

Strategic Prevention Framework State Incentive Grant Cohorts III/IV/V

*Participant Level Instrument (PLI) Implementation
Guide: Collecting Participant Level Data Using the
Approved Adult and Youth Programs Survey Forms*

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Overview

The Participant Level Instrument (PLI) is one of three cross-site instruments implemented to help SAMHSA/CSAP monitor the progress of the Strategic Prevention Framework State Incentive Grant (SPF SIG) initiative. Cohort V grantees must ensure that at least some of their sub-recipients implement individual-level strategies with SPF SIG funds and are therefore able to report participant level data using the PLI. For Cohort III and IV grantees, grantee-specific requirements must be arranged with State Project Officer. The PLI consists of SAMHSA's National Outcome Measures (NOMS) and a menu of additional common alcohol measures. There are two forms of the PLI, one for adults and one for youth (ages 12 to 17 years). The PLI should be completed by all program participants involved in a direct service intervention implemented as part of the SPF SIG process regardless of its duration. To minimize respondent burden and decrease completion time, grantees have the option to select only the NOMs measures from the PLI that are relevant based on site-specific targeted program outcomes. Information from this instrument will be used to assess participant level change and to determine the specific types of interventions and strategies that work, for which populations, and under what circumstances. This document is a guide to administering the PLI.

Participant-Level Instrument (PLI) Data Collection Requirements

For each participant involved in a direct service program implemented as part of the SPF SIG process the minimum data collection requirements include a baseline survey, an exit survey and a follow-up survey.

1. The baseline survey data collection must be conducted before the participant has been exposed to any intervention services and can be conducted any time during the 30 days preceding program entry. This first data collection point establishes a baseline by gathering information about behaviors and attitudes before being exposed to the program.
2. The exit survey must be administered after the participant has completed the entire program but no later than 10 days after program completion. The exit survey is the second data collection point that provides information about a participant's behaviors and attitudes immediately following exposure to a

program. Comparing baseline and exit survey results provides information about the program's effect on desired outcomes.

3. The followup survey must be administered to program participants at least three months after program exit and no later than six months after program exit. The follow-up survey is the third data collection point that provides information about program affected the participant's behaviors and attitudes over time. The follow-up data collection schedule should be established during program planning. Follow-up surveys should be conducted within 30 days before or after the scheduled time-point.

Tailoring the PLI to Meet Site-Specific Needs: Selection of PLI Items

The PLI consists of SAMHSA's National Outcome Measures (NOMS) and a menu of additional common alcohol measures. Grantees have the option to select only the NOMs measures from the PLI that are relevant based on site-specific targeted program outcomes. For example, if the intervention program is specific to marijuana then only questions specific to marijuana use, perceived risks of marijuana use, and attitudes and experiences with marijuana would be required. In addition, surveys measuring outcomes resulting from direct service intervention programs lasting less than 30 days are not expected to include 30-day use measures but should include attitude or risk perception questions relevant to the program's targeted outcomes. The questions pertaining to the demographic characteristics of the participant (i.e., gender, Hispanic, race, birth month, and year, military item) **must** be included on all surveys. Using questions included in the menu of additional alcohol measures is voluntary.

Additional local evaluation items or instruments may be administered with, but not instead of, CSAP's approved list of NOM's items. Questions with similar item wording or response choices will not be accepted as meeting the grant's requirement to collect program-level NOMs data. Local items that do not appear on the PLI will not be accepted or used by the cross-site evaluation.

Because adults and youth have different experiences and prevention needs CSAP provides two versions of the PLI, one for Youth and one for Adults. The Adult and Youth instruments have some shared items, though some of these items have subtle wording differences. In addition, there are some youth-only and adult-only questions. *To get good quality data, it is important to administer the appropriate instrument (items) to the appropriate age groups.*

- The Youth Programs Survey Form should be administered to program participants ages 12-17.

- The Adult Programs Survey Form should be administered to participants 18 years old or older.

Participants who are 12 to 17 years old at the time they take the baseline survey (that is, before they start the program) should be given the Youth Form. Participants who are 18 years old or older at baseline should be given the Adult Form. **It is important to keep in mind that all participants who were given the Youth Programs Survey Form at baseline should also be given the Youth Programs Survey Form at exit and followup, even if some are 18 years old or older by the time of the exit or followup surveys.**

Translation of the PLI

The Adult and Youth PLI are only available in English at this time. Grantees with specific language needs should contact their CSAP Project Officer to discuss these needs. Any plans to translate the PLI or modify the instructions for local purposes should be shared with the SPF SIG Cohort 3/4/5 Cross-site Evaluation Federal Project Officer (Frank Winn, frank.winn@samhsa.hhs.gov) and the SPF SIG Cohort 3/4/5 Cross-site Evaluation DACCC Team Lead (Kelly Vander Ley, kvanderley@rmccorp.com).

Data Submission

Grantees should submit all available data collected with the PLI including data from participants who failed to take one or more of the scheduled surveys. Grantees will have the option of entering the data by hand into the Management Reporting Tool (MRT) or uploading an existing data file into the MRT. The PLI data may be manually entered into the MRT by the grantee-level evaluator, a community-level evaluator, or other designated staff. Directions for how to manually enter PLI data are outlined in the Participant Level Instrument (PLI) Data Entry Training Manual. Only the grantee-level evaluator will have permission to upload PLI data into the MRT using data files formatted to the specifications outlined in the Participant Level Instrument (PLI) Codebook Specifications and Uploading Training Manual. Training videos on both PLI data submission processes (manual data entry and the uploading function) can be viewed at:

<http://kitusers.kithost.net/support/diticsupport/MRT/SPFSIGInstrumentsGLICLIPLITrainingVideos/tabid/1114/Default.aspx>

These training videos provide a demonstrative training experience for users to get a "feel" for how to use the system.

Additional Information

For content questions relating to the PLI item or response definitions contact the DACCC SPF SIG 3/4/5 Cross-site Evaluation Team:

- Kelly Vander Ley (kvanderley@rmccorp.com)
- 1-800-788-1887

For technical questions relating to the navigation of the MRT PLI Data Entry or Uploading Function contact DITIC Support Help Desk:

- dirticsupport@kitsolutions.net
- 1-888-DITIC-4-U (1-888-348-4248)
- Prevention Management Reporting and Training System
<https://www.pmrts.samhsa.gov/pmrts/>

General Administration Guidelines

The success of your data collection depends on careful preparation. This section provides general guidelines to help you plan and carry out your data collection activities. You should work out detailed arrangements within the context of your own local program. Major issues concerning the administration of the instruments should be determined in consultation with the SPF SIG grantee-level evaluator. The Cross-site Evaluation Federal Project Officer (Frank Winn, frank.winn@samhsa.hhs.gov) should be made aware of and approve any deviations to the guidelines discussed throughout this manual.

Guideline: Develop a Storage System

Over the life of the SPF SIG, each funded subrecipient will be collecting information that must be documented and organized. Each person responsible for data management at the community-level will be required to store

1. completed surveys until they are entered online or assembled into a data file for upload via the MRT.
2. consent forms (if applicable), and

3. tracking forms for each of the participants expected to complete a PLI.

Set up your filing and storage system before you start to collect data.

Guideline: Choose an Impartial Evaluator to Administer the PLI

It is strongly recommended that local community members who are not directly involved in the delivery of the direct services being evaluated administer the PLI. Staff who participate in the administration should be trained to follow the guidelines presented in this manual.

During the survey administration, a program staff person should be onsite to introduce the survey administrator. The program staff member may then leave the room and come back later to talk to participants and conduct the debriefing.

Guideline: Arrange for a Time and Place of Administration

Develop a clear understanding with program staff concerning the time and place of the PLI administration well ahead of time. The room where the survey is conducted should have adequate seating to accommodate the group(s) being tested, have adequate lighting and ventilation, and the seating should be spaced to ensure privacy.

Guideline: Familiarize Yourself with the Questionnaire

It is critical that the survey administrator be familiar with the survey prior to administering it to participants. Carefully study the survey until you become familiar with the wording of all items. Relate the different parts of the questionnaire to the item structure (outlined in Section V: Review of Survey Items) for an understanding of the purpose of each set of items. The administrator should be prepared to answer questions from respondents regarding the survey items.

Guideline: Assign Individual Identification Numbers

Assign a unique identifier (ID) to each participant expected to complete the PLI. The ID should be unique for each participant in your service area. The first page of the PLI provides a space for up to 11 characters for the ID. The MRT will accept any alphanumeric code including numbers, letters, and symbols. This ID is used in order to track the responses of program participants over time. Each participant's ID should be written on the face (cover) sheet of the PLI. This ID should be written on the survey prior to it being provided to the participant. Participant names must not be written on any page of the PLI. It is important to

keep a separate list linking the participants' names and IDs in a safe place separate from the completed surveys.

It is common practice for the ID to be created in such a way to help the survey administrator easily identify a participant's location. For example if an intervention is being delivered through the schools, the survey administrator may use the first 3 characters of the ID to identify the district, the next 2 characters to identify the school building, the next number to identify the grade, and the next 5 characters to uniquely identify the participant. Although this practice can save time spent on records management it is important to remember that the ID should not be obvious or decodable by individuals that should not have access to the participant's responses.

PLI Administration Procedures

This section outlines the specific procedures for administering the PLI.

Administration Staff

As mentioned in the General Administration Guidelines section of this manual, it is strongly recommended that local community members who are not directly involved in the delivery of the direct services being evaluated administer the PLI. Staff who participate in the administration should be trained in good practices for maintaining participant privacy and confidentiality.

One or more survey administrators (proctors) should be present during the survey in order to explain the process and to answer any questions that may arise. Additional involvement of the proctor in the survey administration will vary depending upon the reading level and language skills of the respondents. Depending on their reading levels, some respondents may need partial proctoring (certain items read aloud) or full-proctoring (the entire instrument read aloud). In all cases, the respondent should fill out his or her own PLI.

Administration Time

Because subrecipient communities have the option of developing site-tailored instruments by selecting relevant measures from the NOMs Adult and Youth Programs Survey Forms based on site-specific targeted program outcomes the PLI completion time will vary. No site-specific

instrument created in this fashion should exceed an average completion time of 24 minutes. It is recommended that extra time be allotted for distributing the questionnaires, reading the instructions, collecting the completed questionnaires, and any additional local administration activities (e.g., distributing incentives, collecting tracking information).

Administration Setting

The PLI is designed to be administered in individual or group settings. The administration should be conducted in a quiet room with sufficient lighting and space, and with desks or tables to seat the respondents. Some of the questions are sensitive. Therefore, the seating arrangement should provide privacy for each respondent and maximize confidentiality.

Pre-administration Tasks

Before each administration, the survey staff should prepare the survey by entering the assigned ID, administration date, survey type (i.e., baseline, exit, first follow-up, second follow-up), program name, and cohort number on the front (cover) page. Preparing the surveys in advance will help reduce coding errors or missing information.

Administration Materials

In addition to the prepared surveys, the following materials are needed for each administration session:

- **No. 2 Pencils:** Pencils should be provided to participants for marking their responses on the PLI. If machine readable forms are used a No. 2 pencil is usually recommended. Bring enough pencils for everyone who will be in the session and a few extras in case they are needed.
- **A Large Envelope or Folder:** The envelope or folder should be used to store the completed surveys until they are entered or uploaded into the MRT.
- **Roster:** It is crucial to have a roster available with the participants' names and IDs. This roster serves as a crosswalk between the study participants' names and their unique identifier. The roster will be the only means of linking the completed questionnaire to the respondent. The roster should also include each respondent's other local identification number, if another local number is used by the site. This roster should be kept in a safe place separate from completed surveys.

- **Incentive Materials:** These materials will be determined locally. Procedures for documenting the distribution of incentives are the responsibility of the subrecipient.

Survey Introduction

Introduce the survey with a statement similar to the following:

This survey is voluntary. If you choose to take it, you may skip any question you don't want to answer. If you decide not to fill out this form, it will have no effect on your participation in direct service programs.

This survey asks about your experience and opinion on a number of things related to alcohol, tobacco, and drug use. Your answers to these questions will be confidential. That means no one will connect your answers with your name or any other information about you that can identify who you are. To help us keep your answers secret, please do not write your name on this survey form.

The information in this survey will be used to learn more about the effectiveness of programs in preventing substance abuse and protecting youth.

This is not a test, so there are no right or wrong answers. Some questions may ask you to select all of the answers that are relevant, and others ask you to select a single answer. If the question asks for a single answer and you don't find an answer that exactly fits, choose one that comes closest.

Thank you for agreeing to participate in this survey.

Survey Instructions

Read the following instructions to the survey respondents:

- 1. Some of the questions allow you to select more than one answer, by saying "select all that apply" or "select one or more." If the question does not say either of these, then select only **one** answer. If you don't find an answer that fits exactly, choose the one that comes closest.*

- 2. Mark your answers carefully so we can tell which answer you chose. Make heavy dark marks that **fill the square completely**. Do not mark between the squares.*
- 3. We would like you to work fairly quickly so that you can finish on time. Please work quietly by yourself. Raise your hand to let me know if you have a question or don't understand something.*
- 4. We think you will find the survey to be interesting and that you will enjoy filling it out. Before we begin, do you have any questions?*
- 5. Thank you very much for being an important part of this effort!*

Full Proctoring of the PLI

Administering the questionnaire to respondents with limited reading abilities may require full proctoring (reading the entire common questionnaire aloud to respondents). Full proctoring requires more time than self-administration. Prior to this type of session, it is recommended that the administrator practice reading the questions aloud several times. At the beginning of the survey, the administrator should instruct the respondents on how the questionnaire will be read to them. It is important to tell the respondents not to answer the questions out loud, but to simply mark their answers in the questionnaire.

Responses to Questions During the Administration

The survey is designed to be self-administered. During the administration, it may be necessary to respond to respondents' questions about the meaning of certain questions. You can provide verbal clarification to help the respondents. Answer directly any questions related to the proper reading of a word or understanding of its meaning. If a respondent indicates that s/he does not know the meaning of a word, define it in simple terms. The last section of this guide provides a review of the NOMs items including recommended responses to potential issues and questions that may be raised by Respondents. If a respondent asks a question about the meaning or intent of a question not covered in this guide, tell him or her to "answer according to what it means to you."

Answers to respondent questions should be restricted to clarifying the question in terms of wording and intent and explaining words or expressions that the respondent does not know. The survey administrator or proctor should not suggest a response category, even if the answer to the question is very obvious. For example, if the respondent asks what “gender” means, the proctor should not give a response such as “You are male (or female), so mark that square,” no matter how obvious the respondent’s gender appears. The appropriate response in this case would be “Somebody’s gender is whether they are male or female.”

If respondents at your site have serious problems understanding the surveys, please contact the Cross-site Evaluation Federal Project Officer (Frank Winn, frank.winn@samhsa.hhs.gov) and the Cross-Site Evaluation DACCC Team Lead (Kelly Vander Ley, kvanderley@rmccorp.com)

Administration Conclusion

When everyone has completed their surveys, collect the survey from each respondent. Place the questionnaires in the envelope or folder.

Thank all of the Respondents for taking the time to help with the project.

Conclude with this debriefing statement:

Some of the questions on this survey may have raised some troubling questions or issues for some of you. If there is anyone who feels s/he would like to talk to someone about any of your concerns, please see _____. S/he will be glad to listen to you and provide whatever help s/he can.

Makeup Administrations

When scheduled administrations of the instrument are complete, check the group roster to determine if any scheduled respondents missed the session. If there are missing respondents, take the following steps:

- If this was a baseline survey, the make-up survey administration should occur prior to the first intervention session. All baseline surveys must be completed prior to the beginning of intervention services.

- Try to arrange another time to administer the questionnaire.
- If more than one respondent missed the administration, try to arrange a group makeup time.
- If a respondent misses a group makeup, or if a group makeup cannot be arranged, make reasonable efforts to administer the questionnaire individually.
- If a respondent misses a survey and a makeup is not possible, the participant should still complete all subsequent surveys and their responses should be included in the submitted data.

Review of CSAP NOMs Items

This section provides a detailed review of SAMHSA’s NOMs items found in the Adult and Youth PLI. Questions are grouped by topic and for each item, or group of items, potential issues are identified, and one or more recommended solutions are provided for each potential issue. The potential issues focus on questions that respondents may ask about the items in the questionnaire. The recommended solutions are appropriate responses to questions that respondents may ask. Following the recommended solutions will allow for consistency in the way the questionnaire is administered across settings and sites.

Survey Section: Facts About You

1. What is your gender? (Check one)

Potential Issue: Respondent may have gender identity issues. For example, s/he may feel and act like a girl even though biologically male, or vice versa. This may create confusion about which category to select.

Recommended Solution: Say, “Select the answer that you feel closest to at this time.”

2. Are you Hispanic or Latino? (Check one)

Potential Issue: Some Respondents may not understand the question.

Recommended Solution: Ask the Respondent if he/she identifies him/herself as a Hispanic/Latino (a) or Chicano/a. More specifically, does s/he believe that her/his ancestors come from Spain, Mexico, Puerto Rico, Cuba, or some other Spanish-speaking country in

Central or South America or the Caribbean? In any of these cases, the correct response would be “Yes.” The proctor should refrain from making deductions from the respondent’s name, accent, or any other ethnic marker and suggesting the correct response. The intent of this question is to learn what the respondent believes about his or her ethnic origins.

3. What is your race? (Mark all that apply)

Potential Issue #1: The Respondent may be confused about which square to fill in.

Recommended Solution #1: Explain that the respondents are to mark all of the racial groups they think they belong to. They may mark more than one group. For example, if the respondent indicates they are half Asian & half African-American, they should fill in both the squares for Asian and African American. The intent of the question is to determine what race the respondent considers himself or herself. For those respondents that mark “yes” to the Hispanic ethnicity in Question 5, ask them to also mark any of the races in question 6 that apply to them.

Potential Issue #2: The respondent has answered “Yes” to the Hispanic ethnicity question and wonders why s/he has to answer another race question.

Recommended Solution #2: The Federal Government makes a distinction between Hispanic ethnicity and race because Hispanics may belong to several races. For example, there are White Hispanics as well as Hispanics of African origin. Explain this to the respondent and suggest that it is possible to select a race even if one defines oneself as Hispanic. Please refrain from suggesting the correct racial category for the respondent even if there are visible race markers. The intent of this question is to learn the respondents’ self definitions.

4. What is your date of birth (month/year)?

Comments on Item 4: These questions are asked to determine the respondent’s age.

Potential Issue: Respondent may not remember exact month or year of birth.

Recommended Solution: Unlike most of the other questions on this questionnaire, we are interested in learning the truth about the respondents’ birth date, not their beliefs. It is therefore acceptable for the proctor to help the respondent remember. For example, the proctor may remind the respondent that their Drivers’ License, Social Security Card, Student

ID Card, or other identification document may contain birth date, and help the respondent transfer the information from such a document to the questionnaire. If the respondent has no such document, the proctor should not make a guess. Instead, the respondent should be instructed to provide their best estimate. Most people remember the month and day of their birth date because it is celebrated every year, but may have forgotten the year of birth. In that case, it is acceptable to ask the respondent how old s/he was on his/her last birthday and to help them calculate their year of birth. If neither of these solutions is possible, the respondent should be instructed to provide their best estimate. Proctors should refrain from making a guess themselves.

5. (Adult Only) Have you ever served in the Armed Forces, in the Reserves, or the National Guard [select all that apply]?

Comments on Item 5, 5a, and 5b Adult Only: These question ask about the respondents past and current military status and deployment.

Potential Issue #1: Respondents may not know which response applies to the Army, Air Force, Marine Corp, Navy, and Coast Guard.

Recommended Solution #1: If the respondent most recently served in one of the branches of the Armed Forces listed above, please have them indicate the “Yes, in the Armed Forces” response option.

Potential Issue #2: Respondents may have served in more than one.

Recommended Solution #2: Please have him/her indicate all that apply.

5a. (Adult Only) Are you currently on active duty in the Armed Forces, in the Reserves, or the National Guard [select all that apply]?

Potential Issue #1: Respondents may be serving in one branch of the Armed Forces and retired from another branch.

Recommended Solution #1: Please have the respondent indicate the current branch of the Armed Forces in which they are currently serving.

Potential Issue #2: The respondent may not know what is meant by active duty.

Recommended Solution #2: Active duty is similar to working at a full-time civilian job. There are hours when, as a Service Member, individuals will be training or performing a military job.

5b. (Adult Only) Have you ever been deployed to a combat zone [select all that apply]?

Potential Issue: Respondents may have served in more than one combat zone.

Recommended Solution: Please have him/her indicate all that apply.

6. Is anyone in your family or someone close to you on active duty in the Armed Forces, in the Reserves, or the National Guard, or separated or retired from Armed Forces, Reserves, or the National Guard?

Comments on Item 6 Adult/ 5 Youth: These questions ask the respondent to report on the number of family members and close friends serving in the military.

Potential Issue #1: The respondent may not know the additional branches of the Armed Forces.

Recommended Solution #1: In addition to the Reserves and the National Guard, the Armed Forces includes the Army, Air Force, Marine Corp, Navy and Coast Guard.

Potential Issue #2: The respondent may not know what is meant by active duty.

Recommended Solution #2: Active duty is similar to working at a full-time civilian job. There are hours when, as a Service Member, individuals will be training or performing a military job. The respondent should also complete these items if they have a family member or know someone close to them who is in the Reserves or Armed Forces.

Potential Issue #3: The respondent may not know who to include as a family member or someone close.

Recommended Solution #3: A family member or someone close to you can be anyone you care about. This list can include but is not limited to parents, spouses, children, step-parents, siblings, step-siblings, grandparents, uncles, aunts, cousins, or friends. If you want to include someone not listed on the form, check other, and write in how that person is related to you.

7. Service Member's relationship to you

Comments on Item 7 Adult/ 6 Youth: These questions ask the respondent to report who in their family served in the military. The form allows for the respondent to report on up to six people.

Potential Issue: The respondent may have more than six family members or know multiple individuals in the Armed Forces, the Reserves or the National Guard who are close to him/her.

Recommended Solution: Have the respondent indicate the service members to whom he or she feels the closest.

Comments on Item 7a-7d Adult/ 6a-6d Youth: These questions ask the respondent to report on where their family member was deployed and if their family member's military service resulted in any health related consequences. The respondent should report on the people that were counted in the previous question (7 Adult/6 Youth).

7a. Deployed in support of combat operations (e.g., Iraq or Afghanistan)?

7b. Was physically injured during combat operations?

7c. Developed combat stress symptoms/ difficulties adjusting following deployment, including PTSD, depression, or suicidal thoughts?

7d. Died or was killed?

Potential Issue #1: Respondent may not understand what is meant by "difficulties adjusting."

Recommended Solution #1: Difficulties adjusting includes any negative changes in behavior after deployment. For example, **sometimes when people** in the military are moved to different places around the world where there is fighting, **they feel sad or seem angry a lot of the time.**

Potential Issue #2: Respondent may not understand what is meant by "deployed in support of combat operations."

Recommended Solution #2: Some people in the military people are moved to different places around the world where there is fighting.

Survey Section: Cigarettes, Alcohol, and Other Drugs

General Section Comments: This set of questions asks about the use of alcohol, tobacco, and other drugs, and how people feel about substance use. Many of the questions ask about substance use within the past 30 days. These questions do NOT assume that a respondent has used alcohol, tobacco, or other drugs. Respondents who have not used the substance should report that they have used it zero (0) days.

Potential Issue #1: Respondents may be uncomfortable answering questions about health behaviors and illicit drug usage.

Recommended Solution#1: Remind respondents that their names are not on the survey and information will not be reported at an individual level. Also explain that these questions are being asked of everyone and that no assumptions are being made about them, personally.

Potential Issue #2: A respondent may have difficulty recalling behaviors within certain time frames.

Recommended Solution #2: Explain that we only expect them to provide their best estimate and ask them to try to recall to the best of their ability.

Potential Issue #3: Respondents may be unclear as to the meaning of certain terms in this section.

Recommended Solution #3: Definitions are provided throughout this section, and common street terms of certain substances are also included. More detailed solutions are provided on a question-by-question basis.

8. Think back over the past 30 days and report how many days, if any, you used the following substances:

Comments on Items 8a-8e (Adult/Items 7a-7e Youth): These items are asking the respondents use of tobacco, alcohol, marijuana, and other illegal and specific drugs over the past 30 days. The specific definition of each substance is defined within the question. Again, Respondents who have not used the substance during that time period should report that they have used it zero (0) days.

8a. During the past 30 days, on how many days did you smoke part or all of a cigarette? (Include menthol and regular cigarettes and loose tobacco rolled into cigarettes)

Potential Issue: Question may be unclear to the respondent.

Recommended Solution: Tell the respondent we are interested in the number of days, not the number of cigarettes, drags, puffs, or occasions. We are also not asking how many cigarettes per day they smoke.

8b. During the past 30 days, on how many days did you use other tobacco products? (Include any tobacco product other than cigarettes such as snuff, chewing tobacco, and smoking tobacco from a pipe)

Potential Issue: Question may be unclear to the respondent.

Recommended Solution: Tell the respondent we are interested in the number of days, not the amount of substances or the number of puffs or occasions.

8c. During the past 30 days, on how many days did you drink one or more drinks of an alcoholic beverage? (Include beer, wine, wine coolers, malt beverages and liquor)

Comments on Item 8c: This question is about alcohol. There are different groups of people in the United States that may use alcohol for religious reasons. However, this may not be true for every respondent's religious, cultural, or ethnic group. For example, some churches serve wine during a church service. Tell the respondent that if he/she drinks wine at church or for some other religious reason, they should not count these times in their answers to the questions below.

Potential Issue: Question may be unclear to the respondent.

Recommended Solution: Tell the respondent we are interested in the number of days, not the amount sips or occasions.

8d. During the past 30 days, on how many days did you use marijuana or hashish? (Also known as grass, pot, hash, or hash oil)

Potential Issue: Question may be unclear to the respondent.

Recommended Solution: Tell the respondent we are interested in the number of days, not the number of puffs, or the number of occasions.

8e. During the past 30 days, on how many days did you use any other illegal drug? (Include substances like: heroin, crack or cocaine, methamphetamine, hallucinogens (drugs that cause people to see or experience things that are not real) such as LSD (sometimes called acid), Ecstasy (sometimes called MDMA), PCP or peyote (sometimes called angel dust); inhalants or sniffed substances such as glue, gasoline, paint thinner, cleaning fluid, or shoe polish (used to “feel good” or to get high); and prescription drugs used without a doctor’s orders, just to “feel good” or to get high.)

Comment on item 8e: These questions are about OTHER ILLEGAL DRUGS, excluding marijuana or hashish.

Potential Issue: Question may be unclear to the respondent.

Recommended Solution: Tell the respondent we are interested in the number of days, not the number of illegal drugs, or the number of occasions.

9. Think back over your entire lifetime and try to remember whether you have EVER used any of the following substances. If so, what was your age the FIRST TIME you used the substance:

Comments on items 9a-9e Adult/Items 8a-8e Youth): These items are asking the respondents about the FIRST TIME they used of tobacco, alcohol, marijuana, and other illegal drugs. The specific definition of each substance is defined within the question. If a respondent does not remember their age at first use, instruct them to enter their best estimate.

9a. Ever smoked part or all of a cigarette? (Include menthol and regular cigarettes and loose tobacco rolled into cigarettes)

Potential Issue#1: The respondent’s confusion about which square to fill in: might be unsure about how to respond based on the term “part or all.”

Recommended Solution #1: This question is interested in the age of first use regardless of the amount, even if it was just a few puffs. Someone who has never smoked should fill in the “check if NEVER” option.

Potential Issue: #2 The respondent may not be certain of age at first use of substance.

Recommended Solution #2: Ask the respondent to mark their best guess as to what age they were the first time they smoked a cigarette.

9b. Ever used any other tobacco product? (Include any tobacco product other than cigarettes such as snuff, chewing tobacco, and smoking tobacco from a pipe)

Potential Issue: Respondent confusion about which square to fill in.

Recommended Solution: This question is interested in the age of first use regardless of the amount, even if it was just a little bit. Someone who has never used these substances should fill in the “check if NEVER” option.

9c. Ever had a drink of an alcoholic beverage? Do NOT include any time when you only had a sip or two from a drink. (Include beer, wine, wine coolers, malt beverages, and liquor)

Potential Issue: The respondent may not remember exactly when they first had a drink of an alcoholic beverage.

Recommended Solution: Ask the respondent to mark their best guess as to what age they were the first time they had an alcoholic beverage. Remind them that a sip or drink of alcohol for religious purposes (i.e., first communion, Sabbath dinner, etc.) is NOT what we are asking about here. We are interested in their first drink that was not for a religious ceremony. Someone who has never used alcohol outside of a religious ceremony should fill in the “check if NEVER” option.

9d. Ever used marijuana or hashish? (Also known as grass, pot, hash, hash oil)

Potential Issue: The respondent may not remember exactly when they first tried marijuana or hashish.

Recommended Solution: Have the respondent mark their best guess as to what age they were the first time they tried marijuana or hashish, even if it was one puff from someone else’s joint. Someone who has never used marijuana or hashish should fill in the “check if NEVER” option.

9e. Ever used any other illegal drug? (Include substances like: heroin, crack or cocaine, methamphetamine; hallucinogens (drugs that cause people to see or experience things that are not real) such as LSD (sometimes called acid), Ecstasy (sometimes called MDMA), PCP or peyote (sometimes called angel dust); inhalants or sniffed substances such as glue, gasoline, paint thinner, cleaning fluid, or shoe polish (used to “feel good” or to get high); prescription drugs without a doctor’s orders, just to “feel good” or to get high)

Potential Issue #1: The respondent may not remember exactly how old they were the first time they used other illegal drugs.

Recommended Solution#1: Have the respondent make their best guess as to what age they were the first time they tried an illegal drug other than marijuana or hashish.

Potential Issue #2: Respondent may have used several of these substances and may have started using each at a different age.

Recommended Solution#2: Instruct the respondent to report the youngest age. For example, if s/he started using inhalants at age 13 and cocaine at age 18, s/he should fill in 13.

9. For each of the following five questions below check the box that shows how you think or feel.

Comments on Items 9a-9e Youth Only: The next five questions ask about the respondents’ thoughts on someone their age using alcohol, tobacco and other drugs. The questions do not assume that the respondent uses any of these substances, but asks if s/he approves or disapproves if someone (anyone) their age uses them.

9a. How do you feel about someone your age smoking one or more packs of cigarettes a day?

9b. How do you think your close friends would feel about YOU smoking one or more packs of cigarettes a day?

9c. How do you feel about someone your age trying marijuana or hashish once or twice?

9d. How do you feel about someone your age using marijuana once a month or more?

9e. How do you feel about someone your age having one or two drinks of an alcoholic beverage nearly every day?

Potential Issue: The respondent may have difficulty selecting a response option.

Recommended Solution: Explain the responses as follows:

Neither approve nor disapprove

It doesn't make a difference to me. Neither a good thing nor a bad thing to do.

Somewhat disapprove

It is not a good thing to do but I don't feel very strongly about this.

Strongly Disapprove

It is a very bad thing to do and I feel strongly about this.

Don't know or can't say

I don't know how I would feel about someone my age doing this.

10. For each of the three questions below check one box that shows HOW MUCH you think people RISK HARMING themselves physically or in other ways when they do the following things:

Comments on Items 10a-10c: These questions ask the respondents about what they think happens when people use tobacco, marijuana and alcohol. If there are any questions, remind the respondents that there are no right or wrong answers. Also mention that we are not implying that they do any of these things. We are only interested in learning how risky they think these actions are when people engage in them.

10a. When they smoke one or more packs of CIGARETTES per day?

10b. When they smoke MARIJUANA once or twice a week?

10c. When they have five or more drinks of an ALCOHOLIC BEVERAGE once or twice a week?

Potential Issue: The respondent may have difficulty selecting a response option.

Recommended Solution: Explain the response options as follows:

No risk	You think nothing bad will happen if people do this.
Slight risk	You think some bad things may happen some of the time, but usually it's safe to do this.
Moderate risk	You think something bad will happen some of the time when people do this, but the rest of the time, nothing bad will happen. It could go either way.
Great risk	You think something bad will happen most of the time when people do this.
Don't know/Can't say	You really don't know how risky it is to do this.

Survey Section: Attitudes and Experiences

11. Would you be more or less likely to want to work for an employer that tests its employees for drug or alcohol use on a random basis? Would you say more likely, less likely, or would it make no difference to you? (Check one)

Potential Issue #1: The respondent may not have been in the work force and may not know how to answer.

Recommended Solution#1: Explain to the respondent what the question means and ask them to imagine that they were considering working in a certain workplace, and they learned that the employer tests the employees for drugs or alcohol from time to time, without warning. Would this influence how much s/he wanted to work there? When they learn about the testing, would they want to work there more, less, or would it not make a difference?

Potential Issue #2: The respondent may not know what a random drug test is.

Recommended Solution #2: Explain that a person’s blood, or urine, or sometimes their hair can provide information about what substances s/he was using recently. If an employer takes samples from their employees to learn what substances they were using, that is a drug test. “Random” means that the employees are not told ahead of time when the test will be.

12. DURING THE PAST 12 MONTHS, have you driven a vehicle while you were under the influence of alcohol?

Potential Issue: The respondent may not understand what constitutes being “under the influence.”

Recommended Solution: Explain to the respondent that “under the influence” means having had enough alcohol to feel drunk or just high. For most people, more than one beer or one small glass of wine will count as being “under the influence of alcohol.”

13. (Adult Only) Now think about the past 12 months through today. DURING THE PAST 12 MONTHS, how many times have you talked with your child about the dangers or problems associated with the use of tobacco, alcohol, or drugs?

Potential Issue: Respondent may be confused by the question.

Recommended Solution: Explain to the Respondent that this question is asking, how many times they have discussed the topics of tobacco, alcohol, and drug use with their children during the past 12 months—if they currently have any children. If they cannot recall how many times, have them estimate the number to their best ability. Those who don’t have any children should mark the “don’t have any children” option.

13. (Youth Only) Now, think about the past 12 months through today. DURING THE PAST 12 MONTHS, have you talked with at least one of your parents about the dangers of tobacco, alcohol, or drug use? By PARENTS we mean your biological parents, adoptive parents, stepparents, or adult guardians—whether or not they live with you.

Potential Issue: The respondent does not have any parents.

Recommended Solution: Repeat the definition of “parent” included in the question. If the respondent is still not clear, explain that if s/he had a conversation like this with the person responsible for taking care of her/him and making important decisions for her/him, then the answer is “Yes.”

14. (Youth Only) During the past 12 months, do you recall hearing, reading, or watching an advertisement about prevention of substance abuse?

Potential Issue: The respondent may be unsure about what counts as a prevention advertisement.

Recommended Solution: Explain that sometimes, radio, TV, newspapers, magazines, or fliers and brochures in places like youth centers or hospitals talk about the bad things that can happen when people use drugs. If the Respondent has come across any such messages during the past 12 months, the answer is “Yes.”