

SCREENING SECTION (SC)

*SC1. The first few questions are for background purposes. How old are you?

_____ YEARS OLD

DON'T KNOW 998
REFUSED 999

*SC1.1. INTERVIEWER QUERY

R IS A MALE 1
R IS A FEMALE 2

*SC2. How long have you lived at your current address?

_____ NUMBER

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

DON'T KNOW 998
REFUSED 999

*SC2.1. About how many years have you lived in this state?

_____ YEARS

WHOLE LIFE 888
DON'T KNOW 998
REFUSED 999

*SC3. Are you currently married, separated, divorced, widowed, or never married?

MARRIED 1 **GO TO *SC4**
SEPARATED 2
DIVORCED 3
WIDOWED 4
NEVER MARRIED 5
DON'T KNOW 8
REFUSED 9

*SC3a. Are you currently living with someone in a marriage-like relationship?

YES 1
NO 5
DON'T KNOW 8
REFUSED 9

*SC4. How tall are you?

_____ BODY HEIGHT

CIRCLE UNIT OF MASS: FEET/ INCHES.....1 CENTIMETERS.....2

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

*SC5. How much do you weigh?

_____ BODY WEIGHT

CIRCLE UNIT OF MASS: POUNDS.....1 KILOGRAMS.....2

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

*SC7. Are you a current smoker, ex-smoker, or have you never smoked?

CURRENT 1
EX-SMOKER..... 2
NEVER..... 3
(IF VOL) ONLY SMOKED A FEW TIMES 4
DON'T KNOW 8
REFUSED 9

*SC8.1. How would you rate your overall physical health – excellent, very good, good, fair, or poor?

EXCELLENT 1
VERY GOOD..... 2
GOOD 3
FAIR..... 4
POOR 5
DON'T KNOW 8
REFUSED 9

*SC8.2. How would you rate your overall mental health – excellent, very good, good, fair, or poor?

EXCELLENT 1
VERY GOOD..... 2
GOOD 3
FAIR..... 4
POOR 5
DON'T KNOW 8
REFUSED 9

*SC9.1. How many days in the past 30 were you limited at all in carrying out your normal daily activities because of problems with your physical health, mental health, or substance use?

_____ DAYS

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

*SC10.1. Because of a physical, mental or emotional condition lasting three months or longer, do you have any difficulty in doing any of the following activities:

IF R SAYS: "I NEVER NEED TO (REMEMBER/GO OUT/WORK)", PROBE: Would you have any difficulty if you had to (remember/go out/ work)?	YES (1)	NO (5)	DK (8)	RF (9)
*SC10.1a. Learning, remembering or concentrating?	1	5	8	9
*SC10.1b. Getting along with people?	1	5	8	9
*SC10.1c. Dressing, bathing, or getting around inside your home?	1	5	8	9
*SC10.1d. Going outside your home alone to shop or visit a doctor's office?	1	5	8	9
*SC10.1e. Working at a job or business?	1	5	8	9
*SC10.1f. Participating fully in school, housework, or other daily activities?	1	5	8	9

*SC10.4. Do you have any of the following conditions?

	YES (1)	NO (5)	DK (8)	RF (9)
*SC10.4a. Blindness, deafness, or a serious speech problem?	1	5	8	9
*SC10.4b. A hearing problem that prevents you from hearing what is said in normal conversation even with a hearing aid?	1	5	8	9
*SC10.4c. A vision problem that prevents you from reading a newspaper even when wearing glasses or contacts?	1	5	8	9
*SC10.4d. A learning disability of any kind?	1	5	8	9
*SC10.4e. Any other physical handicap or disability?	1	5	8	9
*SC10.4f. Any <u>other</u> condition that substantially limits one or more basic physical activities, such as walking, climbing stairs, reaching, lifting, or carrying?	1	5	8	9
*SC10.4g. Any emotional or mental disability?	1	5	8	9

*SC10.11. INTERVIEWER CHECKPOINT: (SEE *SC10.4a - *SC10.4g)

ONE OR MORE RESPONSES CODED '1'1
 ALL OTHERS.....2 **GO TO *SC19**

*SC10.12. For how long have your activities been limited because of (CONDITION/ your health problems)?

PROGRAMMER: LET THE INTERVIEWER USE THEIR DISCRETION TO FILL "CONDITION" IN ABOVE QUESTION. WE DO NOT WANT YOU TO PROGRAM A FILL

PROBE DK: Has it been longer than 3 months?

_____ NUMBER

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

(IF VOL) ACTIVITIES NOT LIMITED 997 **GO TO *SC19**
 DON'T KNOW 998 **GO TO *SC19**
 REFUSED 999 **GO TO *SC19**

*SC10.13. INTERVIEWER CHECKPOINT: (SEE *SC10.12)

*SC10.12 EQUALS '3 MONTHS' OR LONGER1

ALL OTHERS2 GO TO *SC19

(RB, PG 2) SCALE FOR *SC10.14

- 100 Excellent functioning in all areas of life..... (e.g., superior performance at work and excellent personal relationships)
- 90 Good functioning in all areas of life..... (e.g., no problems at work or in personal life)
- 80 Slight difficulty (e.g., temporarily falling behind in work or school, minor argument with friend or relative)
- 70 Some difficulty (e.g., some work or school problems, but still generally doing well; or some interpersonal problems, but still having meaningful relationships)
- 60 Moderate difficulty..... (e.g., inadequate work or school performance or ongoing conflicts with people in your personal life)
- 50 Serious impairment in one area..... (e.g., can't keep a job or has no friends)
- 40 Serious impairment in more than one area..... (e.g., unable to work and has no friends and has conflicts with family)
- 30 Unable to function in most areas (e.g., no job, no friends, stays in bed most days)
- 20 Difficulty with basic needs (e.g., needs help with bathing or dressing or preparing meals; cannot be left alone for long periods)
- 10 Unable to meet basic needs..... (e.g., requires constant supervision or nursing home care)
- 0 Unconscious (e.g., in coma or on a life support machine)

*SC10.14. (RB, PG 2) The 0-to-100 scale on Page 2 in your booklet describes amounts of activity limitation. Using this scale, what number describes how much your activities have been limited because of your health problems during the past 3 months?

(IF NEC: You can use any number between 0 and 100 to answer.)

_____NUMBER

DON'T KNOW998

REFUSED999

*SC19. (READ SLOWLY) The rest of 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.

YES 1

NO 5

DON'T KNOW 8

REFUSED 9

INTERVIEWER: READ FOLLOWING QUESTIONS SLOWLY	YES (1)	NO (5)	DK (8)	RF (9)
*SC20. Have you ever in your life had an <u>attack of fear or panic</u> when all of a sudden you felt very frightened, anxious, or uneasy?	1 GO TO *SC20.1	5	8	9
*SC20a. Have you ever had an attack when all of a sudden <ul style="list-style-type: none"> • you became very uncomfortable, • you either became short of breath, dizzy, nauseous, or your heart pounded, • or you thought that you might lose control, die, or go crazy? 	1 GO TO *SC20.1	5	8	9
*SC20b. Have you ever in your life had an anxiety attack, when you thought you might lose your mind?	1	5	8	9
*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	8	9
*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 GO TO *SC21	5	8	9
*SC20.3 Have you ever had attacks of anger when all of a sudden you lost control and <u>threatened</u> to hit or hurt someone?	1	5	8	9
*SC21. Have you ever in your life had a period of time lasting several days or longer when most of the day you felt <u>sad</u> , <u>empty</u> or <u>depressed</u> ?	1	5	8	9
*SC22. Have you ever had a period of time lasting several days or longer when most of the day you were very <u>discouraged</u> about how things were going in your life?	1	5	8	9
*SC23. Have you ever had a period of time lasting several days or longer when you <u>lost interest</u> in most things you usually enjoy like work, hobbies, and personal relationships?	1	5	8	9
*SC23a. Have you ever had a period lasting several days or longer when you thought <u>your life had no meaning</u> , and things were not worth the trouble?	1	5	8	9
*SC24. Some people have periods of time lasting several days or longer 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 driving too fast or spending too much money. Have you ever had a period of time like this lasting several days or longer?	1	5	8	9
*SC25. Have you ever had a period of time lasting several days or longer when most of the time you were very <u>irritable</u> , <u>grumpy</u> , or in a <u>bad mood</u> ?	1	5 GO TO *SC25b	8 GO TO *SC25b	9 GO TO *SC25b
*SC25a. Have you ever had a period of time lasting several days or longer when most of the time you were so irritable that you either started arguments, shouted at people, or hit people?	1	5	8	9
*SC25b. Have you ever had a period lasting several days or longer when your thoughts were going so fast you could not control them, you felt restless, or you had difficulty controlling your behavior?	1	5	8	9

*SC26. Did you ever have a time in your life when you were a “ <u>worrier</u> ” – that is, when you worried a lot more about things than other people with the same problems as you?	1 GO TO *SCAT1	5	8	9
*SC26a. Did you ever have a time in your life when you were much more <u>nervous or anxious</u> than most other people with the same problems as you?	1 GO TO *SCAT1	5	8	9
*SC26b. Did you ever have a period of time lasting one month or longer when you were anxious or worried most days?	1 GO TO *SCAT1	5	8	9
*SC26c. Have you ever in your life had excessive worries or nervousness, when you were feeling on the edge or worrying a lot about different things?	1	5	8	9
*SCAT1. Have you ever had an episode or nervous attack where you felt totally out of control?	1	5	8	9

*SC26.1 Did you ever have a time in your life when you smoked so much that your family or friends worried about your health?

YES1
NO5
DON'T KNOW8
REFUSED9

*SC26.1a. INTERVIEWER CHECKPOINT: (SEE *SC7)

*SC7 EQUALS '3' 1 GO TO *SC26.2
ALL OTHERS 2

*SC26.1b.(*TB3) How old were you the very first time you ever smoked even a puff of a cigarette, cigar, or pipe?

IF "ALL MY LIFE" OR "AS LONG AS I CAN REMEMBER," PROBE: Was it before your teens?
IF NO/ DK, PROBE: Was it before your twenties?

_____ YEARS OLD

BEFORE TEENS..... 12
BEFORE 20s..... 19
DON'T KNOW 998
REFUSED..... 999

*SC26.1c. (*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?

_____ DAYS

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

*SC26.1d. INTERVIEWER CHECKPOINT: (SEE *SC26.1c)

*SC26.1c EQUALS '0' 1 GO TO *SC26.2
ALL OTHERS 2

*SC26.1e. (*TB10) On the days you smoked in the past 12 months, about how many cigarettes did you usually have per day?

_____ CIGARETTE(S)

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

*SC26.2 Did you ever use alcohol or drugs so much that your family or friends worried about you or repeatedly complained about your use?

YES1 GO TO *SC27
NO5
DON'T KNOW8
REFUSED.....9

*SC26.3 Did you ever use alcohol or drugs so much that it caused repeated arguments or problems either with your family or friends, people at work or school, or with the police?

YES1 GO TO *SC27
NO5
DON'T KNOW8
REFUSED.....9

*SC26.4 Did you ever use alcohol or drugs so much that it often interfered with your responsibilities at work, at school, or at home?

- YES1
- NO5
- DON'T KNOW8
- REFUSED9

INTERVIEWER: READ FOLLOWING QUESTIONS SLOWLY.				
*SC27. (RB, PG 3) The next questions are about things that make some people afraid even though they know there is no real danger. Looking at page 3 in your booklet, was there ever a time in your life when you felt <u>a lot more afraid than most people</u> of <u>any</u> of the following things?				
	YES (1)	NO (5)	DK (8)	RF (9)
*SC27a. First, bugs, snakes, dogs, or any other animals? (KEY PHRASE: animals)	1	5	8	9
*SC27b. Second, <u>still water</u> , like in a <u>swimming pool</u> or a <u>lake</u> , or weather events, like <u>storms</u> , <u>thunder</u> , or <u>lightning</u> ? (KEY PHRASE: water)	1	5	8	9
*SC27c. Third, going to the <u>dentist</u> or <u>doctor</u> , getting a <u>shot</u> or <u>injection</u> , seeing <u>blood</u> or <u>injury</u> , or being in a hospital or doctor's office? (KEY PHRASE: blood, injury, or medical settings)	1	5	8	9
*SC27d. Fourth, <u>closed spaces</u> , like <u>caves</u> , <u>tunnels</u> , <u>closets</u> , or <u>elevators</u> ? (KEY PHRASE: closed spaces)	1	5	8	9
*SC27e. Fifth, <u>high places</u> like <u>roofs</u> , <u>balconies</u> , <u>bridges</u> , or <u>staircases</u> ? (KEY PHRASE: high places)	1	5	8	9
*SC27f. Sixth, fear of <u>flying</u> or of <u>airplanes</u> ? (KEY PHRASE: flying)	1	5	8	9

*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 *SC27a-*SC27f 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 8
- REFUSED 9

*SC27.3. Did you ever stay away from (this situation/these situations) whenever you could because of your fear?

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

*SC27.4 Do you think your fear was ever much stronger than it should have been?

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

INTERVIEWER: READ FOLLOWING QUESTIONS SLOWLY.	YES (1)	NO (5)	DK (8)	RF (9)
*SC29. (RB, PG 4) Looking at page 4 in your booklet, was there ever a time in your life when you felt very afraid or <u>really</u> , <u>really</u> shy with people, like meeting new people, going to parties, going on a date, or using a public bathroom?	1 GO TO *SC29.1	5	8	9
*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?	1	5 GO TO *SC30	8 GO TO *SC30	9 GO TO *SC30

*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 8
- REFUSED 9

*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 8
- REFUSED 9

*SC29.3. Do you think your fear was ever much stronger than it should have been?

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

*SC29.4. INTERVIEWER CHECKPOINT (SEE *SC29.1, *SC29.2, *SC29.3):

- (*SC29.1 EQUALS '1' OR *SC29.2 EQUALS '1') AND *SC29.3 EQUALS '1' 1
- ALL OTHERS 2

*SC30. (RB, PG 4) Looking at the bottom of page 4 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?

YES1
NO5 **GO TO *SC31**
DON'T KNOW8 **GO TO *SC31**
REFUSED9 **GO TO *SC31**

*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?

YES1
NO5
DON'T KNOW8
REFUSED9

*SC30.2. Did you ever stay away from these situations whenever you could because of your fear?

YES1
NO5
DON'T KNOW8
REFUSED9

*SC30.3. Do you think your fear was ever much stronger than it should have been?

YES 1
NO 5
DON'T KNOW 8
REFUSED 9

*SC30.4. INTERVIEWER CHECKPOINT (SEE *SC30.1, *SC30.2, *SC30.3):

(*SC30.1 EQUALS '1' OR *SC30.2 EQUALS '1') AND *SC30.3 EQUALS '1'1
ALL OTHERS2

*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 were doing or losing interest very quickly in games or work or having trouble finishing what you started without being distracted. During your first years at school, was there ever a period of time lasting six months or longer when you had a lot more trouble with problems of this sort than most children?

YES1
NO5
DON'T KNOW8
REFUSED9

*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 period of time before the age of seven lasting six months or longer in your childhood when you were like that?

INTERVIEWER: IF ONLY IN THIRD GRADE OR LATER, CODE 'NO'.

YES1
NO5
DON'T KNOW8
REFUSED9

*SC33. Did you ever have a period of time lasting six months or longer during your childhood or adolescence when you frequently did things that got you in trouble with adults, like talking back to adults, refusing to do what they asked you to do, or being touchy or irritable?

YES1
NO5
DON'T KNOW8
REFUSED9

*SC33.1. Many children and teenagers go through periods of time 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?

YES1 **GO TO *SC34**
NO5
DON'T KNOW8
REFUSED9

*SC33.2. Did you ever go through a period of time as a child or teenager when you either broke into cars, set fires, or destroyed property on purpose?

YES1 **GO TO *SC34**
NO5
DON'T KNOW8
REFUSED9

*SC33.3. When you were a child or a teenager, 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?

YES1
NO5
DON'T KNOW8
REFUSED9

*SC34. Some young kids get very upset when they are separated from their mother or the person who they are most attached to emotionally. Examples include getting very upset when they are away from these people 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".

YES1
NO5
DON'T KNOW8
REFUSED9

*SC35. Some adults have difficulties with separation from family members, romantic partners, or close friends. Examples include getting very upset when they are away from this person, worrying a lot that this person might leave them, and being too “clingy” or dependent. Did you ever have a period of time lasting one month or longer as an adult when you had problems like this?

- YES1
- NO5
- DON'T KNOW8
- REFUSED.....9

***SCS1.0: INTERVIEWER CHECKPOINT:**

- RANDOM 25% (SERVICES SAMPLE)1
- ALL OTHERS.....2 **GO TO *SC36**

*SCS1. Have you ever in your lifetime been admitted for an overnight stay in a hospital or other facility to receive help for problems with your emotions, nerves, mental health, or your use of alcohol or drugs?

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

*SCS2. Did you ever in your lifetime go to see any of the following professionals for problems with your emotions, nerves or mental health (IF *SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR *SC26.4 EQUALS '1': or your use of alcohol or drugs)?

	YES (1)	NO (5)	DK (8)	RF (9)
*SCS2a. A psychiatrist?	1	5	8	9
*SCS2b. A general practitioner or family doctor?	1	5	8	9
*SCS2c. Any other medical doctor, like a cardiologist or (women: gynecologist / men: urologist)?	1	5	8	9
*SCS2d. A psychologist?	1	5	8	9
*SCS2e. A social worker?	1	5	8	9
*SCS2f. A counselor?	1	5	8	9
*SCS2g. Any other mental health professional, such as a psychotherapist or mental health nurse?	1	5	8	9
*SCS2h. A nurse, occupational therapist, or other health professional?	1	5	8	9

*SCS2i. A religious or spiritual advisor like a minister, priest, pastor, or rabbi?	1	5	8	9
*SCS2j. Any other healer, like an herbalist, or doctor of oriental medicine, or chiropractor, or spiritualist?	1	5	8	9

***SCS2.1. INTERVIEWER INSTRUCTION: (SEE *SCS2a - *SCS2j SERIES)**

CIRCLE ALL ENDORSED PROFESSIONAL IN *SCS2a - *SCS2j SERIES IN LEFT COLUMN BELOW. THEN ASK FOLLOW-UP QUESTIONS TO THE RIGHT IN SEQUENCE ONE ITEM AT A TIME. IF NO PROFESSIONAL ENDORSED, GO TO *SCS6.

	*SCS3. How old were you the first time you went to see (PROF)?	*SCS4. When was the <u>last time</u> you went to see (PROF)?	*SCS5. In the past 12 months, how many times did you go to see (PROF)?
A PSYCHIATRIST	*SCS3a. _____ YEARS DK.....998 RF.....999 GO TO *SCS4a	*SCS4a. PAST MONTH1 GO TO *SCS5a PAST SIX MONTHS.....2 GO TO *SCS5a PAST YEAR.....3 GO TO *SCS5a MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6	*SCS5a. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6
A GENERAL PRACTITIONER OR FAMILY DOCTOR	*SCS3b. _____ YEARS DK.....998 RF.....999 GO TO *SCS4b	*SCS4b. PAST MONTH1 GO TO *SCS5b PAST SIX MONTHS.....2 GO TO *SCS5b PAST YEAR.....3 GO TO *SCS5b MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6	*SCS5b. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6
ANY OTHER MEDICAL DOCTOR, LIKE A CARDIOLOGIST OR (WOMEN: GYNECOLOGIST / MEN:UROLOGIST)	*SCS3c. _____ YEARS DK.....998 RF.....999 GO TO *SCS4c	*SCS4c. PAST MONTH1 GO TO *SCS5c PAST SIX MONTHS.....2 GO TO *SCS5c PAST YEAR.....3 GO TO *SCS5c MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6	*SCS5c. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6
A PSYCHOLOGIST	*SCS3d. _____ YEARS DK.....998 RF.....999 GO TO *SCS4d	*SCS4d. PAST MONTH1 GO TO *SCS5d PAST SIX MONTHS.....2 GO TO *SCS5d PAST YEAR.....3 GO TO *SCS5d MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6	*SCS5d. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6

<p>A SOCIAL WORKER</p>	<p>*SCS3e. _____ YEARS DK.....998 RF.....999 GO TO *SCS4e</p>	<p>*SCS4e. PAST MONTH1 GO TO *SCS5e PAST SIX MONTHS.....2 GO TO *SCS5e PAST YEAR.....3 GO TO *SCS5e MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6</p>	<p>*SCS5e. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6</p>
<p>A COUNSELOR</p>	<p>*SCS3f. _____ YEARS DK.....998 RF.....999 GO TO *SCS4f</p>	<p>*SCS4f. PAST MONTH1 GO TO *SCS5f PAST SIX MONTHS.....2 GO TO *SCS5f PAST YEAR.....3 GO TO *SCS5f MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6</p>	<p>*SCS5f. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6</p>
<p>ANY OTHER MENTAL HEALTH PROFESSIONAL, SUCH AS A PSYCHOTHERAPIST OR MENTAL HEALTH NURSE</p>	<p>*SCS3g. _____ YEARS DK.....998 RF.....999 GO To *SCS4g</p>	<p>*SCS4g. PAST MONTH1 GO TO *SCS5g PAST SIX MONTHS.....2 GO TO *SCS5g PAST YEAR.....3 GO TO *SCS5g MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6</p>	<p>*SCS5g. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6</p>
<p>A NURSE, OCCUPATIONAL THERAPIST, OR OTHER HEALTH PROFESSIONAL</p>	<p>*SCS3h. _____ YEARS DK.....998 RF.....999 GO TO *SCS4h</p>	<p>*SCS4h. PAST MONTH1 GO TO *SCS5h PAST SIX MONTHS.....2 GO TO *SCS5h PAST YEAR.....3 GO TO *SCS5h MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6</p>	<p>*SCS5h. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6</p>
<p>A RELIGIOUS OR SPIRITUAL ADVISOR LIKE A MINISTER, PRIEST, PASTOR, OR RABBI</p>	<p>*SCS3i. _____ YEARS DK.....998 RF.....999 GO TO *SCS4i</p>	<p>*SCS4i. PAST MONTH1 GO TO *SCS5i PAST SIX MONTHS.....2 GO TO *SCS5i PAST YEAR.....3 GO TO *SCS5i MORE THAN A YEAR AGO..4 GO TO *SCS3 NEXT PROF, OR *SCS6 DON'T KNOW.....8 GO TO *SCS3 NEXT PROF, OR *SCS6 REFUSED.....9 GO TO *SCS3 NEXT PROF, OR *SCS6</p>	<p>*SCS5i. _____ TIMES DK.....998 RF.....999 GO TO *SCS3 NEXT PROF, OR *SCS6</p>
<p>ANY OTHER HEALER, LIKE AN HERBALIST, OR DOCTOR OF ORIENTAL MEDICINE, OR CHIROPRACTOR, OR SPIRITUALIST</p>	<p>*SCS3j. _____ YEARS DK.....998 RF.....999 GO TO *SCS4j</p>	<p>*SCS4j. PAST MONTH1 GO TO *SCS5j PAST SIX MONTHS.....2 GO TO *SCS5j PAST YEAR.....3 GO TO *SCS5j MORE THAN A YEAR AGO..4 GO TO *SCS6 DON'T KNOW.....8 GO TO *SCS6 REFUSED.....9 GO TO *SCS6</p>	<p>*SCS5j. _____ TIMES DK.....998 RF.....999 GO TO *SCS6</p>

<p>*SCS6. The next few questions are about different services you might have used at any time in your life for problems with your <u>emotions</u>, <u>nerves</u> or <u>mental health</u> (IF *SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR *SC26.4 EQUALS '1': or your <u>use of alcohol or drugs</u>). You might not know some of these services. Please respond in regard to those services you know. Have you ever used any of the following:</p>	<p>YES (1)</p>	<p>NO (5)</p>	<p>DK (8)</p>	<p>RF (9)</p>
<p>*SCS6a. An internet support group or chat room? (KEY PHRASE: internet support group or chat room)</p>	1	5	8	9
<p>*SCS6b. A self-help group? (KEY PHRASE: self-help group)</p>	1	5	8	9
<p>*SCS6c. A hotline? (KEY PHRASE: hotline)</p>	1	5	8	9
<p>*SCS6d. A psychological counseling or therapy that lasted 30 minutes or longer with any type of professional? (KEY PHRASE: psychological counseling or therapy that lasted 30 minutes or longer with any type of professional)</p>	1	5	8	9

*SCS6e. INTERVIEWER CHECKPOINT: (SEE *SCS6d)

*SCS6d EQUALS '1'1
 ALL OTHERS.....2 GO TO *SCS6.1

*SCS6g. (IF SC35_1 = 1, THEN '(RB PG 19) Which ones? Just give me the letter? (PROBE: Any others?)/ ELSE (IF SC35_1 = 2) 'Which of the following types of professionals offered you the psychological counseling or therapy that lasted 30 minutes or longer: a psychiatrist, general practitioner or family doctor, any other medical doctor, psychologist, social worker, counselor, any other mental health professional such as a psychotherapist or mental health nurse, a nurse occupational therapist or health professional, a religious or spiritual advisor like a minister, priest, pastor, rabbi, any other healer, like a herbalist, chiropractor, doctor of oriental medicine or a spiritualist? (PROBE: Any others?)'

IF SC35_1 = 1, THEN

1. A
2. B
3. C
4. D
5. E
6. F
7. G
8. H
9. I
10. J
11. M

ELSE (IF SC35_1 = 2), THEN

1. PSYCHIATRIST
2. GENERAL PRACTITIONER OR FAMILY DOCTOR
3. ANY OTHER MEDICAL DOCTOR LIKE A CARDIOLOGIST OR (WOMEN:GYNECOLOGIST/
MEN: UROLOGIST)
4. PSYCHOLOGIST
5. SOCIAL WORKER
6. COUNSELOR
7. ANY OTHER MENTAL HEALTH PROFESSIONAL, SUCH AS A PSYCHOTHERAPIST OR
MENTAL HEALTH NURSE
8. A NURSE, OCCUPATIONAL THERAPIST, OR OTHER HEALTH PROFESSIONAL
9. A RELIGIOUS OR SPIRITUAL ADVISOR LIKE A MINISTER, PRIEST, PASTOR, OR RABBI
10. ANY OTHER HEALER, LIKE AN HERBALIST, CHIROPRACTOR, DOCTOR OF ORIENTAL
MEDICINE, OR SPIRITUALIST
11. OTHER (SPECIFY) _____

***SCS6.1. INTERVIEWER INSTRUCTION: (SEE *SCS6a - *SCS6d SERIES)**

CIRCLE ALL ENDORSED SERVICES IN *SCS6a - *SCS6d SERIES IN LEFT COLUMN BELOW. THEN ASK FOLLOW-UP QUESTIONS TO THE RIGHT IN SEQUENCE ONE ITEM AT A TIME. IF NO SERVICE ENDORSED, GO TO *SCS10.

	*SCS7. How old were you the first time you used (SR)?	*SCS8. When was the <u>last time</u> you used (SR)?	*SCS9. In the past 12 months, how many times did you use (SR)?
AN INTERNET SUPPORT GROUP OR CHAT ROOM	*SCS7a. _____ YEARS DK.....998 RF.....999 GO TO *SCS8a	*SCS8a. PAST MONTH1 GO TO *SCS9a PAST SIX MONTHS.....2 GO TO *SCS9a PAST YEAR.....3 GO TO *SCS9a MORE THAN A YEAR AGO..4 GO TO *SCS7 FOR NEXT SR, OR *SCS10 DON'T KNOW.....8 GO TO *SCS7 FOR NEXT SR, OR *SCS10 REFUSED.....9 GO TO *SCS7 FOR NEXT SR, OR *SCS10	*SCS9a. _____ TIMES DK.....998 RF.....999 GO TO *SCS7 FOR NEXT SR, OR *SCS10
A SELF-HELP GROUP	*SCS7b. _____ YEARS DK.....998 RF.....999 GO TO *SCS8b	*SCS8b. PAST MONTH1 GO TO *SCS9b PAST SIX MONTHS.....2 GO TO *SCS9b PAST YEAR.....3 GO TO *SCS9b MORE THAN A YEAR AGO..4 GO TO *SCS7 FOR NEXT SR, OR *SCS10 DON'T KNOW.....8 GO TO *SCS7 FOR NEXT SR, OR *SCS10 REFUSED.....9 GO TO *SCS7 FOR NEXT SR, OR *SCS10	*SCS9b. _____ TIMES DK.....998 RF.....999 GO TO *SCS7 FOR NEXT SR, OR *SCS10
A HOTLINE	*SCS7c. _____ YEARS DK.....998 RF.....999 GO TO *SCS8c	*SCS8c. PAST MONTH1 GO TO *SCS9c PAST SIX MONTHS.....2 GO TO *SCS9c PAST YEAR.....3 GO TO *SCS9c MORE THAN A YEAR AGO..4 GO TO *SCS7 FOR NEXT SR, OR *SCS10 DON'T KNOW.....8 GO TO *SCS7 FOR NEXT SR, OR *SCS10 REFUSED.....9 GO TO *SCS7 FOR NEXT SR, OR *SCS10	*SCS9c. _____ TIMES DK.....998 RF.....999 GO TO *SCS7 FOR NEXT SR, OR *SCS10
A PSYCHOLOGICAL COUNSELING OR THERAPY THAT LASTED 30 MINUTES OR LONGER WITH ANY TYPE OF PROFESSIONAL	*SCS7d. _____ YEARS DK.....998 RF.....999 GO TO *SCS8d	*SCS8d. PAST MONTH1 GO TO *SCS9d PAST SIX MONTHS.....2 GO TO *SCS9d PAST YEAR.....3 GO TO *SCS9d MORE THAN A YEAR AGO..4 GO TO *SCS10 DON'T KNOW.....8 GO TO *SCS10 REFUSED.....9 GO TO *SCS10	*SCS9d. _____ TIMES DK.....998 RF.....999 GO TO *SCS10

***SCS10.** (*SR13) Did you ever get a prescription or medicine for your emotions, nerves or mental health (IF *SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR *SC26.4 EQUALS '1': or substance use) from any type of professional?

- YES.....1
 - NO.....5 GO TO *SC36
 - DON'T KNOW.....8 GO TO *SC36
 - REFUSED.....9 GO TO *SC36
-

***SCS10a.(IF SC35_1 = 1, THEN '(RB PG 19)** Which of the following types of professionals gave you a prescription or medicine for your emotions, nerves, or mental health (IF *SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR *SC26.4 EQUALS '1': or substance use)? Just give me the letter. (PROBE: Any others?)/ **ELSE (IF SC35_1 = 2)** Which of the following types of professionals gave you a prescription or medicine for your emotions, nerves, or mental health (IF *SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR *SC26.4 EQUALS '1': or substance use): a psychiatrist, general practitioner or family doctor, any other medical doctor like a cardiologist or (women: gynecologist / men: urologist), psychologist, any other mental health professional such as a psychotherapist or mental health nurse, a nurse, occupational therapist or other health professional, any other healer, like a herbalist, or doctor of oriental medicine? (PROBE: Any others?)'

IF SC35_1 = 1, THEN

- 1. A
- 2. B
- 3. C
- 4. D
- 7. G
- 8. H
- 10. I
- 13. M

ELSE (IF SC35_1 = 2), THEN

- 1. PSYCHIATRIST
 - 2. GENERAL PRACTITIONER OR FAMILY DOCTOR
 - 3. ANY OTHER MEDICAL DOCTOR LIKE A CARDIOLOGIST OR (WOMEN:GYNECOLOGIST/
MEN: UROLOGIST)
 - 4. PSYCHOLOGIST
 - 7. ANY OTHER MENTAL HEALTH PROFESSIONAL, SUCH AS A PSYCHOTHERAPIST OR
MENTAL HEALTH NURSE
 - 8. A NURSE, OCCUPATIONAL THERAPIST, OR OTHER HEALTH PROFESSIONAL
 - 10. ANY OTHER HEALER, LIKE AN HERBALIST, DOCTOR OF ORIENTAL MEDICINE
 - 13. OTHER (SPECIFY) _____
-

***SCS11.** How old were you the first time (you were given this sort of prescription or medicine)?

_____ YEARS OLD

- DON'T KNOW998
- REFUSED.....999

*SC36. INTERVIEWER CHECKPOINT: (SEE *SC20, *SC20a, *SC20b, *SC21, *SC22, *SC23, *SC23a, *SC25, *SC26, *SC26a, *SC26b, *SC26c, *SC29.4, *SC30.4)

FOLLOW SKIP FOR FIRST ENDORSED ITEM.

*SC21 EQUALS '1'	1	GO TO *D1, NEXT SECTION
*SC22 EQUALS '1'	2	GO TO *D2, NEXT SECTION
*SC23 EQUALS '1'	3	GO TO *D9, NEXT SECTION
*SC23a EQUALS '1'	4	GO TO *D11b, NEXT SECTION
*SC25 EQUALS '1'	5	GO TO *IR1 INTRO 2
*SC20 EQUALS '1'	6	GO TO *PD1 INTRO 1
*SC20a EQUALS '1'	7	GO TO *PD1 INTRO 2
*SC20b EQUALS '1'	8	GO TO *PD1 INTRO 3
*SC29.4 EQUALS '1'	9	GO TO *SO1
*SC30.4 EQUALS '1'	10	GO TO *AG1
*SC26 EQUALS '1'	11	GO TO *G1 INTRO 1
*SC26a EQUALS '1'	12	GO TO *G1 INTRO 2
*SC26b EQUALS '1'	13	GO TO *G1 INTRO 3
*SC26c EQUALS '1'	14	GO TO *G1 INTRO 4
ALL OTHERS	15	GO TO *IED1