

CASE # _____

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CONFIDENTIAL

NORC
University of Chicago

CENTER FOR HUMAN RESOURCE RESEARCH
Ohio State University

National Longitudinal Survey
Of
Labor Market Experience

ROUND TEN
Youth Survey, 1988

DRUG USE SUPPLEMENT

GENERAL INSTRUCTIONS

The questions in this pamphlet are to be completed by you without the interviewer. Please read the instructions below, and then go to the first question on page DS-1.

INSTRUCTIONS:

Answer all questions in the order that they appear unless there are instructions that tell you to skip a question. Instructions that tell you to skip a question appear after some of the answers that you may choose.

There are three types of questions in this pamphlet:

- 1) Write in the answer in the space provided.

Example: How old is your mother?

AGE: 47

- 2) Circle only one answer. Please circle the number that goes with the answer you choose.

Example: What is your gender?

(CIRCLE ONLY ONE)

Male.....(1)

Female..... 2

- 3) Circle all that apply to you. Please circle all of the numbers that go with the answer(s) you choose.

Example: Last week, what did you do for entertainment?

(CIRCLE ALL THAT APPLY)

Went to a movie.....(1)

Went to a concert..... 2

Went to a play..... 3

Went to a sporting event.....(4)

Other (SPECIFY)

Went to the zoo (5)

NOW, GO TO QUESTION 1 ON PAGE DS-1

1. In your lifetime, on how many occasions have you used marijuana or hashish?

(CIRCLE ONLY ONE)

CARD
GG

- 100 or more occasions..... 5 63/
- 40 to 99 occasions..... 4
- 10 to 39 occasions..... 3
- 3 to 9 occasions..... 2
- 1 to 2 occasions 1
- Never..... 0

IF YOU CIRCLED CODES 5, 4, 3, 2, OR 1, GO ON TO QUESTION 2.

IF YOU CIRCLED CODE 0, SKIP TO QUESTION 5 ON NEXT PAGE.

2. How old were you the first time you used marijuana or hashish?

ENTER AGE IN YEARS: 64-65/

3. When was the most recent time you used marijuana or hashish?

(CIRCLE ONLY ONE)

CARD
HH

- Within the past 7 days..... 01 66-67/
- More than a week ago but
within the past 30 days..... 02
- More than 30 days ago but
within the past 6 months..... 03
- More than 6 months
to a year ago..... 04
- More than a year
to two years ago..... 05
- More than 2 years
to 4 years ago..... 06
- More than 4 years ago..... 07

IF YOU CIRCLED CODES 01 OR 02, GO ON TO QUESTION 4 ON NEXT PAGE.

IF YOU CIRCLED CODES 03, 04, 05, 06 OR 07, SKIP TO QUESTION 5 ON NEXT PAGE.

4. During the past 30 days, on how many occasions have you used marijuana or hashish?

(CIRCLE ONLY ONE)

CARD
II

- 40 or more occasions..... 6 68/
- 20-39 occasions..... 5
- 10-19 occasions..... 4
- 6-9 occasions..... 3
- 3-5 occasions..... 2
- 1-2 occasions..... 1

5. In your lifetime, on how many occasions have you used cocaine?

(CIRCLE ONLY ONE)

CARD
GG

- 100 occasions or more..... 5 69/
- 40 to 99 occasions..... 4
- 10 to 39 occasions..... 3
- 3 to 9 occasions..... 2
- 1 to 2 occasions..... 1
- Never..... 0

IF YOU CIRCLED CODES 5, 4, 3, 2, OR 1, GO ON TO QUESTION 6.
IF YOU CIRCLED CODE 0, SKIP TO QUESTION 10 ON PAGE DS-4.

6. How old were you the first time you used cocaine?

ENTER AGE IN YEARS: | | |

70-71/

PLEASE GO TO QUESTION 7 ON NEXT PAGE.

7. When was the most recent time you used cocaine?

(CIRCLE ONLY ONE)

Within the past 7 days..... 01

72-73/

CARD
HH

More than a week ago but
within the past 30 days..... 02

More than 30 days ago but
within the past 6 months..... 03

More than 6 months
to a year ago..... 04

More than a year
to 2 years ago..... 05

More than 2 years
to 4 years ago..... 06

More than 4 years ago..... 07

IF YOU CIRCLED CODES 01 OR 02, GO ON TO QUESTION 8.

IF YOU CIRCLED CODES 03, 04, 05, 06, OR 07, SKIP TO QUESTION 9 ON NEXT PAGE.

8. During the past 30 days, on how many occasions have you used cocaine?

(CIRCLE ONLY ONE)

40 or more occasions..... 6

74/

CARD
II

20-39 occasions..... 5

10-19 occasions..... 4

6-9 occasions..... 3

3-5 occasions..... 2

1-2 occasions..... 1

PLEASE GO TO QUESTION 9 ON NEXT PAGE

9. What methods have you used for taking cocaine?

(CIRCLE ALL THAT APPLY)

- | | | |
|---|---|-----|
| Sniffing or snorting cocaine..... | 1 | 75/ |
| Smoking or inhaling the fumes of
cocaine (including freebasing
cocaine or using crack)..... | 2 | 76/ |
| Injecting cocaine with a needle..... | 3 | 77/ |
| Swallowing or drinking cocaine..... | 4 | 78/ |
| Other (PLEASE EXPLAIN) _____
_____ | 5 | 79/ |

10. PLEASE INSERT IN ENVELOPE AND SEAL IT. RETURN THE SEALED ENVELOPE TO THE INTERVIEWER. THANK YOU.