REMEMBER” .... 995
DON’T KNOW ................................................................. 999
REFUSED .............................................................................. 998

*PD17a_1.INTERVIEWER CHECKPOINT: (SEE *PD17a)

*PD17a EQUALS ‘2’ TO ‘900’.............. 1
ALL OTHERS ......................... 2

*PD18. About how many attacks in your lifetime happened in situations where you were not in real danger, but where you were very afraid for no good reason?

_________ NUMBER OF ATTACKS

IF R REPORTS MORE THAN 900 .................................................. 900
IF R REPORTS “MORE THAN I CAN REMEMBER” .... 995
DON’T KNOW ................................................................. 999
REFUSED .............................................................................. 998

*PD19. About how many attacks in your lifetime happened in situations where you were in real danger?

   IF R THOUGHT THERE WAS REAL DANGER EVEN THOUGH IT TURNED OUT NOT TO BE DANGEROUS CODE “REAL DANGER.”

_________ NUMBER OF ATTACKS

IF R REPORTS MORE THAN 900 .................................................. 900
IF R REPORTS “MORE THAN I CAN REMEMBER” .... 995
DON’T KNOW ................................................................. 999
REFUSED .............................................................................. 998
*PD20. INTERVIEWER CHECKPOINT: (SEE *PD17)

*PD17 EQUALS ‘1’ ....................... 1
ALL OTHERS ............................. 2  GO TO *PD66

*PD20a. INTERVIEWER CHECKPOINT: (SEE *PD18 - *PD19)

*PD18 EQUALS ‘0’ AND *PD19 EQUALS ‘0’ ............................. 1  GO TO *PD22
ALL OTHERS ............................................................................... 2

*PD21. How old were you (when you had the attack/the first time you had an attack) “out of the blue” for no good reason?

IF DON’T KNOW, PROBE: Can you remember what grade you were in at school?

IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before you first started school?

IF NOT YES, PROBE: Was it before you were a teenager?

__________  YEARS OLD  OR  __________  GRADE
BEFORE STARTED SCHOOL .................................. 4
BEFORE TEENAGER ............................................. 12
NOT BEFORE TEENAGER ....................................... 13
WHOLE LIFE OR DON’T KNOW ........................ 999
REFUSED ........................................................ 998

*PD22. How much did (this/these) sudden “out of the blue” attack(s) or your worry about having another attack ever cause problems with either your school work, your job, or your relationships with family or friends – not at all, a little, some, a lot, or extremely?

NOT AT ALL ................................................ 1
A LITTLE ...................................................... 2
SOME .......................................................... 3
A LOT ........................................................... 4
EXTREMELY .............................................. 5
DON’T KNOW ............................................. 9
REFUSED .................................................... 8

*PD23. INTERVIEWER CHECKPOINT: (SEE *PD17a)

*PD17A EQUALS ‘1’ ................................. 1
ALL OTHERS ............................................. 2  GO TO *PD24a
*PD24. Did this sudden “out of the blue” attack happen while you were asleep?

YES...................................1
NO....................................5
DON’T KNOW.................9
REFUSED.......................8

GO TO *PD66

*PD24a. How many of your sudden “out of the blue” attacks occurred while you were asleep?

_________ NUMBER

DON’T KNOW.................99
REFUSED.......................98

*PD25a. Attacks of this sort sometimes occur as a result of physical causes such as being sick or injured or the use of medication, drugs, or alcohol. Do you think any of your attacks ever occurred as the result of such physical causes?

YES ................................ 1
NO ..................................... 5   GO TO *PD33
DON’T KNOW ................. 9   GO TO *PD33
REFUSED ......................... 8   GO TO *PD33

*PD25b. Do you think all of your attacks were the result of physical causes?

YES ................................ 1
NO ..................................... 5   GO TO *PD33
DON’T KNOW ................. 9   GO TO *PD33
REFUSED ......................... 8   GO TO *PD33

*PD25c. Briefly, what were the physical causes?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

*PD33. INTERVIEWER CHECKPOINT: (SEE *PD20a)

*PD20a EQUALS ‘1’ ................. 1
ALL OTHERS...................... 2   GO TO *PD35

*PD34. INTERVIEWER CHECKPOINT: (SEE *PD10)

*PD10 EQUALS ‘1’ ................. 1   GO TO *PD40
ALL OTHERS...................... 2   GO TO *PD39
*PD35. INTERVIEWER CHECKPOINT: (SEE *PD10)

*PD10 EQUALS ‘1’ ...................... 1
ALL OTHERS ...................... 2 \text{ GO TO *PD39}

*PD36. How many sudden “out of the blue” attacks did you have in the past 12 months?

_________ NUMBER OF ATTACKS

DON’T KNOW ...................... 999
REFUSED ...................... 998

*PD37. INTERVIEWER CHECKPOINT: (SEE *PD36)

*PD36 EQUALS “0” ...................... 1

*PD36 EQUALS “1” ...................... 2 \text{ GO TO *PD38}

ALL OTHERS ...................... 3 \text{ GO TO *PD37b}

*PD37a. How old were you the last time you had a sudden “out of the blue” attack?

_________ YEARS OLD \text{ GO TO *PD39}

DON’T KNOW .............. 99 \text{ GO TO *PD39}
REFUSED .............. 98 \text{ GO TO *PD39}

*PD37b. About how many weeks in the past 12 months did you have at least one of these attacks?

_________ NUMBER

DON’T KNOW .............. 99
REFUSED .............. 98
*PD38. When was the last time – in the past month, between two and six months ago, or more than six months ago?

PAST MONTH............................................. 1
BETWEEN TWO AND SIX MONTHS...... 2
MORE THAN SIX MONTHS ............... 3
DON’T KNOW........................................ 9
REFUSED ............................................ 8

GO TO *PD40

*PD39. INTERVIEWER CHECKPOINT: (SEE *PD16)

*PD16 EQUALS ‘1’ ..................... 1 GO TO *PD41
ALL OTHERS ......................... 2 GO TO *PD50

*PD40. When you had an attack in the past 12 months, how upset did you feel during the attack itself -- none, mild, moderate, severe, or so severe that you were unable to concentrate and had to stop what you were doing?

NONE................................................ 1
MILD .............................................. 2
MODERATE ....................................... 3
SEVERE ........................................... 4
SO SEVERE ...................................... 5
DON’T KNOW ................................ 9
REFUSED ...................................... 8

*PD41. Sometimes people with attacks get upset by feelings in their bodies that remind them of the attacks. Examples include being out of breath after physical exercise, feeling speeded up after drinking coffee or caffeinated beverages, feeling out of control after using alcohol or drugs, and feeling tingly while watching a scary movie or television show. In the past 12 months, did you ever get upset by any feelings in your body that reminded you of your attacks?

YES ...................................... 1
NO ............................................. 5 GO TO *PD44
DON’T KNOW ....................... 9 GO TO *PD44
REFUSED .............................. 8 GO TO *PD44

*PD41a. How upset did you get by these feelings in your body in the past 12 months – mild, moderate, severe, or so severe that you became very worried that these feelings might cause you to have another attack?

MILD ............................................ 1
MODERATE ................................... 2
SEVERE ......................................... 3
SO SEVERE .................................. 4
DON’T KNOW ........................... 9
REFUSED ................................. 8

110
*PD42. In the past twelve months, how often did you stay away from situations or activities that might cause these feelings in your body – all the time, most of the time, sometimes, not very often, or never?

ALL THE TIME............................... 1
MOST OF THE TIME ..................... 2
SOMETIMES ................................... 3
NOT VERY OFTEN ...................... 4 GO TO *PD44
NEVER ......................... 5 GO TO *PD44
DON'T KNOW ................... 9 GO TO *PD44
REFUSED .......................... 8 GO TO *PD44

*PD43. How much did staying away from these situations cause problems with either your school work, your job, or your relationships with family or friends over the past 12 months -- not at all, a little, some, a lot, or extremely?

NOT AT ALL ....................... 1
A LITTLE ......................... 2
SOME ......................... 3
A LOT ......................... 4
EXTREMELY .................... 5
DON'T KNOW ................... 9
REFUSED ....................... 8
**PD44.** (RB, PG 37) Think about the time lasting one month or longer in the past 12 months when your attack(s) or worry about the attacks (was/were) worst. Using the 0 to 10 scale on page 37 of your booklet, where 0 means no problems and 10 means very severe problems, what number describes how much the attack(s) or worry about the attacks caused problems with each of the following activities during that time?

(IF NEC: How much did the attacks cause problems with (ACTIVITY) during that time?)

IF NEC: You can use any number between 0 and 10 to answer.

<table>
<thead>
<tr>
<th>NUMBER (0-10)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PD44a.</strong> Your chores at home?</td>
</tr>
<tr>
<td>DOES NOT APPLY ......97</td>
</tr>
<tr>
<td>DON’T KNOW ..........99</td>
</tr>
<tr>
<td>REFUSED..................98</td>
</tr>
<tr>
<td><strong>PD44b.</strong> Your ability to do well at school or work?</td>
</tr>
<tr>
<td>DOES NOT APPLY ......97</td>
</tr>
<tr>
<td>DON’T KNOW ..........99</td>
</tr>
<tr>
<td>REFUSED..................98</td>
</tr>
<tr>
<td><strong>PD44c.</strong> Your ability to get along with your family?</td>
</tr>
<tr>
<td>DOES NOT APPLY ......97</td>
</tr>
<tr>
<td>DON’T KNOW ..........99</td>
</tr>
<tr>
<td>REFUSED..................98</td>
</tr>
<tr>
<td><strong>PD44d.</strong> Your social life?</td>
</tr>
<tr>
<td>DOES NOT APPLY ......97</td>
</tr>
<tr>
<td>DON’T KNOW ..........99</td>
</tr>
<tr>
<td>REFUSED..................98</td>
</tr>
</tbody>
</table>

**PD45.** INTERVIEWER CHECKPOINT: (SEE *PD44a - *PD44d)

ALL RESPONSES EQUAL ‘0’........................................................................................................................................1  
GO TO *PD50

ALL OTHERS.........................................................................................................................................................2

**PD46.** About how many days out of 365 in the past 12 months were you totally unable to go to school or work or carry out your normal activities because of your attacks or because of worry about the attacks?

(IF NEC: You can use any number between 0 and 365 to answer)

_______ NUMBER OF DAYS

DON’T KNOW .................999

REFUSED .......................998
*PD50. Did you ever in your life talk to a medical doctor or other professional about your attacks? (By professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES ................................................... 1
NO .................................................. 5  GO TO *PD65_1
DON’T KNOW .............................. 9  GO TO *PD65_1
REFUSED ....................................... 8  GO TO *PD65_1

*PD50a. How old were you the first time (you talked to a professional about your attacks)?

_____________ YEARS OLD

DON’T KNOW ............... 999
REFUSED .................... 998

*PD62. Did you ever get treatment for your attacks that you considered helpful or effective?

YES ................................... 1
NO .................................... 5  GO TO *PD62c
DON’T KNOW ..................... 9  GO TO *PD62c
REFUSED ...................... 8  GO TO *PD62c

*PD62a. How old were you the first time (you got helpful treatment for your attacks)?

_____________ YEARS OLD

DON’T KNOW ............... 999
REFUSED .................... 998

*PD62b. How many professionals did you ever talk to about your attacks?

_____________ NUMBER OF PROFESSIONALS  GO TO *PD64

DON’T KNOW ............... 99  GO TO *PD64
REFUSED .................... 98  GO TO *PD64

*PD62c. How many professionals did you ever talk to about your attacks?

_____________ NUMBER OF PROFESSIONALS

DON’T KNOW ............... 99
REFUSED .................... 98
*PD64. Did you receive professional treatment for your attacks at any time in the past 12 months?

YES................................................................. 1
NO.......................................................... 5
DON’T KNOW.......................... 9
REFUSED.................................................. 8

*PD65. Were you ever hospitalized overnight for your attacks?

YES ................................................................. 1
NO.......................................................... 5
GO TO *PD65_1
DON’T KNOW.......................... 9
GO TO *PD65_1
REFUSED.................................................. 8
GO TO *PD65_1

*PD65a. How old were you the first time (you were hospitalized overnight because of your attacks)?

_____________ YEARS OLD

DON’T KNOW............... 999
REFUSED....................... 998

*PD65_1. How many of your close relatives – including your biological parents, brothers and sisters, and children – ever had attacks of this sort?

__________ NUMBER

DON’T KNOW............... 999
REFUSED....................... 998


*SC29 EQUALS ‘1’ OR *SC29a EQUALS ‘1’ ................................................... 2
GO TO *SO1
*SC30 EQUALS ‘1’................................................................................... 3
GO TO *AG1
*SC26 EQUALS ‘1’...................................................................................... 4
GO TO *G1 INTRO 1
*SC26a EQUALS ‘1’.................................................................................. 5
GO TO *G1 INTRO 2
*SC26b EQUALS ‘1’.................................................................................. 6
GO TO *G1 INTRO 3
ALL OTHERS......................................................................................... 7
GO TO *IED1
**SOCIAL PHOBIA SECTION (SO)**

INTERVIEWER INSTRUCTION: AFTER EACH “YES” RESPONSE, ASK R TO CHECK OFF CORRESPONDING SITUATION IN BOOKLET.

*SO1. (RB, PG 19) Earlier you mentioned having a time in your life when you felt really shy, afraid, or uncomfortable with other people or when you had to do something in front of others. Looking at page 19 in your booklet, did you ever feel really shy, afraid, or uncomfortable in any of the following situations?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SO1a. Meeting new people your own age?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: meeting new people)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1b. Talking to people in authority, like teachers, coaches, or other adults you don’t know very well?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: talking to people in authority)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1c. Speaking in class when a teacher asks a question or when a teacher calls on you?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: speaking in class)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1d. Being with a group of people your own age, like at a party or in the lunchroom at school?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: going to parties)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1e. Acting, performing, or giving a talk in front of a group of people?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: performing in front of an audience)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1f. Taking an important test or exam or interviewing for a job, even though you were well prepared?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: taking an important exam)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1g. Working or doing homework while someone watches?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: working while someone watches)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1h. Going into a room that already has people in it?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: going into a room)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1i. Talking with people you don’t know very well?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: talking to strangers)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1j. Disagreeing with people you don’t know very well?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: disagreeing with people)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1k. Writing or eating or drinking while someone watches?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: doing things while someone watches)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SO1l. Using a bathroom away from home?</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>(KEY PHRASE: using a public bathroom)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
*SO1m. Going out with or dating someone you are interested in? (KEY PHRASE: going out or dating)

1 5 7 9 8

*SO1n. Any other situation where you could be the center of attention or where something embarrassing might happen? (KEY PHRASE: a situation where you might be embarrassed)

1 5 7 9 8

*SO2. INTERVIEWER CHECKPOINT: (SEE *SO1a - *SO1n SERIES)

ZERO RESPONSES CODED ‘1’ ........................................................ 1 GO TO *SO40
ONE RESPONSE CODED ‘1’ ......................................................... 2 GO TO *SO3 INTRO1
TWO-THREE RESPONSES CODED ‘1’ ........................................... 3 GO TO *SO3 INTRO1
FOUR OR MORE RESPONSES CODED ‘1’ .................................... 4 GO TO *SO3 INTRO2

*SO3. INTRO1
You felt afraid of (KEY PHRASE OF ALL “YES” RESPONSES IN *SO1 SERIES). Can you remember your exact age the very first time you felt afraid of (this/any of these) situation(s)?

YES .........................1
NO .............................5 GO TO *SO3b
DON’T KNOW ...............9 GO TO *SO3b
REFUSED .....................8 GO TO *SO3b

*SO3. INTRO2
You felt afraid of a number of social situations on the list. Can you remember your exact age the very first time you felt afraid of any of these situations?

YES .............................1
NO .............................5 GO TO *SO3b
DON’T KNOW ...............9 GO TO *SO3b
REFUSED .....................8 GO TO *SO3b

*SO3a. (IF NEC: How old were you?)

__________ YEARS OLD GO TO *SO4

DON’T KNOW ...............999 GO TO *SO4
REFUSED .....................998 GO TO *SO4

*SO3b. About how old were you the first time?

__________ YEARS OLD GO TO *SO4

DON’T KNOW ...............999 GO TO *SO3b1
REFUSED .....................998 GO TO *SO3b3
ALL MY LIFE ..................997 GO TO *SO3b3
AS LONG AS I CAN REMEMBER........997 GO TO *SO3b3

*SO3b1. Can you remember what grade you were in at school?

YES .........................1
NO .............................5 GO TO *SO3b3
DON’T KNOW ...............9 GO TO *SO3b3
REFUSED .....................8 GO TO *SO3b3
**SO3b2.** What grade was that?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINDERGARTEN</td>
<td>0</td>
</tr>
<tr>
<td>1ST GRADE</td>
<td>1</td>
</tr>
<tr>
<td>2ND GRADE</td>
<td>2</td>
</tr>
<tr>
<td>3RD GRADE</td>
<td>3</td>
</tr>
<tr>
<td>4TH GRADE</td>
<td>4</td>
</tr>
<tr>
<td>5TH GRADE</td>
<td>5</td>
</tr>
<tr>
<td>6TH GRADE</td>
<td>6</td>
</tr>
<tr>
<td>7TH GRADE</td>
<td>7</td>
</tr>
<tr>
<td>8TH GRADE</td>
<td>8</td>
</tr>
<tr>
<td>HIGH SCHOOL FRESHMAN</td>
<td>9</td>
</tr>
<tr>
<td>HIGH SCHOOL SOPHOMORE</td>
<td>10</td>
</tr>
<tr>
<td>HIGH SCHOOL JUNIOR</td>
<td>11</td>
</tr>
<tr>
<td>HIGH SCHOOL SENIOR</td>
<td>12</td>
</tr>
<tr>
<td>ANY COLLEGE</td>
<td>13</td>
</tr>
</tbody>
</table>

**SO3b3.** Was it before you first started school?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**SO3b4.** Was it before you were a teenager?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**SO4.** Do you think the fear was ever much stronger than it should have been?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**SO6.** INTERVIEWER CHECKPOINT: (SEE *SC29.2)

**SC29.2**

- EQUALS ‘1’ .......... 1
- ALL OTHERS.............. 2

GO TO *SO8

**SO6a.** Earlier in the interview, you mentioned having times when you stayed away from social or performance situations because of your fear. How old were you the first time you started to stay away from these situations?

<table>
<thead>
<tr>
<th>Years Old</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW</td>
<td>.999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>.998</td>
</tr>
<tr>
<td>ALL MY LIFE</td>
<td>.997</td>
</tr>
<tr>
<td>AS LONG AS I CAN REMEMBER</td>
<td>.997</td>
</tr>
</tbody>
</table>

GO TO *SO6a1

**SO6a1.** Can you remember what grade you were in at school?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINDERGARTEN</td>
<td>0</td>
</tr>
<tr>
<td>1ST GRADE</td>
<td>1</td>
</tr>
<tr>
<td>2ND GRADE</td>
<td>2</td>
</tr>
<tr>
<td>3RD GRADE</td>
<td>3</td>
</tr>
<tr>
<td>4TH GRADE</td>
<td>4</td>
</tr>
<tr>
<td>5TH GRADE</td>
<td>5</td>
</tr>
<tr>
<td>6TH GRADE</td>
<td>6</td>
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<tr>
<td>7TH GRADE</td>
<td>7</td>
</tr>
<tr>
<td>8TH GRADE</td>
<td>8</td>
</tr>
<tr>
<td>HIGH SCHOOL FRESHMAN</td>
<td>9</td>
</tr>
<tr>
<td>HIGH SCHOOL SOPHOMORE</td>
<td>10</td>
</tr>
<tr>
<td>HIGH SCHOOL JUNIOR</td>
<td>11</td>
</tr>
<tr>
<td>HIGH SCHOOL SENIOR</td>
<td>12</td>
</tr>
<tr>
<td>ANY COLLEGE</td>
<td>13</td>
</tr>
</tbody>
</table>
**SO6a.** What grade was that?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kindergarten</td>
<td>0</td>
</tr>
<tr>
<td>1st Grade</td>
<td>1</td>
</tr>
<tr>
<td>2nd Grade</td>
<td>2</td>
</tr>
<tr>
<td>3rd Grade</td>
<td>3</td>
</tr>
<tr>
<td>4th Grade</td>
<td>4</td>
</tr>
<tr>
<td>5th Grade</td>
<td>5</td>
</tr>
<tr>
<td>6th Grade</td>
<td>6</td>
</tr>
<tr>
<td>7th Grade</td>
<td>7</td>
</tr>
<tr>
<td>8th Grade</td>
<td>8</td>
</tr>
<tr>
<td>High School Freshman</td>
<td>9</td>
</tr>
<tr>
<td>High School Sophomore</td>
<td>10</td>
</tr>
<tr>
<td>High School Junior</td>
<td>11</td>
</tr>
<tr>
<td>High School Senior</td>
<td>12</td>
</tr>
<tr>
<td>Any College</td>
<td>13</td>
</tr>
</tbody>
</table>

**SO6a3.** Was it before you first started school?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
</tr>
<tr>
<td>Don’t Know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

**SO6a4.** Was it before you were a teenager?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
</tr>
<tr>
<td>Don’t Know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

**SO8.** Think of the time in your life when your fear was worst. When you were faced with (this situation/ these situations), or thought you would have to be, did you ever have any of the following experiences?

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SO8a.</strong> Did you blush or did your hands or body shake?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SO8b.</strong> Were you afraid that if you did not run to the bathroom quickly you might have an accident?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SO8c.</strong> Were you ever afraid that you might vomit?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>
*SO9. (RB, PG 20) When you were faced with (IF *SO2 EQUALS ‘2’: KEY PHRASE/ ALL OTHERS: these situations), did you ever have two or more of the reactions on Page 20?

READ LIST BELOW STARTING WITH SO9a ONLY IF R PREFERS TO HAVE QUESTIONS READ

YES ................................... 1
NO ..................................... 5
DON’T KNOW ...................... 8
REFUSED ........................... 9

GO TO *SO10

GO TO *SO10 AFTER TWO “YES” RESPONSES

<table>
<thead>
<tr>
<th>R</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SO9a. Did your heart beat too fast?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9b. Did you sweat?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9c. Did your hands or body shake?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9d. Did you feel sick to your stomach?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9e. Did your mouth feel dry?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9f. Did you have chills or suddenly feel very hot?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9g. Did your fingers or toes tingle or feel numb?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9h. Did you have trouble breathing normally?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9i. Did you feel like you were choking?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9j. Did you have pain in your chest or did your chest feel tight?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9k. Did you feel dizzy or faint?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9l. Were you afraid that you might die?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9m. Did you fear that you might lose control, go crazy, or pass out?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SO9n. Did you feel like you were “not really there”, like you were watching a movie of yourself?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *SO10

*SO9o. Did you feel that things around you were not real or like a dream? | 1 | 5 | 9 | 8 |
**SO10.** When you were in (this situation/ these situations), were you ever afraid that you might have a sudden attack of feeling very afraid or panicked?

- YES .................................... 1
- NO ...................................... 5  **GO TO *SO11**
- DON’T KNOW ........................ 9  **GO TO *SO11**
- REFUSED .............................. 8  **GO TO *SO11**

**SO10a.** Did you ever have a sudden attack of feeling very afraid or panicked in (this situation / one of these situations)?

- YES .................................... 1
- NO ...................................... 5
- DON’T KNOW ........................ 9
- REFUSED .............................. 8

**SO11.** Were you afraid that you might be trapped or unable to get away?

- YES .................................... 1
- NO ...................................... 5
- DON’T KNOW ........................ 9
- REFUSED .............................. 8

**SO12.** When you were in (IF *SO2 EQUALS ‘2’: this situation/ ALL OTHERS: these situations) were you afraid you might do something to embarrass yourself or to make a fool of yourself?

- YES .................................... 1  **GO TO *SO15**
- NO ...................................... 5
- DON’T KNOW ........................ 9
- REFUSED .............................. 8

**SO12a.** Were you afraid that you might embarrass other people?

- YES .................................... 1  **GO TO *SO15**
- NO ...................................... 5
- DON’T KNOW ........................ 9
- REFUSED .............................. 8

**SO13.** Were you afraid that people might look at you, talk about you, or think bad things about you?

- YES .................................... 1  **GO TO *SO15**
- NO ...................................... 5
- DON’T KNOW ........................ 9
- REFUSED .............................. 8
*SO14. Were you afraid that you might be the center of attention?

YES ........................................1   GO TO *SO15
NO ........................................5
DON’T KNOW .........................9
REFUSED .............................8

*SO14a. What was it you were afraid of the most about (IF *SO2 EQUALS ‘2’ : KEY PHRASE/ ALL OTHERS : these situations)?

REAL DANGER (SPECIFY BELOW) ..............1
OTHER (SPECIFY BELOW) ....................5
DON’T KNOW .....................................9
REFUSED .........................................8

_____________________________________
_____________________________________
_____________________________________

*SO15. Was your fear related to being embarrassed about a physical problem, like stuttering or acne?

YES ........................................1   GO TO *SO16
NO ........................................5   GO TO *SO16
DON’T KNOW .................................9   GO TO *SO16
REFUSED .......................................8

*SO15a. Briefly, what was the physical problem? INTERVIEWER: CIRCLE ALL THAT APPLY

MENTAL HEALTH PROBLEM .........................1
ALCOHOL OR DRUG PROBLEM ..........................2
SPEECH, VISION, OR HEARING PROBLEM ............3
MOVEMENT OR COORDINATION PROBLEM .............4
FACIAL / BODY DISFIGUREMENT OR
WEIGHT / BODY IMAGE PROBLEM ....................5
BAD ODOR OR SWEATING .............................6
PREGNANCY .........................................7
OTHER PHYSICAL HEALTH PROBLEM ...............8
DON’T KNOW .......................................99
REFUSED ...........................................98

*SO16. How much did your fear (or staying away from these situations) ever cause problems with your school work, your job, or your relationships with family or friends – not at all, a little, some, a lot, or extremely?

NOT AT ALL ......................................1
A LITTLE ................................ ..........2
SOME ..............................................3
A LOT .............................................4
EXTREMELY .......................................5
DON’T KNOW .....................................9
REFUSED ..........................................8
**SO17.** Was there ever a time in your life when you felt upset with yourself because of your fear (or avoidance) of (IF *SO2 EQUALS ‘2’ : this situation/ ALL OTHERS : these situations)?

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**SO18.** When was the last time you either felt afraid or stayed away from (IF *SO2 EQUALS ‘2’ : this situation/ ALL OTHERS : any of these situations) – within the past month, between two and six months ago, between seven and twelve months ago, or more than twelve months ago?

<table>
<thead>
<tr>
<th>Time Frame</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>WITHIN PAST MONTH .</td>
<td>1</td>
</tr>
<tr>
<td>2 AND 6 MONTHS</td>
<td>2</td>
</tr>
<tr>
<td>7 AND 12 MONTHS</td>
<td>3</td>
</tr>
<tr>
<td>MORE THAN 12 MONTHS</td>
<td>4</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**SO18a.** How old were you the last time [you either strongly feared or stayed away from (IF *SO2 EQUALS ‘2’ : this situation/ ALL OTHERS : any of these situations)]?

YEARS OLD

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
</tbody>
</table>

**SO19.** What if you were faced with (IF *SO2 EQUALS ‘2’ : this situation/ ALL OTHERS : one of these situations) today: How afraid would you be – not at all afraid, not very afraid, somewhat, very, or extremely afraid?

(IF VOLUNTEERED “IT DEPENDS ON WHICH SITUATION,” PROBE: What if you were faced with the situation that scares you most: How afraid would you be – not at all afraid, not very afraid, somewhat, very, or extremely afraid?)

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOT AT ALL</td>
<td>1</td>
</tr>
<tr>
<td>NOT VERY</td>
<td>2</td>
</tr>
<tr>
<td>SOMEWHAT</td>
<td>3</td>
</tr>
<tr>
<td>VERY</td>
<td>4</td>
</tr>
<tr>
<td>EXTREMELY</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *SO25
**SO20.** During the past 12 months, how often did you stay away from (IF *SO2* EQUALS ‘2’ : KEY PHRASE/ ALL OTHERS : any of these situations) -- all the time, most of the time, sometimes, not very often, or never?

(IF VOL “IT DEPENDS ON WHICH THING,” PROBE: How about for the thing that you stayed away from most: Did you avoid it all the time, most of the time, sometimes, not very often, or never?)

| ALL THE TIME .............................................1 |
| MOST OF THE TIME ....................................2 |
| SOMETIMES ..................................................3 |
| NOT VERY OFTEN........................................4 |
| NEVER ............................................................5 |
| DON’T KNOW ...............................................9 |
| REFUSED .......................................................8 |

<table>
<thead>
<tr>
<th>No Problems</th>
<th>Mild</th>
<th>Moderate</th>
<th>Severe</th>
<th>Very Severe Problems</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
</table>

**SO21.** (RB, PG 37) Think about the one month or longer in the past 12 months when your fear of (or trying to stay away from) social or performance situations was the worst. Using the 0 to 10 scale on page 37 of your booklet, where 0 means no problems and 10 means very severe problems, what number describes how much your fear or staying away from social or performance situations caused problems with each of the following activities during that time?

[IF NEC: How much did the fear (or avoidance) cause problems with (ACTIVITY) during that time?]  
[IF NEC: You can use any number between 0 and 10 to answer.]

NUMBER (0-10)

*SO21a. Your chores at home? ____________

DOES NOT APPLY ...... 97
DON’T KNOW.............. 99
REFUSED...................... 98

*SO21b. Your ability to do well at school or work? ____________

DOES NOT APPLY ...... 97
DON’T KNOW.............. 99
REFUSED...................... 98

*SO21c. Your ability to get along with your family ____________

DOES NOT APPLY ...... 97
DON’T KNOW.............. 99
REFUSED...................... 98

*SO21d. Your social life? ____________

DOES NOT APPLY ...... 97
DON’T KNOW.............. 99
REFUSED...................... 98
**SO22. INTERVIEWER CHECKPOINT:** (SEE *SO21a -*SO21d)

- ALL RESPONSES EQUAL '0' ................................................................. 1  GO TO *SO25
- ALL OTHERS ...................................................................................... 2

**SO23.** About how many days in the past 12 months were you **totally unable** to go to school or work or carry out your normal activities because of your fear or avoidance?

(IF NEC: You may use any number between 0 and 365 to answer.)

- __________ NUMBER OF DAYS
- DON’T KNOW ................ 999
- REFUSED ....................... 998

**SO25.** Did you **ever** in your life talk to a medical doctor or other professional about your fear of (IF *SO2 EQUALS ‘2’ : KEY PHRASE/ ALL OTHERS : these situations)? (By other professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

- YES ............................. 1
- NO ................................. 5  GO TO *SO39_1
- DON’T KNOW ....................... 9  GO TO *SO39_1
- REFUSED .......................... 8  GO TO *SO39_1

**SO25a.** How old were you the first time (you talked to a professional about your fear)?

- __________ YEARS OLD
- DON’T KNOW ....................... 999
- REFUSED .......................... 998

**SO36.** Did you ever get treatment for your fear that you considered **helpful** or **effective**?

- YES ............................. 1
- NO ................................. 5  GO TO *SO36c
- DON’T KNOW ....................... 9  GO TO *SO36c
- REFUSED .......................... 8  GO TO *SO36c

**SO36a.** How old were you the first time (you got helpful treatment for your fear)?

- __________ YEARS OLD
- DON’T KNOW ....................... 999
- REFUSED .......................... 998

**SO36b.** How many professionals did you **ever** talk to about your fear?

- __________ NUMBER OF PROFESSIONALS  GO TO *SO38
- DON’T KNOW ....................... 99  GO TO *SO38
- REFUSED .......................... 98  GO TO *SO38
**SO36c.** How many professionals did you ever talk to about your fear?

_________ NUMBER OF PROFESSIONALS

DON’T KNOW .............. 99
REFUSED .................... 98

**SO38.** Did you receive professional treatment for your fear at any time in the past 12 months?

YES................................. 1
NO .................................... 5
DON’T KNOW .................. 9
REFUSED ....................... 8

**SO39.** Were you ever hospitalized overnight for your fear?

YES................................. 1
NO .................................... 5
DON’T KNOW .................. 9
REFUSED ....................... 8

**SO39a.** How old were you the first time (you were hospitalized overnight because of your fear)?

_________ YEARS OLD

DON’T KNOW ............. 999
REFUSED .................... 998

**SO39_1.** How many of your close relatives – including your biological parents, brothers and sisters, and children – ever had a strong fear of social or performance situations?

_________ NUMBER

DON’T KNOW .................... 999
REFUSED ........................... 998

**SO40.** INTERVIEWER CHECKPOINT (SEE *SC26, *SC26a, *SC26b, *SC30): FOLLOW SKIP FOR FIRST ENDORSED ITEM.

*SC30_1_1* EQUALS ‘1’ *SC30_2_1* EQUALS ‘1’...... 1 GO TO *AG1, NEXT SECTION
*SC26_1* EQUALS ‘1’............................................. 2 GO TO *G1 INTRO 1
*SC26a_1* EQUALS ‘1’ .......................................... 3 GO TO *G1 INTRO 2
*SC26b_1* EQUALS ‘1’ ......................................... 4 GO TO *G1 INTRO 3
ALL OTHERS.................................................. 5 GO TO *IED1
**AGORAPHOBIA SECTION (AG)**

<table>
<thead>
<tr>
<th>AG1a. Being home alone?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: being home alone)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1b. Being in large groups of people or crowds?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: being in crowds)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1c. Traveling away from home?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: traveling away from home)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1d. Traveling alone or being away from home by yourself?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: traveling alone)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1e. Using public transportation, like buses, taxis, trains, or subways?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: using public transportation)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1f. Driving or riding in a car?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: riding in a car)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1g. Standing in a line in a public place like at a store or a fast food restaurant?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: standing in a line)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1h. Being in a department store, shopping mall, or supermarket?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: being in stores or malls)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>9</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1i. Being in a movie theater, auditorium, gymnasium, lecture hall, or church?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: being in large auditoriums)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1j. Being in a restaurant or any other place outside your home?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: being in restaurants)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>AG1k. Being in a wide, open field or out in the street?</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>N/A (7)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(KEY PHRASE: being in open places)</td>
<td>1</td>
<td>5</td>
<td>7</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>
*AG2. INTERVIEWER CHECKPOINT: (SEE *AG1a - *AG1k SERIES)

ZERO - ONE RESPONSES CODED ‘1’ ...........................................................1  GO TO *AG39
TWO - THREE RESPONSES CODED ‘1’......................................................2  GO TO *AG3 INTRO 1
FOUR OR MORE RESPONSES CODED ‘1’ .................................................3  GO TO *AG3 INTRO 2
<table>
<thead>
<tr>
<th>*AG3 INTRO 1</th>
<th>*AG3 INTRO 2</th>
</tr>
</thead>
<tbody>
<tr>
<td>You felt afraid of (KEY PHRASE OF ALL “YES” RESPONSES IN *AG1 SERIES). Can you remember your exact age the very first time you felt afraid of one of these situations?</td>
<td>You felt afraid of a number of the situations on the list. Can you remember your exact age the very first time you felt afraid of one of these situations?</td>
</tr>
<tr>
<td>YES...........................1</td>
<td>YES...........................1</td>
</tr>
<tr>
<td>NO ............................5  GO TO *AG3b</td>
<td>NO ............................5  GO TO *AG3b</td>
</tr>
<tr>
<td>DON’T KNOW .............9  GO TO *AG3b</td>
<td>DON’T KNOW .............9  GO TO *AG3b</td>
</tr>
<tr>
<td>REFUSED .................8  GO TO *AG3b</td>
<td>REFUSED .................8  GO TO *AG3b</td>
</tr>
</tbody>
</table>

*AG3a. (IF NEC: How old were you?)

_________ YEARS OLD  GO TO *AG4

DON’T KNOW .................999  GO TO *AG4
REFUSED .............................998  GO TO *AG4

*AG3b. About how old were you?

IF DON’T KNOW, PROBE: Can you remember what grade you were in at school?

IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before you first started school?

IF NOT YES, PROBE: Was it before you were a teenager?

_________ YEARS OLD  OR  ___________ GRADE

BEFORE STARTED SCHOOL ...............4
BEFORE TEENAGER ...........................12
NOT BEFORE TEENAGER .....................13
DON’T KNOW ..............................999
REFUSED .................................998
*AG4. People with fears like this are afraid of different things about the situations. Which of the following things were you afraid of:

<table>
<thead>
<tr>
<th>AG4.</th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>AG4a. Fear of being alone or of being away from your family?YES</td>
<td>NO</td>
<td>DK</td>
<td>RF</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>AG4b. Fear that there was some real danger, like being robbed or being hurt?YES</td>
<td>NO</td>
<td>DK</td>
<td>RF</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>AG4c. Fear that you might get sick to your stomach or have diarrhea?YES</td>
<td>NO</td>
<td>DK</td>
<td>RF</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>AG4d. Fear that you might have a sudden attack of feeling very afraid or panicked?YES</td>
<td>NO</td>
<td>DK</td>
<td>RF</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>AG4e. Fear that you might have a heart attack or some other emergency or fear that you might die?YES</td>
<td>NO</td>
<td>DK</td>
<td>RF</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>AG4f. Fear that you might get sick and not be able to get help?YES</td>
<td>NO</td>
<td>DK</td>
<td>RF</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>AG4g. Fear that it might be difficult or embarrassing to get away?YES</td>
<td>NO</td>
<td>DK</td>
<td>RF</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>AG4h. Fear that some other terrible thing might happen?YES</td>
<td>NO</td>
<td>DK</td>
<td>RF</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
</tbody>
</table>

*AG6. INTERVIEWER CHECKPOINT: (SEE *SC30_2)

*SC30_2 EQUALS ‘1’.............1
ALL OTHERS ....................2 GO TO *AG8

AG6a. Earlier in the interview, you mentioned having times when you stayed away from these situations whenever you could because of your fear. How old were you when you first tried to stay away from these situations?

<table>
<thead>
<tr>
<th>AGE</th>
</tr>
</thead>
<tbody>
<tr>
<td>________ YEARS OLD</td>
</tr>
<tr>
<td>DON’T KNOW .............999</td>
</tr>
<tr>
<td>REFUSED .................998</td>
</tr>
<tr>
<td>ALL MY LIFE ..............997</td>
</tr>
<tr>
<td>AS LONG AS I CAN REMEMBER........997</td>
</tr>
</tbody>
</table>

AG6a1. Can you remember what grade you were in at school?

<table>
<thead>
<tr>
<th>GRADE</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES ......................1</td>
</tr>
<tr>
<td>NO ......................5</td>
</tr>
<tr>
<td>DON’T KNOW .............9</td>
</tr>
<tr>
<td>REFUSED .................8</td>
</tr>
</tbody>
</table>

AG6a2. What grade was that?

<table>
<thead>
<tr>
<th>GRADE</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINDERGARTEN ...........0</td>
</tr>
<tr>
<td>1ST GRADE ...............1</td>
</tr>
<tr>
<td>2ND GRADE ..............2</td>
</tr>
<tr>
<td>3RD GRADE ............3</td>
</tr>
<tr>
<td>4TH GRADE ............4</td>
</tr>
<tr>
<td>5TH GRADE ............5</td>
</tr>
<tr>
<td>6TH GRADE ...........6</td>
</tr>
</tbody>
</table>
*AG6a3. Was it before you first started school?

YES................................................. 1 \ GO TO *AG8
NO .................................................. 5
DON’T KNOW ........................... 9
REFUSED ................................. 8

BEFORE STARTED SCHOOL............ 4
BEFORE TEENAGER..................... 12
NOT BEFORE TEENAGER............... 13
DON’T KNOW ............................... 999
REFUSED ................................. 998

*AG6a4. Was it before you were a teenager?

YES................................................. 1
NO .................................................. 5
DON’T KNOW ........................... 9
REFUSED ................................. 8

*AG8. Was there some particular event that made you afraid of these situations for the very first time?

YES ................................................. 1
NO .................................................. 5 \ GO TO *AG9
DON’T KNOW ........................... 9 \ GO TO *AG9
REFUSED ................................. 8 \ GO TO *AG9

*AG8a. Did you have a sudden attack of fear or panic as a result of that event?

YES ................................................. 1
NO .................................................. 5
DON’T KNOW ........................... 9
REFUSED ................................. 8

*AG9. Think of the time in your life when your fear (and trying to stay away from these situations) was the worst. When you were faced with these situations, or thought you would have to be, did you ever have any of the following things happen?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*AG9a. Did your heart beat too fast?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*AG9b. Did you sweat?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*AG9c. Did you tremble or shake?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*AG9d. Did your mouth feel dry?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*AG10. INTERVIEWER INSTRUCTION: (SEE *AG9a-d)

ZERO RESPONSES CODED ‘1’ .................................................. 1 \ GO TO *AG12
ONE RESPONSE CODED ‘1’.................................................... 2 \ GO TO *AG11
ALL OTHERS....................................................................... 3 \ GO TO *AG12
*AG11. (RB, PG 22) When you were faced with these situations, or thought you would have to be, did you ever have one or more of these reactions on Page 22?

READ LIST BELOW STARTING WITH AG11a ONLY IF R PREFERS TO HAVE QUESTIONS READ

YES ..................................1
NO.....................................5
DON’T KNOW ....................9
REFUSED ...........................8

GO TO *AG12

<table>
<thead>
<tr>
<th>AG11a</th>
<th>AG11b</th>
<th>AG11c</th>
<th>AG11d</th>
<th>AG11e</th>
<th>AG11f</th>
<th>AG11g</th>
<th>AG11h</th>
<th>AG11i</th>
<th>AG11j</th>
<th>AG11k</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you have trouble breathing normally?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you feel like you were choking?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you have pain in your chest or did your chest feel tight?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you feel sick to your stomach?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you feel dizzy or faint?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you ever fear that you might lose control, go crazy, or pass out?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Were you afraid that you might die?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you have chills or suddenly feel very hot?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did your fingers or toes tingle or feel numb?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you feel like you were “not really there”, like you were watching a movie of yourself?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Did you feel that things around you were not real or like a dream?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*AG12. Do you think the fear was ever much stronger than it should have been?

YES ....................................1
NO .....................................5
DON’T KNOW ......................9
REFUSED ...........................8
**AG13.** Were you ever unable to leave your home for an entire day because of your fear?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO **AG14**

**AG13a.** What is the longest period of days, weeks, months or years you were unable to leave your home?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>NUMBER</td>
<td></td>
</tr>
<tr>
<td>CIRCLE UNIT OF TIME</td>
<td></td>
</tr>
<tr>
<td>DAYS</td>
<td>1</td>
</tr>
<tr>
<td>WEEKS</td>
<td>2</td>
</tr>
<tr>
<td>MONTHS</td>
<td>3</td>
</tr>
<tr>
<td>YEARS</td>
<td>4</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
</tbody>
</table>

**AG14.** Some people are unable to go out of their home unless they have someone they know with them, like a family member or friend. Were you ever unable to leave your home without a family member or friend?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**AG15.** How much did your fear of (or trying to stay away from) these situations ever cause problems with your school work, your job, or your relationships with family and friends – not at all, a little, some, a lot, or extremely?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOT AT ALL</td>
<td>1</td>
</tr>
<tr>
<td>A LITTLE</td>
<td>2</td>
</tr>
<tr>
<td>SOME</td>
<td>3</td>
</tr>
<tr>
<td>A LOT</td>
<td>4</td>
</tr>
<tr>
<td>EXTREMELY</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**AG16.** Was there ever a time in your life when you felt badly about yourself or were upset, worried, or disappointed with yourself because of your fear (or avoidance)?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>
*AG17. Did you feel very afraid or try to stay away from any of these situations at any time in the past 12 months?

YES .................................................................1
NO ...............................................................5  GO TO *AG17b
DON’T KNOW ..................................................9  GO TO *AG17b
REFUSED ......................................................8  GO TO *AG18

*AG17a. When was the last time -- in the past month, between two and six months ago, or more than six months ago?

PAST MONTH ..............................................1
2-6 MONTHS AGO .......................................2
MORE THAN 6 MONTHS AGO ...................3
DON’T KNOW .............................................9
REFUSED ...................................................8

GO TO *AG18

*AG17b. How old were you the last time (you were afraid like this or stayed away from these situations)?

_________ YEARS OLD

DON’T KNOW .......................999
REFUSED .........................998

*AG18. What if you were faced with one of these situations today: How afraid would you be - - not at all afraid, not very afraid, somewhat, very, or extremely afraid?

(IF VOL “IT DEPENDS ON WHICH SITUATION,” PROBE:  What if you were faced with the situation that scares you most: How afraid would you be - - not at all afraid, not very afraid, somewhat, very, or extremely afraid?)

NOT AT ALL ...............................................1  GO TO *AG24
NOT VERY ...............................................2  GO TO *AG24
SOMewhat ..................................................3
VERY ..........................................................4
EXTREMELY ..............................................5
DON’T KNOW .............................................9
REFUSED ...................................................8

*AG19. During the past 12 months, how often did you stay away from these feared situations - - all the time, most of the time, sometimes, not very often, or never?

(IF VOL “IT DEPENDS ON WHICH THING,” PROBE:  How about for the situation that you avoided most: Did you avoid it all the time, most of the time, sometimes, not very often, or never?)

ALL THE TIME .............................................1
MOST OF THE TIME .....................................2
SOMETIMES ...............................................3
NOT VERY OFTEN ......................................4
NEVER ........................................................5
DON’T KNOW .............................................9
REFUSED ...................................................8
*AG20. (RB, PG 37) Think about the one month or longer in the past 12 months when your fear (or avoidance) was worst. Using the 0 to 10 scale on page 37 of your booklet, where 0 means no problems and 10 means very severe problems, what number describes how much your fear (or avoidance) caused problems with each of the following activities during that time?

(IF NEC: How much did the fear (or avoidance) cause problems with (ACTIVITY) during that time?)

(IF NEC: You can use any number between 0 and 10 to answer.)

NUMBER (0-10)

*AG20a. Your chores at home?

__________

DOES NOT APPLY ...... 97
DON’T KNOW.............. 99
REFUSED .................. 98

*AG20b. Your ability to do well at school or work?

__________

DOES NOT APPLY ...... 97
DON’T KNOW.............. 99
REFUSED .................. 98

*AG20c. Your ability to get along with your family?

__________

DOES NOT APPLY ...... 97
DON’T KNOW.............. 99
REFUSED .................. 98

*AG20d. Your social life?

__________

DOES NOT APPLY ...... 97
DON’T KNOW.............. 99
REFUSED .................. 98

*AG21. INTERVIEWER CHECKPOINT: (SEE *AG20a - *AG20d)

ALL RESPONSES EQUAL ‘0’ ............ 1
GO TO *AG24
ALL OTHERS ........................................... 2

*AG22. About how many days in the past 12 months were you totally unable to go to school work or carry out your normal activities because of your fear (or avoidance)?

(IF NEC: You may use any number between 0 and 365 to answer.)

_________ NUMBER OF DAYS

DON’T KNOW ............... 999
REFUSE ............................. 998
AG24. Did you ever in your life talk to a medical doctor or other professional about your fear (or avoidance) of these situations? (By other professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES..................................................1
NO..................................................5   GO TO *AG38_1
DON'T KNOW............................9   GO TO *AG38_1
REFUSED.......................................8   GO TO *AG38_1

AG24a. How old were you the first time (you talked to a professional about your fear)?

____________ YEARS OLD

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

AG35. Did you ever get treatment for your fear that you considered helpful or effective?

YES...................................1
NO ....................................5   GO TO *AG35c
DON'T KNOW ............... 9   GO TO *AG35c
REFUSED ...................... 8   GO TO *AG35c

AG35a. How old were you the first time (you got helpful treatment for your fear)?

_____________ YEARS OLD

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

AG35b. How many professionals did you ever talk to about your fear?

_____________ NUMBER OF PROFESSIONALS   GO TO *AG37

DON'T KNOW .......... 99   GO TO *AG37
REFUSED .............. 98   GO TO *AG37

AG35c. How many professionals did you ever talk to about your fear?

_____________ NUMBER OF PROFESSIONALS

DON'T KNOW .......... 99
REFUSED .............. 98
*AG37. Did you receive professional treatment for your fear at any time in the past 12 months?

YES........................................1
NO........................................5
DON’T KNOW.........................9
REFUSED ............................8

*AG38. Were you ever hospitalized overnight for your fear?

YES...........................................1
NO.............................................5
DON’T KNOW ............................9
REFUSED .................................8

*AG38a. How old were you the first time (you were hospitalized overnight because of your fear)?

_____________ YEARS OLD

DON’T KNOW ......999
REFUSED ..............998

*AG38_1. How many of your close relatives -- including your biological parents, brothers and sisters, and children -- ever had a strong fear of being home alone, being in crowds, or being away from home?

_____________ NUMBER

DON’T KNOW .......................999
REFUSED .............................998


*SC26 EQUALS ‘1’ .................................1 GO TO *G1 INTRO 1, NEXT SECTION
*SC26a EQUALS ‘1’ ..............................2 GO TO *G1 INTRO 2, NEXT SECTION
*SC26b EQUALS ‘1’ ..............................3 GO TO *G1 INTRO 3, NEXT SECTION
ALL OTHERS.................................4 GO TO *IED1
GENERALIZED ANXIETY DISORDER SECTION (G)

**G1 INTRO 1.** (RB, PG 23-24)
Earlier you mentioned having a time in your life when you were "a worrier". The next questions are about that time. Looking at pages 23-24 in your booklet, what kinds of things were you worried or nervous or anxious about during that time?

**G1 INTRO 2.** (RB, PG 23-24)
Earlier you mentioned having a period lasting one month or longer when you were anxious or worried most days. The next questions are about that time. Looking at pages 23-24 in your booklet, what kinds of things were you nervous or anxious about during that time?

**G1 INTRO 3.** (RB, PG 23-24)
Earlier you mentioned having a time in your life when you were much more nervous or anxious than most other people. The next questions are about that time. Looking at pages 23-24 in your booklet, what kinds of things were you nervous or anxious about during that time?

PROBE FOR UP TO THREE EXAMPLES: Anything else [that made you (worried or anxious/nervous or anxious/anxious or worried)]?
CIRCLE ALL MENTIONS.

**DIFFUSE WORRIES**
EVERYTHING ................................................................. 1
NOTHING IN PARTICULAR .................................................. 2

**PERSONAL PROBLEMS**
FINANCES .............................................................................. 3
SUCCESS AT SCHOOL OR WORK ..................................... 4
SOCIAL LIFE ............................................................................ 5
LOVE LIFE .............................................................................. 6
RELATIONSHIPS AT SCHOOL OR WORK .......................... 7
RELATIONSHIPS WITH FAMILY ......................................... 8
PHYSICAL APPEARANCE .................................................... 9
PHYSICAL HEALTH ............................................................. 10
MENTAL HEALTH ............................................................... 11
SUBSTANCE USE ..................................................................... 12
OTHER PERSONAL PROBLEMS (SPECIFY) ......................... 13

**PHOBIC AND OBSESSIVE-COMPULSIVE SITUATIONS**
SOCIAL PHOBIAS (E.G., MEETING PEOPLE AFTER MOVING TO A NEW TOWN) ......................... 14
AGORAPHOBIA (E.G., LEAVING HOME ALONE AFTER A DIVORCE) ................................................. 15
SPECIFIC PHOBIAS (E.G., FEARS OF BUGS, HEIGHTS, OR CLOSED SPACES) ............................... 16
OBSESSIONS (E.G., WORRIES ABOUT GERMS) ............................................................................. 17
COMPULSIONS (E.G., REPETITIVE HANDWASHING) ................................................................. 18

**NETWORK PROBLEMS**
BEING AWAY FROM HOME OR APART FROM LOVED ONES ....................................................... 19
THE HEALTH OR WELFARE OF LOVED ONES - FIRST MENTION ................................................... 20
THE HEALTH OR WELFARE OF LOVED ONES - SECOND MENTION .................................................. 21
THE HEALTH OR WELFARE OF LOVED ONES - THIRD MENTION .................................................... 22
OTHER NETWORK PROBLEMS (SPECIFY) .......................................................................................... 23

**SOCIETAL PROBLEMS**
CRIME / VIOLENCE .................................................................. 24
THE ECONOMY ....................................................................... 25
THE ENVIRONMENT (E.G., GLOBAL WARMING, POLLUTION) ......................................................... 26
MORAL DECLINE OF SOCIETY (E.G., COMMERCIALISM, DECLINE OF THE FAMILY) ..................... 27
WAR / REVOLUTION .................................................................. 28
OTHER SOCIETAL PROBLEMS (SPECIFY) .......................................................................................... 29

**OTHER PROBLEMS (SPECIFY)**
FIRST (SPECIFY) ...................................................................... 30
SECOND (SPECIFY) .................................................................. 31
THIRD (SPECIFY) ..................................................................... 32
**G2.** INTERVIEWER CHECKPOINT: (SEE *G1*)

WORRIED EXCLUSIVELY ABOUT ONE SPECIFIC THING..... 1 GO TO *IED1, NEXT SECTION
MULTIPLE WORRIES ................................................................. 2

**G3.** Do you think your (worry or anxiety/nervousness or anxiety/anxiety or worry) was ever a lot stronger than it should have been?

YES ........................................ 1
NO ......................................... 5
DON’T KNOW ......................... 9
REFUSED .............................. 8

**G4.** How often did you find it hard to stop your (worry or anxiety/nervousness or anxiety/anxiety or worry) -- often, sometimes, not very often, or never?

OFTEN .................................. 1
SOMETIMES ............................ 2
NOT VERY OFTEN .................. 3
NEVER .................................. 4
DON’T KNOW ......................... 9
REFUSED .............................. 8

**G4a.** How often were you so nervous or worried that you could not think about anything else, no matter how hard you tried -- often, sometimes, not very often, or never?

OFTEN .................................. 1
SOMETIMES ............................ 2
NOT VERY OFTEN .................. 3
NEVER .................................. 4
DON’T KNOW ......................... 9
REFUSED .............................. 8

**G4b.** INTERVIEWER CHECKPOINT: (SEE *G4, *G4a*)

*G4 EQUALS ‘1’ OR ‘2’ OR *G4a EQUALS ‘1’ OR ‘2’ ............... 1
ALL OTHERS ................................................................. 2  GO TO *IED1, NEXT SECTION

**G5.** What is the longest number of months or years in a row you ever had when you were (worried or anxious/nervous or anxious/anxious or worried) most days?

IF VOL “WHOLE LIFE” OR “AS LONG AS I CAN REMEMBER,”  CODE 995 YEARS

PROBE DK: Did you ever have a time that lasted 6 months or longer? (IF NOT) Did you ever have a time that lasted one month or longer?

__________ NUMBER

CIRCLE UNIT OF TIME:  DAYS...1  WEEKS...2  MONTHS...3  YEARS...4
*G6.  INTERVIEWER CHECKPOINT: (SEE *G5)

   LESS THAN 1 MONTH............................................ 1  GO TO *IED1, NEXT SECTION
   1 TO 5 MONTHS.................................................... 2  GO TO *G7
   ALL OTHERS ....................................................... 3  GO TO *G8

*G7.  INTERVIEWER INSTRUCTION: ASK ABOUT “TIMES LASTING ONE MONTH OR LONGER” FOR THE
      REMAINDER OF THE SECTION  GO TO *G9

*G8.  INTERVIEWER INSTRUCTION: ASK ABOUT “TIMES LASTING SIX MONTHS OR LONGER” FOR THE
      REMAINDER OF THE SECTION  GO TO *G9
Think of the time lasting (one month / six months) or longer when your (worry or anxiety/nervousness or anxiety/anxiety or worry) was the worst. During that time, did you often have any of the following experiences:

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*G9a. Did you often feel restless or on edge?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G9b. Did you often get tired very easily?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G9c. Were you often more irritable or grouchy than usual?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G9d. Did you often have trouble concentrating or keeping your mind on what you were doing?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G9e. Did your muscles often feel tense or sore?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G9f. Did you often have trouble falling or staying asleep?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**G11. INTERVIEWER CHECKPOINT: (SEE*G9a - *G9f)**

ZERO RESPONSES CODED ‘1’ IN *G9 SERIES………………………………………1
ALL OTHERS………………………………………………………………………2

GO TO *IED1, NEXT SECTION
GO TO *G15
**G15.** How much emotional upset did you ever experience because of your (worry or anxiety/nervousness or anxiety/anxiety or worry) – no upset, mild, moderate, severe, or very severe upset?

- NO................................. 1
- MILD ................................. 2
- MODERATE ............................ 3
- SEVERE ................................. 4
- VERY SEVERE ......................... 5
- DON'T KNOW .......................... 9
- REFUSED ............................... 8

**G17.** How much did your (worry or anxiety/nervousness or anxiety/anxiety or worry) ever cause problems with either your school work, your job, or your relationships with family or friends – not at all, a little, some, a lot, or extremely?

- NOT AT ALL ............................ 1
- A LITTLE ............................... 2
- SOME ................................. 3
- A LOT ................................. 4
- EXTREMELY ............................ 5
- DON'T KNOW .......................... 9
- REFUSED ............................... 8

**G17a.** How often were you unable to carry out your daily activities because of your (worry or anxiety/nervousness or anxiety/anxiety or worry) – often, sometimes, not very often, or never?

- OFTEN ................................. 1
- SOMETIMES ............................ 2
- NOT VERY OFTEN ............................ 3
- NEVER ................................. 4
- DON'T KNOW .......................... 9
- REFUSED ............................... 8

**G17_1. INTERVIEWER CHECKPOINT:** (SEE *G15, G17*)

- ALL OTHERS ..........................................................2

GO TO *IED1, NEXT SECTION
*G18a. (Worry and anxiety/Nervousness and anxiety/Anxiety and worry) sometimes occur as a result of physical causes such as illness or injury or the use of medication, drugs, or alcohol. Do you think your (worry or anxiety/nervousness or anxiety/anxiety or worry) ever occurred as the result of such physical causes?

YES........................................................1
NO..........................................................5
DON'T KNOW........................................9
REFUSED................................................8

*G18b. Do you think your (worry and anxiety/nervousness and anxiety/anxiety and worry) were always the result of physical causes?

YES........................................................1
NO..........................................................5
DON'T KNOW........................................9
REFUSED................................................8

*G26. Think of the very first time in your life you had a time lasting (one month / six months) or longer when (you were worried or anxious most days/you were nervous or anxious most days/you were anxious or worried most days) and also had some of the other problems we just reviewed. Can you remember your exact age?

YES ................................................... 1
NO..................................................... 5
DON'T KNOW ................. 9
REFUSED.......................... 8

*G26a. (IF NEC: How old were you?)

_________ AGE GO TO *G26c

DON’T KNOW ..........999 GO TO *G26c
REFUSED.................998 GO TO *G26c

*G26b. About how old were you the first time?

_________ YEARS OLD GO TO *G26c

DON’T KNOW ..........999 GO TO *G26b1
REFUSED.................998 GO TO *G26b3
ALL MY LIFE..............997 GO TO *G26b3
AS LONG AS I CAN REMEMBER........997 GO TO *G26b3

*G26b1. Can you remember what grade you were in at school?

YES ........................................ 1
NO....................................... 5
DON’T KNOW ................. 9
REFUSED..................... 8

*G26b2. What grade was that?

KINDERGARTEN.................0 7TH GRADE...............................7
1ST GRADE.......................1 8TH GRADE...............................8
2ND GRADE.......................2 HIGH SCHOOL FRESHMAN........9
3RD GRADE......................3 HIGH SCHOOL SOPHOMORE.....10
4TH GRADE.......................4 HIGH SCHOOL JUNIOR..........11
5TH GRADE.......................5 HIGH SCHOOL SENIOR.........12
6TH GRADE.......................6 ANY COLLEGE.....................13
**G26b3.** Was it before you first started school?

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *G26c

**BEFORE STARTED SCHOOL**

**G26b4.** Was it before you were a teenager?

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**BEFORE TEENAGER**

**G26c.** Was that episode brought on by some stressful experience? Or did it happen out of the blue?

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>BROUGHT ON BY STRESS</td>
<td>1</td>
</tr>
<tr>
<td>OUT OF THE BLUE</td>
<td>2</td>
</tr>
<tr>
<td>DON'T REMEMBER</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**NOT BEFORE TEENAGER**

**G27.** Did you have an episode of being (worried or anxious/nervous or anxious/anxious or worried), lasting at least one month or longer, in the past 12 months?

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *G27c

**G27a.** When was the last time – in the past month, two to six months ago, or more than six months ago?

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAST MONTH</td>
<td>1</td>
</tr>
<tr>
<td>2-6 MONTHS AGO</td>
<td>2</td>
</tr>
<tr>
<td>MORE THAN 6 MONTHS</td>
<td>3</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**G27a_1** When I use the word “episode” in the next questions, I mean a time lasting one month or longer when nearly every day you were (worried or anxious/nervous or anxious/anxious or worried) and also had some of the other problems (IF R CAN READ: on pages 4-5/ IF R CANNOT READ: we just reviewed). The episode ends when you no longer have these feelings for a full month. With this definition in mind, how many different episodes did you have in the past 12 months?

__________ NUMBER

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
</tbody>
</table>

**G27a_2.** INTERVIEW CHECKPOINT: (SEE *G27a_1*)

*G27a_1* EQUALS ‘1’ ......................................................... 1

GO TO *G27a_3*

ALL OTHERS................................................................. 2

GO TO *G27a_7*
*G27a_3. In what month did that episode start?

<table>
<thead>
<tr>
<th>MONTH</th>
<th>YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

DON’T KNOW .........................999  
REFUSED .............................998

*G27a_4. How long did that episode last (IF *G27a EQUALS ‘1’ : so far)?

<table>
<thead>
<tr>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

CIRCLE UNIT OF TIME:  DAYS........1  WEEKS......2  MONTHS.....3  YEARS......4

DON’T KNOW .........................999  
REFUSED .............................998

*G27a_5. INTERVIEWER CHECKPOINT (SEE *G27a):

*G27a EQUALS ‘1’ .........................................................1
ALL OTHERS .................................................................2  GO TO *G27b

*G27a_6. Has this episode ended or is it still going on?

ENDED .................................................................1
STILL GOING ON .......................................................5
DON’T KNOW .........................................................9
REFUSED .............................................................8

GO TO *G27b

*G27a_7. How long did the first of these (NUMBER FROM *G27a.1) episodes last?

<table>
<thead>
<tr>
<th>NUMBER</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
</tr>
</tbody>
</table>

CIRCLE UNIT OF TIME:  DAYS......1  WEEKS......2  MONTHS.....3  YEARS......4

DON’T KNOW .........................999  
REFUSED .............................998

*G27a_8. INTERVIEWER CHECKPOINT (SEE *G27a):

*G27a EQUALS ‘1’ .........................................................1
ALL OTHERS .................................................................2  GO TO *G27b

*G27a_9. Has the most recent episode ended or is it still going on?

ENDED .................................................................1
STILL GOING ON .......................................................5
DON’T KNOW .........................................................9
REFUSED .............................................................8

*G27b. How many months in the past 12 months were you in an episode of this sort?
*G27c. How old were you the last time you had one of these episodes?

_________________ YEARS OLD

DON’T KNOW .............................. 999
REFUSED ....................................... 998

*G28. How many episodes of (worry or anxiety/nervousness or anxiety/anxiety or worry) lasting one month or longer have you ever had in your life?

______________ NUMBER

DON’T KNOW .............................. 999
REFUSED ....................................... 998

*G29. INTERVIEWER CHECKPOINT: (SEE *G28)

*G28 EQUALS ‘1’................................. 1
ALL OTHERS ........................................ 2  GO TO *G31

*G30. How long did that episode last?

IF STILL GOING ON: How long did it last so far?

______________ NUMBER  GO TO *G35

CIRCLE UNIT OF TIME: MONTHS .......... 1  YEARS........... 2

DON’T KNOW .............................. 99  GO TO *G35
REFUSED ....................................... 98  GO TO *G35

*G31. How long did the longest of these episodes last?

______________ NUMBER

CIRCLE UNIT OF TIME: MONTHS .......... 1  YEARS........... 2

DON’T KNOW .............................. 99
REFUSED ....................................... 98

*G31_1. How many of these episodes were brought on by some stressful experience?

______________ NUMBER

DON’T KNOW .............................. 999
REFUSED ....................................... 998
*G32. How many different years in your life did you have at least one episode?

____________ YEARS

DON’T KNOW ................................ 999
REFUSED........................................ 998

*G33. INTERVIEWER CHECKPOINT: (SEE *G32)

*G32 EQUALS ’1’............................. 1  GO TO *G35
ALL OTHERS............................... 2

*G34. What is the longest continuous number of years in a row in which you had at least one episode per year?

____________ YEARS

DON’T KNOW ................................ 999
REFUSED........................................ 998

*G35. INTERVIEWER CHECKPOINT: (SEE *G27)

*G27 EQUALS ’1’.................. 1
ALL OTHERS......................... 2  GO TO *G44
*G36. For the next questions, think of the time lasting a month or longer in the past 12 months when your (worry or anxiety/nervousness or anxiety/anxiety or worry) was worst. During that time, how often did you have each of the following feelings?

<table>
<thead>
<tr>
<th>(IF NEC: often, sometimes, occasionally, or never?)</th>
<th>OFTEN (1)</th>
<th>SOME (2)</th>
<th>OCCASION (3)</th>
<th>NEVER (4)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*G36a. How often did you feel tense and wound up – often, sometimes, occasionally, or never?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G36b. How often during that time did you get a sort of frightened feeling like butterflies in the stomach?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G36c. How often did you feel restless?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G36d. How often did you get sudden feelings of fear or panic?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G36e. How often did you have worrying thoughts go through your mind?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G36f. How often could you feel relaxed?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*G36g. How often did you get a scared feeling as if something terrible was about to happen?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*G37. Did this scared feeling worry you badly, not badly, or not at all?

BADLY.......................... 1
NOT BADLY ........................ 2
NOT AT ALL...................... 3
DON’T KNOW ..................... 9
REFUSED......................... 8
No Problems | Mild | Moderate | Severe | Very Severe Problems
--- | --- | --- | --- | ---
0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10

*G38. (RB, PG 37) Think about the one month or longer in the past 12 months when your (worry or anxiety/ nervousness or anxiety/ anxiety or worry) was worst. Using the 0 to 10 scale on page 37 of your booklet, where 0 means no problems and 10 means very severe problems, what number describes how much your (worry or anxiety/ nervousness or anxiety/ anxiety or worry) caused problems with each of the following activities during that time?

(IF NEC: How much did your (worry or anxiety/ nervousness or anxiety/ anxiety or worry) cause problems with (ACTIVITY) during that time?)

(IF NEC: You can use any number between 0 and 10 to answer.)

NUMBER (0-10)

*G38a. Your chores at home?

__________

DOES NOT APPLY ..............97
DON’T KNOW ....................99
REFUSED.......................98

*G38b. Your ability to do well at school or work?

__________

DOES NOT APPLY ..............97
DON’T KNOW ....................99
REFUSED.......................98

*G38c. Your ability to get along with your family?

__________

DOES NOT APPLY ..............97
DON’T KNOW ....................99
REFUSED.......................98

*G38d. Your social life?

__________

DOES NOT APPLY ..............97
DON’T KNOW ....................99
REFUSED.......................98

*G39. INTERVIEWER CHECKPOINT: (SEE *G38a - *G38d)

ALL RESPONSES EQUAL ‘0’.................1 GO TO *G44
ALL OTHERS ..............................................2
*G40. About how many days out of 365 in the past 12 months were you totally unable to go to school or work or carry out your normal activities because of your (worry or anxiety/ nervousness or anxiety/ anxiety or worry)?

(IF NEC: You can use any number between 0 and 365 to answer.)

_________ NUMBER OF DAYS

DON’T KNOW ............... 999
REFUSED .................... 998

*G44. Did you ever in your life talk to a medical doctor or other professional about your (worry or anxiety/ nervousness or anxiety/ anxiety or worry)? (By professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES ........................................... 1
NO ........................................... 5     GO TO *G59_1
DON’T KNOW ....................... 9     GO TO *G59_1
REFUSED ............................... 8     GO TO *G59_1

*G44a. How old were you the first time [you talked to a professional about your (worry or anxiety/ nervousness or anxiety/ anxiety or worry)]?

_________ YEARS OLD

DON’T KNOW .................999
REFUSED .....................998

G56. Did you ever get treatment for your (worry or anxiety/ nervousness or anxiety/ anxiety or worry) that you considered helpful or effective?

YES ...................................... 1
NO ....................................... 5     GO TO *G56c
DON’T KNOW ..................... 9     GO TO *G56c
REFUSED ............................ 8     GO TO *G56c

*G56a. How old were you the first time [you got helpful treatment for your (worry or anxiety/ nervousness or anxiety/ anxiety or worry)]?

_________ YEARS OLD

DON’T KNOW .................999
REFUSED .....................998

*G56b. How many professionals did you ever talk to about your (worry or anxiety/ nervousness or anxiety/ anxiety or worry)?

_________ NUMBER OF PROFESSIONALS     GO TO *G58

DON’T KNOW .................99     GO TO *G58
REFUSED .....................98     GO TO *G58

149
*G56c.  How many professionals did you ever talk to about your (worry or anxiety/ nervousness or anxiety/ anxiety or worry)?

________________ NUMBER OF PROFESSIONALS
DON’T KNOW .......... 99
REFUSED ............... 98

*G58.  Did you receive professional treatment for your (worry or anxiety/ nervousness or anxiety/ anxiety or worry) at any time in the past 12 months?

   YES .................................. 1
   NO ................................... 5
   DON’T KNOW ............... 9
   REFUSED ...................... 8

*G59.  Were you ever hospitalized overnight for your (worry or anxiety/ nervousness or anxiety/ anxiety or worry)?

   YES ........................................ 1
   NO ........................................ 5
   DON’T KNOW ................. 9
   REFUSED ..................... 8
   GO TO *G59_1

   *G59a.  How old were you the first time [you were hospitalized overnight because of your (worry or anxiety/ nervousness or anxiety/ anxiety or worry)]?

   ____________ YEARS OLD
DON’T KNOW .......... 999
REFUSED ............... 998

*G59_1.  How many of your close relatives – including your biological parents, brothers and sisters, and children – were very nervous or anxious people?

________________ NUMBER
DON’T KNOW .......... 999
REFUSED ............... 998

GO TO *IED1, NEXT SECTION
INTERMITTENT EXPLOSIVE DISORDER (IED)

*IED1. INTERVIEWER CHECKPOINT: (SEE *SC20_1, *SC20_2, *SC20_3)

*SC20_1 IS CHECKED...............................................1 GO TO *IED2
*SC20_2 IS CHECKED...............................................2 GO TO *IED3 INTRO 4
*SC20_3 IS CHECKED...............................................3 GO TO *IED3 INTRO 5
ALL OTHERS .............................................................4 GO TO *SD1, NEXT SECTION

*IED2. INTERVIEWER CHECKPOINT: (SEE *SC20_2, *SC20_3)

*SC20_2 IS CHECKED...............................................1 GO TO *IED3 INTRO 1
*SC20_3 IS CHECKED...............................................2 GO TO *IED3 INTRO 2
ALL OTHERS .............................................................3 GO TO *SD1, NEXT SECTION

**IED3_INTRO 1.**
Earlier in the interview you mentioned having attacks of anger when all of a sudden you lost control and either broke or smashed something of value or you hit or hurt someone. The next few questions are about those attacks. About how many times in your life have you had an attack of this sort, (READ SLOWLY) when you lost control and either broke something, hurt someone, or threatened to hurt someone?

**IED3_INTRO 2.**
Earlier in the interview you mentioned having attacks of anger when all of a sudden you lost control and either broke or smashed something of value or you threatened to hit or hurt someone. The next few questions are about those attacks. About how many times in your life have you had an attack of this sort, (READ SLOWLY) when you lost control and either broke or smashed something or threatened to hurt someone?

**IED3_INTRO 3.**
Earlier in the interview you mentioned having attacks of anger when all of a sudden you lost control and broke or smashed something of value. The next few questions are about those attacks. About how many times in your life have you had an attack of this sort, (READ SLOWLY) when you lost control and broke or smashed something of value? The next few questions are about those attacks. About how many times in your life have you had an attack of this sort, (READ SLOWLY) when you lost control and broke or smashed something or threatened to hurt someone?

**IED3_INTRO 4.**
Earlier in the interview you mentioned having attacks of anger when all of a sudden you lost control and hit or hurt someone. The next few questions are about those attacks. About how many times in your life have you had an attack of this sort, (READ SLOWLY) when you lost control and either hurt someone or threatened to hurt someone?

**IED3_INTRO 5.**
Earlier in the interview you mentioned having attacks of anger when all of a sudden you lost control and threatened to hit or hurt someone. The next few questions are about those attacks. About how many times in your life have you had an attack of this sort, (READ SLOWLY) when you lost control and threatened to hurt someone?

CODE RESPONSES GREATER THAN 9997 AS 9997

________________________ ATTACKS

DON’T KNOW.........................999
REFUSED.................................998

*IED4. INTERVIEWER CHECKPOINT: (SEE *IED3)

*IED3 EQUALS ‘0’-‘2’...............................................1 GO TO *SD1, NEXT SECTION
ALL OTHERS .............................................................2

151
**IED5.** Did these anger attacks sometimes occur without a good reason?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**GO TO *IED6**

---

**IED5a.** Did the attacks sometimes occur in situations where most people would not have had an anger attack?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**GO TO *IED6**

---

**IED5b.** During those attacks, did you sometimes get a lot more angry than most people would have been in the same situation.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**GO TO *SD1, NEXT SECTION**

---

**IED6.** Did you have times before these attacks when you felt such a strong urge to let loose or blow-up that you couldn't resist it no matter how hard you tried?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON'T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

---

**IED7.** How often was your anger out of control during your typical attacks -- all of the time, most of the time, sometimes, not very often, or never?

<table>
<thead>
<tr>
<th>ALL OF THE TIME</th>
<th>MOST OF THE TIME</th>
<th>SOMETIMES</th>
<th>NOT VERY OFTEN</th>
<th>NEVER</th>
<th>DON'T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

---

**IED8.** INTERVIEWER CHECKPOINT: (SEE *IED6, IED7*)

<table>
<thead>
<tr>
<th>IED6 EQUALS ‘1’</th>
<th>IED7 EQUALS ‘1’–‘4’</th>
<th>ALL OTHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
</tr>
</tbody>
</table>

**GO TO *SD1, NEXT SECTION**
*IED9. Some people only have anger attacks when they drink alcohol or use drugs. Did your anger attacks usually occur when you had been drinking or using drugs?

YES.............................................. 1
NO .............................................. 5
DON’T KNOW ............................... 9
REFUSED ............................... 8

*IED9a. Did you ever have anger attacks when you had not been drinking or using drugs?

YES .............................................. 1
NO .............................................. 5
DON’T KNOW ............................... 9
REFUSED ............................... 8

*IED10. Anger attacks can sometimes be caused by physical illnesses such as epilepsy or head injury or by the use of medications. Were your anger attacks ever caused by physical illness or the use of medications?

YES.............................................. 1
NO .............................................. 5
DON’T KNOW ............................... 9
REFUSED ............................... 8

*IED10a. What was the cause? _____________________________________________________________________

________________________________________________________________________________________

*IED10b. Did you ever have anger attacks that were not caused by physical causes such as (CAUSE DESCRIBED IN *IED10a) or by the use of alcohol or drugs?

YES.............................................. 1
NO .............................................. 5
DON’T KNOW ............................... 9
REFUSED ............................... 8

*IED11. Some people only have anger attacks when they are sad or depressed. Did your anger attacks usually occur during times when you were sad or depressed?

YES.............................................. 1
NO .............................................. 5
DON’T KNOW ............................... 9
REFUSED ............................... 8

*IED11a. Did you ever have anger attacks at times you were not sad or depressed?

YES.............................................. 1
NO .............................................. 5
DON’T KNOW ............................... 9
REFUSED ............................... 8
IED11_1. Some people who have anger attacks experience changes in their thinking or behavior in the hours or days before the attacks. Examples of these changes include feeling much more excited and full of energy than usual, their minds going to fast, feeling very restless, feeling overly powerful and confident, and needing little sleep. Did you often have changes like these in the hours or days before your anger attacks?

YES.................................1
NO .................................5  GO TO *IED12
DON'T KNOW .................9  GO TO *IED12
REFUSED..........................8  GO TO *IED12

IED11_2. How many of your anger attacks occurred during times you were experiencing changes of this sort – all, most, some, or only a few of your attacks?

ALL .................................1
MOST ................................2
SOME ................................3
A FEW ................................4
DON'T KNOW ......................9
REFUSED............................8

*IED12. INTERVIEWER CHECKPOINT: (SEE *SC20_1, *SC20_2)

*SC 20_1 IS CHECKED.........................1  GO TO *IED15
*SC 20_2 IS CHECKED.........................2  GO TO *IED15
ALL OTHERS .............................3  GO TO *IED16

*IED13. Think about all the things you ever damaged or broke during your anger attacks. What is the approximate combined repair cost or replacement value of all these things?

CODE RESPONSES GREATER THAN $9,997 AS $9,997

$______________

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

*IED15. About how many times during your anger attacks did you ever hurt someone badly enough that they needed medical attention?

CODE RESPONSES GREATER THAN 997 AS 997

______________ TIMES

DON'T KNOW .............................999
REFUSED.................................998
*IED16. How much did your anger attacks ever interfere with either your school work, your job, or your relationships with family or friends -- not at all, a little, some, a lot, or extremely?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>NOT AT ALL</td>
<td>1</td>
</tr>
<tr>
<td>A LITTLE</td>
<td>2</td>
</tr>
<tr>
<td>SOME</td>
<td>3</td>
</tr>
<tr>
<td>A LOT</td>
<td>4</td>
</tr>
<tr>
<td>EXTREMELY</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*IED16a. How often were you unable to carry out your daily activities because of your attacks -- often, sometimes, not very often, or never?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>OFTEN</td>
<td>1</td>
</tr>
<tr>
<td>SOMETIMES</td>
<td>2</td>
</tr>
<tr>
<td>NOT VERY OFTEN</td>
<td>3</td>
</tr>
<tr>
<td>NEVER</td>
<td>4</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*IED17. How often did you feel guilty or embarrassed or sorry for what you did in the days or weeks after your attacks -- all of the time, most of the time, sometimes, not very often, or never?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALL OF THE TIME</td>
<td>1</td>
</tr>
<tr>
<td>MOST OF THE TIME</td>
<td>2</td>
</tr>
<tr>
<td>SOMETIMES</td>
<td>3</td>
</tr>
<tr>
<td>NOT VERY OFTEN</td>
<td>4</td>
</tr>
<tr>
<td>NEVER</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*IED18. Think of the very first time in your life you had an anger attack. Can you remember your exact age when that attack occurred?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*IED18a. (IF NEC: How old were you)?

<table>
<thead>
<tr>
<th>Age</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YEARS OLD</td>
<td>GO TO *IED19</td>
</tr>
<tr>
<td>999</td>
<td>GO TO *IED19</td>
</tr>
<tr>
<td>998</td>
<td>GO TO *IED19</td>
</tr>
</tbody>
</table>
*IED18b. About how old were you the first time?

__________ YEARS OLD        GO TO *IED19
DON’T KNOW .............. 999             GO TO *IED18b1
REFUSED .................... 998             GO TO *IED18b3
ALL MY LIFE ................ 997             GO TO *IED18b3
AS LONG AS I CAN REMEMBER....... 997           GO TO *IED18b3

*IED18b1. Can you remember what grade you were in at school?

YES.............................................. 1
NO ........................................... 5             GO TO *IED18b3
DON’T KNOW ...................... 9             GO TO *IED18b3
REFUSED .......................... 8             GO TO *IED18b3

*IED18b2. What grade was that?

KINDERGARTEN...................... 0
1ST GRADE............................ 1
2ND GRADE........................... 2
3RD GRADE........................... 3
4TH GRADE........................... 4
5TH GRADE........................... 5
6TH GRADE........................... 6
7TH GRADE............................. 7
8TH GRADE............................. 8
HIGH SCHOOL FRESHMAN........... 9
HIGH SCHOOL SOPHOMORE......... 10
HIGH SCHOOL JUNIOR............. 11
HIGH SCHOOL SENIOR............ 12
ANY COLLEGE.......................... 13

*IED18b3. Was it before you first started school?

YES.............................................. 1             GO TO *IED19
NO ........................................... 5
DON’T KNOW ...................... 9
REFUSED .......................... 8

*IED18b4. Was it before you were a teenager?

YES.............................................. 1
NO ........................................... 5
DON’T KNOW ...................... 9
REFUSED .......................... 8

*IED19. About how many different years in your life did you have at least one attack?

__________ YEARS OLD
DON’T KNOW ...................... 999
REFUSED .......................... 998

*IED20. What is the largest number of anger attacks you ever had during a single month?

CODE RESPONSES GREATER THAN 97 AS 97

__________ ATTACKS
DON’T KNOW ...................... 999
REFUSED .......................... 998
*IED21. What is the largest number of anger attacks you ever had during a single year?

**CODE RESPONSES GREATER THAN 997 AS 997**

_____________ ATTACKS

DON’T KNOW ......................... 999
REFUSED ............................. 998

*IED22. When was the last time you had an anger attack -- in the past month, two to six months ago, seven to twelve months ago, or more than twelve months ago?

PAST MONTH .......................................................... 1  
GO TO *IED23

2-6 MONTHS AGO ................................. 2 
GO TO *IED23

7-12 MONTHS AGO ............................... 3 
GO TO *IED23

MORE THAN 12 MONTHS AGO .................. 4

DON’T KNOW ........................................... 9

REFUSED ............................................... 8

*IED22a. How old were you the last time (you had an attack)?

______________ YEARS OLD  
GO TO *IED29

DON’T KNOW ......................... 999  
GO TO *IED29

REFUSED ............................. 998  
GO TO *IED29

*IED23. How many weeks out of 52 in the past twelve months did you have at least one attack?

______________ WEEKS

DON’T KNOW ......................... 999

REFUSED ............................. 998

*IED24. And how many attacks in total did you have during the past twelve months?

**CODE RESPONSES GREATER THAN 997 AS 997**

______________ ATTACKS

DON’T KNOW ......................... 999

REFUSED ............................. 998
*IED25. In answering the next few questions, think about the week during the past twelve months when you (had the attack/had the most violent attack). During that one week, how many times did you do each of the following things:

<table>
<thead>
<tr>
<th>NUMBER OF TIMES</th>
<th>DON’T KNOW (999)</th>
<th>REFUSED (998)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*IED25a. slam a door, kick a chair, or throw clothes in anger?</td>
<td>__________ TIMES</td>
<td>999</td>
</tr>
<tr>
<td>*IED25b. break something in anger?</td>
<td>__________ TIMES</td>
<td>999</td>
</tr>
<tr>
<td>*IED25d. on purpose set a fire or destroy someone else’s property?</td>
<td>__________ TIMES</td>
<td>999</td>
</tr>
<tr>
<td>*IED25e. on purpose injure or torture an animal?</td>
<td>__________ TIMES</td>
<td>999</td>
</tr>
<tr>
<td>*IED25f. threaten someone?</td>
<td>__________ TIMES</td>
<td>999</td>
</tr>
<tr>
<td>*IED25g. hurt someone so badly that they needed medical attention?</td>
<td>__________ TIMES</td>
<td>999</td>
</tr>
<tr>
<td>*IED25h. hurt someone badly, but not enough to need medical attention?</td>
<td>__________ TIMES</td>
<td>999</td>
</tr>
</tbody>
</table>
*IED26. (RB, PG 37) Think about the one month or longer in the past 12 months when you had (your attack/your worst attack). Using the 0 to 10 scale on page 37 of your booklet, where 0 means no problems and 10 means very severe problems, what number describes how much (your attack/your worst attack) caused problems with each of the following activities during that time?

[IF NEC: How much did (your attack/your worst attack) cause problems with (ACTIVITY) during that time?]

(IF NEC: You can use any number between 0 and 10 to answer.)

**NUMBER (0-10)**

*IED26a. Your chores at home?

__________

DOES NOT APPLY.............. 97
DON’T KNOW.................. 99
REFUSED...................... 98

*IED26b. Your ability to do well at school or work?

__________

DOES NOT APPLY.............. 97
DON’T KNOW.................. 99
REFUSED...................... 98

*IED26c. Your ability to get along with your family?

__________

DOES NOT APPLY.............. 97
DON’T KNOW.................. 99
REFUSED...................... 98

*IED26d. Your social life?

__________

DOES NOT APPLY.............. 97
DON’T KNOW.................. 99
REFUSED...................... 98

*IED27. INTERVIEWER CHECKPOINT: (SEE *IED26a - *IED26d)

ALL RESPONSES EQUAL ‘0’......................................................................................... 1
GO TO *IED29
ALL OTHERS........................................................................................................... 2

*IED28. About how many days out of 365 in the past 12 months were you totally unable to work or go to school or carry out your normal activities because of your anger attacks?

(IF NEC: You can use any number between 0 and 365 to answer.)

__________ NUMBER OF DAYS

DON’T KNOW ............999
REFUSED..................998
*IED29. Did you ever in your life talk to a medical doctor or other professional about your anger attacks? (By professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES....................................................1
NO ....................................................5 \*GO TO *IED33_1
DON’T KNOW ........................................9 \*GO TO *IED33_1
REFUSED .............................................8 \*GO TO *IED33_1

*IED29a. How old were you the first time [you talked to a professional about your anger attacks]?

_____________ YEARS OLD

DON’T KNOW ...............999
REFUSED .......................998

*IED30. Did you ever get treatment for your anger attacks that you considered helpful or effective?

YES....................................................1
NO ....................................................5 \*GO TO *IED30c
DON’T KNOW ........................................9 \*GO TO *IED30c
REFUSED .............................................8 \*GO TO *IED30c

*IED30a. How old were you the first time [you got helpful treatment for your anger attacks]?

_____________ YEARS OLD

DON’T KNOW ...............999
REFUSED .......................998

*IED30b. How many professionals did you ever talk to about your anger attacks?

_____________ NUMBER OF PROFESSIONALS \*GO TO *IED32

DON’T KNOW ...............999 \*GO TO *IED32
REFUSED .......................998 \*GO TO *IED32

*IED30c. How many professionals did you ever talk to about your anger attacks?

_____________ NUMBER OF PROFESSIONALS

DON’T KNOW ...............999
REFUSED .......................998

*IED32. Did you receive professional treatment for your anger attacks at any time in the past 12 months?

YES....................................................1
NO ....................................................5
DON’T KNOW ........................................9
REFUSED .............................................8
*IED33. Were you ever hospitalized overnight for your anger attacks?

YES..................................................1
NO...................................................5  GO TO *IED33_1
DON’T KNOW.................................9  GO TO *IED33_1
REFUSED .......................................8  GO TO *IED33_1

*IED33a. How old were you the first time [you were hospitalized overnight because of your anger attacks]?

______________ YEARS OLD

DON’T KNOW .............999
REFUSED .................998

*IED33_1. How many of your close relatives -- including your biological parents, brothers and sisters, and children -- ever had repeated attacks of anger?

______________ NUMBER

DON’T KNOW.........................999
REFUSED .........................998

GO TO *SD1, NEXT SECTION
**SUICIDALITY (SD)**

*SD1. INTERVIEWER CHECKPOINT:

RESPONDENT IS ABLE TO READ ........................... 1
ALL OTHERS..............................................................2  **GO TO *SD15**

*SD2. (RB, PG 25) Three experiences are listed in your booklet on page 25 labeled A, B, and C. Did experience A ever happen to you?

INTERVIEWER: EXPERIENCE A IS ‘YOU SERIOUSLY THOUGHT ABOUT KILLING YOURSELF’

YES ............................ 1  **GO TO *PEA1, NEXT SECTION**
NO.............................. 5  **GO TO *PEA1, NEXT SECTION**
DON'T KNOW .................. 9  **GO TO *PEA1, NEXT SECTION**
REFUSED ......................... 8  **GO TO *PEA1, NEXT SECTION**

*SD2a. How old were you the first time this happened?

__________ YEARS OLD

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

*SD3. Did Experience A happen to you at any time in the past 12 months?

YES................................. 1  **GO TO *SD4**
NO................................. 5
DON'T KNOW .................... 9
REFUSED .......................... 8

*SD3a. How old were you the last time this experience happened to you?

__________ YEARS OLD

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

*SD4. (RB, PG 25) Now look at the second of the three experiences on the list, Experience B. Did experience B ever happen to you?

INTERVIEWER: EXPERIENCE B IS ‘YOU MADE A PLAN FOR KILLING YOURSELF’

YES................................. 1  **GO TO *SD6**
NO................................. 5  **GO TO *SD6**
DON'T KNOW .................... 9  **GO TO *SD6**
REFUSED .......................... 8  **GO TO *SD6**
*SD4a. How old were you the first time this happened?

__________ YEARS OLD

DON’T KNOW ...................... 999
REFUSED ........................... 998

*SD5. Did Experience B happen to you at any time in the past 12 months?

YES ..................................... 1  GO TO *SD6
NO ..................................... 5
DON’T KNOW ........................... 9
REFUSED ............................... 8

*SD5a. How old were you the last time this experience happened to you?

__________ YEARS OLD

DON’T KNOW .......................... 999
REFUSED .............................. 998

*SD6. (RB, PG 25) Now look at the third of the three experiences on the list, Experience C. Did experience C ever happen to you?

INTERVIEWER: EXPERIENCE C IS ‘YOU TRIED TO KILL YOURSELF’

YES ..................................... 1
NO ..................................... 5  GO TO *PEA1, NEXT SECTION
DON’T KNOW ........................... 9  GO TO *PEA1, NEXT SECTION
REFUSED ............................... 8  GO TO *PEA1, NEXT SECTION

*SD6a. How many times did Experience C ever happen to you in your lifetime?

__________ NUMBER OF TIMES

DON’T KNOW .......................... 999
REFUSED .............................. 998

*SD7. INTERVIEWER CHECKPOINT: (SEE *SD6a)

*SD6a EQUALS ‘1’..................................................... 1  GO TO *SD10
ALL OTHERS ................................................. 2

*SD8. How old were you the first time?

__________ YEARS OLD

DON’T KNOW .............................. 999
REFUSED ................................. 998
There are three statements numbered 1, 2, and 3 at the bottom of page 26 in your booklet. Which of these three statements best describes your situation when Experience C happened to you the first time -- 1, 2, or 3?

1. I MADE A SERIOUS ATTEMPT TO KILL MYSELF AND IT WAS ONLY LUCK THAT I DID NOT SUCCEED.
2. I TRIED TO KILL MYSELF, BUT KNEW THAT THE METHOD MAY NOT WORK.
3. MY ATTEMPT WAS A CRY FOR HELP. I DID NOT INTEND TO DIE.

*SD10. Did Experience C happen to you in the past 12 months?

YES ........................................... 1  GO TO *SD11
NO ........................................... 5
DON’T KNOW .............................. 9
REFUSED ..................................... 8

*SD11. Did it result in an injury or poisoning?

YES ........................................... 1  GO TO *SD12
NO ........................................... 5  GO TO *SD14
DON’T KNOW .............................. 9  GO TO *SD14
REFUSED ..................................... 8

*SD12. Did it require medical attention?

YES ........................................... 1  GO TO *SD13
NO ........................................... 5  GO TO *SD14
DON’T KNOW .............................. 9  GO TO *SD14
REFUSED ..................................... 8

*SD13. Did it require overnight hospitalization?

YES ........................................... 1
NO ........................................... 5
DON’T KNOW .............................. 9
REFUSED ..................................... 8
*SD14. (RB, PG 26) Looking at the bottom of page 26 in your booklet, which of the three statements best describes your situation when Experience C happened to you (the last time) – 1, 2, or 3?

I MADE A SERIOUS ATTEMPT TO KILL MYSELF AND IT WAS ONLY LUCK THAT I DID NOT SUCCEED............................................ 1

I TRIED TO KILL MYSELF, BUT KNEW THAT THE METHOD MAY NOT WORK............................................ 2

MY ATTEMPT WAS A CRY FOR HELP. I DID NOT INTEND TO DIE........... 3

DON’T KNOW .......................................................................................... 9

REFUSED ............................................................................................... 8

*SD14_1. INTERVIEWER CHECKPOINT: (SEE *SD10)

*SD10 EQUALS ‘1’..............................................1

ALL OTHERS .......................................................2

GO TO *PEA1, NEXT SECTION

*SD14_2. (RB, PG 27) What method did you use? (Just give me the letter.)

A. GUN ............................................................................................................ 1
B. RAZOR, KNIFE OR OTHER SHARP INSTRUMENT .................................... 2
C. OVERDOSE OF PRESCRIPTION MEDICATIONS ...................................... 3
D. OVERDOSE OF OVER-THE-COUNTER MEDICATIONS ............................ 4
E. OVERDOSE OF OTHER DRUG (E.G. HEROIN, CRACK, ALCOHOL)........... 5
F. POISONING (E.G. CARBON MONOXIDE, RAT POISON) ............................ 6
G. HANGING, STRANGULATION, SUFFOCATION ........................................... 7
H. DROWNING ................................................................................................. 8
I. JUMPING FROM HIGH PLACES ................................................................... 9
J. MOTOR VEHICLE CRASH ............................................................................. 10
K. OTHER (PLEASE DESCRIBE) ................................................................. 11

DON’T KNOW .......................................................................................... 99

REFUSED ............................................................................................... 98

GO TO *PEA1, NEXT SECTION

*SD15. The next few questions are about thoughts of hurting yourself. Have you ever seriously thought about killing yourself?

YES ............................................. 1

NO ................................. 5  GO TO *PEA1, NEXT SECTION

DON’T KNOW .......... 9  GO TO *PEA1, NEXT SECTION

REFUSED ................ 8  GO TO *PEA1, NEXT SECTION

*SD15a. How old were you the first time this happened?

__________ YEARS OLD

DON’T KNOW .......... 999

REFUSED ...................... 998
*SD16. Have you seriously thought about killing yourself at any time in the past 12 months?

YES .................................... 1  \( \text{GO TO} *\text{SD17} \)
NO .................................... 5
DON'T KNOW .................. 9
REFUSED ......................... 8

*SD16a. How old were you the last time this happened?

________ YEARS OLD

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

*SD17. Have you ever made a plan to kill yourself?

YES .................................... 1
NO .................................... 5  \( \text{GO TO} *\text{SD19} \)
DON'T KNOW .................. 9  \( \text{GO TO} *\text{SD19} \)
REFUSED ......................... 8  \( \text{GO TO} *\text{SD19} \)

*SD17a. How old were you the first time this happened?

________ YEARS OLD

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

*SD18. Did you make a plan to kill yourself at any time in the past 12 months?

YES .................................... 1  \( \text{GO TO} *\text{SD19} \)
NO .................................... 5
DON'T KNOW .................. 9
REFUSED ......................... 8

*SD18a. How old were you the last time?

________ YEARS OLD

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

*SD19. Have you ever tried to kill yourself?

YES .................................... 1  \( \text{GO TO} *\text{PEA1, NEXT SECTION} \)
NO .................................... 5  \( \text{GO TO} *\text{PEA1, NEXT SECTION} \)
DON'T KNOW .................. 9  \( \text{GO TO} *\text{PEA1, NEXT SECTION} \)
REFUSED ......................... 8  \( \text{GO TO} *\text{PEA1, NEXT SECTION} \)

*SD19a. How many times did you try to kill yourself in your lifetime?

________ NUMBER OF TIMES

DON'T KNOW .......................... 999
REFUSED ......................... 998
*SD20. INTERVIEWER CHECKPOINT (SEE *SD19a):

*SD19a EQUALS ‘1’.................................1   GO TO *SD23
ALL OTHERS...........................................2

*SD21. How old were you the first time?

____________ YEARS OLD

DON’T KNOW ..................999
REFUSED.........................998

*SD22. There are three statements I will read out loud. Please tell me which of these three statements best describes your situation when you tried to kill yourself the first time – one, two, or three?

“One, I made a serious attempt to kill myself and it was only luck that I did not succeed.”
“Two, I tried to kill myself, but knew that the method may not work.”
“Three, my attempt was a cry for help, I did not intend to die.”

I MADE A SERIOUS ATTEMPT TO KILL MYSELF AND IT WAS ONLY LUCK THAT I DID NOT SUCCEED................................. 1
I TRIED TO KILL MYSELF, BUT KNEW THAT THE METHOD MAY NOT WORK.......................................................... 2
MY ATTEMPT WAS A CRY FOR HELP. I DID NOT INTEND TO DIE........... 3
DON’T KNOW ............................................................... 9
REFUSED................................................................. 8

*SD23. Did you try to kill yourself in the past 12 months?

YES................................................1   GO TO *SD24
NO..............................................5
DON’T KNOW ......................9
REFUSED.................................8

*SD23a. How old were you (when/the last time) you tried to kill yourself?

____________ YEARS OLD   GO TO *SD27

DON’T KNOW ..............999   GO TO *SD27
REFUSED.............998   GO TO *SD27

*SD24. Did it result in an injury or poisoning?

YES................................. 1   GO TO *SD27
NO.................................5   GO TO *SD27
DON’T KNOW ...............9   GO TO *SD27
REFUSED.........................8   GO TO *SD27
*SD25. Did it require medical attention?

YES .................................... 1
NO...................................... 5
DON’T KNOW ................. 9
REFUSED.......................... 8

*SD26. Did it require overnight hospitalization?

YES .................................... 1
NO...................................... 5
DON’T KNOW ................. 9
REFUSED.......................... 8

*SD27. There are three statements I will read out loud. Please tell me which of these three statements best describes your situation when you tried to kill yourself (the last time) – one, two, or three?

“One, I made a serious attempt to kill myself and it was only luck that I did not succeed.”
“Two, I tried to kill myself, but knew that the method may not work.”
“Three, my attempt was a cry for help, I did not intend to die.”

I MADE A SERIOUS ATTEMPT TO KILL MYSELF AND IT WAS ONLY LUCK THAT I DID NOT SUCCEED................................. 1
I TRIED TO KILL MYSELF, BUT KNEW THAT THE METHOD MAY NOT WORK ................................................................. 2
MY ATTEMPT WAS A CRY FOR HELP. I DID NOT INTEND TO DIE............ 3
DON’T KNOW ........................................................................................................... 9
REFUSED.................................................................................................................... 8

*SD28. INTERVIEWER CHECKPOINT: (SEE *SD23)

*SD23 EQUALS ‘1’ ..............................................1
ALL OTHERS ...............................................2

*SD29. What method did you use?

RECORD ALL MENTIONS

A. GUN ......................................................................................................................... 1
B. RAZOR, KNIFE OR OTHER SHARP INSTRUMENT ............................................. 2
C. OVERDOSE OF PRESCRIPTION MEDICATIONS .................................................. 3
D. OVERDOSE OF OVER-THE-COUNTER MEDICATIONS ..................................... 4
E. OVERDOSE OF OTHER DRUG (E.G. HEROIN, CRACK, ALCOHOL)............... 5
F. POISONING (E.G. CARBON MONOXIDE, RAT POISON) ................................... 6
G. HANGING, STRANGULATION, SUFFOCATION ............................................... 7
H. DROWNING .......................................................................................................... 8
I. JUMPING FROM HIGH PLACES ......................................................................... 9
J. MOTOR VEHICLE CRASH ..................................................................................... 10
K. OTHER (PLEASE DESCRIBE)............................................................................ 11

DON’T KNOW ........................................................................................................ 99
REFUSED............................................................................................................... 98

GO TO *PEA1, NEXT SECTION

168
PERSONALITY SECTION PART 1

*PEA1. (RB PG 31) Now I am going to read a series of statements that people use to describe themselves. I need you to tell me how true each statement is for you — very true, somewhat, not very, or not at all true. The best answer is usually the one that comes to your mind first, so don’t take too much time thinking before you answer. Here’s the first statement.

<table>
<thead>
<tr>
<th>(IF NEC: Very, somewhat, not very, or not at all true for you?)</th>
<th>VERY (1)</th>
<th>SOMEWHAT (2)</th>
<th>NOT VERY (3)</th>
<th>NOT AT ALL (4)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*PEA1. I am an impulsive person who often acts before thinking. Is this very true, somewhat, not very, or not at all true for you?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA2. I enjoy getting into new situations where you can’t tell how things will turn out.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA3. I prefer friends who are exciting and unpredictable.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA4. I like “wild” parties.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA5. I would like the kind of life where I can travel a lot, with lots of change and excitement.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA6. I like doing things just for the thrill of it.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA7. I sometimes like to do things that are a little frightening.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA8. I often get so carried away by new and exciting things and ideas that I never think of possible difficulties or problems.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA9. I often do things without thinking of the consequences.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA10. Before I begin a complicated job, I make careful plans.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA11. I usually think about what I am going to do before doing it.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA12. I often feel unsure of myself.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA13. I often get emotionally upset.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA14. I tend to be oversensitive and easily hurt by thoughtless remarks and actions of others.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA15. I often think people I meet are better than I am.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA16. I often worry about things that other people think are not important.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA17. I don’t let a lot of little things bother me.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA18. I often feel uncomfortable and uneasy for no reason.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA18_1. I’m a very nervous person.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA19. I am often a little rude to people I do not like.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA20. When I get mad I say ugly things.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA21. I have a very strong temper.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>VERY (1)</td>
<td>SOMEWHAT (2)</td>
<td>NOT VERY (3)</td>
<td>NOT AT ALL (4)</td>
<td>DK (9)</td>
<td>RF (8)</td>
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</tr>
<tr>
<td>*PEA22. If people annoy me I let them know.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA23. I am always patient with others even when they are annoying.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA24. When people shout at me, I shout back.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA25. When I am angry with people I let them know.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA26. I like to keep busy all of the time.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA27. I like to wear myself out with hard work or exercise.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA28. When I do things I do them with lots of energy.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA29. I like to be doing things all the time.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA30. I lead a busier life than most people.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA31. I like complicated jobs that require a lot of effort and concentration.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA32. I need to be doing things all the time.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA33. I am a very outgoing and friendly person.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA34. I am usually uncomfortable at big parties.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA35. I like to start conversations at parties.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA36. At parties, I enjoy talking with many people whether I already know them or not.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA37. Generally, I like to be alone so I can do things I want to do without other people bothering me.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA38. I probably spend more time than I should hanging out with friends.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA39. I usually prefer to do things alone.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA40. When I feel emotions, I feel them very strongly.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA41. I get emotional very easily.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA42. I often do things without thinking when I get emotional.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA43. I have a hard time controlling myself once I get emotionally worked up.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA44. I sometimes want to do things so much that I can’t stop myself no matter how hard I try.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PEA45. I have a very hard time resisting temptations.</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>
SUBSTANCE (SU)

*SU1. The next questions are about your use of alcohol including beer, wine, wine coolers, and hard liquor like vodka, gin, whiskey, and mixed drinks. How old were you the very first time you ever drank alcohol?

_____ YEARS OLD

(IF VOL): "NEVER" ....................... 997    GO TO *SU4
DON'T KNOW ................................ 999
REFUSED......................................... 998

*SU2. IF R CAN READ: (RB, PG 28) Please use the table on page 28 in your booklet as a guide in answering the next questions. How old were you when you first had at least 12 drinks in a year?

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

_____ YEARS OLD

DON'T KNOW ................ 999    GO TO *SU2a1
REFUSED ...................... 998    GO TO *SU2a1
(IF VOL): "NEVER" ............. 997    GO TO *SU4
ALL MY LIFE.................... 996    GO TO *SU2a3

*SU2a1. Can you remember what grade you were in at school?

YES .................................... 1
NO .................................... 5    GO TO *SU2a3
DON'T KNOW .................... 9    GO TO *SU2a3
REFUSED .......................... 8    GO TO *SU2a3

*SU2a2. What grade was that?

KINDERGARTEN ...... 0  7TH GRADE......................... 7
1ST GRADE .......... 1  8TH GRADE......................... 8
2ND GRADE......... 2  HIGH SCHOOL FRESHMAN ...... 9
3RD GRADE........ 3  HIGH SCHOOL SOPHOMORE .... 10
4TH GRADE....... 4  HIGH SCHOOL JUNIOR......... 11
5TH GRADE.... 5  HIGH SCHOOL SENIOR......... 12
6TH GRADE...... 6  ANY COLLEGE ...................... 13

*SU2a3. Was it before you first started school?

YES....................... 1    GO TO *SU3
NO .............................. 5
DON'T KNOW ............. 9
REFUSED .................. 8

BEFORE STARTED SCHOOL ...... 4
BEFORE TEENAGER..................... 12
NOT BEFORE TEENAGER............ 13
DON'T KNOW .................... 999
REFUSED .......................... 998
*SU3. (RB, PG 28) (Look at page 28 in your booklet.) Think about the past 12 months. In the past 12 months, how often did you usually have at least one drink – nearly every day, three to four days a week, one to two days a week, one to three days a month, or less than once a month?

NEARLY EVERY DAY............................................................................... 1
3 - 4 DAYS PER WEEK........................................................................... 2
1 - 2 DAYS PER WEEK......................................................................... 3
1 - 3 DAYS PER MONTH......................................................................... 4
LESS THAN ONCE A MONTH................................................................. 5
(IF VOL) DID NOT DRINK IN PAST 12 MONTHS................................. 6
DON’T KNOW ..................................................................................... 9
REFUSED............................................................................................. 8

*SU4. (RB, PG 28) (Looking at page 28 in your booklet,) When you drank in the past 12 months, about how many drinks did you usually have in one day?

________ NUMBER OF DRINKS PER DAY

DON’T KNOW ................. 999
REFUSED......................... 998

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

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

*SU6. INTERVIEWER CHECKPOINT: (SEE *SU3)

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

*SU7. INTERVIEWER CHECKPOINT: (SEE *SU4)

*SU4 IS EQUALS ‘3’ OR MORE ........................................................... 1
GO TO *SU12
ALL OTHERS....................................................................................... 2
GO TO *SU41

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

NEARLY EVERY DAY............................................................................... 1
3 - 4 DAYS PER WEEK........................................................................... 2
1 - 2 DAYS PER WEEK......................................................................... 3
1 - 3 DAYS PER MONTH......................................................................... 4
LESS THAN ONCE A MONTH................................................................. 5
DON’T KNOW ..................................................................................... 9
REFUSED............................................................................................. 8
GO TO *SU41
**SU9.** And on the days you drank during that time, about how many drinks would you usually have in one day?

______ NUMBER OF DRINKS PER DAY

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

---

**SU10.** INTERVIEWER CHECKPOINT: (SEE *SU8*)

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

---

**SU11.** INTERVIEWER CHECKPOINT: (SEE *SU9*)

*SU9 EQUALS ‘3’ OR MORE ..................................................1
ALL OTHERS .................................................................2  GO TO *SU41
**INTERVIEWER INSTRUCTION:** IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU12 SERIES QUESTIONS ‘9’ AND GO TO *SU13.

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SU12.</strong> The next questions are about problems you may have had because of drinking. First, was there ever a time in your life when your drinking or being hung over often or caused problems at school or work or at home? (KEY PHRASE: interfered or caused problems with your school or work)</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SU12a.</strong> Was there ever a time in your life when your drinking caused arguments or other serious or repeated problems with your family, friends teachers, neighbors, or co-workers? (KEY PHRASE: caused problems with family, friends or others)</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SU12b.</strong> Did you continue to drink even though it caused problems with these people? (NO KEY PHRASE)</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SU12c.</strong> Were there times in your life when you were often buzzed or drunk in situations where you could get hurt, for example when riding a bicycle, driving, playing sports, operating a machine, or anything else? (KEY PHRASE: jeopardized your safety because you sometimes drank in situations where you could get hurt)</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SU12d.</strong> Were you arrested or stopped by the police because of drunk driving or drunk behavior more than once? (KEY PHRASE: resulted in problems with the police)</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

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

- ZERO RESPONSES CODED ‘1’ ................................. 1
  - GO TO *SU14
- ONE RESPONSE CODED ‘1’ ................................. 2
  - GO TO *SU15 INTRO 1
- ALL OTHERS ...................................................... 3
  - GO TO *SU15 INTRO 2
### *SU15 Intro 1.

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

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>Go To</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>*SU15b</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
<td>*SU15b</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td>*SU15b</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
<td>*SU15b</td>
</tr>
</tbody>
</table>

### *SU15 Intro 2.

Your drinking (KEY PHRASES FOR ALL "YES" RESPONSES IN *SU12 SERIES). Can you remember your exact age the very first time you had (either/any) of these problems?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>Go To</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>*SU15b</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
<td>*SU15b</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td>*SU15b</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
<td>*SU15b</td>
</tr>
</tbody>
</table>

### SU15a.

(IF NEC: How old were you?)

<table>
<thead>
<tr>
<th>Age</th>
<th>Code</th>
<th>Go To</th>
</tr>
</thead>
<tbody>
<tr>
<td>________ YEARS OLD</td>
<td></td>
<td>*SU16</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
<td>*SU16</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
<td>*SU16</td>
</tr>
</tbody>
</table>

### SU15b.

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

<table>
<thead>
<tr>
<th>Age</th>
<th>Code</th>
<th>Go To</th>
</tr>
</thead>
<tbody>
<tr>
<td>________ YEARS OLD</td>
<td></td>
<td>*SU1ba1</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
<td>*SU15b1</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
<td>*SU15b3</td>
</tr>
</tbody>
</table>

### SU15b1.

Can you remember what grade you were in at school?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>Go To</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>*SU2a3</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
<td>*SU2a3</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td>*SU2a3</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
<td>*SU2a3</td>
</tr>
</tbody>
</table>

### SU15b2.

What grade was that?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINDERGARTEN</td>
<td>0</td>
</tr>
<tr>
<td>1ST GRADE</td>
<td>1</td>
</tr>
<tr>
<td>2ND GRADE</td>
<td>2</td>
</tr>
<tr>
<td>3RD GRADE</td>
<td>3</td>
</tr>
<tr>
<td>4TH GRADE</td>
<td>4</td>
</tr>
<tr>
<td>5TH GRADE</td>
<td>5</td>
</tr>
<tr>
<td>6TH GRADE</td>
<td>6</td>
</tr>
<tr>
<td>7TH GRADE</td>
<td>7</td>
</tr>
<tr>
<td>8TH GRADE</td>
<td>8</td>
</tr>
<tr>
<td>HIGH SCHOOL FRESHMAN</td>
<td>9</td>
</tr>
<tr>
<td>HIGH SCHOOL SOPHOMORE</td>
<td>10</td>
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<tr>
<td>HIGH SCHOOL JUNIOR</td>
<td>11</td>
</tr>
<tr>
<td>HIGH SCHOOL SENIOR</td>
<td>12</td>
</tr>
<tr>
<td>ANY COLLEGE</td>
<td>13</td>
</tr>
</tbody>
</table>

### SU15b3.

Was it before you first started school?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>Go To</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>*SU16</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
<td>*SU16</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td>*SU16</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
<td>*SU16</td>
</tr>
</tbody>
</table>

### SU15b4.

Was it before you were a teenager?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
<th>Go To</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>*SU16</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
<td>*SU16</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td>*SU16</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
<td>*SU16</td>
</tr>
</tbody>
</table>

- BEFORE STARTED SCHOOL: 4
- BEFORE TEENAGER: 12
- NOT BEFORE TEENAGER: 13
- DON'T KNOW: 999
- REFUSED: 998

175
*SU15_1. INTERVIEWER CHECKPOINT: (SEE *SU3)

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

*SU16. When was the last time you had [this problem/ (either/ any) of these problems] because of drinking – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

PAST MONTH............................................. 1  GO TO *SU17
2 TO 6 MONTHS AGO............................. 2  GO TO *SU17
7 TO 12 MONTHS AGO......................... 3  GO TO *SU17
MORE THAN 12 MONTHS AGO.............. 4  GO TO *SU17
DON’T KNOW.......................................... 9  GO TO *SU17
REFUSED................................................. 8  GO TO *SU17

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

__________ YEARS OLD

DON’T KNOW........................................... 999
REFUSED................................................ 998

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

__________ YEARS

DON’T KNOW........................................... 999
REFUSED................................................ 998
**INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU19 SERIES QUESTIONS ‘9’ AND GO TO *SU20.**

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SU19. (The next questions are about some other problems you may have had because of drinking.) Was there ever a time in your life when you often felt like drinking so badly that you couldn’t stop yourself from drinking or couldn’t stop thinking about drinking?</td>
<td></td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU19a. Did you ever need to drink more than you used to, to get buzzed or drunk, or did you ever find that you could no longer get buzzed or drunk on the amount you used to drink?</td>
<td></td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU19b. People who all of a sudden cut down or stop drinking may not feel well. These feelings are much stronger and can last longer than the usual hangover. Did you ever get tired or have headaches, diarrhea, the shakes, or emotional problems when you stopped, cut down, or went without drinking?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>GO TO *SU19d</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SU19c. Did you ever drink to keep from having problems like these?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU19d. Did you have times when you started drinking even though you promised yourself you wouldn’t, or when you drank a lot more than you planned to?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>GO TO *SU19g</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SU19e. Were there ever times when you drank more often or for more days in a row than you planned to?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>GO TO *SU19g</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SU19f. Did you have times when you started drinking and became drunk when you didn’t want to?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU19g. Were there times when you tried to stop or cut down on your drinking and found that you were not able to do so?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU19h. Did you ever have times of several days or more when you spent so much time drinking or getting over the effects of alcohol that you had little time for anything else?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU19i. Did you ever have a time lasting a month or longer when you gave up or cut down on important activities because of your drinking – like sports, work, or seeing friends and family?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU19j. Did you ever continue to drink even though you knew you had a serious physical or emotional problem that might have been caused by or made worse by drinking?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>
*SU20. INTERVIEWER CHECKPOINT: (SEE *SU19 SERIES)

ZERO TO TWO RESPONSES CODED ‘1’ .........................1  GO TO *SU41
ALL OTHERS .................................................................2

*SU20_1 INTERVIEWER CHECKPOINT: (SEE *SU3)

*SU3 EQUALS ‘6’ .................................................................1  GO TO *SU28
ALL OTHERS .................................................................2

*SU26. You reported having a number of alcohol problems. When was the last time you had any of these problems – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

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

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

________ YEARS

DON’T KNOW .......... 999
REFUSED .................. 998

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

YES ............................................................1
NO ............................................................2  GO TO *SU32
DON’T KNOW .........................................................9  GO TO *SU32
REFUSED ..............................................................8  GO TO *SU32

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

________ YEARS OLD

DON’T KNOW ............ 999  GO TO *SU30a1
REFUSED .................. 998  GO TO *SU30a3
ALL MY LIFE ............... 997  GO TO *SU30a3

*SU30a1. Can you remember what grade you were in at school?

YES ................................................. 1
NO ......................................................... 5  GO TO *SU30a3
DON’T KNOW ................. 9  GO TO *SU30a3
REFUSED .................. 8  GO TO *SU30a3
*SU30a2. What grade was that?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINDERGARTEN</td>
<td>0</td>
</tr>
<tr>
<td>1ST GRADE</td>
<td>1</td>
</tr>
<tr>
<td>2ND GRADE</td>
<td>2</td>
</tr>
<tr>
<td>3RD GRADE</td>
<td>3</td>
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<td>4TH GRADE</td>
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<td>5TH GRADE</td>
<td>5</td>
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<td>6TH GRADE</td>
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<tr>
<td>7TH GRADE</td>
<td>7</td>
</tr>
<tr>
<td>8TH GRADE</td>
<td>8</td>
</tr>
<tr>
<td>HIGH SCHOOL FRESHMAN</td>
<td>9</td>
</tr>
<tr>
<td>HIGH SCHOOL SOPHOMORE</td>
<td>10</td>
</tr>
<tr>
<td>HIGH SCHOOL JUNIOR</td>
<td>11</td>
</tr>
<tr>
<td>HIGH SCHOOL SENIOR</td>
<td>12</td>
</tr>
<tr>
<td>ANY COLLEGE</td>
<td>13</td>
</tr>
</tbody>
</table>

*SU30a3. Was it before you first started school?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*SU30a4. Was it before you were a teenager?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>TIMES</td>
<td>1</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
</tbody>
</table>

*SU33. INTERVIEWER CHECKPOINT: (SEE *SU32)

*SU32 EQUALS ‘1’ OR MORE ............................................... 1 GO TO *SU37

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

<table>
<thead>
<tr>
<th>Answer</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DURATION NUMBER</td>
<td>1</td>
</tr>
<tr>
<td>CIRCLE UNIT OF TIME:</td>
<td></td>
</tr>
<tr>
<td>DAY.......1</td>
<td>MONTH.......2</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
</tbody>
</table>

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

*SU32 EQUALS ‘1’ ....................................................................................................................... 1 GO TO *SU37

*SU32 EQUALS ‘2’ OR MORE AND *SU34 EQUALS ‘3’ MONTHS OR MORE .................................. 2

ALL OTHERS ....................................................................................................................... 3 GO TO *SU37
*SU36. How many different times have you gone without drinking for three months or longer?  

__________ TIMES  

DON’T KNOW................. 999  
REFUSED......................... 998  

*SU37. INTERVIEWER CHECKPOINT: (SEE *SU26)  

*SU26 EQUALS ‘1’, ‘2’, OR ‘3’ ................................................................. 1  
ALL OTHERS ......................................................................................... 2  
GO TO *SU41  

*SU38. During the past 12 months, how much have you had each of the following experiences because of your drinking:  

<table>
<thead>
<tr>
<th></th>
<th>A LOT (1)</th>
<th>SOME (2)</th>
<th>A LITTLE (3)</th>
<th>NOT AT ALL (4)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SU38a. How much has your physical health been harmed by your drinking – a lot, some, a little, or not at all?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>SU38b. How much has your family been hurt by your drinking (– a lot, some, a little, or not at all)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>SU38c. How much have you done impulsive things, because of your drinking, that you later wished you hadn’t done (– a lot, some, a little, or not at all)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>SU38d. How much have you failed to do what was expected of you because of your drinking (– a lot, some, a little, or not at all)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>SU38e. How much have you been unhappy because of your drinking (– a lot, some, a little, or not at all)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

180
WORK DOWN GRID ASKING *SU41-*SU43. THEN FOR EACH ITEM ENDOURED, ASK FOLLOW-UP QUESTIONS.

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
</table>

**SU41.** The next questions are about the use of drugs.

Have you ever used either marijuana or hashish, even once?

(KEY PHRASE: marijuana or hashish)

| 1 | 5 | 9 | 8 |

**SU42.** (RB, PG 29) Looking at Page 29 in your booklet, have you ever used cocaine in any form, including powder, crack, free base, coca leaves, or paste?

(KEY PHRASE: cocaine)

| 1 | 5 | 9 | 8 |

**SU43.** (RB, PG 29-30) Look at Pages 29-30 in your booklet. Have you ever used tranquilizers, stimulants, pain killers, or other prescription drugs either without the recommendation of a health professional, or for any reason other than a health professional said you should use them?

(KEY PHRASE: prescription drugs without a doctor’s recommendation)

| 1 | 5 | 9 | 8 |

**SU44.** (RB, PG 30) Looking at page 30 in your booklet, have you ever used any other drug – such as (those listed in your booklet/ heroin, opium, glue, LSD, peyote, or any other drug?

(KEY PHRASE: one or more of the drugs on page 30)

| 1 | 5 | 9 | 8 |
**SU45.** How old were you the first time (you used KEY PHRASE)?

IF DON’T KNOW, PROBE: Can you remember what grade you were in at school? IF NOT YES, PROBE: Was it before you were a teenager?

<table>
<thead>
<tr>
<th>YEARS OLD/GRADE</th>
<th>BEFORE TEENAGER</th>
<th>NOT BEFORE TEENAGER</th>
<th>WHOLE LIFE OR DON’T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12</td>
<td>13</td>
<td>999</td>
<td>998</td>
</tr>
</tbody>
</table>

GO TO *SU47a

**SU47a.** Did you use (KEY PHRASE) at any time in the past 12 months?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO NEXT MEDICINE

**SU48a.** How often (did you use KEY PHRASE in the past twelve months)—nearly every day, 3 to 4 days a week, 1 to 2 days a week, 1 to 3 days a month, or less than once a month?

<table>
<thead>
<tr>
<th>NEARLY EVERY DAY</th>
<th>3-4 DAYS PER WEEK</th>
<th>1-2 DAYS PER WEEK</th>
<th>1-3 DAYS PER MONTH</th>
<th>LESS THAN ONCE A MONTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

GO TO NEXT MEDICINE

**SU45b.**

<table>
<thead>
<tr>
<th>YEARS OLD/GRADE</th>
<th>BEFORE TEENAGER</th>
<th>NOT BEFORE TEENAGER</th>
<th>WHOLE LIFE OR DON’T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12</td>
<td>13</td>
<td>999</td>
<td>998</td>
</tr>
</tbody>
</table>

GO TO *SU47b

**SU47b.**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO NEXT MEDICINE

**SU48b.**

**SU45c.**

<table>
<thead>
<tr>
<th>YEARS OLD/GRADE</th>
<th>BEFORE TEENAGER</th>
<th>NOT BEFORE TEENAGER</th>
<th>WHOLE LIFE OR DON’T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12</td>
<td>13</td>
<td>999</td>
<td>998</td>
</tr>
</tbody>
</table>

GO TO *SU47c

**SU47c.**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO NEXT MEDICINE

**SU48c.**

**SU45d.**

<table>
<thead>
<tr>
<th>YEARS OLD/GRADE</th>
<th>BEFORE TEENAGER</th>
<th>NOT BEFORE TEENAGER</th>
<th>WHOLE LIFE OR DON’T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>12</td>
<td>13</td>
<td>999</td>
<td>998</td>
</tr>
</tbody>
</table>

GO TO *SU47d

**SU47d.**

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO NEXT MEDICINE

**SU48d.**

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

ONLY ONE RESPONSE CODED ‘1’ IN *SU41 - *SU44 SERIES | 1 | GO TO *SU64 INTRO 1
MORE THAN ONE RESPONSE CODED ‘1’ IN *SU41 - *SU44 SERIES | 2 | GO TO *SU64 INTRO 2
ALL OTHERS | 3 | GO TO *SU87
**SU64 INTRO 1.**

You reported using (IF *SU41 EQUALS ‘1’: marijuana or hashish/ IF *SU42 EQUALS ‘1’: cocaine/ IF *SU43 EQUALS ‘1’: one or more of the prescription drugs on page X/ IF *SU44 EQUALS ‘1’: one or more of the drugs on page Y). The next questions are about any problems you ever had because of your use.

**SU64 INTRO 2.**

Let me review. You reported that in your lifetime you have used (IF *SU41 EQUALS ‘1’: marijuana or hashish/ and/ IF *SU42 EQUALS ‘1’: cocaine/ and/ IF *SU43 EQUALS ‘1’: one or more of the prescription drugs on page X/ and/ IF *SU44 EQUALS ‘1’: one or more of the drugs on page Y). The next questions are about any problems you ever had because of your use.

**INTERVIEWER INSTRUCTION:** IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU65 SERIES QUESTIONS ‘9’ AND GO TO *SU66.

<table>
<thead>
<tr>
<th>*SU65</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>First, was there ever a time in your life when your use of (IF ONLY *SU41 EQUALS ‘1’: marijuana or hashish/ IF ONLY *SU42 EQUALS ‘1’: cocaine/ IF ONLY *SU41 EQUALS ‘1’ AND *SU42 EQUALS ‘1’: either marijuana or hashish or cocaine / ALL OTHERS: drugs) caused problems at school or at work or at home?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Was there ever a time in your life when your use caused arguments or other repeated problems with your family, friends, teachers, neighbors, or co-workers?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Did you continue to use even though your use caused problems with these people?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Were there times in your life when you were often under the influence of (IF ONLY *SU41 EQUALS ‘1’: marijuana or hashish/ IF ONLY *SU42 EQUALS ‘1’: cocaine/ IF ONLY *SU41 EQUALS ‘1’ AND *SU42 EQUALS ‘1’: either marijuana or hashish or cocaine / ALL OTHERS: drugs) in situations where you could get hurt, for example when riding a bicycle, playing sports, driving, operating a machine, or anything else?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>Were you arrested or stopped by the police more than once because of your behavior while you were high or because you were driving when you were high?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

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

ZERO RESPONSES CODED ‘1’ .............................................. 1 GO TO *SU87
ONE RESPONSE CODED ‘1’ ................................................... 2 GO TO *SU68 INTRO 1
ALL OTHERS................................................................. 3 GO TO *SU68 INTRO 2

**SU68 INTRO 1.**

You just reported that your drug use (KEY PHRASE FOR “YES” RESPONSE IN *SU65 SERIES). Can you remember your exact age the very first time you had this problem?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON’T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**SU68 INTRO 2.**

Your drug use (KEY PHRASES FOR ALL “YES” RESPONSES IN *SU65 SERIES). Can you remember your exact age the very first time you had (either/ any) of these problems?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DON’T KNOW</th>
<th>REFUSED</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

183
*SU68a. (IF NEC: How old were you?)

__________ YEARS OLD   GO TO *SU69
DON’T KNOW .............. 999   GO TO *SU69
REFUSED..................... 998   GO TO *SU69

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

__________ YEARS OLD
DON’T KNOW .............. 999   GO TO *SU68b1
REFUSED..................... 998   GO TO *SU68b3
ALL MY LIFE............... 997   GO TO *SU68b3

*SU68b1. Can you remember what grade you were in at school?

YES............................ 1
NO............................... 5   GO TO *SU68b3
DON’T KNOW .............. 9   GO TO *SU68b3
REFUSED..................... 8   GO TO *SU68b3

*SU68b2. What grade was that?

KINDERGARTEN......0   7TH GRADE ...................... 7
1ST GRADE.......... 1   8TH GRADE ...................... 8
2ND GRADE.......... 2   HIGH SCHOOL FRESHMAN ...... 9
3RD GRADE.......... 3   HIGH SCHOOL SOPHOMORE ....... 10
4TH GRADE.......... 4   HIGH SCHOOL JUNIOR.......... 11
5TH GRADE.......... 5   HIGH SCHOOL SENIOR.......... 12
6TH GRADE.......... 6   ANY COLLEGE ................... 13

*SU68b3. Was it before you first started school?

YES............................ 1   GO TO *SU69
NO............................... 5
DON’T KNOW .............. 9
REFUSED..................... 8

BEFORE STARTED SCHOOL .......... 4
BEFORE TEENAGER .................. 12
NOT BEFORE TEENAGER.......... 13
DON’T KNOW ...................... 999
REFUSED.......................... 998

*SU68b4. Was it before you were a teenager?

YES............................ 1
NO............................... 5
DON’T KNOW .............. 9
REFUSED..................... 8

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

IF *SU47a EQUALS ‘1’ OR *SU47b EQUALS ‘1’ OR *SU47c EQUALS ‘1’ OR *SU47d EQUALS ‘1’ ...... 1
ALL OTHERS.......................... 2   GO TO *SU70
**SU69.** When was the last time you had [this problem/ (either/ any) of these problems] because of using drugs – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

- PAST MONTH .........................................1 \* GO TO *SU73
- 2 TO 6 MONTHS AGO............................2 \* GO TO *SU73
- 7 TO 12 MONTHS AGO.......................3 \* GO TO *SU73
- MORE THAN 12 MONTHS AGO.............4
- DON’T KNOW .....................................9 \* GO TO *SU73
- REFUSED ............................................8 \* GO TO *SU73

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

- __________  YEARS OLD
- DON’T KNOW ..................................999
- REFUSED .......................................998

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

- __________  YEARS
- DON’T KNOW ..................................999
- REFUSED .......................................998
INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU72 SERIES QUESTIONS ‘9’ AND GO TO *SU73.

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SU72. (The next questions are about some other problems you may have had because of using [IF ONLY *SU41EQUALS ‘1’: marijuana or hashish/ IF ONLY *SU42 EQUALS ‘1’: cocaine/ IF ONLY *SU41 EQUALS ‘1’ AND *SU42 EQUALS ‘1’: either marijuana or hashish or cocaine / ALL OTHERS: drugs])</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Was there ever a time in your life when you felt like using so badly that you couldn’t stop yourself or couldn’t think about anything else?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU72a. Did you ever need to use more than you used to in order to get high, or did you ever find that you could no longer get high on the amount you used to use?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*SU72b. People who all of a sudden cut down their drug use or stop using altogether may not feel well if they have been using them regularly for a long time. These feelings are more intense and can last longer than the usual hangover. Did you ever have times when you stopped, cut down, or went without (IF ONLY *SU41EQUALS ‘1’: marijuana or hashish/ IF ONLY *SU42 EQUALS ‘1’: cocaine/ IF ONLY *SU41 EQUALS ‘1’ AND *SU42 EQUALS ‘1’: either marijuana or hashish or cocaine ALL OTHERS: drugs) and then got really tired, had headaches, diarrhea, the shakes, or emotional problems?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU72c. Did you ever use (IF ONLY *SU41EQUALS ‘1’: marijuana or hashish/ IF ONLY *SU42 EQUALS ‘1’: cocaine/ IF ONLY *SU41 EQUALS ‘1’ AND *SU42 EQUALS ‘1’: either marijuana or hashish or cocaine / ALL OTHERS: drugs) to keep from having problems like these?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU72d. Did you have times when you used drugs even though you promised yourself you wouldn’t, or when you used a lot more than you planned to?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>INTERVIEWER INSTRUCTION: IF R PROTESTS OR REFUSES TWO QUESTIONS, CODE ALL UNANSWERED *SU72 SERIES QUESTIONS ‘9’ AND GO TO *SU73.</td>
<td>YES (1)</td>
<td>NO (5)</td>
<td>DK (9)</td>
<td>RF (8)</td>
</tr>
<tr>
<td>---</td>
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</tr>
<tr>
<td><strong>SU72e.</strong> Were there ever times when you used (IF ONLY *SU41 EQUALS ‘1’: marijuana or hashish/ IF ONLY *SU42 EQUALS ‘1’: cocaine/ IF ONLY *SU41 EQUALS ‘1’ AND *SU42 EQUALS ‘1’: either marijuana or hashish or cocaine / ALL OTHERS: drugs) more often or for more days in a row than you planned to?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SU72f.</strong> Were there times when you tried to stop or cut down on your use of (IF ONLY SU41 EQUALS ‘1’: marijuana or hashish / IF ONLY SU42 EQUALS ‘1’: cocaine / IF ONLY SU41 EQUALS ‘1’ and SU42 EQUALS ‘1’: either marijuana or hashish or cocaine / ALL OTHERS: drugs) and found that you were not able to do so?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SU72g.</strong> Did you ever have times of several days or more when you spent so much time using or recovering from the effects of using that you had little time for anything else?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SU72h.</strong> Did you ever have times lasting a month or longer when you gave up or cut down on important activities—like sports, work, or seeing friends and family because of your drug use?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>SU72i.</strong> Did you ever continue to use (IF ONLY *SU41 EQUALS ‘1’: marijuana or hashish/ IF ONLY *SU42 EQUALS ‘1’: cocaine/ IF ONLY *SU41 EQUALS ‘1’ AND *SU42 EQUALS ‘1’: either marijuana or hashish or cocaine / ALL OTHERS: drugs) when you knew you had a serious physical or emotional problem that might have been caused by or made worse by your use?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

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

ZERO TO TWO RESPONSES CODED ‘1’ .............................. 1 \GO TO \*SU87
ALL OTHERS........................................................................................................ 2

**SU73_1 INTERVIEWER CHECKPOINT: (SEE *SU47a - *SU47d SERIES)**

ONE OR MORE RESPONSES CODED ‘1’ .......................... 1
ALL OTHERS........................................................................................................ 2 \GO TO \*SU81
SU79. You reported having a number of problems related to drug use. When was the last time you had any of these problems— in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

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

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

_________ YEARS

DON’T KNOW ............... 999
REFUSED ...................... 998

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

YES..................................................1
NO....................................................2
DON’T KNOW .....................................9
REFUSED ..........................................8

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

_________ YEARS OLD

DON’T KNOW .......... 999
REFUSED ................. 998
ALL MY LIFE .......... 997

SU83a1. Can you remember what grade you were in at school?

YES..........................................1
NO..............................................5
DON’T KNOW .................. 9
REFUSED ......................... 8

SU83a2. What grade was that?

KINDERGARTEN ....0 7TH GRADE ...................... 7
1ST GRADE ........ 1 8TH GRADE ...................... 8
2ND GRADE ......... 2 HIGH SCHOOL FRESHMAN ...... 9
3RD GRADE ......... 3 HIGH SCHOOL SOPHOMORE .... 10
4TH GRADE ......... 4 HIGH SCHOOL JUNIOR .......... 11
5TH GRADE ......... 5 HIGH SCHOOL SENIOR .......... 12
6TH GRADE ......... 6 ANY COLLEGE .................. 13

SU83a3. Was it before you first started school?

YES......................................... 1
NO ........................................... 5
DON’T KNOW .............. 9
REFUSED ......................... 8
*SU83a. Was it before you were a teenager?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>9</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>NO</td>
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<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
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<td></td>
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<tr>
<td>REFUSED</td>
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</tbody>
</table>

BEFORE STARTED SCHOOL.............4
BEFORE TEENAGER................12
NOT BEFORE TEENAGER.............13
DON'T KNOW................................999
REFUSED..................................998

*SU85. INTERVIEWER CHECKPOINT: (SEE *SU79)

*SU79 EQUALS ‘1’, ‘2’, OR ‘3’ .................................................................1
ALL OTHERS.................................................................2 GO TO *SU87

### *SU86. During the past 12 months, how much have you had each of the following experiences because of using [DRUG/ (either/ any) of these substances]):

<table>
<thead>
<tr>
<th></th>
<th>A LOT (1)</th>
<th>SOME (2)</th>
<th>A LITTLE (3)</th>
<th>NOT AT ALL (4)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SU86a. How much has your physical health been harmed by your use of [DRUG/ (either/ any) of these substances]) – a lot, some, a little, or not at all?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU86b. How much has your family been hurt by your use of [DRUG/ (either/ any) of these substances]) (– a lot, some, a little, or not at all)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU86c. How much have you done impulsive things because of using [DRUG/ (either/ any) of these substances]) that you later wished you hadn’t done (– a lot, some, a little, or not at all)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU86d. How much have you failed to do what was expected of you because of your use of [DRUG/ (either/ any) of these substances]) (– a lot, some, a little, or not at all)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*SU86e. How much have you been unhappy because of using [DRUG/ (either/ any) of these substances]) (– a lot, some, a little, or not at all)?</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>
**SU87.** The next questions are about the first time you had an opportunity to drink alcohol or to use drugs, whether or not you used them. By “an opportunity to use” I mean someone either offered you alcohol or drugs, or you were present when others were using and you could have used if you wanted to. Please do not include times when a health care provider may have offered you free samples.

(Thinking back over your entire lifetime,) About how old were you the **very first time** you had an opportunity to use (alcohol/drugs)?

IF DON’T KNOW, PROBE: Can you remember what grade you were in at school?

INITIAL DK, PROBE: Was it before you were a teenager?

INTERVIEWER: GO DOWN THE **SU87 COLUMN** FIRST, THEN ASK **SU88 SERIES.**

<table>
<thead>
<tr>
<th><strong>ALCOHOL</strong></th>
<th><strong>SU87a.</strong></th>
<th>(13x)</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________YEARS OLD/GRADE</td>
<td>BEFORE TEENAGER...........12</td>
<td></td>
</tr>
<tr>
<td></td>
<td>NOT BEFORE TEENAGER......19</td>
<td></td>
</tr>
<tr>
<td></td>
<td>WHOLE LIFE OR DK...........999</td>
<td></td>
</tr>
<tr>
<td></td>
<td>RF................................................998</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>DRUGS</strong></th>
<th><strong>SU87j.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>___________YEARS OLD/GRADE</td>
<td>BEFORE TEENAGER...........12</td>
</tr>
<tr>
<td></td>
<td>NOT BEFORE TEENAGER......19</td>
</tr>
<tr>
<td></td>
<td>WHOLE LIFE OR DK...........999</td>
</tr>
<tr>
<td></td>
<td>RF................................................998</td>
</tr>
</tbody>
</table>

**SU88.** About how many different times did you have the opportunity to use (alcohol/drugs) before ever using (it/them)?

INTERVIEWER: IF R NEVER USED (DRUG), PROBE: Then about how many times did you have the opportunity to use (alcohol/drugs) in your lifetime?

**SU88a.**

<table>
<thead>
<tr>
<th>TIMES</th>
<th>(13x)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW .......... 999</td>
<td></td>
</tr>
<tr>
<td>REFUSED .................. 998</td>
<td></td>
</tr>
</tbody>
</table>

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

YES................................................... 1
NO..................................................... 5  GO TO **SU119_2**
DON’T KNOW ......................... 9  GO TO **SU119_2**
REFUSED........................................... 8  GO TO **SU119_2**

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

<table>
<thead>
<tr>
<th>___________YEARS OLD</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW .......... 999</td>
</tr>
<tr>
<td>REFUSED .................. 998</td>
</tr>
</tbody>
</table>

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

YES............................................... 1
NO ............................................. 5  GO TO **SU102c**
DON’T KNOW ..................... 9  GO TO **SU102c**
REFUSED................................. 8  GO TO **SU102c**
*SU102a. How old were you the first time [you got helpful treatment for your use of (alcohol/drugs/alcohol or drugs)]?

__________ YEARS OLD

DON’T KNOW............ 999
REFUSED.................. 998

*SU102b. How many professionals did you ever talk to about your use of (alcohol/drugs/alcohol or drugs)?

__________ NUMBER OF PROFESSIONALS

DON’T KNOW............ 99   GO TO *SU103
REFUSED.................. 98   GO TO *SU103

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

__________ NUMBER OF PROFESSIONALS

DON’T KNOW............ 99
REFUSED.................. 98

*SU103. Did you receive professional treatment for your (drinking/drug use/drinking or drug use) at any time in the past 12 months?

YES.......................... 1
NO.............................. 5
DON’T KNOW............... 9
REFUSED..................... 8

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

YES.......................... 1
NO.............................. 5   GO TO *SU119_2
DON’T KNOW............... 9   GO TO *SU119_2
REFUSED..................... 8   GO TO *SU119_2

*SU119_1. How old were you the first time [you were hospitalized overnight because of your use of (alcohol/drugs/alcohol or drugs)]?

__________ YEARS OLD

DON’T KNOW............... 999
REFUSED..................... 998

*SU119_2. Did you ever go to a self-help group like Alcohol Anonymous or Rational Recovery for help with your use of (alcohol/drugs/alcohol or drugs)?

YES.......................... 1
NO.............................. 5   GO TO *SU119_5
DON’T KNOW............... 9   GO TO *SU119_5
REFUSED..................... 8   GO TO *SU119_5
*SU119_3. How old were you the first time (you went to a self-help group of this sort)?

______________ YEARS OLD

DON’T KNOW ......................... 999
REFUSED ....................... 998

*SU119_4. How many meetings of such a group did you attend in the past 12 months?

______________ MEETINGS

MORE THAN ‘97’ ......................... 97
DON’T KNOW .............................. 99
REFUSED ................................. 98

*SU119_5. How many of your close relatives -- including your biological parents, brothers and sisters, and children -- ever had problems with alcohol or drug use?

______________ NUMBER

DON’T KNOW .............................. 99
REFUSED ................................. 98

GO TO *PT4, NEXT SECTION
**POST-TRAUMATIC STRESS DISORDER (PT)**

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PT4.</strong> (RB, PG 32) In the next part of the interview, we ask about very scary things that might have happened in your life. (Some of these things are listed on Page 32 in your booklet.) Were you ever in a place where there was a war, revolution, military coup or where there was ongoing terror of civilians for political, ethnic, religious or other reasons?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*<em>GO TO <em>PT32 AND CODE “1”</em></em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PT5.</strong> Were you ever a refugee – that is, did you ever flee from your home to a foreign country or place to escape danger or persecution?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*<em>GO TO <em>PT33 AND CODE “1”</em></em></td>
<td></td>
<td></td>
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</tr>
<tr>
<td><strong>PT6.</strong> Were you ever kidnapped or held captive?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*<em>GO TO <em>PT34 AND CODE “1”</em></em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PT7.</strong> Were you ever exposed to a poisonous chemical or substance that could cause you serious harm?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*<em>GO TO <em>PT35 AND CODE “1”</em></em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PT8.</strong> Were you ever involved in a very serious or life-threatening car accident?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*<em>GO TO <em>PT36 AND CODE “1”</em></em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>PT9.</strong> Did you ever have any other very serious or life-threatening accident?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*<em>GO TO <em>PT37 AND CODE “1”</em></em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*PT10.</td>
<td>Were you ever involved in a major disaster, like a devastating flood, hurricane, fire, bomb explosion, tornado, or earthquake?</td>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td>YES (1)</td>
<td>NO (5)</td>
<td>DK (9)</td>
<td>RF (8)</td>
</tr>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td></td>
<td>GO TO *PT38 AND CODE “1”</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| *PT12. | Did you ever have a very serious or life-threatening illness? |
|        | YES (1) | NO (5) | DK (9) | RF (8) |
|        | 1       | 5      | 9      | 8      |
|        | GO TO *PT40 AND CODE “1” |

| *PT13. | Were you ever badly beaten up by your parents or the people who raised you? |
|        | YES (1) | NO (5) | DK (9) | RF (8) |
|        | 1       | 5      | 9      | 8      |
|        | GO TO *PT41 AND CODE “1” |

| *PT14. | Were you ever badly beaten up by someone you were dating or with whom you were romantically involved? |
|        | YES (1) | NO (5) | DK (9) | RF (8) |
|        | 1       | 5      | 9      | 8      |
|        | GO TO *PT42 AND CODE “1” |

| *PT15. | Were you ever badly beaten up by anyone else? |
|        | YES (1) | NO (5) | DK (9) | RF (8) |
|        | 1       | 5      | 9      | 8      |
|        | GO TO *PT43 AND CODE “1” |

| *PT16. | Were you ever mugged, held up, or threatened with a weapon? |
|        | YES (1) | NO (5) | DK (9) | RF (8) |
|        | 1       | 5      | 9      | 8      |
|        | GO TO *PT44 AND CODE “1” |

| *PT17. | The next two questions are about sexual assault. The first is about rape. We define this as someone either having sexual intercourse with you or penetrating your body with a finger or object when you did not want them to, either by threatening you or by using force. Did this ever happen to you? |
|        | YES (1) | NO (5) | DK (9) | RF (8) |
|        | 1       | 5      | 9      | 8      |
|        | GO TO *PT45 AND CODE “1” |

| *PT18. | Other than rape, were you ever sexually assaulted or molested? |
|        | YES (1) | NO (5) | DK (9) | RF (8) |
|        | 1       | 5      | 9      | 8      |
|        | GO TO *PT46 AND CODE “1” |

<p>| *PT19. | Has someone ever stalked you – that is, followed you or kept track of your activities in a way that made you feel you were in serious danger? |
|        | YES (1) | NO (5) | DK (9) | RF (8) |
|        | 1       | 5      | 9      | 8      |
|        | GO TO *PT47 AND CODE “1” |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>PT20. Did someone very close to you ever die unexpectedly; for example, they were killed in an accident, murdered, committed suicide, or had a fatal heart attack at a young age?</td>
<td>1</td>
<td>GO TO *PT48 AND CODE “1”</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>PT22. Did anyone very close to you ever have a very stressful or life-threatening experience, like being kidnapped, tortured or raped?</td>
<td>1</td>
<td>GO TO *PT50 AND CODE “1”</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>PT22_1. Did you ever witness serious physical fights at home, like when your father beat up your mother?</td>
<td>1</td>
<td>GO TO *PT50.1 AND CODE “1”</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>PT23. Did you ever see someone being badly injured or killed, or unexpectedly see a dead body?</td>
<td>1</td>
<td>GO TO *PT51 AND CODE “1”</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>PT24. Did you ever do something that accidentally led to the serious injury or death of another person?</td>
<td>1</td>
<td>GO TO *PT52 AND CODE “1”</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>PT25. Did you ever on purpose either seriously injure, torture, or kill another person?</td>
<td>1</td>
<td>GO TO *PT53 AND CODE “1”</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>PT27. Did you ever experience any other extremely upsetting or life-threatening event that I haven’t asked about yet?</td>
<td>1</td>
<td>GO TO *PT55 AND CODE “1”</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td>PT28. Sometimes people have experiences they don’t want to talk about in interviews. I won’t ask you to describe anything like this, but, without telling me what it was, did you ever have an extremely upsetting or life-threatening event that you didn’t tell me about because you didn’t want to talk about it?</td>
<td>1</td>
<td>GO TO *PT57 AND CODE “YES”</td>
<td>5</td>
<td>9</td>
<td>8</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>GO TO *TB2, NEXT SECTION</td>
<td></td>
</tr>
</tbody>
</table>
INTERVIEWER: IF EVENT IS ENDORSED, ASK
THE FOLLOW-UP QUESTIONS AT RIGHT.

<table>
<thead>
<tr>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
</table>

How old were you when you were first in this situation?

<table>
<thead>
<tr>
<th>CHECK OFF</th>
<th>EVENT ON REF. CARD</th>
</tr>
</thead>
</table>

*PT32. (KEY PHRASE: in a place where there was ongoing terror)

1

YEARS

DK..........999
RF..........998

*PT32b.

DAYS........1
WEEKS.......2
MONTHS.....3
YEARS.....4
DK..........99
RF.........98

INTERVIEWER: IF RESPONDENT VOLUNTEERS INFORMATION ON MULTIPLE OCCURRENCES OF THIS EVENT TYPE, ENTER AGE AND DURATION FOR THE SECOND OCCURRENCE.

*PT32c.

________________

YEARS

DK..........999
RF..........998

*PT32d.

DAYS........1
WEEKS.......2
MONTHS.....3
YEARS.....4
DK..........99
RF.........98
### INQUIRY ON REFUGEE STATUS AND CAPTIVITY

#### INTERVIEWER: IF EVENT IS ENDORSED, ASK THE FOLLOW-UP QUESTIONS AT RIGHT.

<table>
<thead>
<tr>
<th>AGE</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>How old were you when you were first in this situation?</td>
<td>How long were you a refugee?</td>
</tr>
</tbody>
</table>

#### *PT33. (KEY PHRASE: refugee)*

Were you ever a refugee – that is, did you ever flee from your own home to a foreign country or place to escape danger or persecution?

<table>
<thead>
<tr>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td></td>
</tr>
</tbody>
</table>

| RF | 8 | GO TO **PT34** |
| DK | 9 | GO TO **PT33a** |

#### INTERVIEWER: IF RESPONDENT VOLUNTEERS INFORMATION ON MULTIPLE OCCURRENCES OF THIS EVENT TYPE, ENTER AGE AND DURATION FOR THE SECOND OCCURRENCE.

<table>
<thead>
<tr>
<th>AGE</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Days</td>
<td>Weeks</td>
</tr>
</tbody>
</table>

#### *PT33a.

<table>
<thead>
<tr>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td></td>
</tr>
</tbody>
</table>

| RF | 998 | GO TO **PT33b** |
| DK | 999 | 1 |

#### *PT33b.

<table>
<thead>
<tr>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td></td>
</tr>
</tbody>
</table>

| RF | 98 | GO TO **PT34** |
| DK | 99 | 1 |

#### INTERVIEWER: IF EVENT IS ENDORSED, ASK THE FOLLOW-UP QUESTIONS AT RIGHT.

<table>
<thead>
<tr>
<th>AGE</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>How old were you when you were first in this situation?</td>
<td>How long were you in captivity?</td>
</tr>
</tbody>
</table>

#### *PT34. (KEY PHRASE: kidnapped)*

Were you ever kidnapped or held captive?

<table>
<thead>
<tr>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td></td>
</tr>
</tbody>
</table>

| RF | 8 | GO TO **PT35** |
| DK | 9 | GO TO **PT34a** |

#### INTERVIEWER: IF RESPONDENT VOLUNTEERS INFORMATION ON MULTIPLE OCCURRENCES OF THIS EVENT TYPE, ENTER AGE AND DURATION FOR THE SECOND OCCURRENCE.

<table>
<thead>
<tr>
<th>AGE</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Days</td>
<td>Weeks</td>
</tr>
</tbody>
</table>

#### *PT34a.

<table>
<thead>
<tr>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td></td>
</tr>
</tbody>
</table>

| RF | 998 | GO TO **PT34b** |
| DK | 999 | 1 |

#### *PT34b.

<table>
<thead>
<tr>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td></td>
</tr>
</tbody>
</table>

| RF | 98 | GO TO **PT34** |
| DK | 99 | 1 |
**INTERVIEWER:** IF EVENT IS ENDORSED, ASK THE FOLLOW-UP QUESTIONS AT RIGHT.

| YES (1) | NO (5) |  |  |
|---------|--------|  |  |
|         |        | AGE | #TIMES |
|         |        | How old were you when you first found out about (this exposure/ one of these exposures)? | How many times (did that happen in your life)? |

**PT35. (KEY PHRASE: poisonous chemical exposure)**

Were you ever exposed to a poisonous chemical or substance that could cause you serious harm?

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>1</th>
<th>5</th>
</tr>
</thead>
</table>
| DK | RF | CHECK OFF EVENT ON REF. CARD | GO TO *PT36

---

*PT35a.

---

*PT35b.

---

IF VOL “MAYBE, NOT SURE,” CODE DK.

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>DK</td>
<td>RF</td>
<td>YEARS</td>
<td>TIMES</td>
</tr>
<tr>
<td>999</td>
<td>998</td>
<td>999</td>
<td>998</td>
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</table>

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198
INTERVIEWER: FOR EACH ENDORSED EVENT, ASK THE FOLLOW-UP QUESTIONS AT RIGHT.

<table>
<thead>
<tr>
<th>EVENT</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>AGE</th>
<th># TIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>How old were you the first time?</strong></td>
<td>1</td>
<td>5</td>
<td>*PT36a.</td>
<td>*PT36b.</td>
</tr>
<tr>
<td><strong>How many times (did that happen in your life)?</strong></td>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td></td>
<td>YEARS</td>
<td>TIMES</td>
</tr>
<tr>
<td>** Were you ever involved in a very serious or life-threatening car accident?**</td>
<td>DK ............9 GO TO *PT37</td>
<td>RF ............8 GO TO *PT37</td>
<td>DK ............999</td>
<td>RF ............998</td>
</tr>
<tr>
<td>** Were you in any other very serious or life-threatening accident?**</td>
<td>DK ............9 GO TO *PT38</td>
<td>RF ............8 GO TO *PT38</td>
<td>DK ............999</td>
<td>RF ............998</td>
</tr>
<tr>
<td>** Were you ever involved in a major disaster, like a devastating flood, hurricane, fire, bomb explosion, or earthquake?**</td>
<td>DK ............9 GO TO *PT40</td>
<td>RF ............8 GO TO *PT40</td>
<td>DK ............999</td>
<td>RF ............998</td>
</tr>
<tr>
<td>** Did you ever have a very serious or life-threatening illness?**</td>
<td>DK ............9 GO TO *PT41</td>
<td>RF ............8 GO TO *PT41</td>
<td>DK ............999</td>
<td>RF ............998</td>
</tr>
</tbody>
</table>
INTERVIEWER: FOR EACH ENDORSED EVENT, ASK THE FOLLOW-UP QUESTIONS AT RIGHT.

<table>
<thead>
<tr>
<th>AGE</th>
<th># TIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES (1)</td>
<td>NO (5)</td>
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</table>

<table>
<thead>
<tr>
<th>EXAMINATION</th>
<th>1</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>PT41. (KEY PHRASE: beaten up by caregiver)</td>
<td>*PT41a.</td>
<td>*PT41b.</td>
</tr>
<tr>
<td>Were you ever badly beaten up by your parents or the people who raised you?</td>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td>CHECK OFF EVENT ON REF. CARD</td>
</tr>
<tr>
<td>DK...........9 GO TO *PT42</td>
<td>RF...........8 GO TO *PT42</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PT42. (KEY PHRASE: beaten up by romantic partner)</th>
<th>1</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were you ever beaten up by someone you were dating or with whom you were romantically involved?</td>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td>CHECK OFF EVENT ON REF. CARD</td>
</tr>
<tr>
<td>DK...........9 GO TO *PT43</td>
<td>RF...........8 GO TO *PT43</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PT43. (KEY PHRASE: beaten by somebody else)</th>
<th>1</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were you ever badly beaten up by anyone else?</td>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td>CHECK OFF EVENT ON REF. CARD</td>
</tr>
<tr>
<td>DK...........9 GO TO *PT44</td>
<td>RF...........8 GO TO *PT44</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PT44. (KEY PHRASE: mugged or threatened with a weapon)</th>
<th>1</th>
<th>5</th>
</tr>
</thead>
<tbody>
<tr>
<td>Were you ever mugged, held up, or threatened with a weapon?</td>
<td>CHECK OFF EVENT ON REF. CARD</td>
<td>CHECK OFF EVENT ON REF. CARD</td>
</tr>
<tr>
<td>DK...........9 GO TO *PT45</td>
<td>RF...........8 GO TO *PT45</td>
<td></td>
</tr>
</tbody>
</table>

IF “ONGOING” FOR A PERIOD IN R’S LIFE, CODE 995.
**PT45.** (KEY PHRASE: raped)  
The next two questions are about sexual assault. The first is about rape. We define this as someone either having sexual intercourse with you or penetrating your body with a finger or object when you did not want them to, either by threatening you or by using force. Did this ever happen to you?

<table>
<thead>
<tr>
<th></th>
<th>CHECK OFF EVENT ON REF. CARD</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>GO TO *PT46</td>
<td>5</td>
<td>GO TO *PT46</td>
</tr>
</tbody>
</table>

DK ............ 9  GO TO *PT46  
RF ............ 8  GO TO *PT46  

*PT45a.  
__________YEARS  
DK .......... 999  
RF .......... 998  

*PT45b.  
__________TIMES  
DK .......... 999  
RF .......... 998
INTERVIEWER: FOR EACH ENDORSED EVENT,
ASK THE FOLLOW-UP QUESTIONS AT RIGHT.

<table>
<thead>
<tr>
<th></th>
<th>AGE</th>
<th># TIMES</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>YES (1)</td>
<td>NO (5)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*PT46. (KEY PHRASE: sexually assaulted)</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Other than rape, were you ever sexually assaulted or molested?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DK .............9</td>
<td>GO TO *PT47</td>
<td></td>
</tr>
<tr>
<td>RF .............8</td>
<td>GO TO *PT47</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*PT47. (KEY PHRASE: stalked)</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Has someone ever stalked you – that is, followed you or kept track of your activities in a way that made you feel you were in serious danger?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DK .............9</td>
<td>GO TO *PT48</td>
<td></td>
</tr>
<tr>
<td>RF .............8</td>
<td>GO TO *PT48</td>
<td></td>
</tr>
</tbody>
</table>

IF “ONGOING” FOR A PERIOD IN R’S LIFE, CODE 995.
INTERVIEWER: FOR EACH ENDORSED EVENT, ASK THE FOLLOW-UP QUESTIONS AT RIGHT.

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>AGE</strong></td>
<td></td>
<td></td>
<td></td>
<td>How old were you the first</td>
<td>How many times (has that</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>time?</td>
<td>happened in your life)?</td>
</tr>
<tr>
<td><strong># TIMES</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>IF “ONGOING” FOR A PERIOD IN R’S LIFE, CODE 995.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>*<strong>PT48.</strong> (KEY PHRASE: unexpected death of a loved one)</th>
<th>1 CHECK OFF EVENT ON REF. CARD</th>
<th>5 GO TO *PT50</th>
<th>*PT48a.</th>
<th>*PT48b.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did someone very close to you ever die unexpectedly; for example, they were killed in an accident, murdered, committed suicide, or had a fatal heart attack at a young age?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DK...........9  GO TO *PT50</td>
<td>RF...........8  GO TO *PT50</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>*<strong>PT50.</strong> (KEY PHRASE: traumatic event to love one)</th>
<th>1 CHECK OFF EVENT ON REF. CARD</th>
<th>5 GO TO *PT50.1</th>
<th>*PT50a.</th>
<th>*PT50b.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did anyone very close to you ever have a very stressful or life-threatening experience, like being kidnapped, tortured or raped?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DK...........9  GO TO *PT50.1</td>
<td>RF...........8  GO TO *PT50.1</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>*<strong>PT50_1.</strong> (KEY PHRASE: witnessed physical fights at home)</th>
<th>1 CHECK OFF EVENT ON REF. CARD</th>
<th>5 GO TO *PT51</th>
<th>*PT50_1a.</th>
<th>*PT50_1b.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you ever witness serious physical fights at home, like when your father beat up your mother?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DK ........9  GO TO *PT51</td>
<td>RF ........8  GO TO *PT51</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>*<strong>PT51.</strong> (KEY PHRASE: witnessed death or dead body or saw someone seriously hurt)</th>
<th>1 CHECK OFF EVENT ON REF. CARD</th>
<th>5 GO TO *PT52</th>
<th>*PT51a.</th>
<th>*PT51b.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did you ever see someone being badly injured or killed, or unexpectedly see a dead body?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DK...........9  GO TO *PT52</td>
<td>RF...........8  GO TO *PT52</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**INTERVIEWER:** FOR EACH ENDORSED EVENT, ASK THE FOLLOW-UP QUESTIONS AT RIGHT.

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td>(5)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th><strong>AGE</strong></th>
<th><strong># TIMES</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>How old were you the first time?</td>
<td>How many times (has that happened in your life)?</td>
</tr>
<tr>
<td></td>
<td>IF “ONGOING” FOR A PERIOD IN R’S LIFE, CODE 995.</td>
</tr>
</tbody>
</table>

| *PT52.* (KEY PHRASE: accidentally caused serious injury or death) |
| Did you ever do something that accidentally led to the serious injury or death of another person? |
| IF VOL “MAYBE, NOT SURE,” CODE NO. |
| DK............9 | RF............8 |
| GO TO *PT53 | GO TO *PT53 |

<table>
<thead>
<tr>
<th>*PT52a.</th>
<th>*PT52b.</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>YEARS</td>
<td>TIMES</td>
</tr>
<tr>
<td>DK..........999</td>
<td>DK..........999</td>
</tr>
<tr>
<td>RF..........998</td>
<td>RF..........998</td>
</tr>
</tbody>
</table>

| *PT53.* (KEY PHRASE: purposely injured, tortured or killed someone) |
| (Other than what you already told me about,) Did you ever on purpose either seriously injure, torture, or kill another person? |
| DK............9 | RF............8 |
| GO TO *PT55 | GO TO *PT55 |

<table>
<thead>
<tr>
<th>*PT53a.</th>
<th>*PT53b.</th>
</tr>
</thead>
<tbody>
<tr>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>YEARS</td>
<td>TIMES</td>
</tr>
<tr>
<td>DK..........999</td>
<td>DK..........999</td>
</tr>
<tr>
<td>RF..........998</td>
<td>RF..........998</td>
</tr>
</tbody>
</table>
*PT55. Did you ever experience any other very upsetting or life-threatening event that I haven’t asked about yet?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DK</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>RF</td>
<td>5</td>
<td>0</td>
</tr>
</tbody>
</table>

CHECK OFF EVENT ON REF. CARD

GO TO *PT57

*PT55a. Briefly, what was the one most upsetting event that you have not told me about?

REFUSED................................. 8 GO TO *PT57

RECORD BRIEF DESCRIPTION OF EVENT:

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

____________________________________________________________________________________________

*PT55b. (IF NEC: Was this a one-time event or was it ongoing over a period of days, weeks, months, or even years?)

ONE-TIME EVENT...... 1 GO TO *PT55c
ONGOING EVENT ...... 2 GO TO *PT55d
DON’T KNOW ............ 9
REFUSED .................. 8

*PT55c. [IF NEC: How old were you when (EVENT IN *PT55a / this happened)?]
(IF NEC: How old were you when you first learned about it?)

__________ YEARS OLD GO TO *PT56

DON’T KNOW ............ 999 GO TO *PT56
REFUSED .................. 998 GO TO *PT56

*PT55d. (IF NEC: For how long were you in this situation / For how long did this continue)?

__________ DURATION NUMBER

CIRCLE UNIT
OF TIME: DAYS ............ 1 WEEKS... 2 MONTHS ... 3 YEARS ... 4

DON’T KNOW ............ 99
REFUSED .................. 98
**PT56.** INTERVIEWER QUERY: (SEE *PT55a*) DID EVENT IN *PT55a* INVOLVE THREAT OF DEATH OR SERIOUS INJURY TO R OR TO A CLOSE LOVED ONE?

(If nec, probe: Did this event involve threat of death or serious injury to you or to a close loved one?)

YES..................................................................................................................1
NO....................................................................................................................5
DON’T KNOW .................................................................................................9
REFUSED ..........................................................................................................8

**PT57.** Sometimes people have experiences they don’t want to talk about in interviews. I won’t ask you to describe anything like this, but, without telling me what it was, did you ever have a very upsetting or life-threatening event that you didn’t report because you didn’t want to talk about it?

YES.............................................. 1 CHECK OFF “PRIVATE EVENT” ON REFERENCE CARD, THEN GO TO *PT57a*
NO.............................................. 5 GO TO *PT60*
DON’T KNOW ................................ 9 GO TO *PT60*
REFUSED ........................................ 8 GO TO *PT60*

**PT57a.** How old were you when your most upsetting event like this happened? Or, if it was something that kept happening over a period of time, how old were you when it started and for how long were you in this situation?

If I ask you any further questions about this event, I will refer to it as your “private event.”

__________ YEARS OLD

__________ DURATION NUMBER FOR ONGOING EVENTS

CIRCLE UNIT OF TIME:

DAYS ...... 1 WEEKS.......2 MONTHS ...... 3 YEARS ...... 4

DON’T KNOW ......... 99
REFUSED .............. 98
*PT60. INTERVIEWER CHECKPOINT: (SEE *PT4 - *PT57)

R reported only one event type,  
*PT4 through *PT6 or *PT32 through *PT34 ..............................1  GO TO *PT62 Intro 1
R reported only one event type, other than above,  
and that event occurred only once ............................................2  GO TO *PT62 Intro 1
All others ..........................................................................................3

*PT61. INTERVIEWER CHECKPOINT: (SEE *PT58)

R reported only one event type,  
and that event occurred more than once ................... 1  GO TO *PT62 Intro 2
R reported two or three different event types .... 2  GO TO *PT62 Intro 3
All others ..........................................................................................3  GO TO *PT62 Intro 4
Let me review. You experienced (KEY PHRASE OF EVENT TYPE). After an experience like this, people sometimes have problems like upsetting memories or dreams, feeling emotionally distant or depressed, trouble sleeping or concentrating, and feeling jumpy or easily startled. Did you have any of these reactions after [(EVENT TYPE)/ this experience]?

INTERVIEWER: THIS EVENT WILL NOW BE REFERED TO AS “WORST EVENT”

Let me review. You experienced (NUMBER) (KEY PHRASE OF EVENT TYPE). After an experience like this, people sometimes have problems like upsetting memories or dreams, feeling emotionally distant or depressed, trouble sleeping or concentrating, and feeling jumpy or easily startled. Did you have any of these reactions after [(either/any) [EVENT TYPE]/ of these experiences]?

Let me review. You had (two/three) different types of traumatic events: [KEY PHRASES OF ALL EVENT TYPES] (and a private event). After experiences like these, people sometimes have problems like upsetting memories or dreams, feeling emotionally distant or depressed, trouble sleeping or concentrating, and feeling jumpy or easily startled. Did you have any of these reactions after any of the traumatic experiences you have gone through?

Let me review. You had quite a few different traumatic experiences, like: [KEY PHRASES OF UP TO 3 EVENT TYPES] (and a private event). After experiences like these, people sometimes have problems like upsetting memories or dreams, feeling emotionally distant or depressed, trouble sleeping or concentrating, and feeling jumpy or easily startled. Did you have any of these reactions after any of the traumatic experiences you have gone through?

YES.................................1
NO ...........................................5   GO TO *TB2, NEXT SECTION
DON’T KNOW .....................9   GO TO *TB2, NEXT SECTION
REFUSED ..........................8   GO TO *TB2, NEXT SECTION

*PT62_1. Did these reactions (ever) last for 30 days or longer?

YES ................................................. 1
NO ................................................... 5   GO TO *TB2, NEXT SECTION
DON’T KNOW .............................. 9   GO TO *TB2, NEXT SECTION
REFUSED ....................................... 8   GO TO *TB2, NEXT SECTION

*PT62_2. INTERVIEWER CHECKPOINT: (SEE *PT60, *PT61)

*PT60 EQUALS ‘1’ OR ‘2’ .............. 1   GO TO *PT67
ALL OTHERS .................................2
PT64. Of the [*PT61 EQUALS ‘1’ : (NUMBER) times this happened/ ALL OTHERS: experiences you reported] which one caused you the most problems like that?

IF NEC: REVIEW ENDORSED EVENTS.

(IF “DON’T KNOW,” PROBE: Which of these very upsetting events happened most recently?)

DON’T KNOW .......................... 999
REFUSED ............................. 998

RECORD WORST EVENT:  __________ NUMBER OF EVENT

PT64a. NOTE AGE AT TIME OF WORST EVENT:
[IF NEC: How old were you when that (happened/ started)?]

____________ YEARS OLD

DON’T KNOW ............... 999
REFUSED .......................... 998

PT64b. [IF NEC: Which occurrence was this (-- the first time, the second time…)?]

NOTE OCCURRENCE (E.G., “FIRST TIME,” “ONLY TIME,” “ONGOING,” ETC.):

OCCURRENCE: ______________________

INTERVIEWER: THIS EVENT WILL NOW BE REFERRED TO AS “WORST EVENT.”
INTERVIEWER: SEE *PT64, THEN PROBE:

<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*PT67. [FOR “ONGOING” EVENTS: During the time when (WORST EVENT) was happening, did you ever feel terrified or very frightened?] [ALL OTHERS: Were you terrified or very frightened at the time (WORST EVENT)?]</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PT67a. Did you feel helpless?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PT67b. Did you feel shocked or horrified?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*PT67c. Did you feel numb?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*GO TO *PT68
**GO TO *PT68
<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*PT68. (RB, PG 33): (Look at Group 1 on Page 33 in your booklet.)</td>
<td></td>
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<tr>
<td>In the <strong>weeks, months, or years</strong> after (the event/this experience</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>ended/ WORST EVENT), did you try not to think about (it/what happened)?</td>
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<tr>
<td>(IF YES: Please make a checkmark by reaction 1.)</td>
<td></td>
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<tr>
<td>(KEY PHRASE: tried not to think about it)</td>
<td></td>
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</tr>
<tr>
<td>*PT69. Did you purposely stay away from places, people or activities</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>that reminded you of (it/ the event/ this experience/ WORST EVENT)?</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>(IF YES: Please make a checkmark by reaction 2.)</td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>(KEY PHRASE: stayed away from reminders of it)</td>
<td></td>
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<tr>
<td>*PT70. Were you ever unable to remember some important parts of</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>what happened?</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>IF VOL “UNCONSCIOUS,” “KNOCKED OUT,” OR “HEAD INJURY,” CODE NO.</td>
<td></td>
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</tr>
<tr>
<td>(IF YES: Please make a checkmark by reaction 3.)</td>
<td></td>
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<tr>
<td>[KEY PHRASE: were unable to remember part(s) of it]</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>*PT71. Did you lose interest in doing things you used to enjoy?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(IF YES: Please make a checkmark by reaction 4.)</td>
<td></td>
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<td></td>
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<tr>
<td>(KEY PHRASE: lost interest in things you used to enjoy)</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>*PT72. Did you feel emotionally distant or cut-off from other people?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(IF YES: Please make a checkmark by reaction 5.)</td>
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<td></td>
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</tr>
<tr>
<td>(KEY PHRASE: felt distant from other people)</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*PT73. Did you have trouble feeling normal feelings like love,</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>happiness, or warmth toward other people?</td>
<td></td>
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</tr>
<tr>
<td>(IF YES: Please make a checkmark by reaction 6.)</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>(KEY PHRASE: had trouble feeling normal feelings)</td>
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</tr>
<tr>
<td>*PT74. Did you feel you had no reason to plan for the future because</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>you thought it would be cut short?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(IF YES: Please make a checkmark by reaction 7.)</td>
<td></td>
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</tr>
<tr>
<td>(KEY PHRASE: felt you had no reason to plan for the future)</td>
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</tr>
</tbody>
</table>

*PT75. INTERVIEWER CHECKPOINT: (SEE *PT68 - *PT74)

ZERO “YES” RESPONSES IN *PT68 - *PT74........................................... 1
ALL OTHERS............................................................... 2
<table>
<thead>
<tr>
<th>*PT86.</th>
<th>(RB, PG 33) (Look at Group 2 on page 33 in your booklet.) Did you ever have repeated unwanted memories of (it/ the event/ this experience/ WORST EVENT) – that is, you kept remembering it even when you didn’t want to? (IF YES: Please make a checkmark by reaction 8 in the booklet.) (KEY PHRASE: had unwanted memories)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>*PT87.</th>
<th>Did you ever have repeated unpleasant dreams about (it/ the event/ this experience/ WORST EVENT)? (IF YES: Please make a checkmark by reaction 9 in the booklet.) (KEY PHRASE: had unpleasant dreams)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>*PT88.</th>
<th>Did you have flashbacks – that is, suddenly act or feel as if (it/ the event/ this experience/ WORST EVENT) were happening all over again? (IF YES: Please make a checkmark by reaction 10 in the booklet.) (KEY PHRASE: had flashbacks)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>*PT89.</th>
<th>Did you get very upset when you were reminded of (it/ the event/ this experience/ WORST EVENT)? (IF YES: Please make a checkmark by reaction 11 in the booklet.) (KEY PHRASE: got really upset when reminded of it)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>*PT90.</th>
<th>When you were reminded of (it/ the event/ this experience/ WORST EVENT), did you ever have physical reactions like sweating, your heart racing, or feeling shaky? (IF YES: Please make a checkmark by reaction 12 in the booklet.) (KEY PHRASE: had physical reactions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>NO</td>
</tr>
<tr>
<td>1</td>
<td>5</td>
</tr>
</tbody>
</table>

*PT91. INTERVIEWER CHECKPOINT: (SEE *PT86 - *PT90) ZERO “YES” RESPONSES IN *PT86 - *PT90................................. 1 GO TO *TB2, NEXT SECTION ALL OTHERS ................................................................. 2
**PT102.** (RB, PG 33) (Look at Group 3 on Page 33 in your booklet.)

During the time (this event/this experience/WORST EVENT) affected you most, did you have trouble falling or staying asleep?

(IF YES: Please make a checkmark by reaction 13.)

(KEY PHRASE: had sleep problems)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
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</tbody>
</table>

**PT103.** Were you more easily annoyed or short-tempered than you usually are?

(IF YES: Please make a checkmark by reaction 14.)

(KEY PHRASE: were irritable)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**PT104.** Did you have more trouble concentrating or keeping your mind on what you were doing?

(IF YES: Please make a checkmark by reaction 15.)

(KEY PHRASE: had trouble concentrating)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**PT105.** Were you much more alert or watchful, even when there was no real need to be?

(IF YES: Please make a checkmark by reaction 16.)

(KEY PHRASE: were more alert or watchful)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**PT106.** Were you more jumpy or easily startled by ordinary noises?

(IF YES: Please make a checkmark by reaction 17.)

(KEY PHRASE: were jumpy or easily startled)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
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</tbody>
</table>

**PT107, INTERVIEWER CHECKPOINT:** (SEE *PT102 - PT106)

ZERO “YES” RESPONSES IN *PT102 – *PT106.................................................. 1  
GO TO *TB2, NEXT SECTION 
ALL OTHERS..................................................................................................... 2
*PT110. You had quite a few reactions, such as (FIRST KEY PHRASE FOR EACH OF THE 3 SETS OF REACTIONS REPORTED IN *PT68 - *PT74, *PT86 - *PT90, *PT102 - *PT106). For about how many days, weeks, months, or years did you continue to have any of these reactions?

(IF VOL “IT’S STILL GOING ON,” PROBE: How long has it been so far?)

(IF DK, PROBE, “Was it at least a month?” IF YES, CODE 97 BELOW.)

__________ DURATION NUMBER

CIRCLE UNIT OF TIME:  DAYS... 1  WEEKS... 2  MONTHS ... 3  YEARS ... 4

“AT LEAST A MONTH” ............. 97
DON’T KNOW .......................... 99
REFUSED ............................. 98

*PT111. INTERVIEWER CHECKPOINT: (SEE *PT110)

LESS THAN ONE MONTH (30 DAYS) OF REACTIONS IN *PT110 ........... 1  GO TO *TB2, NEXT SECTION
ALL OTHERS ........................................................................................................ 2

*PT113. Think of the time when these reactions were most frequent and strongest. How often did they occur – less than once a month, one to two times a month, three to five times a month, six to ten times a month, or more than ten times a month?

LESS THAN ONCE A MONTH ............ 1  GO TO *TB2, NEXT SECTION  (11p)
ONE TO TWO TIMES A MONTH ........ 2
THREE TO FIVE TIMES A MONTH .... 3
SIX TO TEN TIMES A MONTH .......... 4
MORE THAN TEN TIMES A MONTH .... 5
DON’T KNOW .............................. 9
REFUSED ................................. 8
*PT114. How much emotional distress did these reactions cause you – none, mild, moderate, severe, or very severe distress?

NONE............................................................... 1
MILD ............................................................. 2
MODERATE .................................................... 3
SEVERE .......................................................... 4
VERY SEVERE .............................................. 5
DON’T KNOW .............................................. 9
REFUSED ....................................................... 8

*PT115. How much did these reactions interfere or cause problems with your normal, daily life – not at all, a little, some, a lot, or extremely?

NOT AT ALL .................................................. 1
A LITTLE ........................................................ 2
SOME............................................................... 3
A LOT .............................................................. 4
EXTREMELY ................................................. 5
DON’T KNOW .............................................. 9
REFUSED ....................................................... 8

*PT116. INTERVIEWER CHECKPOINT: (SEE *PT114 *PT115)

RESPONSES CODED “1” OR “2”

IN *PT114 AND “1” OR “2” IN *PT115 ........................................... 1
GO TO *TB2, NEXT SECTION

ALL OTHERS ........................................................................... 2
*PT261.* (RB, PG 33) (Look at all the reactions on PG 33 in your booklet.) The next question is about whether in the past 12 months you had any reactions like these associated with any traumatic event that ever happened to you in your entire life. Did you have any reactions of this sort over the past 12 months?

- YES................................. 1
- NO................................. 5  GO TO *TB2, NEXT SECTION
- DON’T KNOW .................. 9  GO TO *TB2, NEXT SECTION
- REFUSED............................ 8  GO TO *TB2, NEXT SECTION

*PT262.* When was the last time you had any of these reactions – within the past month, between 2 and 6 months ago, or more than 6 months ago?

- PAST MONTH............................ 1
- TWO TO SIX MONTHS AGO............ 2
- MORE THAN SIX MONTHS AGO........ 3
- DON’T KNOW............................ 9
- REFUSED................................. 8

*PT263.* About how many weeks altogether in the past 12 months did you have any of these reactions? (You can use any number between 0 and 52.)

- ________ NUMBER OF WEEKS

- DON’T KNOW............................ 99
- REFUSED................................. 98

*PT264.* INTERVIEWER CHECKPOINT: (SEE *PT263)

- ZERO TO THREE WEEKS IN *PT263... 1  GO TO *TB2, NEXT SECTION
- ALL OTHERS........................... 2
What were the events or experiences that caused these recent reactions?

IF R REPORTS A RECENT “TRIGGER” EVENT, SUCH AS SEEING A MOVIE THAT REMINDED THEM OF A TRAUMA THAT OCCURRED IN THE PAST, PROBE FOR AND RECORD THE TRAUMA (E.G., R WAS RAPE) RATHER THAN THE TRIGGER (E.G., SEEING A MOVIE ABOUT RAPE).

(PROBE UNTIL NO MORE MENTIONS: Any other traumatic events that caused these reactions during the past 12 months?)

INTERVIEWER: CIRCLE ALL THAT APPLY.

IN A PLACE WHERE THERE WAS ONGOING TERROR ................................................... 4
REFUGEE ......................................................................................................................... 5
KIDNAPPED ..................................................................................................................... 6
POISONOUS CHEMICAL EXPOSURE ............................................................................... 7
CAR ACCIDENT ................................................................................................................... 8
OTHER LIFE THREATENING ACCIDENT ........................................................................ 9
DISASTER .......................................................................................................................... 10
LIFE-THREATENING ILLNESS .......................................................................................... 12
BEATEN UP BY CAREGIVER ............................................................................................ 13
BEATEN UP BY ROMANTIC PARTNER ........................................................................... 14
BEATEN UP BY SOMEONE ELSE ..................................................................................... 15
MUGGED OR THREATENED WITH A WEAPON ................................................................ 16
RAPED ............................................................................................................................. 17
SEXUALLY ASSAULTED ................................................................................................. 18
STALKED .......................................................................................................................... 19
UNEXPECTED DEATH OF LOVED ONE ........................................................................... 20
TRAUMATIC EVENT TO LOVED ONE ............................................................................. 22
WITNESSED PHYSICAL FIGHT AT HOME ..................................................................... 23
WITNESSED DEATH OR DEAD BODY, OR SAW SOMEONE SERIOUSLY HURT ...... 24
ACCIDENTALLY CAUSED SERIOUS INJURY OR DEATH ............................................ 25
PURPOSELY INJURED, TORTURED, OR KILLED SOMEONE ......................................... 26
SOME OTHER EVENT (SPECIFY) ..................................................................................... 27

_______________________________________________________________
_______________________________________________________________

DON’T KNOW ................................................................................................................ 99
REFUSED ......................................................................................................................... 98

INTERVIEWER: THE REPORTED EVENTS AND EXPERIENCES WILL NOW BE REFERRED TO AS “WORST 12-MONTH EVENT.”
*PT269. Please think of the one month in the past 12 months when your reactions to [(WORST 12-MONTH EVENT)/ these events/ these experiences] were most frequent and strongest. During that month, did you lose interest in doing things you used to enjoy?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
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</table>

*PT270. Did you feel emotionally distant or cut off from other people during that month?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
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</tbody>
</table>

*PT271. Did you have trouble feeling normal feelings like love, happiness, or warmth toward other people?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
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</table>

*PT272. Did you feel you had no reason to plan for the future because you thought it would be cut short?

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<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*PT273. Did you have any trouble falling or staying asleep during that month?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*PT274. Were you more jumpy or more easily startled by ordinary noises?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*PT275. Did you purposely stay away from places, people or activities that reminded you of [(WORST 12-MONTH EVENT)/ these events]?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*PT277. INTERVIEWER CHECKPOINT: (SEE *PT269-*PT275)

ZERO “YES” RESPONSES IN *PT269-*PT275 ...... 1 GO TO *TB2, NEXT SECTION
ALL OTHERS.............................................................. 2
For the next questions, think again about the one month or longer in the past 12 months when your reactions to (WORST 12-MONTH EVENT/ these events) were worst. Using a 0 to 10 scale, where 0 means no problems and 10 means very severe problems, what number describes how much your reactions to (WORST 12-MONTH EVENT/ these events) caused problems with each of the following activities during that time?

(IF NEC: How much did your reactions caused problems with (ACTIVITY) during that time?)
(IF NEC: You can use any number between 0 and 10 to answer.)

NUMBER (0-10)

*PT278a. Your chores at home?

________________

DOES NOT APPLY ..........97
DON’T KNOW................99
REFUSED....................98

*PT278b. Your ability to do well at school or work?

________________

DOES NOT APPLY ..........97
DON’T KNOW................99
REFUSED....................98

*PT278c. Your ability to get along with your family?

________________

DOES NOT APPLY ..........97
DON’T KNOW................99
REFUSED....................98

*PT278d. Your social life?

________________

DOES NOT APPLY ..........97
DON’T KNOW................99
REFUSED....................98

*PT279. INTERVIEWER CHECKPOINT: (SEE *PT278a - *PT278d)

ALL FOUR RESPONSES TO *PT278a - *PT278d SERIES EQUAL “0” ..... 1 GO TO *PT281
ALL OTHERS...............................................................2
**PT280.** About how many days out of 365 in the past 12 months were you **totally unable** to work or go to school or carry out your normal activities because of your reactions [to (WORST 12-MONTH EVENT/ these events)]?

(IF NEC: You can use any number between 0 and 365 to answer.)

____________ NUMBER OF DAYS

DON’T KNOW ................ 999
REFUSED ...................... 998

**PT281.** Did you receive any professional treatment for your reactions to (WORST 12-MONTH EVENT/ these events) in the 12 months prior to this interview?

YES ............................. 1  GO TO *TB2, NEXT SECTION
NO .................................. 5  GO TO *TB2, NEXT SECTION
DON’T KNOW ................... 9  GO TO *TB2, NEXT SECTION
REFUSED .......................... 8  GO TO *TB2, NEXT SECTION

END OF SECTION
**TOBACCO (TB)**

*TB2.* The next questions are about smoking. Have you ever smoked a cigarette, cigar, or pipe, even a single puff?

<p>| | |</p>
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<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
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</tbody>
</table>

*TB3.* How old were you the very first time you ever smoked even a puff of a cigarette, cigar, or pipe?

<p>| | |</p>
<table>
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<tbody>
<tr>
<td>________ YEARS OLD</td>
<td></td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
<tr>
<td>ALL MY LIFE</td>
<td>997</td>
</tr>
</tbody>
</table>

*TB3b1.* Can you remember what grade you were in at school?

<p>| | |</p>
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<thead>
<tr>
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<tbody>
<tr>
<td>YES</td>
<td>1</td>
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<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*TB3b2.* What grade was that?

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
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<tbody>
<tr>
<td>KINDERGARTEN</td>
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<tr>
<td>1ST GRADE</td>
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</tr>
<tr>
<td>2ND GRADE</td>
<td>2</td>
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<tr>
<td>3RD GRADE</td>
<td>3</td>
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<td>5TH GRADE</td>
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<td>6TH GRADE</td>
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<tr>
<td>8TH GRADE</td>
<td>8</td>
</tr>
<tr>
<td>HIGH SCHOOL FRESHMAN</td>
<td>9</td>
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<tr>
<td>HIGH SCHOOL SOPHOMORE</td>
<td>10</td>
</tr>
<tr>
<td>HIGH SCHOOL JUNIOR</td>
<td>11</td>
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<td>HIGH SCHOOL SENIOR</td>
<td>12</td>
</tr>
<tr>
<td>ANY COLLEGE</td>
<td>13</td>
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*TB3b3.* Was it before you first started school?

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<tbody>
<tr>
<td>YES</td>
<td>1</td>
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<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
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*TB3b4.* Was it before you were a teenager?

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<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
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*TB4.* Was there ever a time in your life lasting at least two months when you smoked at least once per week?

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<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

221
*TB5 Intro 1. The next questions are about smoking. You reported earlier that you are a current smoker. How old were you the very first time you ever smoked even a puff of a cigarette, cigar, or pipe?

IF DON’T KNOW, PROBE: Can you remember what grade you were in at school?
IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before your teens?

__________ YEARS OLD/GRADE

BEFORE STARTED SCHOOL……..4
BEFORE TEENS .........................12
NOT BEFORE TEENS ..................13
WHOLE LIFE ...............................996
DK .................................................999
RF ..................................................998

*TB5 Intro 2. The next questions are about smoking. You reported earlier that you are an ex-smoker. How old were you the very first time you ever smoked even a puff of a cigarette, cigar, or pipe?

IF DON’T KNOW, PROBE: Can you remember what grade you were in at school?
IF “ALL MY LIFE” OR “AS LONG AS I CAN REMEMBER,” PROBE: Was it before your teens?

__________ YEARS OLD/GRADE

BEFORE STARTED SCHOOL……..4
BEFORE TEENS .........................12
NOT BEFORE TEENS ..................13
WHOLE LIFE ...............................996
DK .................................................999
RF ..................................................998
*TB6*. How old were you the very first time you smoked tobacco at least once a week for a period of at least two months?

__________ YEARS OLD

DON’T KNOW ............... 999  GO TO *TB61
REFUSED .................. 998  GO TO *TB63
(IF VOL) ‘NEVER’ .......... 997  GO TO NEXT SECTION
ALL MY LIFE ............... 996

*TB61*. Can you remember what grade you were in at school?

YES .................................... 1
NO ..................................... 5  GO TO *TB63
DON’T KNOW ............... 9  GO TO *TB63
REFUSED .................. 8  GO TO *TB63

*TB62*. What grade was that?

KINDERGARTEN ......0  7TH GRADE.......................... 7
1ST GRADE ..........1  8TH GRADE.......................... 8
2ND GRADE ..........2  HIGH SCHOOL FRESHMAN ......9
3RD GRADE ..........3  HIGH SCHOOL SOPHOMORE ....10
4TH GRADE ..........4  HIGH SCHOOL JUNIOR ..........11
5TH GRADE ..........5  HIGH SCHOOL SENIOR ..........12
6TH GRADE ..........6  ANY COLLEGE ....................13

*TB63*. Was it before you first started school?

YES .............................. 1  GO TO *TB6a
NO .................................. 5
DON’T KNOW ............... 9
REFUSED .................. 8

*TB64*. Was it before you were a teenager?

YES .............................. 1
NO .................................. 5
DON’T KNOW ............... 9
REFUSED .................. 8

*TB6a*. How old were you the very first time you smoked tobacco (READ SLOWLY) every day or nearly everyday for a period of at least two months?

__________ YEARS OLD

DON’T KNOW ............... 999  GO TO *TB6a1
REFUSED .................. 998  GO TO *TB6a3
(IF VOL) ‘NEVER’ .......... 997  GO TO NEXT SECTION
ALL MY LIFE ............... 996  GO TO TB6a3

*TB6a1*. Can you remember what grade you were in at school?

YES .................................... 1
NO ..................................... 5  GO TO *TB6a3
DON’T KNOW ............... 9  GO TO *TB6a3
REFUSED .................. 8  GO TO *TB6a3
*TB6a2. What grade was that?

<table>
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<th>Grade Description</th>
<th>Code</th>
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<tbody>
<tr>
<td>KINDERGARTEN</td>
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<tr>
<td>ANY COLLEGE</td>
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*TB6a3. Was it before you first started school?

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<th>Code</th>
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<tbody>
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<tr>
<td>NO</td>
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<td>DON'T KNOW</td>
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*TB6a4. Was it before you were a teenager?

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<th>Code</th>
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<tbody>
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<td>NO</td>
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<td>DON'T KNOW</td>
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*TB7. INTERVIEWER CHECKPOINT: (SEE *TB1)

<table>
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<tbody>
<tr>
<td>*TB1 IS CODED “1”</td>
<td>1</td>
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</table>
| ALL OTHERS                | 2      | GO TO *TB9

*TB9. Think about the past 12 months. About how many days out of the last 365 did you smoke at least one cigarette, cigar, or pipe?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
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<tbody>
<tr>
<td>DON'T KNOW</td>
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<tr>
<td>REFUSED</td>
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*TB9_1. INTERVIEWER CHECKPOINT: (SEE *TB9)

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</table>
| ALL OTHERS          | 2      | GO TO *TB12
*TB10. On the days you smoked in the past 12 months, about how many cigarettes did you usually have per day?  

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<thead>
<tr>
<th>CIGARETTE(S)</th>
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<tr>
<td>DK ........... 999</td>
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<tr>
<td>RF ............ 998</td>
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</tbody>
</table>

*TB10a. (On the days you smoked in the past 12 months,) ...about how many cigars did you usually have per day?  

<table>
<thead>
<tr>
<th>CIGAR(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DK ........... 999</td>
</tr>
<tr>
<td>RF ............ 998</td>
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</table>

*TB10b. (On the days you smoked in the past 12 months,) ... about how many times did you usually smoke a pipe per day?  

<table>
<thead>
<tr>
<th>TIME(S)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DK ........... 999</td>
</tr>
<tr>
<td>RF ............ 998</td>
</tr>
</tbody>
</table>

*TB11. Was there ever a year in your life when you smoked more than you did in the past 12 months?  

<p>| |</p>
<table>
<thead>
<tr>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES ................................................... 1</td>
</tr>
<tr>
<td>NO ................................. 5 GO TO *TB14</td>
</tr>
<tr>
<td>DON’T KNOW ....................... 9 GO TO *TB14</td>
</tr>
<tr>
<td>REFUSED ........................ 8 GO TO *TB14</td>
</tr>
</tbody>
</table>

*TB12. Think about the year or years in your life when you smoked most. During that time, about how many days out of 365 did you smoke at least one cigarette, cigar, or pipe?  

<table>
<thead>
<tr>
<th>DAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW ....................... 999</td>
</tr>
<tr>
<td>REFUSED ........................... 998</td>
</tr>
</tbody>
</table>

*TB13. On the days you smoked during that time, about how many cigarettes, cigars, and pipes did you usually have per day?  

(IF NEC: How many cigars? How many pipes?)  

<table>
<thead>
<tr>
<th>DON’T KNOW (999)</th>
<th>REFUSED (998)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CIGARETTE(S)</td>
<td>999</td>
</tr>
<tr>
<td>CIGAR(S)</td>
<td>999</td>
</tr>
<tr>
<td>TIME(S)</td>
<td>999</td>
</tr>
</tbody>
</table>

*TB14. How many different years in your life did you smoke daily or almost daily?  

<table>
<thead>
<tr>
<th>YEARS</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW ................... 999</td>
</tr>
<tr>
<td>REFUSED ........................ 998</td>
</tr>
</tbody>
</table>

225
<table>
<thead>
<tr>
<th>Question</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*TB15. The next questions are about some problems you may have had because of smoking tobacco. First, was there ever a time when you often wanted to smoke so badly that you couldn’t stop yourself from having a cigarette, cigar, or pipe, or found it difficult to think of anything else? <em>(KEY PHRASE: you had a strong and irresistible urge to smoke)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB15a. Over time did you become so used to tobacco that you were able to smoke without getting sick to your stomach or feeling grouchy or restless? <em>(KEY PHRASE: you developed a physical tolerance for tobacco)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB15b. People who cut down or stop smoking after smoking regularly for some time may not feel well. Did you ever have times when you stopped, cut down, or went without smoking and then experienced physical symptoms like feeling really tired, headaches, constipation, upset stomach, weakness, or trouble sleeping? <em>(KEY PHRASE: you had physical symptoms when you stopped smoking)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB15b_1. INTERVIEWER CHECKPOINT: (SEE <em>TB15 - TB15b)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>THREE RESPONSES CODED ‘1’ ..................................................................</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALL OTHERS .......................................................................................</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*TB15c. Did you ever have times when you stopped, cut down, or went without smoking and then had emotional problems like feeling irritable, nervous, restless, trouble concentrating or depressed? <em>(KEY PHRASE: you had emotional problems when you stopped smoking)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB15c_2. INTERVIEWER CHECKPOINT: (SEE <em>TB15C)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*TB15C EQUALS ‘1’ .............................................................................</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALL OTHERS .......................................................................................</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*TB15d. Did you ever have times when you smoked to keep from having problems like these? <em>(KEY PHRASE: you smoked to keep from feeling physical or emotional problems)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB15e. Did you have times when you smoked even though you promised yourself you wouldn’t? <em>(KEY PHRASE: you smoked when you planned not to)</em></td>
<td>1</td>
<td>GO TO *TB15g</td>
<td>5</td>
<td>9</td>
</tr>
<tr>
<td>*TB15f. Were there ever times when you smoked more often or for more days in a row than you planned? <em>(KEY PHRASE: you smoked more frequently than you intended)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB15g. Were there times when you tried to stop or cut down on your smoking and found that you were not able to do so? <em>(KEY PHRASE: you tried but weren’t able to stop or cut down)</em></td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB15g_1. INTERVIEWER CHECKPOINT: (SEE <em>TB15 - TB15g)</em></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ZERO RESPONSES CODED ‘1’ ..................................................................</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>ALL OTHERS .......................................................................................</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Survey Question</td>
<td>Yes (1)</td>
<td>No (5)</td>
<td>DK (9)</td>
<td>RF (8)</td>
</tr>
<tr>
<td>-----------------</td>
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</tr>
<tr>
<td><strong>TB15h.</strong> Did you ever have times of several days or more when you chain-smoked, that is, started another cigarette as soon as you had finished one? (KEY PHRASE: you had periods when you chain-smoked for several days or more)</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>TB15i.</strong> Did you ever have a month or longer when you gave up or greatly reduced important activities – like sports, work, or associating with friends and family – so you could smoke? (KEY PHRASE: you gave up or reduced important activities so you could smoke)</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>TB15j.</strong> Did tobacco ever cause you any physical problems like coughing, difficulty breathing, lung trouble, or problems with your heart or blood pressure? (KEY PHRASE: tobacco caused you some physical problems)</td>
<td>1</td>
<td>GO TO <em>TB15</em></td>
<td>GO TO <em>TB15</em></td>
<td>GO TO <em>TB15</em></td>
</tr>
<tr>
<td><strong>TB15k.</strong> Did you continue to smoke even though you had any of these physical problems? (KEY PHRASE: you smoked even though tobacco caused you some physical problems)</td>
<td>GO TO <em>TB16</em></td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><strong>TB15l.</strong> Did tobacco ever cause you any emotional problems like irritability, nervousness, restlessness, difficulty concentrating, or depression? (KEY PHRASE: tobacco caused you some emotional problems)</td>
<td>1</td>
<td>GO TO <em>TB16</em></td>
<td>GO TO <em>TB16</em></td>
<td>GO TO <em>TB16</em></td>
</tr>
<tr>
<td><strong>TB15m.</strong> Did you continue to smoke even though you had any of these emotional problems? (KEY PHRASE: you smoked even though tobacco caused you some emotional problems)</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**TB16. INTERVIEWER CHECKPOINT: (SEE *TB15 SERIES)**

ONE OR TWO RESPONSES CODED ‘1’ IN *TB15 SERIES ..............1
ALL OTHERS .........................................................................................2  GO TO *TB21

**TB16_1.** You reported that (KEY PHRASES FOR ALL YES RESPONSES IN *TB15 SERIES). Can you remember your exact age the very first time you had (this/either of these) problem(s)?

- YES ........................................ 1  GO TO *TB21a
- NO ......................................... 5  GO TO *TB21b
- DON’T KNOW ....................... 8  GO TO *TB21b
- REFUSED .............................. 9  GO TO *TB21b
*TB21. You reported having a number of smoking-related problems. Can you remember your exact age the very first time you had any of these problems?

YES ............................... 1
NO .............................. 5   GO TO *TB21b
DON’T KNOW .............. 9   GO TO *TB21b
REFUSED ..................... 8   GO TO *TB21b

*TB21a. (IF NEC: How old were you?)

_________ YEARS OLD   GO TO *TB22
DON’T KNOW .............. 999   GO TO *TB22
REFUSED ...................... 998   GO TO *TB22

*TB21b. About how old were you [the first time you had (this problem/any of these problems) because of smoking]?

_________ YEARS OLD
DON’T KNOW .............. 999   GO TO *TB21b1
REFUSED ...................... 998   GO TO *TB21b3
ALL MY LIFE ................. 997   GO TO *TB21b3

*TB21b1. Can you remember what grade you were in at school?

YES ............................... 1
NO .............................. 5   GO TO *TB21b3
DON’T KNOW .............. 9   GO TO *TB21b3
REFUSED ..................... 8   GO TO *TB21b3

*TB21b2. What grade was that?

KINDERGARTEN ......0  7TH GRADE ............................. 7
1ST GRADE ..........1  8TH GRADE ............................. 8
2ND GRADE ..........2  HIGH SCHOOL FRESHMAN ......9
3RD GRADE ..........3  HIGH SCHOOL SOPHOMORE ....10
4TH GRADE ..........4  HIGH SCHOOL JUNIOR ..........11
5TH GRADE ..........5  HIGH SCHOOL SENIOR ..........12
6TH GRADE ..........6  ANY COLLEGE .....................13

*TB21b3. Was it before you first started school?

YES ............................... 1   GO TO *TB22
NO .............................. 5
DON’T KNOW .............. 9
REFUSED ..................... 8

*TB21b4. Was it before you were a teenager?

YES ............................... 1
NO .............................. 5
DON’T KNOW .............. 9
REFUSED ..................... 8

BEFORE STARTED SCHOOL ................. 4
BEFORE TEENAGER ..................... 12
NOT BEFORE TEENAGER ................. 13
DON’T KNOW ......................... 999
REFUSED ............................. 998
*TB22. When was the last time you had (this problem/any of these problems) – in the past month, 2 to 6 months ago, 7 to 12 months ago, or more than 12 months ago?

PAST MONTH..............................1  GO TO *TB23_1
2 TO 6 MONTHS AGO...............2  GO TO *TB23_1
7 TO 12 MONTHS AGO..........3  GO TO *TB23_1
MORE THAN 12 MONTHS AGO......4
DON’T KNOW..........................9  GO TO *TB23_1
REFUSED...............................8  GO TO *TB23_1

*TB23. How old were you the last time you had (this problem/any of these problems)?

__________________ YEARS OLD

DON’T KNOW...............999
REFUSED..................998

*TB23_1. INTERVIEWER CHECKPOINT: (SEE *TB16)

*TB16 EQUALS ‘1’.................................1  GO TO *TB36
ALL OTHERS.............................2
*TB24. How many different years in your life did you ever have at least one of these problems?

__________ YEARS
DON’T KNOW ............... 999
REFUSED ..................... 998

*TB25. Did you ever have three (or more) of these problems in the same year?

YES ............................................................ 1
NO .............................................................. 5   GO TO *TB36
DON’T KNOW ........................... 9   GO TO *TB36
REFUSED ............................................... 8   GO TO *TB36

*TB26. How old were you the first time you had three (or more) of these problems in the same year?

__________ YEARS OLD
DON’T KNOW............. 999   GO TO *TB261
REFUSED ....................... 998   GO TO *TB263
ALL MY LIFE ............... 997   GO TO *TB263

*TB261. Can you remember what grade you were in at school?

YES .................................... 1
NO ...................................... 5   GO TO *TB263
DON’T KNOW ............... 9   GO TO *TB263
REFUSED ....................... 8   GO TO *TB263

*TB262. What grade was that?

KINDERGARTEN ...... 0  7TH GRADE ................................................. 7
1ST GRADE .......... 1  8TH GRADE ............................................. 8
2ND GRADE .......... 2  HIGH SCHOOL FRESHMAN ..... 9
3RD GRADE .......... 3  HIGH SCHOOL SOPHOMORE ...... 10
4TH GRADE .......... 4  HIGH SCHOOL JUNIOR ........... 11
5TH GRADE .......... 5  HIGH SCHOOL SENIOR .......... 12
6TH GRADE .......... 6  ANY COLLEGE ......................... 13

*TB263. Was it before you first started school?

YES ......................... 1  GO TO *TB36
NO ................................. 5
DON’T KNOW ............... 9
REFUSED ....................... 8

*TB264. Was it before you were a teenager?

YES ......................... 1
NO ................................. 5
DON’T KNOW ............... 9
REFUSED ....................... 8

BEFORE STARTED SCHOOL .......... 4
BEFORE TEENAGER ............. 12
NOT BEFORE TEENAGER ....... 13
DON’T KNOW ..................... 999
REFUSED .......................... 998
*TB36. How many different times did you ever make a serious attempt to quit smoking?

__________   TIME(S)

DON’T KNOW ................. 999
REFUSED ....................... 998

*TB37. INTERVIEWER CHECKPOINT: (SEE *TB36)

AT LEAST ONE TIME IN *TB36 ...................................................... 1
ALL OTHERS ........................................................... 2  GO TO NEXT SECTION

*TB38. Since then, what is the longest period of time you have ever gone without smoking?

__________   DURATION NUMBER

CIRCLE UNIT OF TIME:     DAYS.....1     WEEKS.....2     MONTHS.....3     YEARS.....4

DON’T KNOW ................. 999
REFUSED ....................... 998

*TB39. INTERVIEWER CHECKPOINT: (SEE *TB36, *TB38)

EXACTLY ONE TIME IN *TB36 ...................................................... 1  GO TO *TB41
AT LEAST TWO TIMES IN *TB36 AND AT LEAST 3 MONTHS IN *TB38........... 2
ALL OTHERS ........................................................... 3  GO TO *TB41

*TB40. How many different times have you gone without smoking for three months or longer?

__________   TIME(S)

DON’T KNOW ................. 999
REFUSED ....................... 998

*TB41. Have you ever in your life used any of the following types of things to help you cut down or quit smoking?

<table>
<thead>
<tr>
<th></th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*TB41a. Nicotine gum or a nicotine patch?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB41b. A prescription medicine?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB41c. Nicotine-free cigarettes?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*TB41d. A class or group for people trying to quit smoking?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *EA1
EATING DISORDERS (EA)

**EA1.** This part of the interview is about problems you might have had either with eating or with your weight. Was there ever a time in your life when you worried a great deal or strongly feared being too fat or overweight?

YES........................................................ 1
NO ......................................................... 5 Go to *EA16
DON’T KNOW ........................................ 9 Go to *EA16
REFUSED.............................................. 8 Go to *EA16

**EA1a.** Did you ever have this strong worry or fear at a time when you really weighed less than most other people?

YES.............................................. 1
NO ................................................... 5 Go to *EA16
DON’T KNOW ....................... 9 Go to *EA16
REFUSED........................................ 8 Go to *EA16

**EA2.** What was the lowest body weight you ever purposefully had since turning twelve?

________ BODY WEIGHT
CIRCLE UNIT OF MASS: POUNDS………1 KILOGRAMS……….2

DON’T KNOW ................................. 999
REFUSED........................................ 998

**EA3.** How tall were you at that time?

________ BODY HEIGHT
CIRCLE UNIT OF MASS: FEET/ INCHES………1 CENTIMETERS……….2

DON’T KNOW ................................. 999
REFUSED........................................ 998

**EA4.** INTERVIEWER CHECKPOINT: (SEE **EA2, EA3 AND MINIMUM WEIGHT TABLE, BELOW**)

WEIGHT RECORDED IN **EA2** IS LESS THAN MINIMUM WEIGHT IN TABLE FOR
HEIGHT RECORDED IN **EA3** ..................................................................................................................................1
ALL OTHERS .................................................................................................................................................................2 Go to *EA16
UNTIL BLAISE VERSION DATE 8/6/01, THE FOLLOWING TABLE WAS USED FOR EA4:

<table>
<thead>
<tr>
<th>Height (feet)</th>
<th>Weight (lbs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5'0&quot; or less</td>
<td>102</td>
</tr>
<tr>
<td>5'1&quot;</td>
<td>106</td>
</tr>
<tr>
<td>5'2&quot;</td>
<td>109</td>
</tr>
<tr>
<td>5'3&quot;</td>
<td>113</td>
</tr>
<tr>
<td>5'4&quot;</td>
<td>116</td>
</tr>
<tr>
<td>5'5&quot;</td>
<td>120</td>
</tr>
<tr>
<td>5'6&quot;</td>
<td>124</td>
</tr>
<tr>
<td>5'7&quot;</td>
<td>128</td>
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<tr>
<td>5'8&quot;</td>
<td>132</td>
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<tr>
<td>5'9&quot;</td>
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<td>5'10&quot;</td>
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<tr>
<td>6'2&quot;</td>
<td>156</td>
</tr>
<tr>
<td>6'3&quot;</td>
<td>160</td>
</tr>
<tr>
<td>6'4&quot;</td>
<td>164</td>
</tr>
<tr>
<td>6'5&quot; or more</td>
<td>175</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Height (meters)</th>
<th>Weight (kg)</th>
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</thead>
<tbody>
<tr>
<td>1.40 or less</td>
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<tr>
<td>1.41-1.42</td>
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<tr>
<td>1.43-1.44</td>
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<tr>
<td>1.45</td>
<td>42</td>
</tr>
<tr>
<td>1.46-1.47</td>
<td>43</td>
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<td>1.48-1.49</td>
<td>44</td>
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<tr>
<td>1.50</td>
<td>45</td>
</tr>
<tr>
<td>1.51-1.52</td>
<td>46</td>
</tr>
<tr>
<td>1.53-1.54</td>
<td>47</td>
</tr>
<tr>
<td>1.55</td>
<td>48</td>
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<tr>
<td>1.56-1.57</td>
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<td>1.59-1.60</td>
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<td>1.77-1.78</td>
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<td>1.81-1.82</td>
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<td>1.91</td>
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<tr>
<td>1.92-1.93</td>
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<tr>
<td>1.94</td>
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<td>1.95</td>
<td>76</td>
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<td>1.96</td>
<td>77</td>
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<tr>
<td>1.97-1.98</td>
<td>78</td>
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<tr>
<td>1.99</td>
<td>79</td>
</tr>
<tr>
<td>2.00 or more</td>
<td>80</td>
</tr>
</tbody>
</table>

VERSIONS AFTER 8/6/01, USED THE FOLLOWING TABLE:

<table>
<thead>
<tr>
<th>Height (feet)</th>
<th>Weight (lbs)</th>
<th>Height (feet)</th>
<th>Weight (lbs)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4'10&quot; or less</td>
<td>111</td>
<td>5'2&quot; or less</td>
<td>128</td>
</tr>
<tr>
<td>4'11&quot;</td>
<td>114</td>
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<td>5'0&quot;</td>
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<td>5'4&quot;</td>
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<tr>
<td>5'1&quot;</td>
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<td>5'5&quot;</td>
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<tr>
<td>5'2&quot;</td>
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<td>5'6&quot;</td>
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<tr>
<td>5'3&quot;</td>
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<tr>
<td>5'4&quot;</td>
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<td>5'8&quot;</td>
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<tr>
<td>5'5&quot;</td>
<td>132</td>
<td>5'9&quot;</td>
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<tr>
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<td>5'9&quot;</td>
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<tr>
<td>5'11&quot;</td>
<td>150</td>
<td>6'3&quot;</td>
<td>172</td>
</tr>
<tr>
<td>6'0&quot; or more</td>
<td>152</td>
<td>6'4&quot; or more</td>
<td>176</td>
</tr>
</tbody>
</table>
**EA6.** At the time you weighed (WEIGHT REPORTED IN *EA2) were you very afraid that you might gain weight?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*GO TO *EA16*

**EA7.** Did you do things to keep your weight low, such as dieting or exercising?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
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</tbody>
</table>

*GO TO *EA16*

**(17b)**

**EA8.** INTERVIEWER CHECKPOINT: (R’S GENDER)

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>R IS MALE</td>
<td>1</td>
</tr>
<tr>
<td>R IS FEMALE</td>
<td>2</td>
</tr>
</tbody>
</table>

*GO TO *EA10*

**EA9.** Around the time you weighed (WEIGHT REPORTED IN *EA2) did you ever have three months or more in a row when you stopped having your menstrual periods?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>(IF VOL.) DID NOT YET HAVE PERIODS</td>
<td>7</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*GO TO *EA16*  

**(17c)**
**EA10.** Did you feel like you were heavier than you should have been or heavier than you wanted to be?  
(KEY PHRASE: feeling you were too heavy) 

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**EA10b.** Did you think that some parts of your body were too fat?  
(KEY PHRASE: thinking that parts of your body were too fat) 

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
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</tbody>
</table>

**EA10c.** Did how you felt about yourself depend on your ability to stay thin or to lose even more weight?  
(KEY PHRASE: feeling like your self-esteem depended on being thin) 

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**EA10d.** Did anyone tell you that your low weight was bad for your health?  
(KEY PHRASE: hearing from others that your low weight was bad for your health) 

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

**EA11.** INTERVIEWER CHECKPOINT: (SEE (**EA10, **EA10b, **EA10c, **EA10d) **)  
(17e) 

AT LEAST ONE “YES” RESPONSE IN (**EA10, **EA10b, **EA10c or **EA10d)  
GO TO **EA16
*EA12. Think of the very first time in your life you weighed around (WEIGHT REPORTED IN *EA2) and you had problems like (KEY PHRASES FROM “YES” RESPONSES IN *EA10 SERIES). Can you remember your exact age?

YES..............................................1
NO .............................................5     GO TO *EA12b
DON’T KNOW .........................9     GO TO *EA12b
REFUSED .................................8     GO TO *EA12b

*EA12a. (IF NEC: How old were you?)

_________ YEARS OLD     GO TO *EA13
DON’T KNOW ...............999     GO TO *EA13
REFUSED .......................998     GO TO *EA13

*EA12b. About how old were you the first time?

_________ YEARS OLD
DON’T KNOW ...............999     GO TO *EA12b1
REFUSED .......................998     GO TO *EA12b3
ALL MY LIFE .................997     GO TO *EA12b3

*EA12b1. Can you remember what grade you were in at school?

YES..............................................1
NO .............................................5     GO TO *EA12b3
DON’T KNOW .........................9     GO TO *EA12b3
REFUSED .................................8     GO TO *EA12b3

*EA12b2. What grade was that?

KINDERGARTEN..............0     7TH GRADE ...........................................7
1ST GRADE ......................1     8TH GRADE ...........................................8
2ND GRADE ......................2     HIGH SCHOOL FRESHMAN .................9
3RD GRADE ......................3     HIGH SCHOOL SOPHOMORE .............10
4TH GRADE ......................4     HIGH SCHOOL JUNIOR .................11
5TH GRADE ......................5     HIGH SCHOOL SENIOR .................12
6TH GRADE ......................6     ANY COLLEGE .............................13

*EA12b3. Was it before you first started school?

YES..............................................1     GO TO *EA13
NO .............................................5
DON’T KNOW .........................9
REFUSED .................................8

*EA12b4. Was it before you were a teenager?

YES ..............................................1
NO .............................................5
DON’T KNOW .........................9
REFUSED .................................8

BEFORE STARTED SCHOOL .................4
BEFORE TEENAGER .....................12
NOT BEFORE TEENAGER .................13
DON’T KNOW ..............................999
REFUSED .................................998
*EA13. About how many different years in your life did you weigh around (WEIGHT REPORTED IN *EA2) and have problems like the ones we just reviewed?

__________ YEARS

DON’T KNOW ............... 999
REFUSED ..................... 998

*EA14. INTERVIEWER CHECKPOINT: (SEE *EA13)

*EA13 IS CODED 1 YEAR OR LESS ..................... 1   GO TO *EA16
ALL OTHERS................................................................. 2

*EA15. When was the last time you weighed around (WEIGHT REPORTED IN *EA2) and have problems like the ones we just reviewed – in the past month, two to six months ago, seven to twelve months ago, or more than twelve months ago?

PAST MONTH ................................................ 1   GO TO *EA16
2-6 MONTHS AGO................................. 2   GO TO *EA16
7-12 MONTHS AGO.............................. 3   GO TO *EA16
MORE THAN 12 MONTHS AGO............. 4
DON’T KNOW ................................................ 9
REFUSED ................................................. 8

*EA15a. How old were you the last time?

__________ YEARS OLD

DON’T KNOW ............... 999
REFUSED ..................... 998
*EA16. The next question is about “eating binges” where a person eats a large amount of food during a short time like two hours. By “a large amount” I mean eating so much food that it would be like eating two or more entire meals in one sitting, or eating so much of one particular food -- like candy or ice cream -- that it would make most people feel sick. With that definition in mind, did you ever have a time in your life when you went on eating binges (READ SLOWLY) at least twice a week for several months or longer?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
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</table>

*EA17. During the binges did you usually eat much more quickly than usual?

*EA17a. Did you usually eat until you felt uncomfortably full?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*EA17b. Did you usually continue to eat even when you didn’t feel hungry?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*EA17c. Did you usually eat alone because you were embarrassed by how much you ate?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*EA17d. Did you feel guilty, very upset with yourself, or depressed after you binged?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*EA17e. Around the time you were binge eating, were you very afraid that you would gain weight?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*EA17f. Did feeling good about yourself depend on your weight or body shape?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*EA17g. Did you worry about the effects of binging on your health, on your weight, or on your body shape?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
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</tbody>
</table>

*EA17h. Did you often get upset both during and after the binges and think that your eating was out of your control?

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*EA18. INTERVIEWER CHECKPOINT: (SEE *EA17 SERIES)

AT LEAST ONE “YES” RESPONSE IN *EA17 SERIES ................. 1
ALL OTHERS ........................................................................ 2 GO TO *EA23
*EA19. Can you remember your exact age the very first time in your life you began binging at least two times a week for three months or longer?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*EA19a. (IF NEC: How old were you?)

<table>
<thead>
<tr>
<th>Age</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________ YEARS OLD</td>
<td>GO TO *EA20</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
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</tbody>
</table>

*EA19b1. About how old were you the first time?

<table>
<thead>
<tr>
<th>Age</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________ YEARS OLD</td>
<td>GO TO *EA19b2</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
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</tbody>
</table>

*EA19b2. What grade was that?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Code</th>
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<tbody>
<tr>
<td>KINDERGARTEN</td>
<td>0</td>
</tr>
<tr>
<td>1ST GRADE</td>
<td>1</td>
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<td>2ND GRADE</td>
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<td>3RD GRADE</td>
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<td>7TH GRADE</td>
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<td>9TH GRADE</td>
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<tr>
<td>10TH GRADE</td>
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</tr>
<tr>
<td>11TH GRADE</td>
<td>11</td>
</tr>
<tr>
<td>12TH GRADE</td>
<td>12</td>
</tr>
<tr>
<td>ANY COLLEGE</td>
<td>13</td>
</tr>
</tbody>
</table>

*EA20. About how many years in your life did you have times when you binged at least two times a week for three months or longer?

<table>
<thead>
<tr>
<th>Age</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________ YEARS</td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
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</tbody>
</table>

*EA21. INTERVIEWER CHECKPOINT: (SEE *EA20)

*EA20 IS CODED 1 YEAR OR LESS..................1   GO TO *EA23a
ALL OTHERS........................................2
*EA22. When was the last time you binged at least two times a week – in the past month, two to six months ago, seven to twelve months ago, or more than twelve months ago?

- PAST MONTH ................................................1
- 2-6 MONTHS AGO.........................................2
- 7-12 MONTHS AGO.......................................3
- MORE THAN 12 MONTHS AGO.................4
- DON’T KNOW .............................................9
- REFUSED ....................................................8

*EA22a. How old were you the last time?

- ________ YEARS OLD GO TO *EA23a
- DON’T KNOW ..............999 GO TO *EA23a
- REFUSED ......................998 GO TO *EA23a

*EA23. Did you ever do any of the following things regularly in order to control your weight:

- Did you not eat at all or only drink liquids for 8 hours or longer?
  - (KEY PHRASE: didn’t eat or only drank liquids)

*EA23a. Did you ever do any of the following things regularly after binging in order to control your weight:

- Did you not eat at all or only take liquids for 8 hours or longer?
  - (KEY PHRASE: didn’t eat or only drank liquids)

*EA23b. Did you take water pills, diuretics, or weight control medicines?
  - (KEY PHRASE: took weight loss medicine or pills)

*EA23c. Did you make yourself throw up?
  - (KEY PHRASE: threw up)

*EA23d. Did you take laxatives or enemas?
  - (KEY PHRASE: took laxatives or enemas)

*EA23e. Did you exercise too much?
  - (KEY PHRASE: exercised too much)

*EA23f. Did you chew and then spit out your food?
  - (KEY PHRASE: spit out your food)

*EA24. INTERVIEWER CHECKPOINT: (SEE *EA23 SERIES)

- AT LEAST ONE “YES” RESPONSE IN *EA23 SERIES.................................1
- ALL OTHERS.................................................................2 GO TO *EA30
*EA25. You (KEY PHRASES FROM “YES” RESPONSES IN *EA23 SERIES). Did you ever do (this/ either of these things/ any of these things) at least two times a week for three months or longer?

YES .....................................1
NO ......................................5
DON’T KNOW .........................9
REFUSED ..............................8

*EA26. Can you remember your exact age the very first time you used (this/ any of these) weight control (strategy/ strategies) at least two times a week for three months?

YES .....................................1
NO ......................................5
DON’T KNOW .........................9
REFUSED ..............................8

*EA26a. (IF NEC: How old were you?)

__________ YEARS OLD   GO TO *EA27

DON’T KNOW .....................999
REFUSED .............................998

*EA26b. About how old were you the first time?

__________ YEARS OLD

DON’T KNOW .....................999
REFUSED .............................998
ALL MY LIFE .......................997

*EA26b1. Can you remember what grade you were in at school?

YES.....................................1
NO ......................................5
DON’T KNOW .........................9
REFUSED ..............................8

*EA26b2. What grade was that?

KINDERGARTEN..... 0     7TH GRADE .............................. 7  
1ST GRADE ........ 1     8TH GRADE .............................. 8  
2ND GRADE .......... 2     HIGH SCHOOL FRESHMAN ...... 9  
3RD GRADE .......... 3     HIGH SCHOOL SOPHOMORE .... 10  
4TH GRADE .......... 4     HIGH SCHOOL JUNIOR .......... 11  
5TH GRADE .......... 5     HIGH SCHOOL SENIOR .......... 12  
6TH GRADE .......... 6     ANY COLLEGE ..................... 13  

*EA26b3. Was it before you first started school?

YES .....................................1  
NO ......................................5  
DON’T KNOW .........................9  
REFUSED ..............................8

BEFORE STARTED SCHOOL ............... 4
BEFORE TEENAGER ................... 12
NOT BEFORE TEENAGER ................. 13
DON’T KNOW ...........................999
REFUSED ..................................998
*EA26b4. Was it before you were a teenager?

YES ......................... 1
NO ............................. 5
DON'T KNOW ............... 9
REFUSED ..................... 8

*EA27. About how many years in your life did you do any of these things at least twice a week for three months or longer?

_________ YEARS

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

*EA28. INTERVIEWER CHECKPOINT: (SEE *EA27)

*EA27 IS CODED 1 YEAR OR LESS ...................... 1  GO TO *EA30
ALL OTHERS ................................................. 2
*EA29.  When was the last time you used (this strategy/these strategies) at least twice a week – in the past month, two to six months ago, seven to twelve months ago, or more than twelve months ago?

PAST MONTH ................................................1  GO TO *EA30
2-6 MONTHS AGO.................................2  GO TO *EA30
7-12 MONTHS AGO...............................3  GO TO *EA30
MORE THAN 12 MONTHS AGO...............4
DON'T KNOW ...........................................9
REFUSED ..................................................8

*EA29a.  How old were you the last time?

____________ YEARS OLD

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

*EA30.  INTERVIEWER CHECKPOINT: (SEE *EA11, *EA18, *EA24)

RESPONSE CODED “1,” IN AT LEAST ONE OF THE FOLLOWING:  *EA11, *EA18 OR *EA24..........................................................1
ALL OTHERS..................................................2  GO TO *PR1, NEXT SECTION

*EA31.  INTERVIEWER CHECKPOINT: (SEE *EA15, *EA22, *EA29)

RESPONSE CODED “1,” “2,” OR “3” IN AT LEAST ONE OF THE FOLLOWING:  *EA15, *EA22 OR *EA29..................................................1
ALL OTHERS..................................................2  GO TO *EA35
*EA32. (RB, PG 37) Think about the one month or longer in the past 12 months when your problems with your eating or weight were worst. Using a 0 to 10 scale, where 0 means no problems and 10 means very severe problems, what number describes how much your eating or weight caused problems with each of the following activities during that time?

(IF NEC: How much did your eating or weight cause problems with (ACTIVITY) during that time?)

(IF NEC: You can use any number between 0 and 10 to answer.)

NUMBER (0-10)

*EA32a. Your chores at home?

_________

DOES NOT APPLY ........... 97
DON’T KNOW .................. 99
REFUSED ..................... 98

*EA32b. Your ability to do well at school or work?

_________

DOES NOT APPLY ........... 97
DON’T KNOW .................. 99
REFUSED ..................... 98

*EA32c. Your ability to get along with your family?

_________

DOES NOT APPLY ........... 97
DON’T KNOW .................. 99
REFUSED ..................... 98

*EA32d. Your social life?

_________

DOES NOT APPLY ........... 97
DON’T KNOW .................. 99
REFUSED ..................... 98

*EA33. INTERVIEWER CHECKPOINT: (SEE *EA32 SERIES)

ALL FOUR RESPONSES TO *EA32 SERIES EQUAL “0” .................. 1
GO TO *EA35

ALL OTHERS .................................................................................. 2

*EA34. About how many days out of 365 in the past 12 months were you totally unable to go to school or work or carry out your normal activities because of problems with your eating or weight?

(IF NEC: You can use any number between 0 and 365 to answer.)

_________ NUMBER OF DAYS

DON’T KNOW ............... 999
REFUSED ...................... 998
*EA35. Did you ever in your life talk to a medical doctor or other professional about problems with your eating or weight? (By other professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES........................................1
NO.............................................5 GO TO *PRI, NEXT SECTION
DON’T KNOW..............................9 GO TO *PRI, NEXT SECTION
REFUSED....................................8 GO TO *PRI, NEXT SECTION

*EA35a. How old were you the first time (you talked to a professional about problems with your eating or weight)?

__________ YEARS OLD

DON’T KNOW.................999
REFUSED .........................998

*EA37. Did you ever get treatment for problems with your eating or weight that you considered helpful or effective?

YES........................................1
NO.............................................5 GO TO *EA37c
DON’T KNOW..............................9 GO TO *EA37c
REFUSED....................................8 GO TO *EA37c

*EA37a. How old were you the first time (you got helpful treatment for problems with your eating or weight)?

__________ YEARS OLD

DON’T KNOW.................999
REFUSED .........................998

*EA37b. How many professionals did you ever talk to about problems with your eating or weight?

__________ NUMBER OF PROFESSIONALS GO TO *EA38

DON’T KNOW.................999 GO TO *EA38
REFUSED .........................998 GO TO *EA38

*EA37c. How many professionals did you ever talk to about problems with your eating or weight?

__________ NUMBER OF PROFESSIONALS

DON’T KNOW.................999
REFUSED .........................998

*EA38. Did you receive professional treatment for problems with your eating or weight at any time in the past 12 months?

YES........................................1
NO.............................................5
DON’T KNOW..............................9
REFUSED....................................8

END OF SECTION
**WOMEN’S HEALTH (PR)**

*PR1. INTERVIEWER CHECKPOINT: (SEE RESPONDENT’S GENDER)*

<table>
<thead>
<tr>
<th>Gender</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Female</td>
<td>1</td>
</tr>
<tr>
<td>Male</td>
<td>2</td>
</tr>
</tbody>
</table>

GO TO NEXT SECTION

*PR2. This part of the interview is about women’s and girls’ health issues. How old were you when you had your first menstrual period?

_________ YEARS OLD

<table>
<thead>
<tr>
<th>Status</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never had a menstrual period</td>
<td>997</td>
</tr>
<tr>
<td>Don’t know</td>
<td>999</td>
</tr>
<tr>
<td>Refused</td>
<td>998</td>
</tr>
</tbody>
</table>

GO TO *PR31_1

*PR3. Did you have your first menstrual period earlier, later, or at about the same time as other girls you knew?

<table>
<thead>
<tr>
<th>Timing</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Earlier</td>
<td>1</td>
</tr>
<tr>
<td>Later</td>
<td>2</td>
</tr>
<tr>
<td>About the same time</td>
<td>3</td>
</tr>
<tr>
<td>Don’t know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *PR4

*PR3a. A lot (earlier/ later), somewhat, or only a little (earlier/ later)?

<table>
<thead>
<tr>
<th>Comparison</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>A lot</td>
<td>1</td>
</tr>
<tr>
<td>Somewhat</td>
<td>2</td>
</tr>
<tr>
<td>A little</td>
<td>3</td>
</tr>
<tr>
<td>Don’t know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

*PR4. Have you ever taken birth control pills?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
</tr>
<tr>
<td>Don’t know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *PR6

*PR4a. How old were you when you started taking birth control pills?

_________ YEARS OLD

<table>
<thead>
<tr>
<th>Status</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Don’t know</td>
<td>999</td>
</tr>
<tr>
<td>Refused</td>
<td>998</td>
</tr>
</tbody>
</table>

*PR4b. Do you still take them now?

<table>
<thead>
<tr>
<th>Response</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>1</td>
</tr>
<tr>
<td>No</td>
<td>5</td>
</tr>
<tr>
<td>Don’t know</td>
<td>9</td>
</tr>
<tr>
<td>Refused</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *PR6

*PR4c. How old were you when you stopped taking them?

_________ YEARS OLD

<table>
<thead>
<tr>
<th>Status</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Don’t know</td>
<td>999</td>
</tr>
<tr>
<td>Refused</td>
<td>998</td>
</tr>
</tbody>
</table>
*PR6. Are you having a period today?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *PR13

*PR6a. How long did your last period begin?

<table>
<thead>
<tr>
<th>NUMBER</th>
<th>CIRCLE UNIT OF TIME:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>DAYS .... 1</td>
</tr>
<tr>
<td></td>
<td>WEEKS ......2</td>
</tr>
<tr>
<td></td>
<td>MONTHS......3</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON'T KNOW</td>
<td>99</td>
</tr>
<tr>
<td>REFUSED</td>
<td>98</td>
</tr>
</tbody>
</table>

*PR7. INTERVIEWER CHECKPOINT (SEE *PR6a)

*PR6a IS GREATER THAN '30' DAYS                           1
ALL OTHERS                                               2

GO TO *PR13

*PR8. Are you pregnant?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*PR13. Many women find that their mood becomes much worse in the week before their menstrual period and then returns to normal within a few days after their period starts. The changes in mood usually involve things like feeling sad, depressed, sensitive, anxious, tense or irritable. Did you ever have a time in your life like this when your mood became much worse in the week before your menstrual period?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

GO TO *PR31_1

*PR14. During the time in your life when these mood changes were worst, about how many months out of 12 each year were your moods much worse during the week before your period? (You can use any number between 1 and 12).

<table>
<thead>
<tr>
<th>MONTHS</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
</tbody>
</table>

*PR15. INTERVIEWER CHECKPOINT: (SEE *PR14)

*PR14 EQUALS '7' OR MORE                                    1
ALL OTHERS                                                 2

GO TO *PR31_1
*PR16. Think about the week before your period in a typical month when you had mood changes. Was your mood much worse than normal all the time, most of the time, some of the time, or only a little of the time?

ALL THE TIME .................................... 1
MOST OF THE TIME........................... 2
SOME OF THE TIME......................... 3     GO TO *PR31_1
A LITTLE OF THE TIME ................. 4     GO TO *PR31_1
DON’T KNOW ................................. 9     GO TO *PR31_1
REFUSED ....................................... 8     GO TO *PR31_1

*PR16a. Did you usually also have any other problems at the same time, such as difficulty concentrating, tiredness, change in appetite, or change in sleep?

YES...................................................... 1
NO ....................................................... 5     GO TO *PR31_1
DON’T KNOW ..................................... 9     GO TO *PR31_1
REFUSED ........................................... 8     GO TO *PR31_1

*PR19. How much did these problems with your mood ever cause problems with your school work, your job or your relationships with family or friends-- not at all, a little, some, a lot or extremely?

NOT AT ALL ......................1     GO TO *PR31_1
A LITTLE ..........................2     GO TO *PR31_1
SOME ........................................ 3
A LOT ....................................... 4
EXTREMELY ............................ 5
DON’T KNOW .............................. 9     GO TO *PR31_1
REFUSED ......................................... 8     GO TO *PR31_1

PR19a. How often were you unable to carry out your daily activities because of the problems that occurred during the week before your menstrual period – often, sometimes, not very often, or never?

OFTEN ..................................1
SOMETIMES ...........................2
NOT VERY OFTEN .................. 3
NEVER .................................4
DON’T KNOW ............................ 9
REFUSED ......................................... 8

*PR20. Can you remember your exact age the very first time in your life you had pre-menstrual problems?

YES .....................................1
NO .......................................5     GO TO *PR20b
DON’T KNOW ......................... 9     GO TO *PR20b
REFUSED ................................. 8     GO TO *PR20b

*PR20a. (IF NEC: How old were you?)

__________ YEARS OLD  GO TO *PR21

DON’T KNOW .................999     GO TO *PR21
REFUSED .........................998     GO TO *PR21
*PR20b. About how old were you the first time?

__________ YEARS OLD

DON'T KNOW ..................999   GO TO *PR20b1
REFUSED ......................998   GO TO *PR20b3
ALL MY LIFE ................997   GO TO *PR20b3

*PR20b1. Can you remember what grade you were in at school?

YES.....................................1
NO ......................................5   GO TO *PR20b3
DON'T KNOW ....................9   GO TO *PR20b3
REFUSED .........................8   GO TO *PR20b3

*PR20b2. What grade was that?

KINDERGARTEN...... 0   7TH GRADE..............................7
1ST GRADE ........... 1   8TH GRADE..............................8
2ND GRADE .......... 2   HIGH SCHOOL FRESHMAN...... 9
3RD GRADE .......... 3   HIGH SCHOOL SOPHOMORE.... 10
4TH GRADE .......... 4   HIGH SCHOOL JUNIOR......... 11
5TH GRADE .......... 5   HIGH SCHOOL SENIOR....... 12
6TH GRADE .......... 6   ANY COLLEGE .....................13

*PR20b3. Was it before you first started school?

YES .....................1   GO TO *PR21
NO .....................5
DON'T KNOW ............9
REFUSED ..................8

BEFORE STARTED SCHOOL.........4
BEFORE TEENAGER...............12
NOT BEFORE TEENAGER.........13
DON'T KNOW ..................999
REFUSED .......................998

*PR20b4. Was it before you were a teenager?

YES .....................1
NO .....................5
DON'T KNOW ............9
REFUSED ..................8

*PR21. Did you have problems like these in the past 12 months?

YES.................................................1
NO ..................................................5
DON'T KNOW .............................9   GO TO *PR21b
REFUSED .................................8   GO TO *PR21b

*PR21a. How recently – in the past month, two to six months ago, or more than six months ago?

PAST MONTH..........................1
2 - 6 MONTHS AGO .....................2
MORE THAN 6 MONTHS AGO ..........3
DON'T KNOW .........................9
REFUSED .................................8

GO TO *PR31_1

*PR21b. How old were you the last time?

__________ YEARS OLD
*PR22. How advanced would you say your physical development is compared to other girls your age? Would you say you look younger than most, younger than some, about average, look older than some, or look older than most other girls your age?

LOOK YOUNGER THAN MOST ........... 1
LOOK YOUNGER THAN SOME .......... 2
LOOK ABOUT AVERAGE ................ 3
LOOK OLDER THAN SOME ............. 4
LOOK OLDER THAN MOST ............. 5
DON’T KNOW .. ............................... 9
REFUSED ... ................................. 8

*PR48. (HAND CARD FOR GIRLS TO R) The pictures on side 1 of this card show different stages of breast growth that women go through as their bodies develop and mature. All women go through each of these five stages as shown. Please look carefully at each picture, and put an X on the line above the picture that is closest to your stage of growth. Tell me when you are done.

WHEN R IS DONE, ASK: At the bottom of pictures two through five are lines. Please write on these lines the ages when you first reached each stage you have reached so far. So, for example, a person at stage four might write down 11 for picture two, 13 for picture three, 14 for picture four, and leave picture five blank. Tell me when you are done.

PRESS ENTER TO CONTINUE

*PR49. The pictures on side 2 of the card show different stages of women’s growth. Please look at each picture, and put an X in the box above the picture that is closest to you. Tell me when you are done.

WHEN R IS DONE, ASK: At the bottom of pictures two through five are lines. Please write on these lines the ages when you first reached each stage you have reached so far. So, for example, a person at stage four might write down 11 for picture two, 13 for picture three, 14 for picture four, and leave picture five blank. Tell me when you are done.

PRESS ENTER TO CONTINUE

*PR50. INTERVIEWER INSTRUCTION: HAND THE ENVELOPE TO R. INSTRUCT R TO PUT THE CARD IN THE ENVELOPE, SEAL THE ENVELOPE, AND HAND IT BACK TO YOU.

END OF SECTION
**OPPOSITIONAL DEFIANT DISORDER (OD)**

*OD1.* Earlier in the interview you mentioned a time lasting six months or longer when you often did things that got you in trouble with adults. Which of the following things did you do during that time:

<table>
<thead>
<tr>
<th></th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>OD1a.</em> Did you often lose your temper?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: frequently lost your temper)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>OD1b.</em> Did you often argue with or “talk back” to adults?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: often argued with adults)</td>
<td>GO TO</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td><em>OD1c.</em> Did you often disobey rules at home, school, or work?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: often disobeyed rules)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>OD1d.</em> Did you often refuse to follow directions from adults like your parents, teacher, or boss?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: refused to follow directions)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>OD1e.</em> Were you angry a lot of the time?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: were angry a lot)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>OD1f.</em> Did you often feel you were being taken advantage of or treated unfairly?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: felt like you were being treated unfairly)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><em>OD1g.</em> Did you annoy people on purpose by doing or saying things just to bother them?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: annoyed people on purpose)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Question</td>
<td>YES (1)</td>
<td>NO (5)</td>
<td>DK (9)</td>
<td>RF (8)</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>---------</td>
<td>--------</td>
<td>--------</td>
<td>--------</td>
</tr>
<tr>
<td>*OD1h. Did you blame others for your mistakes or bad behavior?</td>
<td></td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: blamed others for your mistakes or bad behavior)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*OD1i. Did you do mean things to “pay people back” for things they did</td>
<td></td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: did mean things to get back at people)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*OD1j. Did you easily get mad at the way people treated you?</td>
<td></td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: easily took offense)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*OD1k. Were you easily annoyed by others?</td>
<td></td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>(KEY PHRASE: were easily annoyed by others)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*OD2. INTERVIEWER CHECKPOINT: (SEE *OD1a-k*)

**THREE (FOUR) OR MORE “YES” RESPONSES IN *OD1a-k.........1**

ALL OTHERS .............................................................................................. 2  
GO TO *OD27
*OD3. You mentioned several things – such as, you (KEY PHRASES FOR 3 ITEMS ENDORSED IN *OD1a-k). Think of the very first time in your life you had six months or longer of feeling or acting like this. Can you remember your exact age?

YES......................... 1
NO........................... 5   GO TO *OD3b
DON’T KNOW.............9   GO TO *OD3b
REFUSED....................8   GO TO *OD3b

*OD3a. (IF NEC: How old were you?)

__________ YEARS OLD   GO TO *OD4

DON’T KNOW...............999 GO TO *OD4
REFUSED....................998 GO TO *OD4

*OD3b. About how old were you (the first time you had a period of this sort)?

__________ YEARS OLD

DON’T KNOW...............999 GO TO *OD3b1
REFUSED....................998 GO TO *OD3b3
ALL MY LIFE................997 GO TO *OD3b3

*OD3b1. Can you remember what grade you were in at school?

YES.......................... 1
NO........................... 5   GO TO *OD3b3
DON’T KNOW...............9   GO TO *OD3b3
REFUSED....................8   GO TO *OD3b3

*OD3b2. What grade was that?

KINDERGARTEN......0    7TH GRADE.................................7
1ST GRADE.........1    8TH GRADE.................................8
2ND GRADE.........2    HIGH SCHOOL FRESHMAN.........9
3RD GRADE.........3    HIGH SCHOOL SOPHOMORE.....10
4TH GRADE.........4    HIGH SCHOOL JUNIOR..........11
5TH GRADE.........5    HIGH SCHOOL SENIOR.........12
6TH GRADE.........6    ANY COLLEGE .......................13

*OD3b3. Was it before you first started school?

YES.......................... 1   GO TO *OD4
NO........................... 5
DON’T KNOW...............9
REFUSED....................8

*OD3b4. Was it before you were a teenager?

YES.......................... 1
NO........................... 5
DON’T KNOW...............9
REFUSED....................8

BEFORE STARTED SCHOOL............4
BEFORE TEENAGER..................12
NOT BEFORE TEENAGER.............13
DON’T KNOW......................999
REFUSED..........................998
*OD4. Did you still feel or act like this during the past 12 months?

YES................................................... 1   GO TO *OD5
NO.......................................................... 5
DON'T KNOW ........................................ 9
REFUSED.................................................. 8

*OD4a. How old were you the last time you had six months or longer when you felt or acted like this?

_________ YEARS OLD

DON’T KNOW ............... 999
REFUSED ..................... 998

*OD5. How many years altogether did you act like this a lot of the time?

_______ NUMBER OF YEARS

DON’T KNOW ................. 999
REFUSED ....................... 998

*OD6. How much did these behaviors ever cause problems with either your school work or job, or your relationships with family or friends – not at all, a little, some, a lot or extremely?

NOT AT ALL ........................................... 1     GO TO *OD27
A LITTLE .................................................. 2    GO TO *OD27
SOME..................................................... 3
A LOT .......................................................... 4
EXTERMELY ............................................... 5
DON’T KNOW ........................................... 9     GO TO *OD27
REFUSED ................................................ 8   GO TO *OD27

*OD7. INTERVIEWER CHECKPOINT: (SEE *OD4)

*OD4 EQUALS “YES” ............................... 1     GO TO *OD27
ALL OTHERS ........................................... 2   GO TO *OD12
*OD8. (RB, PG 37) Think about the one month or longer in the past 12 months when these behaviors were worst. Using a 0 to 10 scale, where 0 means no problems and 10 means very severe problems, what number describes how much these behaviors caused problems with each of the following activities during that time?

(IF NEC: How much did these behaviors cause problems with (ACTIVITY) during that time?)
(IF NEC: You can use any number between 0 and 10 to answer.)

NUMBER (0-10)

*OD8a. Your chores at home?

__________

DOES NOT APPLY ............97
DON’T KNOW ..................99
REFUSED..........................98

*OD8b. Your ability to do well at school or work?

__________

DOES NOT APPLY ............97
DON’T KNOW ..................99
REFUSED..........................98

*OD8c. Your ability to get along with your family?

__________

DOES NOT APPLY ............97
DON’T KNOW ..................99
REFUSED..........................98

*OD8d. Your social life?

__________

DOES NOT APPLY ............97
DON’T KNOW ..................99
REFUSED..........................98

*OD9. INTERVIEWER CHECKPOINT: (SEE *OD8a - *OD8d)

ALL FOUR RESPONSES TO *OD8a - *OD8d SERIES EQUAL ‘0’... 1  GO TO *OD12
ALL OTHERS .................................................. 2

*OD10. About how many days out of 365 in the past 12 months were you totally unable to work or go to school or carry out your normal activities because of these behaviors?

(IF NEC: You can use any number between 0 and 365 to answer.)

__________ NUMBER OF DAYS

DON’T KNOW ............... 999
REFUSED ...................... 998
*OD12. Did you ever in your life talk to a medical doctor or other professional about these behaviors? (By other professional we mean psychologists, counselors, spiritual advisors, herbalists, acupuncturists, and other healing professionals.)

YES ................................................... 1
NO .................................................. 5  GO TO *OD27
DON’T KNOW .......................... 9  GO TO *OD27
REFUSED ............................... 8  GO TO *OD27

*OD12a. How old were you the first time (you talked to a professional about these behaviors)?

_____________ YEARS OLD  (GO TO *OD23) **  (39d)

DON’T KNOW ....................... 999  (GO TO *OD23) **
REFUSED ............................. 998  (GO TO *OD23) **

*OD23. Did you ever get treatment for these behaviors that you considered helpful or effective?

YES .................................. 1
NO .................................... 5  GO TO *OD23c
DON’T KNOW ....................... 9  GO TO *OD23c
REFUSED ............................. 8  GO TO *OD23c

*OD23a. How old were you the first time (you got helpful treatment for these behaviors)?

_____________ YEARS OLD

DON’T KNOW ..................... 999
REFUSED ............................ 998

*OD23b. How many professionals did you ever talk to about these behaviors?

_____________ NUMBER OF PROFESSIONALS  GO TO *OD25

DON’T KNOW ...................... 99  GO TO *OD25
REFUSED ............................. 98  GO TO *OD25

*OD23c. How many professionals did you ever talk to about these behaviors?

_____________ NUMBER OF PROFESSIONALS

DON’T KNOW ..................... 99
REFUSED ............................. 98

*OD25. Did you receive professional treatment for these behaviors at any time in the past 12 months?

YES ...................................... 1
NO ..................................... 5
DON’T KNOW ................... 9
REFUSED ............................. 8

*OD26. Were you ever hospitalized overnight for these behaviors?

YES ............................................. 1
NO ............................................. 5  GO TO *OD27
DON’T KNOW .......................... 9  GO TO *OD27
REFUSED ............................... 8  GO TO *OD27

256
*OD26a. How old were you the first time (you were hospitalized overnight because of these behaviors)?

______________ YEARS OLD

DON’T KNOW ..........999
REFUSED..............998

*OD27. INTERVIEWER CHECKPOINT: (SEE *SC33_1, *SC33_2, *SC33_3)

*SC33_1 IS CODED ‘1’, OR *SC33_2 IS CODED ‘1’,
OR *SC33_3 IS CODED ‘1’..................................................1  GO TO *CD1, NEXT SECTION
ALL OTHERS.................................................................2  GO TO *CD16, PAGE X
**CONDUCT DISORDER (CD)**

*CD1.* You mentioned earlier that you had a time in your life when you did things adults don’t like young people to do. The next questions are about those things. Was there ever a time... (IF *SC33.1 EQUALS ‘1’ GO TO *CD1a/ IF *SC33.2 EQUALS ‘1’ GO TO *CD1e/ IF *SC33.3 EQUALS ‘1’ GO TO *CD1h)

(IF NEC: Was there ever a time …)

<table>
<thead>
<tr>
<th>(IF NEC: Was there ever a time …)</th>
<th>YES (1)</th>
<th>NO (2)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*CD1a. ... when you often told lies to trick people into giving you things or doing what you wanted them to do?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1b. ... when you often got out of doing things you were supposed to do by fooling people or lying to them?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*CD1c. ... when you shoplifted or stole something worth at least $20?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1d. ... when you stole money or other things from your parents or the other people you lived with?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1e. ... when you broke into someone’s locked car, or a locked home or building?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1f. ... when you set a fire to try to cause serious damage?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1g. ... when you deliberately damaged someone’s property by doing something like breaking windows, slashing tires, vandalizing, or writing graffiti on buildings?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1h. ... when you often stayed out three hours or more later at night than your parents wanted?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1i. ... when you often skipped school without permission?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1j. ... when you ran away from home and stayed away for at least four days?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD1k. ... when you ran away from home overnight more than once?</td>
<td>1</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
</tbody>
</table>

*CD3. INTERVIEWER CHECKPOINT: (SEE *CD1a – *CD1k)*

ONE OR MORE RESPONSES CODED ‘1’...............................................1
ALL OTHERS ..............................................................................................2

GO TO *CD16a
*CD7. You answered “yes” to (NUMBER OF “YES” RESPONSES IN *CD1 SERIES) of the questions I just asked about. Think of the very first time in your life you did (that type of behavior/ either of those behaviors/ any of those behaviors). Can you remember your exact age?

YES..................................................1 GO TO *CD7b
NO ..................................................5 GO TO *CD7c
DON’T KNOW .........................9 GO TO *CD7c
REFUSED .............................8 GO TO *CD7c

*CD7a. Can you remember your exact age the very first time in your life you did (that type of behavior/ either of those behaviors/ any of those behaviors)?

YES..................................................1
NO ..................................................5 GO TO *CD7c
DON’T KNOW .........................9 GO TO *CD7c
REFUSED .............................8 GO TO *CD7c

*CD7b. (IF NEC: How old were you?)

_________ YEARS OLD GO TO *CD9

DON’T KNOW .........................999 GO TO *CD9
REFUSED .............................998 GO TO *CD9

*CD7c. About how old were you the first time [you did (that type of behavior/ either of those behaviors/ any of those behaviors)]?

_________ YEARS OLD

DON’T KNOW .........................999 GO TO *CD7c1
REFUSED .............................998 GO TO *CD9
ALL MY LIFE .............................997 GO TO *CD7c3

*CD7c1. Can you remember what grade you were in at school?

YES..............................................1
NO ............................................5 GO TO *CD7c3
DON’T KNOW .........................9 GO TO *CD7c3
REFUSED .............................8 GO TO *CD7c3

*CD7c2. What grade was that?

KINDERGARTEN .... 0 7TH GRADE .............................7
1ST GRADE ............ 1 8TH GRADE .............................8
2ND GRADE ............ 2 HIGH SCHOOL FRESHMAN .... 9
3RD GRADE ............ 3 HIGH SCHOOL SOPHOMORE .... 10
4TH GRADE ............ 4 HIGH SCHOOL JUNIOR ............ 11
5TH GRADE ............ 5 HIGH SCHOOL SENIOR ............ 12
6TH GRADE ............ 6 ANY COLLEGE ......................13

*CD7c3. Was it before you first started school?

YES ..............................................1 GO TO *CD9
NO ............................................5
DON’T KNOW .........................9
REFUSED .............................8
*CD7c4. Was it before you were a teenager?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th>5</th>
<th>9</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>REFUSED</td>
<td>8</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>BEFORE STARTED SCHOOL</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>BEFORE TEENAGER</td>
<td>12</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NOT BEFORE TEENAGER</td>
<td>13</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
<td></td>
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</tbody>
</table>

*CD9. Did you do (that type of behavior/ either of those behaviors/ any of those behaviors) during the past 12 months?

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<thead>
<tr>
<th></th>
<th>1</th>
<th></th>
<th>5</th>
<th></th>
</tr>
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<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>GO TO *CD10</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
<td></td>
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</tr>
</tbody>
</table>

*CD9a. How old were you the last time you did (that type of behavior/ either of those behaviors/ any of those behaviors)?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th></th>
<th>5</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>_____ YEARS OLD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
<td></td>
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</tbody>
</table>

*CD10. About how many years altogether did you do (that type of behavior/ either of those behaviors/ any of those behaviors)?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th></th>
<th>5</th>
<th></th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>_____ NUMBER OF YEARS</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>999</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
<td></td>
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</tbody>
</table>

*CD11. How much did (this behavior/ these behaviors) ever cause problems with either your school work, your job, or your relationships with family or friends – not at all, a little, some, a lot, or extremely?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th></th>
<th>2</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>NOT AT ALL</td>
<td>1</td>
<td>GO TO *CD16a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A LITTLE</td>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>SOME</td>
<td>3</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>A LOT</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>EXTREMELY</td>
<td>5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
<td></td>
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</tbody>
</table>

*CD16. The next questions are about aggressive things adults don’t like young people to do. We want to know if you ever did any of these things. Did you have a time in your life when you often “bullied,” threatened, or frightened people, including smaller or younger children?

<table>
<thead>
<tr>
<th></th>
<th>1</th>
<th></th>
<th>5</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
<td>GO TO *CD16b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
<td>GO TO *CD16b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>9</td>
<td>GO TO *CD16b</td>
<td></td>
<td></td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
<td>GO TO *CD16b</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
*CD16a. Here is another set of questions about things adults don’t like young people to do. These questions all involve aggressive behavior. Did you ever have a time in your life when you often “bullied,” threatened, or frightened people, including smaller or younger children?

YES...............................................................1
NO.................................................................5
DON’T KNOW ..................................................9
REFUSED .....................................................8
(IF NEC: Was there ever a time …)

<table>
<thead>
<tr>
<th>Question</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (9)</th>
<th>RF (8)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*CD16b. … when you repeatedly got involved in physical fights?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*CD16c. … when you used a weapon on another person, like a baseball bat, glass bottle, knife, gun, or brick?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*CD16d. … when you were physically cruel to an animal and hurt it on purpose? (IF NEC: This does not include hunting or getting rid of pests like rodents or insects.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*CD16e. … when you were physically cruel to a person and hurt them on purpose?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*CD16f. … when you forced someone to give you something like money, jewelry, or clothing by threatening them or hurting them?</td>
<td>GO TO *CD16h</td>
<td>5</td>
<td>9</td>
<td>8</td>
</tr>
<tr>
<td>*CD16g. … when you stole someone’s purse, wallet, luggage, package or bag by grabbing it from them? (IF NEC: This does not include stealing from someone who wasn’t aware of the theft, such as stealing a piece of luggage when the owner wasn’t watching.)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>*CD16h. … when you made anyone do something sexual by either forcing, intimidating, or threatening them?</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*CD17_1. INTERVIEWER CHECKPOINT: (SEE *CD16 – *CD16h)

ONE OR MORE RESPONSES CODED ‘1’ ----------------------------------------------- 1
ALL OTHERS--------------------------------------------------------------- 2 GO TO *CD24

*CD18. You answered “yes” to (NUMBER OF “YES” RESPONSES IN *CD16 SERIES) type(s) of aggressive behavior. Think of the very first time in your life when you did (that type of behavior/ either of those behaviors / any of those behaviors). Can you remember your exact age?

YES..............................................1
NO.............................................5 GO TO *CD18c
DON’T KNOW ..............................9 GO TO *CD18c
REFUSED .................................8 GO TO *CD18c

*CD18b. (IF NEC: How old were you?)

__________ YEARS OLD GO TO *CD20

DON’T KNOW ..............................999 GO TO *CD20
REFUSED .................................998 GO TO *CD20
**CD18c.** 

*About how old were you the first time [you engaged in (that type of aggressive behavior/ either of those aggressive behaviors/ any of those aggressive behaviors)]?*

_________ YEARS OLD

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
<tr>
<td>ALL MY LIFE</td>
<td>997</td>
</tr>
</tbody>
</table>

*GO TO *CD18c1*

**CD18c1.** Can you remember what grade you were in at school?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
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</tbody>
</table>

*GO TO *CD18c3*

**CD18c2.** What grade was that?

<table>
<thead>
<tr>
<th>Grade</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>KINDERGARTEN</td>
<td>0</td>
</tr>
<tr>
<td>1ST GRADE</td>
<td>1</td>
</tr>
<tr>
<td>2ND GRADE</td>
<td>2</td>
</tr>
<tr>
<td>3RD GRADE</td>
<td>3</td>
</tr>
<tr>
<td>4TH GRADE</td>
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</tr>
<tr>
<td>5TH GRADE</td>
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<tr>
<td>6TH GRADE</td>
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<tr>
<td>7TH GRADE</td>
<td>7</td>
</tr>
<tr>
<td>8TH GRADE</td>
<td>8</td>
</tr>
<tr>
<td>HIGH SCHOOL FRESHMAN</td>
<td>9</td>
</tr>
<tr>
<td>HIGH SCHOOL SOPHOMORE</td>
<td>10</td>
</tr>
<tr>
<td>HIGH SCHOOL JUNIOR</td>
<td>11</td>
</tr>
<tr>
<td>HIGH SCHOOL SENIOR</td>
<td>12</td>
</tr>
<tr>
<td>ANY COLLEGE</td>
<td>13</td>
</tr>
</tbody>
</table>

**CD18c3.** Was it before you first started school?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
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</table>

*GO TO *CD20*

**CD18c4.** Was it before you were a teenager?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

**CD20.** Did you do (that type of behavior/ either of those behaviors/ any of those behaviors) during the past 12 months?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>9</td>
</tr>
<tr>
<td>REFUSED</td>
<td>8</td>
</tr>
</tbody>
</table>

*GO TO *CD21*

**CD20a.** How old were you the last time you did (that type of behavior/ either of those behaviors/ any of those behaviors)?

_________ YEARS OLD

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW</td>
<td>999</td>
</tr>
<tr>
<td>REFUSED</td>
<td>998</td>
</tr>
</tbody>
</table>
**CD21.** About how many years altogether did you do (that type of behavior/ either of those behaviors/ any of those behaviors)?

_______ NUMBER OF YEARS

DON’T KNOW .................. 999
REFUSED ....................... 998

**CD22.** How much did (this behavior/ these behaviors) ever cause problems with either your school work, your job, or your relationships with family or friends – not at all, a little, some, a lot, or extremely?

NOT AT ALL ................................. 1
A LITTLE ...................................... 2
SOME .......................................... 3
A LOT .......................................... 4
EXTREMELY .................................. 5
DON’T KNOW ............................... 9
REFUSED ................................. 8

GO TO *CD32
**CD24. INTERVIEWER CHECKPOINT: (SEE *CD3)**

RESPONSE CODED “1” IN *CD3................................. 1
ALL OTHERS ................................................. 2  GO TO *CD40

**CD32.** Were you ever suspended or expelled from school as a result of your behavior?

YES...............................................1
NO ...............................................5
DON’T KNOW...............................9
REFUSED ........................................8

**CD33.** Were you ever fired from a job because of your behavior?

YES...............................................1
NO ...............................................5
DON’T KNOW...............................9
REFUSED ........................................8

**CD37.** Were you ever in trouble with the police as a result of your behavior?

YES...............................................1
NO ...............................................5
DON’T KNOW...............................9
REFUSED ........................................8

*CD37a. How old were you the first time (you got into trouble with the police as a result of your behavior)?

______________ YEARS OLD
DON’T KNOW ........... 999
REFUSED ................... 998

**CD38.** Were you ever arrested (because of your behavior)?

YES...............................................1
NO ...............................................5  GO TO *CD40
DON’T KNOW...............................9  GO TO *CD40
REFUSED ........................................8  GO TO *CD40

**CD39.** Were you ever sent to jail, prison, or a juvenile correction facility because of your behavior?

YES...............................................1
NO ...............................................5  GO TO *CD40
DON’T KNOW...............................9  GO TO *CD40
REFUSED ........................................8  GO TO *CD40

*CD39a. How old were you the first time (you were sent to jail, prison, or a juvenile correction facility for your behavior)?

______________ YEARS OLD
DON’T KNOW ........... 999
REFUSED ................... 998

265
*CD39b. How long did you stay in any of these facilities altogether?

______________ DURATION NUMBER

CIRCLE UNIT OF TIME: DAYS ......1  WEEKS ...... 2  MONTHS .... 3  YEARS .... 4

DON’T KNOW .................. 999
REFUSED ....................... 998

*CD40. INTERVIEWER CHECKPOINT: (SEE *SC34)

FOLLOW SKIP FOR THE FIRST ENDORSED ITEM.

IF *SC34 EQUALS ‘1’  .............................. 1  GO TO *SA1, NEXT SECTION

ALL OTHERS  ................................. 2  GO TO *PEC1
RACIAL IDENTITY (ID)

*Multidimensional Inventory of Black Identity (Sellers 1997)*

<table>
<thead>
<tr>
<th>ID2. Now I would like to know how you feel about being Black. Please tell me if you strongly agree, somewhat agree, somewhat disagree, or strongly disagree with each of the following statements.</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) In general, being Black is an important part of my self-image.</td>
</tr>
<tr>
<td>b) My destiny is tied to the destiny of other Black people.</td>
</tr>
<tr>
<td>c) I have a strong attachment to other Black people.</td>
</tr>
<tr>
<td>d) Being Black is an important reflection of who I am.</td>
</tr>
<tr>
<td>e) I feel good about Black people.</td>
</tr>
<tr>
<td>f) I am happy that I am Black.</td>
</tr>
<tr>
<td>g) I am proud to be Black.</td>
</tr>
<tr>
<td>h) I feel that the Black community has made valuable contributions to this society.</td>
</tr>
<tr>
<td>i) In general, society respects Black people.</td>
</tr>
<tr>
<td>j) In general, other racial groups view Blacks in a positive manner.</td>
</tr>
<tr>
<td>k) Society views Black people as an asset.</td>
</tr>
<tr>
<td>l) In general, other racial groups view Blacks as competent people.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree (1)</th>
<th>Somewhat Agree (2)</th>
<th>Somewhat Disagree (3)</th>
<th>Strongly Disagree (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
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<tr>
<td>f)</td>
<td>☐</td>
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<td>☐</td>
<td>☐</td>
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<tr>
<td>g)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>i)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>j)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>k)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>l)</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
**Racial Socialization – Frequency and Source (Tony Brown)**

ID3. The next few questions are about messages you might have received to help you know what it means to be Black and to help you deal with people outside your race. We are interested in how often the following people talk with you about race or racism.

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Very Often (1)</th>
<th>Fairly Often (2)</th>
<th>Sometimes (3)</th>
<th>Rarely (4)</th>
<th>Never (5)</th>
</tr>
</thead>
</table>
a) How often do your parents or the people who raised you talk with you about race or racism? Would you say very often, fairly often, sometimes, rarely, never? □ □ □ □ □
b) Not including your parents or the people who raised you, how often do other close relatives such as your brothers, sisters, aunts, uncles, and grandparents talk with you about race or racism? □ □ □ □ □
c) How about your friends? □ □ □ □ □
d) How about other adults such as church members, your teachers or neighbors? □ □ □ □ □

ID4. **INTERVIEWER CHECKPOINT** (Refer to ID3)

  □ 1 –ID3 ALL RESPONSES EQUAL “5: Never” **GO TO ID6**
  □ 2 - ALL OTHERS **GO TO ID5**

ID5. Think about the messages you have received about race or racism. Do you remember being told any of the following things?

<table>
<thead>
<tr>
<th>Message</th>
<th>Yes (1)</th>
<th>No (5)</th>
</tr>
</thead>
</table>
a) Race doesn’t matter. □ □
b) With hard work you can achieve anything, regardless of your race. □ □
c) You should ‘keep it real’. □ □
d) You should not trust White people. □ □
e) You should be proud to be Black. □ □
f) You should not trust Asian people. □ □
<table>
<thead>
<tr>
<th></th>
<th>Yes (1)</th>
<th>No (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>g) Hispanics and Blacks have a lot in common.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h) Whites think they are better than Blacks.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>i) Sometimes you have to act White to get ahead.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>j) You will experience discrimination.</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>k) Did you receive any messages that I did not mention?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>l) What were the messages that I did not mention? ( RECORD FIRST RESPONSE)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>m) What do you think was the most useful message about race or racism that you have received? (OPEN ENDED) [IWR: IF R GIVES MORE THAN ONE RESPONSE PROBE: Which was the most important?](ENTER MOST IMPORTANT)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

ID6. How many of your friends are of your same racial group — all, most, some, a few, or none?

1 – All  
2 - Most  
3 - Some  
4 - A few  
5 - None

ID7. How important do you think it is for people who are from your same racial group to marry other people who are also from this group – very important, somewhat, not very, or not at all important?

1 - Very Important  
2 - Somewhat Important  
3 - Not Very Important  
4 - Not At All Important
DS1. (RB PG 46) The following questions are about shades of skin color. Compared to most Black teenagers your age, what shade of skin color do you believe you have, is that very dark brown, dark brown, medium brown, light brown, or very light brown?

1 – Very dark brown
2 – Dark brown
3 – Medium brown
4 – Light brown
5 – Very light brown

DS2. (RB, P. 34) Do you think the shade of your skin color makes white teenagers your age treat you a lot better, somewhat better, no different, somewhat worse, or a lot worse than other Blacks?

1 – A lot better
2 – Somewhat better
3 – No different
4 – Somewhat worse
5 – A lot worse

DS3. (RB STILL ON P. 34) Do you think the shade of your skin color makes Black teenagers treat you a lot better, somewhat better, no different, somewhat worse, or a lot worse than other Blacks?

1 – A lot better
2 – Somewhat better
3 – No different
4 – Somewhat worse
5 – A lot worse

DS4. Do you think that you have ever been treated unfairly or badly because of your race?

1 – Yes
2 – No ➔ GO TO DS5

DS4a. At what age did you first have an experience like that?

_____ years old
### DAS 95- Every Day Discrimination

#### DS5. (RB PG 35) In your day-to-day life how often have any of the following things happened to you?

<table>
<thead>
<tr>
<th>Question</th>
<th>Almost everyday (1)</th>
<th>At least once a week (2)</th>
<th>A few times a month (3)</th>
<th>A few times a year (4)</th>
<th>Less than once a year (5)</th>
<th>Never (6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) You are treated with less courtesy than other people.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) You are treated with less respect than other people.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) You receive poorer service than other people at restaurants or stores.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) People act as if they think you are not smart.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e) People act as if they are afraid of you.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f) People act as if they think you are dishonest.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>g) People act as if they’re better than you are.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h) You are called names or insulted.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>i) You are threatened or harassed.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>j) You are followed around in stores.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>k) Your teachers treat you with less respect than other students.</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>
DS6. (RB PG 36) We've talked about a number of things that may have happened to you in your day-to-day life. Thinking of those experiences which have happened to you, overall what do you think was the main reason for (this/these) experiences(s)?

1 - Your ancestry or natural origins
2 - Your gender
3 - Your race
4 - Your age
5 - Your height or weight
6 - Some other aspect of your physical appearance
11 - Other (SPECIFY): _____________________

DS7. Have you ever been unfairly stopped, searched, questioned, physically threatened or abused by the police?

1 – Yes
5 – No  GO TO HE1

DS7_5. (RB PG 36) What do you think was the main reason for this experience? Would you say…?

1 - Your Ancestry or National Origins
2 - Your Gender
3 - Your Race
4 - Your Age
5 - Your Height or Weight
6 - Some other aspect of your physical appearance
11 - Other (SPECIFY) ____________________
HEALTH (HE)

General Health Satisfaction

HE1. How would you rate your overall physical health – excellent, very good, good, fair, or poor?
   1 - Excellent
   2 - Very Good
   3 - Good
   4 - Fair
   5 - Poor

HE2. How would you rate your overall mental health – excellent, very good, good, fair, or poor?
   1 - Excellent
   2 - Very Good
   3 - Good
   4 - Fair
   5 - Poor

Medical Help-Seeking

HE3. Have you been to a dentist in the past year?
   1 – Yes
   2 – No

HE4. Do you have a medical doctor who you see regularly?
   1 – Yes
   2 – No

<table>
<thead>
<tr>
<th>HE5. In the past year, have you been to any of these places for health care?</th>
<th>Yes (1)</th>
<th>No (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) A hospital clinic?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) The local public health department?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Planned Parenthood or Family Planning Clinic?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) A private doctor’s office?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) An emergency room?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f) A community mental health center?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g) Another kind of health care clinic or office? (SPECIFY):</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
HE6. In the past year, have you been to a medical person, not counting your school nurse, for any of the following reasons?

<table>
<thead>
<tr>
<th>Reason</th>
<th>Yes (1)</th>
<th>No (5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) For a regular check-up?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>b) For a sports physical?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>c) For a sore throat, a cough, a bad cold, a high temperature, or an ear ache?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>d) For an injury you got during a fight or from other violence?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>e) For an injury you got during an accident?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>f) For immunization shots?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>g) To be treated for taking too many drugs or drinking too much alcohol?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>h) To talk about emotional problems?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>i) To be treated for an asthma attack?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>j) To get information about birth control?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>k) To be tested for a sexually transmitted disease like AIDS, gonorrhea, herpes, and so on?</td>
<td>☐</td>
<td>☐</td>
</tr>
<tr>
<td>l) To be treated for an STD?</td>
<td>☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

HE7. Do you have a health clinic in your school?

1 – Yes
2 – No → GO TO HE8

HE7a. Have you used the clinic in the past 12 months?

1 – Yes
2 – No → GO TO HE8

HE7b. What did you go to the clinic for?

___________________________________________
HE8. INTERVIEWER CHECKPOINT (REFE TO DM5.1)

1 – DM5.1 equals 1  GO TO HE12a
5 – DM5.1 equals 5

HE12. Now I’d like to ask you just a few personal questions. Have you ever had sex?

1 – Yes
5 – No  GO TO HE15

HE12a. (Now I’d like to ask you just a few personal questions.) At what age did you first have sex?

____________ AGE

HE13. During the last month, how often have you had sex?

1 – Not at all
2 – Once
3 – 2-4 times
4 – 5 times or more

HE14. How many different partners have you had in the last 6 months?

____________ NUMBER

HE15. What do you think are your chances of getting the HIV/AIDS virus? Would you say high, medium, low, or none?

1 – High
2 – Medium
3 – Low
4 – None

HE16. What do you currently weigh? ________________

HE17. How tall are you? ______ Feet ________ Inches

HE18. Are you trying to lose weight?

1 – Yes
2 – No

HE19. Do you consider yourself to be underweight, just about right, or overweight?

1 – Underweight
2 – Just Right  → GO TO HE20
3 – Overweight
HE19a. Is that very, somewhat, or only a little (underweight/overweight)?

1 – Very
2 – Somewhat
3 – Only a Little

HE20. **INTERVIEWER CHECKPOINT** (SEE R’S SEX)

☐ 1 - R IS FEMALE  ⇒ **GO TO NEXT SECTION**

☐ 2 - R IS MALE  ⇒ **GO TO HE21**

HE21. Would you say your body hair, meaning underarm and pubic hair, has not yet started growing, has barely started growing, has definitely started growing, or is hair growth completed?

1 - Has not yet started growing
2 - Has barely started growing
3 - Has definitely started growing
4 - Hair growth completed

HE22. Have you noticed a deepening of your voice? Would you say your voice has not yet started changing, has barely started changing, your voice change is definitely underway or voice change is completed?

1 - Has not yet started changing
2 - Has barely started changing
3 - Voice change is definitely underway
4 - Voice change completed

HE23. How advanced is your physical development compared to other boys your age? Would you say you look younger than most, you look younger than some, you look about average, you look older than some, or you look older than most?

1 - Look younger than most
2 - Look younger than some
3 - Look about average
4 - Look older than some
5 - Look older than most
### NEIGHBORHOOD (NH)

<table>
<thead>
<tr>
<th>NH1.</th>
<th>How true is each of the following statements about your neighborhood – very true, somewhat, not very, or not at all true? (IF NEC: Is this very, somewhat, not very, or not at all true?)</th>
<th>Very (1)</th>
<th>Some What (2)</th>
<th>Not Very (3)</th>
<th>Not At All (4)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a)</td>
<td>I feel safe being out alone in my neighborhood during the day.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b)</td>
<td>I feel safe being out alone in my neighborhood at night.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c)</td>
<td>I have neighbors who would help me if I had an emergency.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d)</td>
<td>People in my neighborhood are friendly.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
<tr>
<td>e)</td>
<td>People in my neighborhood trust each other.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
<tr>
<td>f)</td>
<td>People in my neighborhood look out for each other.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
<tr>
<td>g)</td>
<td>People often get mugged or attacked in my neighborhood.</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Neighborhood Safety - NSBA**

NH2. How often are there problems with muggings, burglaries, assaults or anything else like that in your neighborhood? Would you say these things happen very often, fairly often, not too often, hardly ever or never?

1 - Very often  
2 - Fairly often  
3 - Not too often  
4 - Hardly ever  
5 - Never

NH3. How much of a problem is the selling and use of drugs in your neighborhood? Would you say it is a very serious problem, fairly serious, not too serious, or not serious at all?

1 - Very serious  
2 - Fairly serious  
3 - Not Too serious  
4 - Not Serious at all
Now I have a few questions for you about your feelings regarding the terrorist attacks on New York and Washington, DC on September 11. It’s important to find out how people are coping with these attacks, and we’ve found that many people appreciate the opportunity to talk about how they feel. However, if I ask you a question that you don’t want to answer, let me know and we’ll go on to the next question.

TR1. How did you first learn about the attacks?

INTERVIEWER: DO NOT READ CODE LIST

1. Saw it on television (GO TO TR2)
2. Heard about it from someone (A Friend, Co-worker, or Family Member) (GO TO TR2)
3. Saw the story on the internet (GO TO TR2)
4. Received a telephone call (GO TO TR2)
5. Heard it on the radio (GO TO TR2)
6. Read about it in the newspaper (GO TO TR2)
7. Witnessed attack from location outside building (GO TO TR1b)
8. Was in one of the buildings when attacked (GO TO TR1b)
9. Other (SPECIFY: TR1a. ____________________)

TR1b. Were you injured?

1. Yes
2. No
3. Don’t Know
4. Refused

TR2. Did someone close to you witness the attack in New York, Washington, or Pennsylvania, first hand? That is, not on television, but in person.

1. Yes
5. No (GO TO TR3)
9. Don’t Know (GO TO TR3)
8. Refused (GO TO TR3)

TR2a. Who was that?

1. Parent (GO TO TR2c)
2. Sibling (GO TO TR2c)
3. Child (GO TO TR2c)
4. Spouse (GO TO TR2c)
5. Second Degree Relative (e.g., Cousin, Nephew, Aunt) (GO TO TR2c)
6. Other Relative (GO TO TR2c)
7. Romantic Partner (GO TO TR2c)
8. Friend (GO TO TR2c)
9. Neighbor (GO TO TR2c)
10. Co-Worker (GO TO TR2c)
11. Acquaintance (GO TO TR2c)
12. Other (SPECIFY: TR2b____)
99. DON’T KNOW (GO TO TR2c)
98. REFUSED (GO TO TR2c)

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TR2c. (Was this person/Were these people) injured?
   1. Yes
   5. No
   9. Don't Know
   8. Refused

TR3. Was someone close to you in any of the buildings when they were attacked?
   1. Yes
   5. No  (GO TO TR4)
   9. Don't Know  (GO TO TR4)
   8. Refused  (GO TO TR4)

TR3a. Who was that?
   1. Parent  (GO TO TR3c)
   2. Sibling  (GO TO TR3c)
   3. Child  (GO TO TR3c)
   4. Spouse  (GO TO TR3c)
   5. Second Degree Relative
      (e.g., Cousin, Nephew, Aunt)  (GO TO TR3c)
   6. Other Relative  (GO TO TR3c)
   7. Romantic Partner  (GO TO TR3c)
   8. Friend  (GO TO TR3c)
   9. Neighbor  (GO TO TR3c)
   10. Co-Worker  (GO TO TR3c)
   11. Acquaintance  (GO TO TR3c)
   12. Other (SPECIFY: TR3b____)
   99. Don't Know  (GO TO TR3c)
   98. Refused  (GO TO TR3c)

TR3c. Do you know what happened to (this person/these people)?

INTERVIEWER: DO NOT READ CODE LIST
   1. Died  (GO TO TR4)
   2. Missing  (GO TO TR4)
   3. Injured  (GO TO TR4)
   4. Escaped Without Harm  (GO TO TR4)
   5. Other (SPECIFY: TR3d______)  (GO TO TR4)
   9. Don't Know  (GO TO TR4)
   8. Refused  (GO TO TR4)

TR4. How much--if any--has the attack shaken your own personal sense of safety and security? Has it shaken that a great deal, a good amount, not too much or not at all?

IF R IS UNSURE, PROBE: How much, if any, has the attack made you feel unsafe?

   1. A Great Deal
   2. A Good Amount
   3. Not Too Much
   4. Not At All
   9. Don't Know
   8. Refused
MEDIA (ME)

ME1. Please tell me how many hours you do each of the following in a typical weekday. How many hours do you spend… (IF NEC: How many hours do you spend…)

<table>
<thead>
<tr>
<th></th>
<th>None (0)</th>
<th>One or Less (1)</th>
<th>Two (2)</th>
<th>Three to Four (3)</th>
<th>Five or More (4)</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) …watching music videos on TV?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>b) …watching other TV shows?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>c) …listening to music?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>d) …going to the movies?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>e) …reading magazines?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>f) …reading books?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>g) …playing video games?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>h) …talking on the telephone?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>i) …how many hours do you spend using email or chat rooms?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>j) …not including email or chat rooms, how many hours do you spend on the internet, or World Wide Web?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>k) …playing computer games?</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

Perceived Realism Measures/Identification

Please tell me if you strongly agree, somewhat agree, somewhat disagree or strongly disagree with the following statements about TV.

ME3. TV content reflects everyday life.

1 – Strongly Agree  
2 – Somewhat Agree  
3 – Somewhat Disagree  
4 – Strongly Disagree

ME4. It is easy to identify with the characters I see on TV.

1 – Strongly Agree  
2 – Somewhat Agree  
3 – Somewhat Disagree  
4 – Strongly Disagree

GO TO RCIntro – RECONTACT SHEET