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NATIONAL VIETNAM VETERANS READJUSTMENT STUDY

Research Triangle Institute

Contractual Report of Findings from the National Vietnam Veterans Readjustment Study

Volume III: Survey Interview Questionnaires

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16. Abstract (Limit: 200 words) REFLECTING ON THE MORE THAN FOUR YEAR LIFE OF THE NATIONAL VIETNAM VETERANS READJUSTMENT STUDY EVOKES IN US A KALEIDOSCOPE OF MEMORIES AND THEIR ASSOCIATED EMOTIONS. CONDUCT OF THE READJUSTMENT STUDY HAS IN SOME WAYS RECAPITULATED THE VIETNAM ERA. THE STUDY WAS CONDUCTED UNDER CONTRACT NUMBER V101(93)P-1040 FROM THE VETERANS ADMINISTRATION (VA). TO ACHIEVE THE OBJECTIVES SET FORTH IN THE CONGRESSIONAL MANDATE, THIS STUDY WAS CARRIED OUT BY STAFF FROM A CONSORTIUM OF ORGANIZATIONS. THE NEED FOR BROAD-BASED INPUT INTO THE DESIGN AND OPERATION OF THE STUDY RESULTED FROM THE CONFLEUNCE OF SEVERAL FACTORS: THE SCIENTIFIC COMPLEXITY OF THE STUDY'S SUBJECT MATTER: THE POTENTIAL POLITICAL AND PROGRAMMATIC IMPLEMENTATIONS OF THE FINDINGS: AND THE INTENSE AND GENUINE EMOTIONAL INVESTMENT OF SOME IN THEIR BELIEFS ABOUT VIETNAM VETERANS, DESPITE THE SOMETIMES NON-SYSTEMATIC BASIS OF THOSE BELIEFS. THE EXECUTIVE SUMMARY IS PROVIDED IN THREE PARTS. IN PART A, HIGHLIGHTS OF SOME MAJOR FINDINGS ARE PROVIDED IN BRIEF SUMMARY FORM. IN PART B, STUDY FINDINGS FROM THE VARIOUS CHAPTERS OF THE REPORT ARE INTEGRATED TO ADDRESS DIRECTLY THE SPECIFIC ISSUES RAISED IN PUBLIC LAW 98-160, THE ENABLING LEGISLATION FOR THE NATIONAL VIETNAM VETERANS READJUSTMENT STUDY. PART C PROVIDES A CHAPTER BY CHAPTER SUMMARY OF THE ENTIRE REPORT, WHICH IS FOUR VOLUMES.

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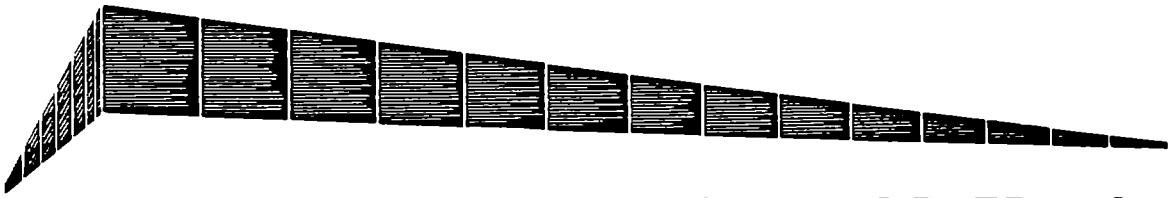

NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
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MAIN STUDY QUESTIONNAIRE

VOLUME I

SECTION A: PREAMBLE AND ELIGIBILITY
SECTION C: MARITAL HISTORY AND ADJUSTMENT
SECTION D: PARENTING HISTORY AND ADJUSTMENT
SECTION E: EDUCATIONAL HISTORY
SECTION F: OCCUPATIONAL HISTORY AND WORK ROLE ADJUSTMENT
SECTION G: CHILDHOOD AND FAMILY HISTORY

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INTRODUCTION TO BE READ TO ALL RESPONDENTS:

This survey is being conducted to collect information about how veterans and other Americans feel about their lives both during and after the Vietnam war. During this interview, I will ask questions about all facets of your life, including questions about your family history, your education and employment, your health and use of medical care services, and questions about your experiences during and after the Vietnam war.

SECTION A: PREAMBLE AND ELIGIBILITY

RECORD BEGINNING DATE AND TIME: ☐☐ / ☐☐ ☐☐ : ☐☐ A.M. P.M.
MONTH DAY HOUR MINUTE

MARK * RESPONSES ON TALLY SHEET X.

Let me begin by asking you a few questions about yourself, the Vietnam war, and about veterans who served in that war.

A1. RECORD SEX AS OBSERVED:

MALE 01
FEMALE 02

A2. First, what is your date of birth?

RECORD DATE: ☐☐ ☐☐ ☐☐
MONTH DAY YEAR

A3. Where were you born?
RECORD IN FULL. PROBE FOR COUNTY, IF APPLICABLE.

☐☐☐☐☐

CITY (OR TOWN) _____ COUNTY _____ STATE (OR COUNTRY IF NOT USA)

A3a. IF BORN IN THE UNITED STATES → (A4)

In what month and year did you move to the United States?

IF NEVER MOVED TO U.S. CODE "99 99."

RECORD DATE: ☐☐ AND ☐☐
MONTH YEAR

A4. HAND R CARD A-4.
Please look at this card and tell me the letter of the group that best describes your racial background.

HISPANIC IS NOT A VALID "OTHER." IF HISPANIC, PROBE FOR RACIAL GROUP R IDENTIFIES WITH.

a. AMERICAN INDIAN 01
b. ALASKAN NATIVE 02
c. ASIAN 03
d. PACIFIC ISLANDER 04
e. BLACK 05
f. WHITE 06
g. OTHER (SPECIFY) 07

_____

A5. HAND R CARD A-5.
Are you of Hispanic (Spanish) origin or descent? That is, do any of these groups best describe your national origin or ancestry?

PROBE: Did your ancestors come from any of these groups?

NO . . . . . 01* → (A6)
YES 02*

A5a. POINT TO CARD A-5.
Which of these groups best describes your national origin or ancestry?

PROBE: Which of these countries did your ancestors come from?

IF R GIVES MORE THAN ONE GROUP, ASK WHICH GROUP S/HE MOST CLOSELY IDENTIFIES WITH.

ENTRIES IN BRACKETS ARE COUNTRIES CORRESPONDING TO HISPANIC ETHNIC GROUPS.

a. PUERTO RICAN [PUERTO RICO] 01
b. CUBAN [CUBA] 02
c. CUBAN-AMERICAN [CUBA] 03
d. MEXICAN [MEXICO] 04
e. MEXICANO [MEXICO] 05
f. MEXICAN-AMERICAN [MEXICO] 06
g. CHICANO [MEXICO] 07
h. CENTRAL OR SOUTH AMERICAN--SPANISH COUNTRY (SPECIFY) 08

_____

i. OTHER SPANISH OR HISPANIC (SPECIFY) . . 09

_____

MARK ON TALLY SHEET X

A5b. In what country have you lived most of your life? Have you lived mostly in (HISPANIC COUNTRY CORRESPONDING TO A5a.) with some time in the United States, mostly in the United States with some time in (HISPANIC COUNTRY), only in the United States, or about equally in the United States and (HISPANIC COUNTRY)?

LIVED ONLY IN PUERTO RICO	01
MOSTLY HISPANIC COUNTRY, PART U.S.	02
EQUAL	03
MOSTLY U.S., PART HISPANIC COUNTRY	04
U.S. ONLY	05
OTHER (SPECIFY)	06

_____

A6. Now a few questions about the war in Vietnam. Do you feel, in general, that we did the right thing in getting into the fighting in Vietnam, or should we have stayed out?

CODE PRESENT FEELING.

RIGHT IN GETTING IN	01
SHOULD HAVE STAYED OUT	02
HAVE NO STRONG FEELINGS ABOUT THE WAR ONE WAY OR THE OTHER (VOLUNTEERED)	03
DK	94
RE	97

A7. How much would you say the Vietnam war has affected your everyday life--a great deal, a fair amount, hardly at all, or not at all?

PROBE: From the time of the war until now.

A GREAT DEAL	01	
A FAIR AMOUNT	02	
HARDLY AT ALL	03	
NOT AT ALL	04	→ (A8)

A7a. In what ways has the Vietnam war affected your everyday life?

_____

_____

_____

_____

_____

_____

A8. And overall, how much contact would you say you currently have with veterans of the Vietnam era--a great deal of contact, a fair amount, just some, or hardly any at all?

A GREAT DEAL 01
A FAIR AMOUNT 02
JUST SOME 03
HARDLY ANY AT ALL 04

A9. Have you <u>ever</u> served in the U.S. Armed Forces--either on active duty, in the National Guard, or in the Reserves??

NO . . . . . 01 → (C1)
YES 02

A10. Did you ever serve in the National Guard or on other reservist-type duty?

NO--R IS VETERAN-ACTIVE . . . . . 01* → (A12)
YES 02

A10a. Are you still <u>currently</u> a member of the military reserves or National Guard?

NO 01
YES 02

A10b. How many years altogether (did you serve/have you served) in the Guard or Reserves?

RECORD CALENDAR YEARS: ☐☐
YEARS

A11. Did your military service consist <u>entirely</u> of National Guard or other reservist-type duty, such as initial training, weekly or monthly meetings, and yearly summer camp?

NO--R IS VETERAN-ACTIVE. . . . . 01* → (A12)
YES 02

A11a. Was your National Guard or Military Reserve Unit ever blanketed or called into the regular Armed Forces, or were you ever called up for active duty <u>not</u> <u>counting</u> the 4 to 6 months duty for initial training or yearly summer camp?

NO . . . . . 01 → (C1)
YES--R IS VETERAN-ACTIVE. 02*

A12. Did you serve on active duty in the Armed Forces at any time between August 5, 1964 and May 7, 1975? (If your service was only in a National Guard or Military Reserve Unit, include only the time you were called up for active duty.)

NO--R IS NON-VIETNAM VETERAN 01
YES--R IS VIETNAM VETERAN 02

(THIS PAGE INTENTIONALLY BLANK.)

SECTION C: MARITAL HISTORY AND ADJUSTMENT

MARK * RESPONSES ON TALLY SHEET X.

C1. Are you presently married, or are you legally separated, divorced, widowed, or have you never been married?

IF R MENTIONS, CODE COMMON LAW AS MARRIED.

MARRIED	01*	
SEPARATED	02*	→ (C2)
DIVORCED	03*	→ (C2)
WIDOWED	04*	→ (C2)
NEVER MARRIED	05*	→ (C16)

C1a. Are you currently living with your (wife/husband)?

NO	01*
YES	02*

C1b. What is your (wife's/husband's) first name?

RECORD NAME: _____

C2. How many times have you been married (including your current marriage)?

ENTER NUMBER OF TIMES.

RECORD NUMBER: ☐☐ MARRIAGES IF ONLY ONE MARRIAGE → (C5)

C3. How many times (if ever) have you been divorced?

RECORD NUMBER: ☐☐ DIVORCES

C4. INTERVIEWER CHECKPOINT:

ARE MORE DIVORCES (C3) RECORDED THAN MARRIAGES (C2)?

NO	01	
YES	02	→ (RECONCILE C2 AND C3. C3 CANNOT BE GREATER THAN C2)

C5. (Other than when you separated just before a divorce) have you and your (wife/wives/husband(s)) ever separated for a few days or longer because of not getting along?

NO . . . . . 01 → (C6)
YES 02

C5a. Did you separate more than once?

COUNT ALL MARRIAGES.

NO 01
YES 02

	C6. FIRST MARRIAGE	C7. SECOND MARRIAGE	C8. THIRD MARRIAGE	C9. FOURTH MARRIAGE	C10. FIFTH MARRIAGE
a. In what month and year did you get married the (first/second/next/last) time?	___ ___ → (C6c) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C7c) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C8c) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C9c) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C10c) MONTH YEAR DON'T KNOW . . . 9494
b. How old were you when you got married the (first/second/next/last) time?	YEARS	YEARS	YEARS	YEARS	YEARS
c. (Are you still living together), did you separate from your (wife/husband) get divorced or become widowed?	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04
d. Approximately what month and year (were you separated/was your final decree of divorce/were you widowed?	___ ___ → (C6f) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C7f) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C8f) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C9f) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C10f) MONTH YEAR DON'T KNOW . . . 9494
e. How old were you when you (separated/got divorced/became widowed) (that time)?	YEARS	YEARS	YEARS	YEARS	YEARS
f. SKIP INSTRUCTION	GO TO C7 OR TO QUESTION C16	GO TO C8 OR TO QUESTION C16	GO TO C9 OR TO QUESTION C16	GO TO C10 OR TO QUESTION C16	GO TO C11 OR TO QUESTION C16

	C11. SIXTH MARRIAGE	C12. SEVENTH MARRIAGE	C13. EIGHTH MARRIAGE	C14. NINTH MARRIAGE	C15. TENTH OR LAST MARRIAGE IF MORE THAN TEN
a. In what month and year did you get married the (next/last) time?	___ ___ → (C11c) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C12c) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C13c) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C14c) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C15c) MONTH YEAR DON'T KNOW . . . 9494
b. How old were you when you got married the (next/last) time?	YEARS	YEARS	YEARS	YEARS	YEARS
c. (Are you still living together), did you separate from your (wife/husband) get divorced or become widowed?	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04	STILL TOGETHER . 01 → (C16) SEPARATED . 02 DIVORCED . 03 WIDOWED . . 04
d. Approximately what month and year (were you separated/was your final decree of divorce/were you widowed?	___ ___ → (C11f) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C12f) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C13f) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C14f) MONTH YEAR DON'T KNOW . . . 9494	___ ___ → (C15f) MONTH YEAR DON'T KNOW . . . 9494
e. How old were you when you (separated/got divorced/became widowed)?	YEARS	YEARS	YEARS	YEARS	YEARS
f. SKIP INSTRUCTION:	GO TO C12 OR TO QUESTION C16	GO TO C13 OR TO QUESTION C16	GO TO C14 OR TO QUESTION C16	GO TO C15 OR TO QUESTION C16	GO TO QUESTION C16

C16. Have you ever lived with someone for at least a year as though you were married?

NO . . . . . 01 → (C17)
YES 02*

C16a. How many times have you lived with someone for a year or more as though you were married?

RECORD NUMBER: ☐☐
TIMES

C16b. What is the longest time you've lived with someone as though you were married?

RECORD MONTHS: ☐☐☐
MONTHS

C16c. Did you and the person(s) you lived with ever separate for a few days or longer because of not getting along?

NO . . . . . 01 → (C17)
YES 02

C16d. Did you separate more than once?

COUNT ALL TIMES AND ALL PERSONS LIVED WITH AS MARRIED.

NO 01
YES 02

C17. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, C1A.

IS RESPONDENT CURRENTLY LIVING WITH SPOUSE?

NO OR NEVER MARRIED 01
YES . . . . . 02 → (C20)

C18. Are you currently living with someone as though you were married?

NO . . . . . 01 → (C19)
YES 02*

C18a. What is this person's first name?

RECORD NAME: _____
FIRST NAME

C18b. RECORD PARTNER'S SEX. ASK IF NOT OBVIOUS FROM NAME:

Is this person male or female?

MALE 01
FEMALE 02

C18c. When did you begin living with (NAME) as though you were married?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494

→ (C20)

C19. During the past year, have you been romantically involved with anyone?

NO . . . . . 01 → (D1)
YES 02

C19a. Do you have a romantic involvement at this time?

NO . . . . . 01 → (D1)
YES 02

C19b. What is this person's first name?

RECORD NAME: _____
FIRST NAME

C19c. RECORD THAT PERSON'S SEX. ASK IF NOT OBVIOUS FROM NAME:

Is this person male or female?

MALE 01
FEMALE 02

C19d. How long have you and (NAME) been together?

☐☐ NUMBER →
MONTHS 01
YEARS 02

SAY TO THE RESPONDENT: In the next few questions, I am going to refer to you and (NAME) as "partners."

C20. These next few questions are about your current (marriage/relationship). Taking things altogether, how would you describe your (marriage/relationship)--would you say your (marriage/relationship) was very happy, a little happier than average, just about average, or not too happy?

VERY HAPPY 01
LITTLE HAPPIER THAN AVERAGE . . . 02
JUST ABOUT AVERAGE 03
NOT TOO HAPPY . . . . . 04 → (C21)

C20a. Even in cases where (married people/couples/partners) are happy there have often been times in the past when they weren't too happy--when they had problems getting along with each other. Has this ever been true for you?

NO . . . . . 01 → (C21)
YES 02

C20b. What was that usually about?

C21. Many (men/women--USE SEX OF RESPONDENT) feel that they're not as good (husbands/wives/partners) as they would like to be. Do you sometimes feel this way?

NO . . . . . 01 → (C22)
YES 02

C21a. What kinds of things make you feel this way?

C21b. Do you feel this way a lot of times, or only once in a while?

A LOT OF TIMES 01
ONLY ONCE IN A WHILE 02

C22. HAND R CARD C-22.

When it comes to making important decisions, do you and your (wife/husband/partner) almost always agree, occasionally disagree, frequently disagree, almost always disagree, or does one of you make the important decisions without discussing them with the other?

ALMOST ALWAYS AGREE 01
OCCASIONALLY DISAGREE 02
FREQUENTLY DISAGREE 03
ALMOST ALWAYS DISAGREE 04
ONE DECIDES WITHOUT DISCUSSION . 05

C23. How well do you think your (wife/husband/partner) understands you--your feelings, your likes and dislikes, and any problems you may have; do you think that (s/he) understands you very well, fairly well, not very well, or not well at all?

PROBE: Overall or in general.

VERY WELL 01
FAIRLY WELL 02
NOT VERY WELL 03
NOT WELL AT ALL 04

C23A. HAND R CARD C-23A.

How much do you agree or disagree with the following statement: My (wife/husband/partner) is someone I can really talk with about things that are important to me. (Would you say you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree?)

STRONGLY AGREE 01
SOMEWHAT AGREE 02
NEITHER AGREE NOR DISAGREE . . . 03
SOMEWHAT DISAGREE 04
STRONGLY DISAGREE 05

C24. How much companionship do you and your (wife/husband/partner) have--how often do you do things together--all the time, very often, often, sometimes, or hardly ever?

PROBE: Overall or in general.

ALL THE TIME 01
VERY OFTEN 02
OFTEN 03
SOMETIMES 04
HARDLY EVER 05

C25. HAND R SELF-REPORT BOOKLET TURNED TO C25.

Now I'd like you to complete both sets of questions on this page. The first question describes some ways in which different people describe their marriages or relationships. Please read each statement carefully and after each one circle the number which best describes your current (marriage/relationship).

WHEN R RETURNS BOOKLET, GO TO QUESTION C27.

Please indicate how often you do each of the following things by circling one of the numbers.

		ALL THE TIME	MOST OF THE TIME	MORE OFTEN THAN NOT	OCCA-SIONALLY	RARELY	NEVER
A.	How often do you discuss or have you considered divorce, separation, or terminating your relationship?	01	02	03	04	05	06
B.	In general, how often do you think that things between you and your partner are going well?	01	02	03	04	05	06
C.	How often do you and your partner quarrel?	01	02	03	04	05	06
D.	How often do you and your partner "get on each other's nerves?"	01	02	03	04	05	06

C26. How often have you been upset about how you and your spouse or partner were getting along in the sexual part of your life?

OFTEN 01
SOMETIMES 02
RARELY 03
NEVER 04

C27. Here are some more questions like those you've filled out, but these are mostly about how you have felt during the past year.

HAND R CARD C-27 TO USE THROUGH C30.

During the past year, how often have you felt uncomfortable with your (wife/husband/partner)? Would you say very often, fairly often, sometimes, almost never, or never?

PROBE: Overall or in general.

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

C28. Sometimes (husbands and wives/people in a relationship) have differences of opinion about showing love. During the past year, how often has this been a problem for you in your (marriage/relationship)? Would you say very often, fairly often, sometimes, almost never, or never?

PROBE: Overall or in general.

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

C29. During the past year, how often have you felt affectionate towards your (wife/husband/partner)? (Very often, fairly often, sometimes, almost never, or never?)

PROBE: Overall or in general.

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

C30. During the past year, how often has the thought come to your mind that your (wife/husband/partner) doesn't really love you? (Would you say very often, fairly often, sometimes, almost never, or never?)

PROBE: Overall or in general.

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

C31. During the past year, how satisfied have you been with your (marriage/relationship)? Would you say (you were) very satisfied, somewhat satisfied, neither satisfied nor dissatisfied, somewhat dissatisfied, or very dissatisfied?

VERY SATISFIED 01
SOMEWHAT SATISFIED 02
NEITHER SATISFIED NOR DISSATISFIED 03
SOMEWHAT DISSATISFIED 04
VERY DISSATISFIED 05

C32. Now one more question about your (wife/husband/partner). Has (she/he) ever had a serious mental or emotional problem, such as problems with depression, suicide attempts, odd or violent behavior, or difficulties with drugs or alcohol?

NO . . . . . 01 → (D1)
YES 02

C32a. Could you tell me the specific mental or emotional problem(s) that (she/he) had?

_____			
_____			
_____			

C32b. Was (she/he) ever in a hospital for (this problem/any of these problems)?

NO 01
YES 02

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SECTION D: PARENTING HISTORY AND ADJUSTMENT

MARK * RESPONSES ON TALLY SHEET X.

D1. Have you ever (fathered/given birth to) any children--not counting stillbirths, miscarriages, or abortions?

INCLUDE CHILDREN WHO DIED SINCE BIRTH.

NO . . . . . 01 → (D6)
YES 02

D1a. In what month and year did you first become a parent?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

D1b. In all, how many live born children have you had?

RECORD NUMBER: ☐☐ CHILDREN

D2. For all of the children you've (fathered/given birth to), please tell me whether they're male or female, when they were born (month and year), and where or who they live with now. Please tell me the names of the children in the order in which they were born.
IF CHILD NOT CURRENTLY ALIVE, CODE RESIDENCE AS "DECEASED" (CODE 21).

SEX
Male . . . 01
Female . . 02

RESIDENCE CODE - ENTER FIRST CODE THAT APPLIES

Same household as R	11	School or college dorm	18
With (other) parent	12	Correctional facility or reform school	19
With (child's) spouse	13	Hospital or institution	20
With other relative	14	Deceased	21
Foster home or unrelated caretaker	15	Unknown or runaway	22
In friend's home	16	Other (SPECIFY IN RIGHT MARGIN)	23
In own home alone	17		

CHILD'S NAME	#	SEX	DATE OF BIRTH MONTH/YEAR		RESIDENCE CODE
A. _____	1			/	
B. _____	2			/	
C. _____	3			/	
D. _____	4			/	
E. _____	5			/	
F. _____	6			/	
G. _____	7			/	
H. _____	8			/	
I. _____	9			/	
J. _____	10			/	
K. _____	11			/	
L. _____	12			/	

D3. INTERVIEWER CHECKPOINT: REVIEW D1b AND D2.

DOES NUMBER OF CHILDREN REPORTED IN D2 EQUAL NUMBER REPORTED IN D1b?

NO . . . . . 01 → (RECONCILE D2 AND D1b)

YES 02

D4. INTERVIEWER CHECKPOINT: REVIEW D2.

ARE ANY RESIDENCE CODES = 21?

NO . . . . . 01 → (D5A)
YES 02

D5. Did (this/any) child die before (his/her) first birthday?

NO 01
YES 02

D5A. (Has your child/Have any of your children) ever had a serious mental or emotional problem, such as problems with depression, suicide attempts, odd or violent behavior, or difficulties with drugs or alcohol?

NO . . . . . 01 → (D6)
YES 02

D5b. Could you tell me the specific mental or emotional problem(s) that (he/she/they) had?

D5c. (Was/Were) (he/she/they) ever in a hospital for (this problem/any of these problems)?

NO 01
YES 02

D6. (In addition to the child(ren) that you've told me about), have you ever (fathered/had) any pregnancies that ended early, such as a miscarriage or spontaneous abortion, stillbirth, an (induced) abortion, or a tubal pregnancy?

NO . . . . . 01 → (D7)
YES 02
DON'T KNOW . . . . . 94 → (D7)

D6a. How many such pregnancies have you (fathered/had) that ended in...

RECORD NUMBER:

Miscarriages or Spontaneous Abortions . . ☐☐

Stillbirths . . . . . ☐☐

(Induced) Abortions . . . . . ☐☐

Tubal Pregnancies . . . . . ☐☐

Other (SPECIFY) . . . . . ☐☐

_____

_____

D7. Did you and any (wife/husband or) partner ever try for a period of a year or more to conceive a child without being able to?

NO . . . . . 01 → (D8)
YES 02

D7a. Did you or your spouse or partner see a doctor or other health professional to discuss difficulties in conceiving children?

NO 01
YES 02

D8. Have you ever raised or acted as a parent for children who were not your own natural children (such as adopted children, foster children, or stepchildren)?

DO NOT INCLUDE BABYSITTING, TEACHING, TEMPORARY CARETAKING, ETC.

NO . . . . . 01 → (D11)
YES 02

D8a. In what month and year did you first act as a parent for children who were not your own?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

D8b. How many children in all who were not your own natural children (have you raised/are you raising)?

RECORD NUMBER: ☐☐ CHILDREN

D9. For all of the children that you raised (other than those you've fathered/given birth to) please tell me whether they're male or female, how old they are, and where or who they live with now. Please tell me the names of the children beginning with the oldest.

IF CHILD NOT CURRENTLY ALIVE, RECORD AGE AT DEATH AND RESIDENCE AS "DECEASED" (CODE 21).

SEX
Male . . . 01
Female . . 02

RESIDENCE CODE - ENTER FIRST CODE THAT APPLIES.

Same household as R . . .	11	School or college dorm . . .	18
With (other) parent . . .	12	Correctional facility or reform school	19
With (child's) spouse . .	13	Hospital or institution . .	20
With other relative . . .	14	Deceased	21
Foster home or unrelated caretaker	15	Unknown or runaway	22
In friend's home	16	Other (SPECIFY IN RIGHT MARGIN)	23
In own home alone	17		

CHILD'S NAME	#	SEX	AGE (YEARS)	RESIDENCE CODE
A. _____	1			
B. _____	2			
C. _____	3			
D. _____	4			
E. _____	5			
F. _____	6			
G. _____	7			
H. _____	8			
I. _____	9			
J. _____	10			
K. _____	11			
L. _____	12			
M. _____	13			
N. _____	14			
O. _____	15			

D10. INTERVIEWER CHECKPOINT: REVIEW D8b AND D9.

DOES NUMBER OF CHILDREN REPORTED IN D9 EQUAL NUMBER REPORTED IN D8b?		
NO	01 →	(RECONCILE D8b AND D9)
YES	02	

D11. INTERVIEWER CHECKPOINT: REVIEW D1 AND D8.

DOES RESPONDENT HAVE ANY NATURAL OR ADOPTED/FOSTER/STEPCHILDREN?		
NO	01 →	(D18)
YES	02*	

D12. Compared to most children would you say your child(ren) (has/have) given you a lot of problems, quite a few problems, some problems, only a few problems, or haven't they given you any problems at all?

A LOT 01
QUITE A FEW 02
SOME 03
ONLY A FEW 04
HAVEN'T GIVEN ANY PROBLEMS . . . 05

D13. Would you say that in your case, being a (father/ mother) has always been enjoyable; that it has nearly always been enjoyable; that it has usually been enjoyable; that it has sometimes been enjoyable; or that being a (father/mother) has hardly ever been enjoyable?

ALWAYS 01
NEARLY ALWAYS 02
USUALLY 03
SOMETIMES 04
HARDLY EVER 05

D14. Many (men/women--SAME SEX AS RESPONDENT) feel they're not as good (fathers/mothers) as they would like to be. Have you ever felt this way?

NO . . . . . 01 → (D15)
YES 02

D14a. What kinds of things have made you feel this way?

D14b. Have you felt this way a lot of times, or only once in a while?

A LOT OF TIMES 01
ONLY ONCE IN A WHILE 02

D15. During the past year, how satisfied have you been with how you get along with your children? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

VERY SATISFIED 01
SOMEWHAT SATISFIED 02
SOMEWHAT DISSATISFIED 03
VERY DISSATISFIED 04
DON'T KNOW 94

D16. During the past year how satisfied have you been as a parent with how your children are turning out--very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

VERY SATISFIED 01
SOMEWHAT SATISFIED 02
SOMEWHAT DISSATISFIED 03
VERY DISSATISFIED 04
DON'T KNOW 94

D17. INTERVIEWER CHECKPOINT: REVIEW D2 AND D9.

DOES RESPONDENT HAVE CHILDREN LIVING WITH HIM/HER--DO ONE OR MORE RESIDENCE CODES = 11?

NO 01
YES . . . . . 02 → (D19)

D18. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, C1A AND C18.

IS RESPONDENT LIVING WITH SPOUSE OR SOMEONE AS THOUGH MARRIED?

NO . . . . . 01 → (E1)
YES . . . . . 02 → (D20)

D19. FOR RESPONDENTS WITH CHILDREN LIVING WITH THEM.

HAND R SELF-REPORT BOOKLET TURNED TO D19.

Now we have a few questions about your family--all family members living in the home, including you, your (wife/husband/partner) and/or any children you have living with you. Here is a list of statements people sometimes use to describe their families. Please indicate how often each of these describes your family at the present time.

Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
A. Family members are supportive of each other during difficult times	01	02	03	04	05
B. Family members sometimes get so angry they throw things	01	02	03	04	05
C. In our family, it is easy for everyone to express his/her opinion	01	02	03	04	05
D. It is easier to discuss problems with people outside the family than with other family members	01	02	03	04	05
E. Each family member has input in major family decisions	01	02	03	04	05
F. Our family gathers together in the same room	01	02	03	04	05
G. Family members sometimes hit each other.	01	02	03	04	05
H. Children have a say in their discipline	01	02	03	04	05
I. Our family does things together	01	02	03	04	05
J. Family members discuss problems and feel good about the solutions	01	02	03	04	05
K. In our family, everyone goes his/her own way	01	02	03	04	05
L. We shift household responsibilities from person to person	01	02	03	04	05
M. Family members know each other's close friends	01	02	03	04	05
N. It is hard to know what the rules are in our family	01	02	03	04	05

Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
O. Family members consult other family members on their decisions	01	02	03	04	05
P. We fight a lot in our family	01	02	03	04	05
Q. Family members say what they want	01	02	03	04	05
R. We have difficulty thinking of things to do as a family	01	02	03	04	05
S. In solving problems, the children's suggestions are followed	01	02	03	04	05
T. Family members feel very close to each other	01	02	03	04	05
U. Family members rarely criticize each other	01	02	03	04	05
V. Discipline is fair in our family	01	02	03	04	05
W. Family members feel closer to people outside the family than to other family members	01	02	03	04	05
X. Our family tries new ways of dealing with problems	01	02	03	04	05
Y. Family members go along with what the family decides to do	01	02	03	04	05
Z. In our family, everyone shares responsibilities	01	02	03	04	05
AA. Family members like to spend their free time with each other	01	02	03	04	05
BB. It is difficult to get a rule changed in our family	01	02	03	04	05
CC. Family members avoid each other at home	01	02	03	04	05
DD. When problems arise, we compromise	01	02	03	04	05
EE. We approve of each other's friends	01	02	03	04	05
FF. Family members are afraid to say what is on their minds	01	02	03	04	05
GG. Family members pair up rather than do things as a total family	01	02	03	04	05

Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
HH. Family members share interests and hobbies with each other	01	02	03	04	05
II. Family members hardly ever lose their tempers	01	02	03	04	05

WHEN R RETURNS BOOKLET, GO TO E1.

D20. FOR COUPLES WITHOUT CHILDREN.

HAND R SELF-REPORT BOOKLET TURNED TO PAGE D20.

Now we have a few questions about your family, that is, your wife/husband/partner and all family members living in the home. Here is a list of statements people sometimes use to describe their families. Please indicate how often each of these describe your family at the present time.

AFTER R FILLS OUT AND RETURNS BOOKLET, CONTINUE WITH E1.

Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
A. We are supportive of each other during difficult times	01	02	03	04	05
B. We sometimes get so angry we throw things	01	02	03	04	05
C. In our relationship, it is easy for both of us to express our opinion	01	02	03	04	05
D. It is easier to discuss problems with people outside the marriage/relationship than with my partner	01	02	03	04	05
E. We each have input regarding major family decisions	01	02	03	04	05
F. We spend time together when we are home	01	02	03	04	05
G. We sometimes hit each other	01	02	03	04	05
H. We are flexible in how we handle differences	01	02	03	04	05

Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
I. We do things together	01	02	03	04	05
J. We discuss problems and feel good about the solutions	01	02	03	04	05
K. In our marriage/relationship, we each go our own way	01	02	03	04	05
L. We shift household responsibilities between us	01	02	03	04	05
M. We know each other's close friends	01	02	03	04	05
N. It is hard to know what the rules are in our relationship	01	02	03	04	05
O. We consult each other on personal decisions	01	02	03	04	05
P. We fight a lot	01	02	03	04	05
Q. We freely say what we want	01	02	03	04	05
R. We have difficulty thinking of things to do together	01	02	03	04	05
S. We have a good balance of leadership in our family	01	02	03	04	05
T. We feel very close to each other	01	02	03	04	05
U. We rarely criticize each other	01	02	03	04	05
V. We operate on the principle of fairness in our marriage/relationship	01	02	03	04	05
W. I feel closer to people outside the marriage/relationship than to my partner	01	02	03	04	05
X. We try new ways of dealing with problems	01	02	03	04	05
Y. I go along with what my partner decides to do	01	02	03	04	05
Z. In our marriage/relationship, we share responsibilities	01	02	03	04	05
AA. We like to spend our free time with each other	01	02	03	04	05

Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
BB. It is difficult to get a rule change in our relationship	01	02	03	04	05
CC. We avoid each other at home	01	02	03	04	05
DD. When problems arise, we compromise	01	02	03	04	05
EE. We approve of each other's friends	01	02	03	04	05
FF. We are afraid to say what is on our minds.	01	02	03	04	05
GG. We tend to do more things separately	01	02	03	04	05
HH. We share interests and hobbies with each other	01	02	03	04	05
II. We hardly ever lose our tempers	01	02	03	04	05

SECTION E: EDUCATIONAL HISTORY

E1. What is the highest grade in regular school or year of college you have ever attended?

NONE, NO FORMAL SCHOOLING .	00							
ELEMENTARY:	01	02	03	04	05	06	07	08
HIGH SCHOOL:	09	10	11	12				
COLLEGE:	13	14	15	16				
GRADUATE/PROFESSIONAL: . .	17	18	19	20+				

E2. In what month and year did you last attend regular school or college?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

E3. Did you complete that grade or year and get credit for it?

NO 01
YES . . . . . 02 → (E4)

E3a. In what month and year did you complete your highest grade of school or year of college?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

E4. Did you get a high school (graduation) diploma?

NO 01
YES . . . . . 02 → (E7)

E5. Did you pass a high school equivalency test or GED?

NO . . . . . 01 → (E6)
YES 02

E5a. In what month and year did you obtain an equivalency (GED) certificate?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

→ (E7)

E6. Did you receive an Adult Basic Education (ABE) certificate?

NO . . . . . 01 → (E7)
YES 02

E6a. In what month and year did you receive an ABE?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494
REFUSE 9797

E7. In what month and year did you graduate or last attend high school?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

NEVER ATTENDED HIGH SCHOOL . . . . . 0000 → (E12)
DON'T KNOW 9494
REFUSE 9797

E8. HAND R CARD E-8.
Which of these best describes what you did in the first year or so after finishing or leaving high school?

WENT TO COLLEGE 01
WORKED FOR A YEAR OR TWO AND THEN WENT TO COLLEGE 02
GOT A PART-TIME JOB AND WENT TO COLLEGE 03
GOT A FULL-TIME JOB AND WENT TO COLLEGE 04
→ (E9a)
WENT TO TRADE SCHOOL, OR TOOK SPECIAL TRAINING 05
GOT A JOB 06
BECAME AN APPRENTICE 07
MILITARY SERVICE 08
OTHER 09

(SPECIFY) _____

E9. Did you ever attend either a junior (two-year) or four-year college?

NO . . . . . 01 → (E11)
YES 02

E9a. In what month and year did you first attend (either a junior or four-year college) as an undergraduate?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494
REFUSE 9797

E9b. And, in what month and year did you last attend college as an undergraduate, either completing the requirements for a degree or, if you did not graduate, your last semester in college?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

STILL IN COLLEGE 0000
DON'T KNOW 9494
REFUSE 9797

E9c. Did you attend college full-time or part-time?

FULL-TIME 01
BOTH FULL-TIME AND PART-TIME (COMBINATION) 02
PART-TIME 03

E9d. During this period did you ever drop out or withdraw from college for one semester or more and then go back to any college later?

NO 01
YES 02

E9e. Did you receive a four-year college or bachelor's degree, such as a Bachelor of Arts (B.A. or A.B.) or Bachelor of Science (B.S.) degree?

NO 01
YES . . . . . 02 → (E9g)

E9f. Did you receive a junior college or an Associate of Arts (A.A.) degree?

NO . . . . . 01 → (E10)
YES 02

E9g. In what month and year did you receive that degree?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494
REFUSE 9797

E10. Did you ever attend a graduate or professional school?

NO . . . . . 01 → (E11)
YES 02

E10a. In what month and year did you first attend a graduate or professional school?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494
REFUSE 9797

E10b. And, in what month and year did you last attend a graduate or professional school, either completing requirements for a degree or, if you did not graduate, your last semester as a graduate or professional student?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

STILL IN GRADUATE SCHOOL 0000
DON'T KNOW 9494
REFUSE 9797

E10c. Did you attend graduate school full-time or part-time?

FULL-TIME 01
BOTH FULL-TIME AND PART-TIME (COMBINATION) 02
PART-TIME 03

E10d. During this period did you ever drop out or withdraw from graduate or professional school for one semester or more and then return (somewhere) later?

NO 01
YES 02

E10e. Did you receive a graduate or professional degree?

NO . . . . . 01 → (E11)
YES 02

E10f. What is the highest degree you received?

MASTER'S DEGREE (e.g., M.A., M.S., M.B.A., OR M.S.W.) 01
DOCTOR OF PHILOSOPHY (Ph.D.) OR OTHER DOCTORATE (e.g., Ed.D.) 02
PROFESSIONAL DEGREE (e.g., M.D., D.D.S., J.D.) 03
OTHER (SPECIFY) 04

E10g. In what month and year did you receive that degree?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494
REFUSE 9797

E11. INTERVIEWER CHECKPOINT: REVIEW E1-E3a, E9, E9b, E10, E10b

ARE YEARS AND DATES REPORTED IN E1-E3a CONSISTENT WITH RESPONSES IN E9, E9b, E10, E10b?

NO . . . . . 01 → (RECONCILE E1-E3a, E9, E9b, E10, E10b)
YES 02

E12. Besides what you've told me about your regular schooling, did you ever attend any other kind of school, such as a vocational or technical school?

NO . . . . . 01 → (E13)
YES 02

E12a. What type(s) of school(s) did you attend?

CIRCLE ALL THAT APPLY.

TECHNICAL SCHOOL OR INSTITUTE (E.G., DRAFTING, ELECTRONICS, ETC.) 01
BUSINESS SCHOOL (E.G., BOOK-KEEPING, SECRETARIAL, DATA PROCESSING, ETC.) 02
TRADE SCHOOL (E.G., CARPENTRY, NURSING-LPN, PLUMBING, ETC.) . 03
HOSPITAL AFFILIATED NURSING PROGRAM--RN 04
OTHER (SPECIFY) 05

E12b. In what month and year did you first attend such a school?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494
REFUSE 9797

E12c. And, in what month and year did you last attend a school like that?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

STILL IN VOCATIONAL SCHOOL . . . 0000
DON'T KNOW 9494
REFUSE 9797

E12d. Did you receive a vocational (adult) training or school certificate of completion or license for this schooling?

NO . . . . . 01 → (E13)
YES 02

E12e. In what month and year did you receive this certificate or license?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494
REFUSE 9797

E13. (Other than in the military,) have you ever received any job training, skills development, or work experience training?

NO . . . . . 01 → (E14)
YES 02

E13a. What type(s) of training have you received?

_____

_____

_____

E13b. In what month and year did you last receive any such training?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

STILL IN TRAINING 0000
DON'T KNOW 9494
REFUSE 9797

E14.

RECORD ENDING DATE AND TIME: ☐☐ MONTH / ☐☐ DAY ☐☐ HOUR : ☐☐ MINUTE A.M. P.M.

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SECTION F: OCCUPATIONAL HISTORY AND WORK ROLE ADJUSTMENT

RECORD BEGINNING DATE AND TIME: ☐☐ / ☐☐ ☐☐ : ☐☐ A.M. P.M.
MONTH DAY HOUR MINUTE

Next, we would like to find out about your past and present employment.

F1. First, do you have any physical or nervous condition that keeps you from working at a job or business, or that limits the kind or amount of work you can do?

NO . . . . . 01 → (F2)
YES 02

F1a. What condition is that?

_____

_____

_____

_____

F2. HAND R CARD F-2.

Are you working now, unemployed, retired, (a student), (a housewife), or what?

CODE ONLY PRIMARY ACTIVITY.

WORKING NOW . . . . . 01 → (F8)
WITH A JOB, BUT NOT AT WORK (BECAUSE OF TEMPORARY ILLNESS, ON SICK LEAVE, VACATION, LABOR DISPUTE, ON STRIKE, BAD WEATHER, OR OTHER TEMPORARY LAYOFF) . . . . . 02 → (F8)
UNEMPLOYED OR PERMANENT LAYOFF 03
RETIRED . . . . . 04 → (F6)
GOING TO SCHOOL OR TRAINING PROGRAM 05
KEEPING HOUSE . . . . . 06 → (F2b)
DISABLED (UNABLE TO WORK) 07
NOT WORKING-INSTITUTIONALIZED . . . . . 08 → (F5)
OTHER . . . . . 09 → (F2b)

(SPECIFY) _____ → (F2b)

F2a. How long have you been unemployed?

RECORD NUMBER OF MONTHS: ☐☐ MONTHS

DON'T KNOW 94
REFUSE 97
NEVER HAD JOB . . . . . 00 → (F3)

F2b. Are you doing <u>any</u> work for pay at the present time?

NO 01
YES . . . . . 02 → (F8)

F3. Are you <u>looking</u> for work at the present time?

NO . . . . . 01 → (F4)
YES 02

F3a. How many weeks have you been looking for work?

RECORD NUMBER: ☐☐ WEEKS → (F5)

DON'T KNOW 94
REFUSE 97

F4. Even though you are not looking now, do you want a regular job, either full- or part-time?

NO 01
YES . . . . . 02 → (F5)
MAYBE--IT DEPENDS 03

F4a. A lot of people would like to work but have lost hope that they can find a decent job. Some lose hope so much they stop looking for work. Is this true for you?

NO 01
YES 02

F5. Have you <u>ever</u> done any work for pay (at a regular job or business)?

NO . . . . . 01 → (G1)
YES 02

F6. When did you last work for pay at a regular job or business, either full-time or part-time?

RECORD DATE: ☐☐ MONTH <u>AND</u> ☐☐ YEAR

DON'T KNOW 9494
REFUSE 9797

F7. Why did you leave that job--did the company go out of business, were you laid off, did you quit, go back to school, retire, or what?

CIRCLE ONLY ONE REASON.

COMPANY WENT OUT OF BUSINESS	01
LAID OFF OR FIRED	02
QUIT	03
SEASONAL JOB COMPLETED	04
TEMPORARY (NONSEASONAL) JOB COMPLETED	05
LEFT JOB FOR MEDICAL REASONS	06
BACK TO SCHOOL	07
ENLISTED OR DRAFTED IN MILITARY SERVICE	08
RETIRED	09
OTHER (SPECIFY)	10

_____

_____

DON'T KNOW	94
REFUSE	97

F8. Now I have some questions about your (last) main occupation or job. For whom (do/did) you work (last)?

IF MORE THAN ONE JOB, THE ONE ON WHICH RESPONDENT SPENDS THE MOST TIME, OR IF TIME SPENT IS EQUAL, THE ONE WHICH PROVIDES THE MOST INCOME.

_____

NAME OF COMPANY, BUSINESS, ORGANIZATION, OR OTHER EMPLOYER

F9. What kind of business or industry (is/was) this? What (do/did) they do or make at the place where you (work/worked)?

E.G., TV AND RADIO MANUFACTURING, RETAIL SHOE STORE, STATE LABOR DEPARTMENT, FARM, ETC.

_____

_____

INDUSTRY

F10. What kind of work (are you doing/did you do)? What (is/was) your main occupation called?

E.G., ELECTRICAL ENGINEER, SALES CLERK, TYPIST, FARMER.

_____

_____

F11. What (are/were) your most important activities or duties? Tell me a little more about what you actually (do/did) in that job.

E.G., TYPE, KEEP ACCOUNT BOOKS, FILE, SELL CARS, OPERATE PRINTING PRESS, FINISH CONCRETE, ETC.

_____

_____

OCCUPATION
| | | |

F12. (Is/Was) that full-time or part-time work?

FULL-TIME 01
PART-TIME 02

F13. How many hours per week (do/did) you usually work at this job?

RECORD NUMBER: | | | |
HOURS/WEEK

DON'T KNOW 994
REFUSE 997

F14. HAND R CARD F-14.

(Are/Were) you .....

An employee of a private company, business, or individual for wages, salary, or commissions? . 01
A government employee (federal, state, county, or local government) 02
Self-employed in own business, professional practice, or farm? 03
Working for pay in a family business or farm? . . 04
Working without pay in a family business or farm? . . . . . 05 → (F16)
OTHER (SPECIFY) 06

_____

F15. What (is/was) your wage, salary, or rate of pay on this job, before taxes and deductions?

RECORD ACTUAL AMOUNT, THEN CIRCLE ONE CODE FOR RATE. IF SELF EMPLOYED, ASK FOR TOTAL YEARLY EARNINGS.

$ | | | | | | | . | | | PER:
DOLLARS CENTS

DON'T KNOW 99999994
REFUSE 99999997

HOUR 01
DAY 02
WEEK 03
TWO WEEKS 04
MONTH 05
YEAR 06
OTHER 07

(SPECIFY)_____

F16. For how many years or months altogether (have you worked/did you work) for (your present/that employer) (PERSON OR PLACE MENTIONED IN F8)?

RECORD NUMBER: ☐☐ → MONTHS . . . 01
YEARS . . . 02

DON'T KNOW 9494
REFUSE 9797

F17. Now I have a few more questions about your (current/last regular) job--the one as a (JOB TITLE IN F10) with (EMPLOYER MENTIONED IN F8). (Is/Was) your (last) job one where you (have/had) regular, steady work throughout the year, (is/was) it seasonal, (are/were) there frequent layoffs, or what?

REGULAR, STEADY EMPLOYMENT 01
SEASONAL, WITH EXPECTED PERIODS OF EMPLOYMENT . . 02
COMPLETING SPECIFIC JOBS WITH POSSIBLE UNEMPLOYMENT BETWEEN JOBS 03
FREQUENT LAYOFFS 04
OTHER (SPECIFY) 05

F18. What level of formal education do you feel is needed by a person in your (last) job?

NONE 00
GRADES 1-7 (SOME GRADE SCHOOL) . 10
GRADE 8 (COMPLETION OF GRADE SCHOOL) 20
GRADES 9-11 (SOME HIGH SCHOOL) . 30
GRADE 12 (HIGH SCHOOL DIPLOMA, GED, OR ANY HIGH SCHOOL EQUIVALENT) 40
SOME COLLEGE WITHOUT DEGREE . . . 50
GRADUATE OF JUNIOR COLLEGE . . . 51
GRADUATE OF 4 YEAR COLLEGE . . . 60
GRADUATE OR PROFESSIONAL EDUCATION IN EXCESS OF COLLEGE DEGREE 70

F19. All in all, how satisfied would you say you (are/were) with your (last) job--very satisfied, somewhat satisfied, not too satisfied, or not at all satisfied?

VERY SATISFIED 01
SOMEWHAT SATISFIED 02
NOT TOO SATISFIED 03
NOT AT ALL SATISFIED 04

F20. Is this the kind of work you (have done/did) for the major portion of your working life? Of all kinds of work you've done is (JOB MENTIONED IN F10) the kind you've done longest?

NO . . . . . 01 → (F23)
YES 02

F21. When did you first start working as a (JOB TITLE MENTIONED IN F10)?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

F22. For how many years or months altogether (have you worked/did you work) as a (JOB TITLE MENTIONED IN F10)?

RECORD NUMBER: [ ][ ] →
MONTHS . . . 01
YEARS 02
→ (F35)
DON'T KNOW 9494
REFUSE 9797

F23. What kind of work have you done for the major portion of your working life?

E.G., ELECTRICAL ENGINEER, SALES CLERK, TYPIST, FARMER.

_____

_____

F24. What were your most important activities or duties? Tell me a little more about what you actually did in that job.

E.G., TYPE, KEEP ACCOUNT BOOKS, FILE, SELL CARS, OPERATE PRINTING PRESS, FINISH CONCRETE, ETC.

_____ OCCUPATION [ ][ ][ ]

_____

F25. While doing that kind of work, for whom did you work the longest?

_____
NAME OF COMPANY, BUSINESS, ORGANIZATION, OR OTHER EMPLOYER

F26. What kind of business or industry was that? What did they do or make at that place?

E.G., TV AND RADIO MANUFACTURING, RETAIL SHOE STORE, STATE LABOR DEPARTMENT, FARM, ETC.

INDUSTRY

F27. Was that full-time or part-time work?

FULL-TIME 01
PART-TIME 02

F28. How many hours per week did you usually work at that job?

RECORD NUMBER: HOURS/WEEK

DON'T KNOW 994
REFUSE 997

F29. HAND R CARD F-14.

Were you.....

An employee of a private company, business, or individual for wages, salary, or commissions? . 01
A government employee (federal, state, county, or local government) 02
Self-employed in own business, professional practice, or farm? 03
Working for pay in a family business or farm? . . 04
Working without pay in a family business or farm? . . . . . 05 → (F28)
OTHER (SPECIFY) 06

F30. What was your (highest) wage, salary, or rate of pay on this job, before taxes and deductions?

RECORD ACTUAL AMOUNT, THEN CIRCLE ONE CODE FOR THE RATE. IF SELF EMPLOYED, ASK FOR TOTAL YEARLY EARNINGS.

$ [ ][ ][ ][ ][ ][ ] . [ ][ ]
DOLLARS CENTS

DON'T KNOW 99999994
REFUSE 99999997

PER: HOUR 01
DAY 02
WEEK 03
TWO WEEKS 04
MONTH 05
YEAR 06
OTHER 07

(SPECIFY)_____

F31. When did you first start working for (PERSON OR PLACE IN F25)?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

F32. For how many years or months altogether did you work for that employer (PERSON OR PLACE MENTIONED IN F25)?

RECORD NUMBER: [ ][ ] → MONTHS . . 01
YEARS . . . 02

DON'T KNOW 9494
REFUSE 9797

F33. When did you first start working as a (JOB TITLE MENTIONED IN F23)?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 994
REFUSE 997

F34. And, for how many years or months altogether did you work as a (JOB TITLE MENTIONED IN F23)?

RECORD NUMBER: [ ][ ] → MONTHS . . 01
YEARS . . . 02

DON'T KNOW 9494
REFUSE 9797

F35. Now I'd like to ask you some questions about your work history.

First, not counting military service, how many different employers have you had (including working for yourself as one employer) since leaving high school or the first time you stopped going to school?

RECORD NUMBER: [ ][ ][ ]
EMPLOYERS

DON'T KNOW 994
REFUSE 997

F36. And how many different kinds of jobs have you had during this same period--such as a machinist, auto mechanic, mail handler, sales engineer, etc.?

RECORD NUMBER: [ ][ ][ ]
JOBS

DON'T KNOW 994
REFUSE 997

F37. What is the longest period of time during those years that you held a job with the same employer?

INCLUDE SELF-EMPLOYMENT.

RECORD NUMBER: [ ][ ] → MONTHS . . 01
YEARS . . 02

DON'T KNOW 9494
REFUSE 9797

F38. Since leaving high school (the first time you stopped going to school), how many periods of unemployment have you had--that is, periods lasting over a month when you were not working but were either looking for work or wanted a job?

RECORD NUMBER: [ ][ ][ ]
PERIODS OF UNEMPLOYMENT

NONE . . . . . 000 → (G1)
DON'T KNOW 994
REFUSE 997

F39. In what month and year were you first unemployed for over a month?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

F40. In what month and year did that period of unemployment end?

RECORD INTERVIEW DATE IF STILL UNEMPLOYED

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

F41. INTERVIEWER CHECKPOINT

REVIEW F38. IS THERE MORE THAN ONE PERIOD OF UNEMPLOYMENT?

NO (F38 = 001) . . . . . 01 → (G1)
YES (F38 > 001 OR DK OR RE) . . . 02

F42. In what month and year were you last (most recently) unemployed for over a month?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

F43. In what month and year did that period of unemployment end?

RECORD INTERVIEW DATE IF STILL UNEMPLOYED.

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR

DON'T KNOW 9494
REFUSE 9797

F44. INTERVIEWER CHECKPOINT

REVIEW F38. ARE THERE MORE THAN TWO PERIODS OF UNEMPLOYMENT?

NO (F38 = 002) . . . . . 01 → (G1)
YES (F38 > 002 OR DK OR RE) 02

F45. What is the longest period of time (number of months) during those years (since high school) that you have been unemployed and looking for work?

RECORD NUMBER: [ ][ ] → MONTHS . . 01
YEARS . . . 02

DON'T KNOW 9494
REFUSE 9797

SECTION G: CHILDHOOD AND FAMILY HISTORY

MARK * RESPONSES ON TALLY SHEET X.

We've spent some time discussing the details of your present life. Let's go back now and talk about life when you were a child.

G1. First, where did you live mostly while you were growing up?

IF R MENTIONS MORE THAN ONE PLACE, PROBE FOR PLACE LIVED MOST BETWEEN AGES 6-16

CITY (OR TOWN) _____ COUNTY _____ STATE (OR COUNTRY IF NOT U.S.A.) _____

OFFICE USE

G2. Was that in a rural or country area, a small town, a small city, a suburb of a large city, or in a large city?

IF MORE THAN ONE, CODE FOR PLACE RECORDED IN G1.

RURAL OR COUNTRY AREA	01
SMALL TOWN (<25,000)	02
SMALL CITY (25,000-100,000)	03
SUBURB OF A LARGE CITY	04
LARGE CITY (>100,000)	05
OTHER (SPECIFY) _____	06

G3. What was your religious background when you were growing up--Protestant, Roman Catholic, Jewish, or something else?

PROTESTANT	01	
ROMAN CATHOLIC	02	
JEWISH	03	
BLACK MUSLIM	04	→ (G4)
NONE; NO RELIGION	05	
OTHER (SPECIFY) _____	06	

G3a. What church or denomination was that?

NON-DENOMINATIONAL PROTESTANT CHURCH	01
BAPTIST	02
METHODIST	03
LUTHERAN	04
PRESBYTERIAN	05
EPISCOPALIAN, ANGLICAN, CHURCH OF ENGLAND	06
CHURCH OF CHRIST	07
PENTECOSTAL OR ASSEMBLY OF GOD	08
CONGREGATIONAL	09
PRIMITIVE BAPTIST OR FREE WILL BAPTIST, MISSIONARY BAPTIST	10
LATTER DAY SAINTS, MORMONS	11
"CHRISTIAN"	12
OTHER (SPECIFY)	13

G4. Were any languages other than English spoken in your home when you were growing up?

NO	01	→ (G5)
YES	02	

G4a. What language(s) (was/were) spoken?

CIRCLE ALL THAT APPLY.

GERMAN	01
SPANISH	02
FRENCH	03
CHINESE	04
JAPANESE	05
ITALIAN	06
YIDDISH	07
OTHER (SPECIFY)	08

G5. Did you always live with <u>both</u> your natural mother <u>and</u> father until you were 16 years old?

DON'T COUNT INTERRUPTIONS OF LESS THAN A YEAR.

NO	01	
YES	02*	→ (G6)

G5a. Did you <u>ever</u> live with <u>both</u> your natural mother <u>and</u> father?

NO	01
YES	02*

G5b. What happened to prevent you from living with both of them until you were 16?

R NEVER LIVED WITH NATURAL PARENTS TO HIS/HER KNOWLEDGE . . . . . 01 → (G5e)

R GIVEN UP FOR ADOPTION 02

PARENTS NEVER MARRIED, NEVER LIVED TOGETHER . . . 10

FATHER DIED 20
MOTHER DIED 21
BOTH PARENTS DIED 22

PARENTS SEPARATED, FATHER LEFT HOME 30
PARENTS SEPARATED, MOTHER LEFT HOME 31
PARENTS SEPARATED, BOTH LEFT R'S HOME 32
PARENTS SEPARATED, R SENT TO LIVE WITH SOMEONE ELSE 33

PARENTS DIVORCED, FATHER LEFT HOME 40
PARENTS DIVORCED, MOTHER LEFT HOME 41
PARENTS DIVORCED, BOTH LEFT R'S HOME 42
PARENTS DIVORCED, R SENT TO LIVE WITH SOMEONE ELSE 43

R SENT TO LIVE WITH SOMEONE ELSE, PARENT(S) ALIVE AND NOT SEPARATED OR DIVORCED 50

R ABANDONED (LIVED SOME TIME WITH NATURAL PARENTS) 60

R LEFT HOME, RAN AWAY 70

OTHER (SPECIFY) 80

G5c. How old were you when that (first) happened?

RECORD AGE: ☐☐ → (G5e)
YEARS

DON'T KNOW 94

G5d. Would you say it was before you were 6 years old or later than that?

BEFORE AGE 6 01
AGE 6 OR OLDER 02

G5e. Who did you live with (who raised you) most of the time when you were not living with <u>both</u> your natural parents (until you were 16)?

MOTHER ALONE	01
MOTHER WITH STEPFATHER(S)	02*
MOTHER WITH RELATIVE(S)	03
FATHER ALONE	11
FATHER WITH STEPMOTHER(S)	12*
FATHER WITH RELATIVE(S)	13
GUARDIAN <u>FAMILY</u> (INCLUDING ADOPTIVE PARENTS, GRANDPARENTS, OR OTHER RELATIVES	21*
FEMALE GUARDIAN (INCLUDING ADOPTIVE MOTHER, GRANDMOTHER, OR OTHER FEMALE RELATIVE)	22
MALE GUARDIAN (INCLUDING ADOPTIVE FATHER, GRANDFATHER, OR OTHER MALE RELATIVE)	23
FOSTER PARENT(S)	31*
ORPHANAGE	32 → (G49)
OTHER (SPECIFY)	40

G6. Think about the home you lived in when you were six. Did you move from this house before you were 16?

MOVE = CHANGED PRINCIPAL RESIDENCE.

NO	01 → (G7)
YES	02

G6a. How many houses did you live in between the ages of 6 and 16?

	HOUSES

G6b. How many-times (if any) did you have to change schools because you had moved?

	TIMES

G7. The next set of questions is about the people who were a mother and father to you. These might be your natural parents, your stepparents, a guardian, or someone else. First, who was the man most responsible for raising you while you were growing up (ages 6-16)?

NO MAN RESPONSIBLE (E.G., ORPHANAGE, INSTITUTION, RAISED ONLY BY FEMALES)	00	→ (G19)
FATHER	01	
ADOPTIVE FATHER	02	
STEPFATHER	03	
BROTHER; STEPBROTHER	04	
BROTHER-IN-LAW	05	
UNCLE	06	
GRANDFATHER	07	
FOSTER FATHER	08	
OTHER MALE RELATIVE	09	
OTHER MALE NON-RELATIVE	10	

G8. Now I have a few questions about your (father/MALE MOST RESPONSIBLE FOR RAISING R IN G7). First, what was the highest grade of school or year of college your (father/RELATIONSHIP) completed?

NONE, NO FORMAL SCHOOLING	00				
ELEMENTARY	01	02	03	04	
	05	06	07	08	
HIGH SCHOOL	09	10	11	12	→ (G9)
COLLEGE	13	14	15	16	
GRADUATE/PROFESSIONAL	17	18	19	20+	
DON'T KNOW	94				

G8a. Would you guess that he had less than seven years of school, between seven and twelve years of school, finished high school, or had some schooling past high school?

LESS THAN SEVEN YEARS	01
BETWEEN SEVEN AND TWELVE YEARS	02
FINISHED HIGH SCHOOL	03
SOME SCHOOLING PAST HIGH SCHOOL	04

G9. Did your (father/RELATIONSHIP) ever serve in the Armed Forces?

NO	01	→ (G10)
YES	02	

G9a. In which branch did he serve?

CIRCLE ALL THAT APPLY.

ARMY	01
AIR FORCE	02
NAVY	03
MARINE CORPS	04
COAST GUARD	05
RESERVES/NATIONAL GUARD	06

G9b. Did he serve during any of the following periods...

	NO	YES
1. World War I	01	02
2. World War II	01	02
3. Korean War	01	02
4. Vietnam War	01	02
5. Any Other Time	01	02

G9c. While he was in the military, did your (father/RELATIONSHIP) ever experience combat?

NO	01	→ (G10)
YES	02	

G9d. While in the military, was he wounded or killed?

NO	01
YES, WOUNDED	02
YES, KILLED	03

G10. While you were growing up, did your (father/RELATIONSHIP) do any work for pay?

NO	01	→ (G10)
YES	02	

G10a. What was your (father's/RELATIONSHIP'S) main occupation while you were growing up--what sort of work did he do?

RECORD JOB TITLE: E.G., SALES CLERK, ELECTRICAL ENGINEER, FARMER, ETC.

_____

_____

G10b. What were his most important activities or duties? Tell me a little more about what he actually did in that job.

E.G., KEEP ACCOUNT BOOKS, SELL CARS, OPERATE PRINTING PRESS, FINISH CONCRETE, ETC.

_____ OCCUPATION ☐☐☐

_____

G10c. While doing that kind of work, for whom did he work the longest?

_____
NAME OF COMPANY, BUSINESS, ORGANIZATION, OR OTHER EMPLOYER.

G10d. What kind of business or industry was that?

E.G., TV AND RADIO MANUFACTURING, RETAIL SHOE STORE, FARM, ETC.

_____ INDUSTRY ☐☐☐

_____

G10e. Did he work for himself or for someone else?

SELF-EMPLOYED 01
SOMEONE ELSE 02
BOTH 03

G11. While you were growing up, can you remember a time when your (father/ RELATIONSHIP) was out of work for 3 months or longer and not on vacation?

NO . . . . . 01 → (G12)
YES 02

G11a. For how many months altogether was he out of work while you were 6 to 16 (years old)?

WHOLE TIME = 120 MONTHS.

RECORD NUMBER: ☐☐☐
MONTHS OUT OF WORK

DON'T KNOW 994
REFUSED 997

G12. HAND R CARD G-12.

The next questions are about your relationship with your (father/RELATIONSHIP) when you were growing up. Overall, while you were growing up (ages 6-16), how was your relationship with your (father/RELATIONSHIP)? Just read me the number on this card.

POOR	01
	02
FAIR	03
	04
AVERAGE	05
	06
GOOD	07
	08
EXCELLENT	09

G13. HAND R CARD G-13 TO USE THROUGH G18.

When you were growing up, how much did your (father/ RELATIONSHIP) show you affection (like hugging or kissing you, or doing something else to make you feel cared for)--not at all, just a little, some, pretty much, or a great deal?

NOT AT ALL	01
JUST A LITTLE	02
SOME	03
PRETTY MUCH	04
A GREAT DEAL	05

G14. How much did you and he do things together that you both enjoyed doing?

NOT AT ALL	01
JUST A LITTLE	02
SOME	03
PRETTY MUCH	04
A GREAT DEAL	05

G15. IF R IS FEMALE → (G16)
When you were growing up, how much did you want to be like your (father/ RELATIONSHIP)?

NOT AT ALL	01
JUST A LITTLE	02
SOME	03
PRETTY MUCH	04
A GREAT DEAL	05

G16. How much did he make it easy for you to confide in him?

NOT AT ALL	01
JUST A LITTLE	02
SOME	03
PRETTY MUCH	04
A GREAT DEAL	05

G17. How close did you feel to him?

NOT AT ALL 01
JUST A LITTLE 02
SOME 03
PRETTY MUCH 04
A GREAT DEAL 05

G18. How much did he try to help you when you were scared or upset?

NOT AT ALL 01
JUST A LITTLE 02
SOME 03
PRETTY MUCH 04
A GREAT DEAL 05

G19. Who was the woman most responsible for raising you while you were growing up (ages 6-16)?

NO WOMAN RESPONSIBLE, E.G., ORPHANAGE, INSTITUTION, RAISED ONLY BY MALES . . . . . 00 → (G31)
MOTHER 01
ADOPTIVE MOTHER 02
STEPMOTHER 03
SISTER; STEPSISTER 04
SISTER-IN-LAW 05
AUNT 06
GRANDMOTHER 07
FOSTER MOTHER 08
OTHER FEMALE RELATIVE 09
OTHER FEMALE NON-RELATIVE 10

G20. Now I have a few questions about your (mother/FEMALE MOST RESPONSIBLE FOR RAISING R IN G19). First, what was the highest grade of school or year of college your (mother/RELATIONSHIP) completed?

NONE, NO FORMAL SCHOOLING	00				
ELEMENTARY	01	02	03	04	
	05	06	07	08	
HIGH SCHOOL	09	10	11	12	→ (G21)
COLLEGE	13	14	15	16	
GRADUATE/PROFESSIONAL	17	18	19	20+	

DON'T KNOW 94

G20a. Would you guess that she had less than seven years of school, between seven and twelve years of school, finished high school, or had some schooling past high school?

LESS THAN SEVEN YEARS	01
BETWEEN SEVEN AND TWELVE YEARS	02
FINISHED HIGH SCHOOL	03
SOME SCHOOLING PAST HIGH SCHOOL	04

G21. Did your (mother/RELATIONSHIP) ever serve in the Armed Forces?

NO	01	→ (G22)
YES	02	

G21a. In which branch did she serve?

CIRCLE ALL THAT APPLY.

ARMY	01
AIR FORCE	02
NAVY	03
MARINE CORPS	04
COAST GUARD	05
RESERVES/NATIONAL GUARD	06

G21b. Did she serve during any of the following periods...

	NO	YES
1. World War I	01	02
2. World War II	01	02
3. Korean War	01	02
4. Vietnam War	01	02
5. Any Other Time	01	02

G21c. While she was in the military, was your (mother/RELATIONSHIP) ever exposed to combat?

NO	01	→ (G22)
YES	02	

G21d. While in the military, was she wounded or killed?

NO	01
YES, WOUNDED	02
YES, KILLED	03

G22. Did your (mother/RELATIONSHIP) ever work for pay (outside the home) while you were growing up?

NO	01	→ (G24)
YES	02	

G22a. What was her main occupation while you were growing up--what sort of work did she do?

RECORD JOB TITLE: E.G., TYPIST, SALES CLERK, ELECTRICAL ENGINEER, ETC.

_____

_____

G22b. What were her most important activities or duties? Tell me a little more about what she actually did in that job?

E.G., TYPE, SELL SHOES, FILE, KEEP ACCOUNT BOOKS, ETC.

_____ OCCUPATION

_____ [ ][ ][ ]

G22c. While doing that kind of work, for whom did she work the longest?

_____

NAME OF COMPANY, BUSINESS, ORGANIZATION, OR OTHER EMPLOYER.

G22d. What kind of business or industry was that?

E.G., TV AND RADIO MANUFACTURING, RETAIL SHOE STORE, STATE LABOR DEPARTMENT, ETC.

_____ INDUSTRY

_____ [ ][ ]

G22e. Did she work for herself or for someone else?

SELF-EMPLOYED 01
SOMEONE ELSE 02
BOTH 03

G22f. Overall, how were you taken care of while your (mother/RELATIONSHIP) was working and you were not in school?

CIRCLE ALL THAT APPLY.

R TOOK CARE OF (CARED FOR) SELF 10

MOTHER/SUBSTITUTE--SHE WORKED AT HOME . . . 21
MOTHER/SUBSTITUTE WATCHED R AT WORK 22
MOTHER/SUBSTITUTE WORKED ONLY WHILE
R IN SCHOOL 23

R'S (OTHER) PARENT/STEP-PARENT 31
R'S BROTHER(S)/SISTER(S) 32
R'S GRANDPARENT(S) 33
OTHER RELATIVE(S) OF R 34

MOTHER'S PARTNER 41
OTHER NON-PROFESSIONAL, NON-RELATIVE OF R . 42

SITTER/BABYSITTER 51
NURSERY, PRESCHOOL, OR KINDERGARTEN 52
DAY/GROUP CARE CENTER 53

OTHER (SPECIFY) 70

G23. After your (mother/RELATIONSHIP) began working, can you remember any time when she was out of work without choosing to be for three months or longer (while you were growing up)?

NO . . . . . 01 → (G24)
YES 02

G23a. For how many months altogether was she out of work without choosing to be while you were 6 to 16 (years old)?

WHOLE TIME = 120 MONTHS.

RECORD NUMBER: [| |]
MONTHS OUT OF WORK

DON'T KNOW 994
REFUSED 997

G24. HAND R CARD G-24.

The next questions are about your relationship with your (mother/RELATIONSHIP) when you were growing up. Overall, while you were growing up (ages 6-16), how was your relationship with your (mother/RELATIONSHIP)? Just read me the number on this card?

POOR	01
	02
FAIR	03
	04
AVERAGE	05
	06
GOOD	07
	08
EXCELLENT	09

G25. HAND R CARD G-25 GO USE THROUGH G30.
When you were growing up, how much did your (mother/ RELATIONSHIP) show you affection (like hugging or kissing you or doing something else to make you feel cared for)--not at all, just a little, some, pretty much, or a great deal?

NOT AT ALL	01
JUST A LITTLE	02
SOME	03
PRETTY MUCH	04
A GREAT DEAL	05

G26. How much did you and she do things together that you both enjoyed doing?

NOT AT ALL	01
JUST A LITTLE	02
SOME	03
PRETTY MUCH	04
A GREAT DEAL	05

G27. IF R IS MALE → (G28)
When you were growing up, how much did you want to be like your (mother/RELATIONSHIP)?

NOT AT ALL	01
JUST A LITTLE	02
SOME	03
PRETTY MUCH	04
A GREAT DEAL	05

G28. How much did she make it easy for you to confide in her?

NOT AT ALL	01
JUST A LITTLE	02
SOME	03
PRETTY MUCH	04
A GREAT DEAL	05

G29. How close did you feel to her?

NOT AT ALL 01
JUST A LITTLE 02
SOME 03
PRETTY MUCH 04
A GREAT DEAL 05

G30. How much did she try to help you when you were scared or upset?

NOT AT ALL 01
JUST A LITTLE 02
SOME 03
PRETTY MUCH 04
A GREAT DEAL 05

G31. How many natural brothers and sisters did you have while you were growing up?

RECORD NUMBER: ☐☐

NONE . . . . . 00 → (G34)

G31a. Were you the first born (oldest), second born, last born (youngest) or what?

RECORD NUMBER: ☐☐ 1ST = 01, 3RD = 03, ETC.
BIRTH ORDER

G32. Do you have any brothers or sisters who served in the Armed Forces?

INCLUDE NATURAL AND ANY OTHER SIBLINGS.

NO . . . . . 01 → (G34)
YES 02

G32a. How many of your brothers and sisters have served in the Armed Forces?

RECORD NUMBER: ☐☐
SIBLINGS

G33. Now a few questions about each brother or sister who served in the Armed Forces. ASK G33a THROUGH G33d FOR EACH SIBLING WHO SERVED IN THE ARMED FORCES, BEGINNING WITH THE OLDEST:

		SIBLING 01	SIBLING 02	SIBLING 03
G33a.	In which branch did s/he serve? CIRCLE ALL THAT APPLY.	ARMY . . . . . 01 AIR FORCE . . . . 02 NAVY . . . . . 03 MARINE CORPS . . . 04 COAST GUARD . . . 05 RESERVES/NATIONAL GUARD 06	ARMY . . . . . 01 AIR FORCE . . . . 02 NAVY . . . . . 03 MARINE CORPS . . . 04 COAST GUARD . . . 05 RESERVES/NATIONAL GUARD 06	ARMY . . . . . 01 AIR FORCE . . . . 02 NAVY . . . . . 03 MARINE CORPS . . . 04 COAST GUARD . . . 05 RESERVES/NATIONAL GUARD 06
G33b.	Did s/he serve during any of the following periods... CIRCLE ALL THAT APPLY.	World War I . . . 01 World War II . . . 02 Korean War . . . . 03 Vietnam War . . . 04 Any Other Time . . 05	World War I . . . 01 World War II . . . 02 Korean War . . . . 03 Vietnam War . . . 04 Any Other Time . . 05	World War I . . . 01 World War II . . . 02 Korean War . . . . 03 Vietnam War . . . 04 Any Other Time . . 05
G33c.	Did s/he ever experience (or was exposed to) combat?	NO . . . . . 01 YES . . . . . 02 IF NO, SKIP TO NEXT SIBLING OR G34.	NO . . . . . 01 YES . . . . . 02 IF NO, SKIP TO NEXT SIBLING OR G34.	NO . . . . . 01 YES . . . . . 02 IF NO, SKIP TO NEXT SIBLING OR G34.
G33d.	Was s/he wounded or killed?	NO . . . . . 01 YES 02	NO . . . . . 01 YES 02	NO . . . . . 01 YES 02
		GO TO NEXT SIBLING OR QUESTION G34	GO TO NEXT SIBLING OR QUESTION G34	GO TO NEXT SIBLING OR QUESTION G34

		SIBLING 04	SIBLING 05	SIBLING 06
G33a.	In which branch did s/he serve? CIRCLE ALL THAT APPLY.	ARMY . . . . . 01 AIR FORCE . . . . 02 NAVY . . . . . 03 MARINE CORPS . . . 04 COAST GUARD . . . 05 RESERVES/NATIONAL GUARD 06	ARMY . . . . . 01 AIR FORCE . . . . 02 NAVY . . . . . 03 MARINE CORPS . . . 04 COAST GUARD . . . 05 RESERVES/NATIONAL GUARD 06	ARMY . . . . . 01 AIR FORCE . . . . 02 NAVY . . . . . 03 MARINE CORPS . . . 04 COAST GUARD . . . 05 RESERVES/NATIONAL GUARD 06
G33b.	Did s/he serve during any of the following periods... CIRCLE ALL THAT APPLY.	World War I . . . 01 World War II . . . 02 Korean War . . . . 03 Vietnam War . . . 04 Any Other Time . . 05	World War I . . . 01 World War II . . . 02 Korean War . . . . 03 Vietnam War . . . 04 Any Other Time . . 05	World War I . . . 01 World War II . . . 02 Korean War . . . . 03 Vietnam War . . . 04 Any Other Time . . 05
G33c.	Did s/he ever experience (or was exposed to) combat?	NO . . . . . 01 YES . . . . . 02 IF NO, SKIP TO NEXT SIBLING OR G34.	NO . . . . . 01 YES . . . . . 02 IF NO, SKIP TO NEXT SIBLING OR G34.	NO . . . . . 01 YES . . . . . 02 IF NO, SKIP TO NEXT SIBLING OR G34.
G33d.	Was s/he wounded or killed?	NO . . . . . 01 YES 02	NO . . . . . 01 YES 02	NO . . . . . 01 YES 02
		GO TO NEXT SIBLING OR QUESTION G34	GO TO NEXT SIBLING OR QUESTION G34	

G34. Now I'm going to ask some questions about your family or household in general while you were growing up (THE FAMILY/HOUSEHOLD IN WHICH THE RESPONDENT SPENT THE MOST TIME BETWEEN AGES 6-16). First, compare your family when you were growing up with other (American/COUNTRY IN G1) families in general. Compared with the average (American/COUNTRY IN G1) family at the time, would you say that your family was well to do, about average or rather poor?

WELL TO DO 01
ABOUT AVERAGE 02
RATHER POOR 03

G35. Now a few questions about your parents (or the people who raised you). When you were growing up (age six to sixteen), did your parents (or the people who raised you) ever have a hard time making ends meet--that is, making a living, or buying what the family needed?

NO . . . . . 01 → (G36)
YES 02

G35a. Did they have a hard time making ends meet often, sometimes, or rarely?

OFTEN 01
SOMETIMES 02
RARELY 03

G35b. Did your family receive any kind of welfare or charity?

NO 01
YES 02

G36. Some parents are strict with their children. They have lots of rules or don't allow the children to do things that most of their friends can do. When you were growing up (were/was) your (parents/mother/father/SUBSTITUTE(S)) too strict, just about right, or not strict enough?

TOO STRICT 01
JUST ABOUT RIGHT 02
NOT STRICT ENOUGH 03

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, G5, G5a AND G5e.

G37. WAS RESPONDENT EVER RAISED BY A COUPLE (E.G., MOTHER AND FATHER, FATHER AND STEPMOTHER, ETC.)?

NO . . . . . 01 → (G40)
YES 02

G38. While you were growing up, about how often did you see your (parents/ SUBSTITUTES) expressing affection for one another, either by touching, smiling, kissing, or some other way--would you say very often, often, sometimes, rarely, or never?

VERY OFTEN	01	
OFTEN	02	
SOMETIMES	03	
RARELY	04	
NEVER	05	
DID NOT GROW UP WITH COUPLE	06	→ (G40)

G39. Did you ever see your (parents/SUBSTITUTES) hit one another?

NO	01
YES	02

G40. These next questions concern your family and/or the people you lived with when you were growing up. Please include your natural parents, brothers, sisters, stepbrothers, or stepsisters, even if you did not live with them.

While you were growing up, did anyone in your family or household, not including yourself, have a serious illness that kept them in bed or in the hospital or out of work for over six months?

NO	01	→ (G41)
YES	02	

G40a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

G41. While you were growing up, was anyone in your family or who lived in your home (not including yourself) crippled or physically or mentally handicapped for six months or more and in need of a lot of care?

NO	01	→ (G42)
YES	02	

G41a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

G42. While you were growing up, did anyone in your family or household (not including yourself) drink so much that it became a problem? (For example, did anyone drink so much that they got into fights with other people or started to beat the kids, or got so drunk that they couldn't get out of bed the next day, or had difficulty holding a job?)

NO	01	→ (G43)
YES	02	

G42a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

G43. (While you were growing up,) did anyone in your family or household (not including yourself) use hard drugs--such as heroin, cocaine, speed, or uppers and downers--or have a drug problem?

NO	01	→ (G44)
YES	02	

G43a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

G44. (While you were growing up,) did anyone in your family or household (not including yourself) have a serious mental or nervous disorder--such as a nervous breakdown, problems with depression, suicide attempts, odd or violent behavior--or was anyone thought of as mentally ill?

NO	01	→ (G45)
YES	02	

G44a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

G45. (While you were growing up,) did anyone in your family or household (not including yourself) talk to a doctor or counselor (psychiatrist, psychologist, social worker or other mental health professional) about an emotional or mental problem or a problem with alcohol or drugs?

NO	01	→ (G46)
YES	02	

G45a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

G46. (While you were growing up,) was anyone in your family or household (not including yourself) admitted to a (mental or psychiatric) hospital because of mental or emotional problems or problems with drinking or taking drugs?

NO	01	→ (G47)
YES	02	

G46a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

G47. (While you were growing up,) was anyone in your family or household (not including yourself) ever arrested and charged with anything other than traffic violations?

NO	01	→ (G48)
YES	02	

G47a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

_____

G47b. Did (they/anyone) ever serve a jail sentence?

NO	01	→ (G48)
YES	02	

G47c. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

_____

G48. Did anyone in your family or household ever spank or hit you hard enough that you had marks or bruises, had to stay in bed, or see a doctor?

DO NOT COUNT CHILDHOOD FIGHTS BETWEEN SIBLINGS.

NO	01	→ (G49)
YES	02	

G48a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

_____

G48b. Overall, about how often did that happen--would you say very often, fairly often, sometimes, or hardly ever?

VERY OFTEN	01
FAIRLY OFTEN	02
SOMETIMES	03
HARDLY EVER	04

G49. Now think about these same people <u>after</u> you had grown up--that is, from the time you were 16 until now. During that period, did any of these people ever have serious mental or emotional problems, such as a nervous breakdown, problems with depression, suicide attempts, odd or violent behavior, or difficulties with drugs or alcohol?

SAME PEOPLE = MEMBERS OF FAMILY OR HOUSEHOLD WHILE R WAS GROWING UP.

NO	01	→ (G50)
YES	02	

G49a. Who was that?

CIRCLE ALL THAT APPLY.

NATURAL MOTHER	01
NATURAL FATHER	02
STEPMOTHER	03
STEPFATHER	04
OTHER MOTHER SUBSTITUTE	05
OTHER FATHER SUBSTITUTE	06
BROTHER	07
SISTER	08
STEPBROTHER	09
STEPSISTER	10
OTHER RELATIVE	11
OTHER (SPECIFY)	12

G50.

RECORD ENDING DATE AND TIME: [ ][ ] / [ ][ ] [ ][ ] : [ ][ ] A.M. P.M.
MONTH DAY HOUR MINUTE

TALLY SHEET X

A4-5. Race/Ethnicity: ☐ Black Non-Hispanic ☐ Hispanic ☐ White Non-Hispanic

A5a. National origin: _____

A10, 11, 11a. Active duty status: ☐ Active

C1. Marital status:

☐ Married ☐ Separated ☐ Divorced ☐ Widowed ☐ Never Married

C1a. Currently living with spouse: ☐ Yes ☐ No

C16. Ever live as though married: ☐ Yes

C18. Living with someone as though married: ☐ Yes

D11. Parental status: ☐ Is/Acted as a Parent

G5., G5a., G5e. Raised by couple: ☐ Yes

H31. Vietnam theatre status: ☐ Vietnam Theatre Vet ☐ Vietnam Era Vet

S13.

____ A. Minister, priest, or rabbi

____ B. Psychiatrist or other mental health specialist at a health plan or family clinic

____ C. Psychiatrist, social worker, or counselor in private practice

____ D. Medical doctor in private practice

____ E. Mental health center

____ F. Psychiatric outpatient clinic at a general or university hospital

____ G. Outpatient clinic in a psychiatric hospital

____ H. Outpatient clinic in a VA hospital

____ I. Veterans Outreach (Vet) Center

____ J. Drug clinic or center

____ K. Alcohol clinic or center

____ L. Hospital emergency room

____ M. Family service, child counseling, or social service agency

____ N. Self-help group

____ O. Community program such as a crisis center or hotline

____ P. Natural therapist (spiritualist, herbalist, faith healer, etc.)

____ Q.- Curandero, santero, sobador

____ R. Anyone else

NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
EXPIRES: 12/31/88

MAIN STUDY QUESTIONNAIRE

VOLUME II

SECTION H: MILITARY HISTORY

SECTION J: VIETNAM EXPERIENCE

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SECTION H: MILITARY SERVICE HISTORY

RECORD BEGINNING DATE AND TIME: ☐☐ / ☐☐ ☐☐ : ☐☐ A.M. P.M.
MONTH DAY HOUR MINUTE

H1. INTERVIEWER CHECKPOINT:

WHAT IS R'S SEX?

MALE 01
FEMALE . . . . . 02 → (H6)

Now I have a few questions about the period when you were eligible for military service (and your experiences in the military if you actually served in the Armed Forces).

H2. First, which of the following describes the way in which you registered with the selective service? Were you registered for the draft on or near your 18th birthday, registered for the draft at least a year after your 18th birthday, enlisted before registration, did you never register, or were you not eligible for draft?

REGISTERED FOR THE DRAFT ON OR NEAR 18TH BIRTHDAY 01
REGISTERED FOR THE DRAFT AT LEAST A YEAR AFTER 18TH BIRTHDAY 02
ENLISTED BEFORE REGISTRATION 03
NEVER REGISTERED 04
NOT ELIGIBLE FOR DRAFT (SPECIFY) . . 05 → (H6)
_____
OTHER (SPECIFY) 06
_____
CAN'T RECALL, NOT SURE 94

H3. HAND R CARD H-3.

Here is a card which shows most of the classes or types of deferments and draft or military classifications used by the Selective Service during the period you were eligible for the military. Please tell me which of these classifications if any you had at one time or another between age 18-35.

CIRCLE ALL THAT APPLY.

I-A:	AVAILABLE FOR MILITARY SERVICE	01
I-A-O:	CONSCIENTIOUS OBJECTOR, AVAILABLE FOR NON-COMBATANT MILITARY SERVICE	02
I-A-OM:	MEDICAL, DENTAL OR ALLIED SPECIALIST AVAILABLE FOR NONCOMBATANT MILITARY SERVICE	03
I-AM:	MEDICAL, DENTAL OR ALLIED SPECIALIST	04
I-C:	MEMBER OF ENVIRONMENTAL OR PUBLIC HEALTH COMMISSIONS OR MILITARY	05
I-H:	WON DRAFT LOTTERY, TOO YOUNG (REGISTRANT NOT SUBJECT TO PROCESSING FOR INDUCTION)	06
I-D:	QUALIFIED MEMBER OF RESERVE OR STUDENT IN ROTC OR ACCEPTED AVIATION CADET	07
I-O:	CONSCIENTIOUS OBJECTOR AVAILABLE ONLY FOR CIVILIAN WORK	08
I-OM:	MEDICAL, DENTAL OR ALLIED SPECIALIST AVAILABLE FOR ALTERNATIVE SERVICE	09
I-S:	STUDENT UNTIL GRADUATES FROM HIGH SCHOOL OR 20TH BIRTHDAY OR UNTIL COMPLETES ACADEMIC UNIVERSITY CAREER	10
I-W:	CONSCIENTIOUS OBJECTOR IN CIVILIAN WORK, OR WHO HAS COMPLETED CIVILIAN WORK REQUIREMENTS	11
I-Y:	REGISTRANT WHO QUALIFIES ONLY IN TIME OF WAR OR NATIONAL EMERGENCY	12
II-A:	OCCUPATIONAL DEFERMENT--APPRENTICE	21
II-AM:	MEDICAL, DENTAL OR ALLIED SPECIALIST DEFERRED BECAUSE OF COMMUNITY SERVICE	22
II-C:	AGRICULTURAL	23
II-D:	DIVINITY STUDENT	24
II-M:	MEDICAL STUDENT	25
II-S:	STUDENT (NOT DIFFERENT FROM I-S)	26
III-A:	EXTREME HARDSHIP DEFERMENT OR HAS CHILDREN	31
IV-A:	REGISTRANT WITH SUFFICIENT PRIOR ACTIVE SERVICE OR SOLE SURVIVING SON	41
IV-B:	PUBLIC OFFICIAL DEFERRED BY LAW	42
IV-C:	ALIENS OR DUAL NATIONAL--NOT LIABLE FOR MILITARY SERVICE	43
IV-D:	MINISTER OF RELIGION OR DIVINITY	44
IV-F:	REGISTRANT NOT QUALIFIED FOR ANY SERVICE	45
IV-FM:	MEDICAL SPECIALIST NOT QUALIFIED FOR MILITARY SERVICE	46
IV-W:	REGISTRANT WHO HAS COMPLETED ALTERNATIVE SERVICE IN LIEU OF INDUCTION	47
IV-G:	REGISTRANT EXEMPTED FROM SERVICE DURING PEACETIME	48
V-A:	OVER AGE OF LIABILITY (OVER 35) FOR SERVICE	51
	OTHER (SPECIFY)	61

H4. About how many of the good friends you had at the time you first registered with the Selective Service would you say eventually entered military service--almost all, many, about half, some, very few, or none?

ALMOST ALL 01
MANY 02
ABOUT HALF 03
SOME 04
VERY FEW 05
NONE 06

H5. HAND R CARD H-5.

On this card are listed a number of ways people sometimes used to stay out of military service or combat. Please tell me which, if any, of these ways you attempted to use at any time during your period of eligibility for military service.

		NO	YES
A.	APPLIED FOR NONCOMBATANT STATUS	01	02
B.	APPLIED FOR CONSCIENTIOUS OBJECTOR STATUS	01	02
C.	APPLIED FOR PSYCHIATRIC DEFERMENT	01	02
D.	APPLIED FOR MEDICAL DEFERMENT	01	02
E.	PURSUED ACTIVE DRAFT RESISTANCE	01	02
F.	ARRANGED FOR A DOCTOR TO WRITE A LETTER TO THE DRAFT BOARD WHICH EXAGGERATED A PROBLEM IN ORDER TO GET A DEFERMENT .	01	02
G.	USED STUDENT DEFERMENT	01	02
H.	OTHER (SPECIFY)	01	02

H6. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, A10, A11 AND A11a.

DID RESPONDENT EVER SERVE ON ACTIVE DUTY IN THE U.S. ARMED FORCES?

NO 01
YES . . . . . 02 → (H9)

H7. During the period you were eligible for military service, did you ever consider enlisting in the military?

NO 01
YES 02

H8. IF R IS FEMALE → (H49).

In general, which of the following best describes your feelings about being in the military during the time you were eligible for military service? Would you say that you were willing to serve, but were not drafted; you were not willing to serve, and you were not drafted; you were not willing to serve and you took steps to avoid being drafted; or, something else."

WILLING TO SERVE, BUT WAS NOT DRAFTED 01
NOT WILLING TO SERVE, AND WAS NOT DRAFTED 02
NOT WILLING TO SERVE, AND TOOK STEPS TO AVOID BEING DRAFTED . . . . . 03 → (H49)
OR, SOMETHING ELSE (PLEASE EXPLAIN) 04

_____

_____

_____

H9. Earlier, you told me you served on active duty in the Armed Forces. The next few questions are about your military service. First, during what month and year did you begin active service in the United States Armed Forces?

RECORD DATE: [ ][ ] MONTH AND [ ][ ] YEAR → (H10)

DON'T KNOW 9494

H9a. How old were you when you began active service in the United States Armed Forces?

RECORD AGE: [ ][ ] YEARS

H10. At that time, where were you living?
RECORD IN FULL. PROBE FOR COUNTY, IF APPLICABLE.

_____ _____ _____
CITY (OR TOWN) COUNTY STATE (OR COUNTRY IF NOT USA)

[ ][ ][ ][ ][ ]

H11. Just before you entered the Armed Forces, were you working, unemployed, retired, (a student), (a housewife), or what?

CODE ONLY PRIMARY ACTIVITY.

WORKING	01
WITH A JOB, BUT NOT AT WORK (BECAUSE OF TEMPORARY ILLNESS, ON SICK LEAVE, VACATION, LABOR DISPUTE, ON STRIKE, BAD WEATHER, OR OTHER TEMPORARY LAYOFF)	02
UNEMPLOYED OR PERMANENT LAY OFF	03
RETIRED	04
GOING TO SCHOOL OR TRAINING PROGRAM	05
KEEPING HOUSE	06
DISABLED (UNABLE TO WORK)	07
OTHER (SPECIFY)	08

H12. And how did you <u>first</u> get into the military--were you drafted, did you enlist, or were you activated from ROTC or a service academy, did you get a direct commission, or what?

DRAFTED	01	
ENLISTED	02	→ (H12c)
ACTIVATED FROM (OR WITH) NATIONAL GUARD OR RESERVE UNIT	03	→ (H13)
ROTC, AFROTC, OR NROTC COMMISSION	04	→ (H13)
SERVICE ACADEMY	05	→ (H13)
DIRECT COMMISSION	06	→ (H13)
OTHER (SPECIFY)	07	→ (H13)

H12a. Did you volunteer for the draft, have your draft number moved up, or were you just plain drafted?

VOLUNTEERED FOR DRAFT	01
NUMBER MOVED UP	02
DRAFTED	03

H12b. Did you ever consider avoiding the draft?

NO	01	→ (H13)
YES	02	→ (H13)

H12c. Did you enlist voluntarily, enlist to avoid the draft (after receiving a draft notice), enlist for legal reasons (to avoid possible legal or criminal charges), or what?

ENLISTED VOLUNTARILY 01
ENLISTED TO AVOID DRAFT 02
ENLISTED FOR LEGAL REASONS . . . 03
OTHER (SPECIFY) 04

H13. In which branch or branches of the Armed Forces did you serve while on active duty?

CIRCLE ALL THAT APPLY. IF RESERVES OR NATIONAL GUARD, PROBE AND ALSO CIRCLE ACTIVE DUTY BRANCH.

ARMY 01
NAVY 02
AIR FORCE 03
MARINE CORPS 04
COAST GUARD 05
RESERVES/NATIONAL GUARD 06
OTHER (SPECIFY) 07

H14. IF ONLY ONE CODE CIRCLED IN H13 → (H15).

In which branch of the Armed Forces did you <u>last</u> serve on active duty?

IF RESERVES OR NATIONAL GUARD, PROBE AND ALSO CIRCLE ACTIVE DUTY BRANCH.

ARMY 01
NAVY 02
AIR FORCE 03
MARINE CORPS 04
COAST GUARD 05
RESERVES/NATIONAL GUARD 06
OTHER (SPECIFY) 07

H15. While you were on active duty in the United States Armed Forces, were you ever...

		NO	YES
A.	in the enlisted ranks?	01	02
B.	a noncommissioned officer?	01	02
C.	a warrant officer?	01	02
D.	a commissioned officer?	01	02

H15a. IF NEVER A COMMISSIONED OFFICER → (H15B)

When were you commissioned?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494

H15B. At what rank and pay grade did you (first) enter the service on active duty?

RECORD RANK VERBATIM, THEN CONSULT RANK/PAY GRADE CARDS (H-15B-E, H-15B-W, H-15B-0) IF NEEDED TO CIRCLE THE APPROPRIATE PAY GRADE CODE.

RANK: _____

		CODE
PAY GRADE:	ENLISTED (UNSPECIFIED)	10
ENLISTED:	E-1	11
	E-2	12
	E-3	13
	E-4	14
	E-5	15
	E-6	16
	E-7	17
	E-8	18
	E-9	19
OFFICER:	OFFICER TRAINEE	20
	WARRANT OFFICER (UNSPECIFIED)	30
	W-1	31
	W-2	32
	W-3	33
	W-4	34
	OFFICER (UNSPECIFIED)	40
	0-1	41
	0-2	42
	0-3	43
	0-4	44
	0-5	45
	0-6	46
	0-7	47
	0-8	48
	0-9	49
	0-10	50

H16. Did you ever re-enlist or extend your period of service on active duty?

NO . . . . . 01 → (H17)
YES 02

H16a. How many times (did you re-enlist)?

RECORD NUMBER: ☐☐
TIMES

H17. In all, how long did you serve on active duty in the Armed Forces? If you served for more than one period, include the total time for all service periods. (If your service was in a National Guard or Military Reserve Unit, count only the time you were called up for active duty. Do not count the 4-6 months duty for initial training or yearly summer camps.)

IF ANSWER IS IN "MONTHS," COUNT EACH MONTH AS 30 DAYS.

LESS THAN 90 DAYS 01
90 TO 180 DAYS 02
MORE THAN 180 DAYS BUT LESS THAN 1 YEAR 03
1 YEAR OR MORE BUT LESS THAN 3 YEARS 04
3-4 YEARS 05
MORE THAN 4 YEARS BUT LESS THAN 20 YEARS 06
20 YEARS OR MORE 07

H18. Did you ever receive any disciplinary actions while in the service, such as being restricted to quarters, loss of pay, getting demoted or busted, or put in the brig or stockade?

NO . . . . . 01 → (H19)
YES 02

H18a. Did you receive an Article 15 or some other form of non-judicial punishment (for example, Captain's Mast, Office Hours)?

NO . . . . . 01 → (H18c)
YES 02

H18b. How many times did you receive this type of punishment?

ENTER NUMBER OF DISTINCT OCCASIONS.

RECORD NUMBER: ☐☐
TIMES

H18c. Were you ever court-martialed?

NO . . . . . 01 → (H19)
YES 02

H18d. What type of court martial did you receive?

CIRCLE ALL THAT APPLY.

SUMMARY COURT MARTIAL 01
SPECIAL COURT MARTIAL 02
GENERAL COURT MARTIAL 03

H19. During what month and year were you last released from active duty in the Armed Forces?

DO NOT COUNT RESERVE/NATIONAL GUARD DUTY AFTER RELEASE FROM ACTIVE DUTY.

RECORD DATE: ☐☐ AND ☐☐
MONTH AND YEAR

DON'T KNOW 9494

H20. What was your military occupation (MOS, SSI, Rating or NEC, NOBC, or AFSC) at the time of your final separation (release/discharge) from active duty?

PROBE AND RECORD BOTH CODE (NUMBER) AND TITLE FOR PRIMARY, SECONDARY, AND TERTIARY SPECIALTIES.

PRIMARY: _____ CODE _____ TITLE | | | |

SECONDARY: _____ CODE _____ TITLE | | | |

TERTIARY: _____ CODE _____ TITLE | | | |

H21. Was your primary military occupation (MOS, SSI, Rating or NEC, NOBC, or AFSC) at separation the same one to which you were first assigned (when you first entered active duty) after you finished training?

NO 01
YES . . . . . 02 → (H22)

H21a. What was your first military occupation?

PROBE AND RECORD BOTH CODE (NUMBER) AND TITLE FOR PRIMARY, SECONDARY, AND TERTIARY SPECIALTIES.

PRIMARY: _____ CODE _____ TITLE | | | |

SECONDARY: _____ CODE _____ TITLE | | | |

TERTIARY: _____ CODE _____ TITLE | | | |

H22. What was your rank and pay grade at the time you were last released or discharged from active duty?

RECORD RANK VERBATIM, THEN CONSULT RANK/PAY GRADE CARDS (H-15B-E, H-15B-W, H-15B-O) IF NEEDED TO CIRCLE THE APPROPRIATE PAY GRADE CODE.

RANK: _____

		CODE
PAY GRADE:	ENLISTED (UNSPECIFIED)	10
ENLISTED:	E-1	11
	E-2	12
	E-3	13
	E-4	14
	E-5	15
	E-6	16
	E-7	17
	E-8	18
	E-9	19
OFFICER:	OFFICER TRAINEE	20
	WARRANT OFFICER (UNSPECIFIED)	30
	W-1	31
	W-2	32
	W-3	33
	W-4	34
	OFFICER (UNSPECIFIED)	40
	O-1	41
	O-2	42
	O-3	43
	O-4	44
	O-5	45
	O-6	46
	O-7	47
	O-8	48
	O-9	49
	O-10	50

H23. Was this the highest rank and pay grade you held while on active duty in the service?

NO	01	
YES	02	→ (H24)

H23a. What was the highest rank and pay grade you held while on active duty?

RECORD RANK VERBATIM AND ENTER PAY GRADE CODE USING CODES IN H22.

RANK: _____

PAY GRADE CODE: ☐☐

H24. HAND R CARD H-24.

And what kind of discharge did you receive from the service at the time of your release?

PROBE FOR SPECIFIC TYPE.

HONORABLE	01	→ (H25)
GENERAL (UNDER HONORABLE CONDITIONS)	02	
UNDESIRABLE (UNDER OTHER THAN HONORABLE CONDITIONS)	04	
BAD CONDUCT DISCHARGE	05	
DISHONORABLE DISCHARGE	06	
DISMISSAL (APPLIES TO OFFICERS ONLY)	07	
OTHER (SPECIFY)	08	

H24a. Did you ever apply for a discharge upgrade?

NO	01	→ (H25)
YES	02	

H24b. Did you receive a discharge upgrade?

NO	01	→ (H25)
YES	02	

H24c. What was your final discharge?

PROBE FOR SPECIFIC TYPE.

HONORABLE	01	→ (H25)
GENERAL (UNDER HONORABLE CONDITIONS)	02	
CLEMENCY (VOLUNTEERED)	03	
UNDESIRABLE (UNDER OTHER THAN HONORABLE CONDITIONS)	04	
BAD CONDUCT DISCHARGE	05	
DISHONORABLE DISCHARGE	06	
DISMISSAL (APPLIES TO OFFICERS ONLY)	07	
OTHER (SPECIFY)	08	

H25. HAND R CARD H-25.

In what manner were you last released from active duty in the Armed Forces?

RELEASE OR SEPARATION AT END OF NORMAL TERM OF SERVICE CONTRACT (NOT MEDICAL OR DISABILITY) WITH LESS THAN 20 YEARS OF SERVICE	01
RELEASE DUE TO REDUCTION IN FORCE	02
MILITARY RETIREMENT FOR LENGTH OF SERVICE (20 OR MORE YEARS)	03
MEDICAL OR DISABILITY RELEASE	04
MILITARY RETIREMENT FOR DISABILITY	05
RELEASE DUE TO MARRIAGE, PREGNANCY, OR CHILDREN	06
EARLY OUT PROGRAM	07
OTHER RELEASE (SPECIFY)	08

H26. HAND R SELF-REPORT BOOKLET TURNED TO H26.

Now I want you to think back to how you felt while you were in the military. For each of these statements, please circle the number under the category that best describes how much you felt that way while you were on active duty in the military--a great deal, pretty much, some, just a little, or not at all?

AFTER R FILLS OUT AND RETURNS BOOKLET, GO TO H27.

	How much did you . . .	A GREAT DEAL	PRETTY MUCH	SOME	JUST A LITTLE	NOT AT ALL
A.	feel unfairly treated while you were in the military?	01	02	03	04	05
B.	enjoy your time in the military? . .	01	02	03	04	05
C.	feel that nothing turned out the way you wanted it to?	01	02	03	04	05
D.	feel that you got less than you deserved in the military when it came to rewards and benefits? . . .	01	02	03	04	05
E.	feel that there was nothing worthwhile about military life to look forward to except discharge?	01	02	03	04	05
F.	feel that you were acquiring a variety of experiences in the military that would be useful later in life?	01	02	03	04	05
G.	How bitter did you feel about being in the military then?	01	02	03	04	05
H.	feel that you were in control of what went on in your life while you were in the military? . .	01	02	03	04	05
I.	feel that you were completely helpless?	01	02	03	04	05
J.	feel that your efforts and contributions were appreciated and rewarded?	01	02	03	04	05
K.	feel that you had a lot of things to look forward to once you returned to civilian life?	01	02	03	04	05

H27. HAND R CARD H-27.

Now a few questions about the periods, location, and nature of your service. First, during which of these periods did you serve on active duty in the U.S. Armed Forces?

If your service was only in a National Guard or Military Reserve Unit, include only the time you were called up for active duty.

PROBE: Any other times?

CIRCLE ALL THAT APPLY.

BEFORE WORLD WAR II (BEFORE SEPTEMBER 16, 1940)	01
WORLD WAR II (SEPTEMBER 16, 1940--JULY 25, 1947)	02
BETWEEN WORLD WAR II AND KOREAN CONFLICT (JULY 26, 1947--JUNE 26, 1950)	03
KOREAN CONFLICT (JUNE 27, 1950--JANUARY 31, 1955)	04
BETWEEN KOREAN CONFLICT AND VIETNAM ERA (FEBRUARY 1, 1955--AUGUST 4, 1964)	05
VIETNAM ERA (AUGUST 5, 1964--May 7, 1975)	06
AFTER VIETNAM ERA (AFTER MAY 7, 1975)	07

H27a. IF VIETNAM ERA (06) IN H27 IS CIRCLED → (H28).

Just to make sure, did you ever serve on active duty in the Armed Forces at any time between August 5, 1964 and May 7, 1975?

NO	01	→ (H32)
YES	02	→ (CIRCLE CODE 06 FOR H27)

H28. While you were in the military, were you ever stationed in Vietnam, Laos or Cambodia; in the waters in or around these countries, or fly in missions over these areas?

NO	01	
YES	02	(R IS VIETNAM THEATRE VETERAN)

H29. Did you receive the Vietnam Service Medal, the (Republic of) Vietnam Campaign Medal, or the Armed Forces Expenditionary Medal for Vietnam?

NO	01	
YES	02	(R IS VIETNAM THEATRE VETERAN)

H30. Did you receive combat pay during the Vietnam Era?

NO	01
YES	02

H31. INTERVIEWER CHECKPOINT: REVIEW H28 AND H29.

IS RESPONDENT A VIETNAM ERA VETERAN OR A VIETNAM THEATRE VETERAN?

VIETNAM ERA (H28 = 01 AND H29 = 01) . . . 01*
VIETNAM THEATRE (H28 = 02 OR H29 = 02) . 02* → (H44)

H32. While you were on active duty in the military, did you serve only in the continental United States, or were you also stationed overseas or assigned to sea duty?

SERVED IN CONTINENTAL U.S. ONLY . 01 → (H35)
ALSO HAD OVERSEAS OR SEA DUTY . . 02

H32a. Where did you serve (while on active duty in the United States Armed Forces)?

RECORD ANSWER VERBATIM, AND THEN CODE USING COUNTRY CODES ON NEXT PAGE.

		CODE
1.	_____	
2.	_____	
3.	_____	
4.	_____	
5.	_____	
6.	_____	
7.	_____	
8.	_____	
9.	_____	
10.	_____	

NORTH AND SOUTH AMERICA

- ALASKA 01
- CANADA, GREENLAND 02
- MEXICO AND CENTRAL AMERICA 03
- SOUTH AMERICA 04

EUROPE

- UNITED KINGDOM AND IRELAND 11
- FRANCE 12
- GERMANY (EAST AND WEST) 13
- SCANDINAVIA AND NORTHERN EUROPE (E.G., BELGIUM, THE NETHERLANDS, ICELAND, SWEDEN) 14
- EASTERN EUROPE (E.G., HUNGARY, POLAND, CZECHOSLOVAKIA) . . . 15
- RUSSIA (USSR) 16
- SOUTHERN EUROPE (E.G., SPAIN, PORTUGAL, ITALY, GREECE) . . . 17

AFRICA

- NORTH AFRICA 21
- SOUTHERN AFRICA 22

ASIA

- NEAR AND MIDDLE EAST, SOUTHWEST ASIA (E.G., SAUDI ARABIA, TURKEY, IRAN) 31
- SOUTH ASIA (E.G., INDIA, PAKISTAN, AFGHANISTAN) 32
- SOUTHEAST ASIA (BURMA, THAILAND, INDOCHINA, MALAYSIA) . . . 33
- EAST INDIES (INDONESIA, THE PHILLIPINES, PAPUA NEW GUINEA) 34
- JAPAN 35
- KOREA (NORTH AND SOUTH) 36
- CHINA, MONGOLIA, AND OTHER EAST ASIA 37

- AUSTRALIA AND NEW ZEALAND 40

- ARCTIC OCEAN 51
- ANTARCTICA 52

ATLANTIC OCEAN (AND ISLANDS)

- WEST INDIES, CARIBBEAN ISLANDS (E.G., CUBA, PUERTO RICO) . . 61
- CARIBBEAN SEA, AFLOAT 62
- MEDITERRANEAN SEA ISLANDS (E.G., CRETE, CYPRUS) 63
- MEDITERRANEAN SEA, AFLOAT 64
- NORTH ATLANTIC OCEAN ISLANDS (OTHER) 65
- NORTH ATLANTIC OCEAN, AFLOAT (OTHER) 66
- SOUTH ATLANTIC OCEAN ISLANDS 67
- SOUTH ATLANTIC OCEAN, AFLOAT 68

PACIFIC OCEAN (AND ISLANDS)

- HAWAIIAN ISLANDS 70
- NORTH PACIFIC ISLANDS, OTHER (E.G., MIDWAY ISLANDS, GUAM) . 71
- NORTH PACIFIC OCEAN, AFLOAT 72
- SOUTH PACIFIC ISLANDS (E.G., SAMOA, FIJI, SOLOMON ISLANDS) . 73
- SOUTH PACIFIC OCEAN, AFLOAT 74

INDIAN OCEAN (AND ISLANDS)

- INDIAN OCEAN ISLANDS (E.G., MAURITIUS, MALDIVES, DIEGO GARCIA) 81
- INDIAN OCEAN, AFLOAT 82

OTHER 90

H33. During your military service, were you ever in or exposed to combat situations?

NO . . . . . 01 → (H35)
YES 02

H33a. Did you serve in an area designated as a war zone?

NO 01
YES 02

H33b. Did you fly in aircraft over a combat zone?

NO 01
YES 02

H33c. Were you stationed in a combat zone?

NO 01
YES 02

H33d. Did you fire a weapon in a combat situation?

NO 01
YES 02

H33e. Were you ever under enemy fire?

NO 01
YES 02

H33f. Did you see Americans being killed or wounded?

NO 01
YES 02

H33g. Did you receive any war-related wounds?

NO 01
YES 02

H33h. Were you a Prisoner of War (POW)?

NO 01
YES 02

H34. Did you receive any personal decorations for combat? Do not count unit or "automatic" decorations, such as the National Defense Service Medal (NDSM), campaign ribbons, or personal decorations or awards for outstanding or meritorious service.

NO . . . . . 01 → (H35)
YES 02

H34a. Which decorations or awards did you receive?

CIRCLE ALL THAT APPLY.

COMBAT
COMBAT INFANTRY BADGE 01
ARMY COMMENDATION MEDAL WITH "V" 02
AIR MEDAL OR AIR FORCE COMMENDATION MEDAL WITH "V" 03
NAVY COMMENDATION MEDAL WITH "V" 04
BRONZE STAR WITH "V" 05
AIR FORCE CROSS OR DISTINGUISHED FLYING CROSS . 06
SILVER STAR 07
DISTINGUISHED SERVICE CROSS 08
MEDAL OF HONOR 09
PURPLE HEART 10
FOREIGN DECORATION FOR VALOR 11
OTHER (SPECIFY) 12

H35. While you were on active duty, did you receive any personal decorations or awards for outstanding or meritorious service? Do not count unit or "automatic" decorations, such as the National Defense Service Medal (NDSM).

DO NOT INCLUDE COMBAT MEDALS MENTIONED ABOVE.

NO . . . . . 01 → (H36)
YES 02

H35a. Which decorations did you receive?

CIRCLE ALL THAT APPLY.

MERITORIOUS SERVICE
DISTINGUISHED SERVICE MEDAL 31
LEGION OF MERIT 32
BRONZE STAR 33
JOINT SERVICE COMMENDATION MEDAL 34
ARMY COMMENDATION MEDAL 35
NAVY COMMENDATION MEDAL 36
AIR MEDAL OR AIR FORCE COMMENDATION MEDAL . . . 37
FOREIGN DECORATION FOR MERITORIOUS SERVICE . . 38
GOOD CONDUCT MEDAL 39
OTHER (SPECIFY) 40

H36. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, A4 AND A5.

WHAT IS RESPONDENT'S RACIAL OR ETHNIC GROUP?

WHITE--NOT HISPANIC	01	→ (H42)
BLACK--NOT HISPANIC	02	
HISPANIC (E.G., PUERTO RICAN, CUBAN-, MEXICAN- OR OTHER SPANISH-AMERICAN)	03	
OTHER	04	→ (H42)

H37. Some veterans have reported that they were treated differently in the Armed Forces because of their racial or ethnic background.

How about you personally? Do you think that you were assigned or not assigned to certain duty stations because you're (Black/Hispanic)?

NO	01
YES	02

H38. Do you think you were ever demoted or denied promotion while you were in the military because you're (Black/Hispanic)?

NO	01
YES	02

H39. Do you think you were ever given <u>unpleasant</u> duty assignments while you were in the military because you're (Black/Hispanic)?

NO	01
YES	02

H40. Do you think you were ever given <u>dangerous</u> duty assignments while you were in the military because you're (Black/Hispanic)?

NO	01
YES	02

H41. While you were serving on active duty in the military do you think there were any (other) ways you were treated unfairly or badly because you're (Black/Hispanic)?

NO	01	→ (H42)
YES	02	

H41a. In what ways were you treated unfairly or badly?

H42. INTERVIEWER CHECKPOINT:

IS RESPONDENT MALE OR FEMALE?

MALE . . . . . 01 → (H49)
FEMALE 02

H43. While serving in the military, were there any ways you were treated unfairly or badly because you are a woman?

NO . . . . . 01 → (H49)
YES 02

H43a. In what ways were you treated unfairly or badly?

GO TO H49

H44. Did you receive any personal decorations for combat? Do not count unit or "automatic" decorations, such as the National Defense Service Medal (NDSM), campaign ribbons, or personal decorations or awards for outstanding or meritorious service.

NO	01	→ (H45)
YES	02	

H44a. Which combat decoration(s) did you receive?

CIRCLE ALL THAT APPLY.

COMBAT

COMBAT INFANTRY BADGE	01
ARMY COMMENDATION MEDAL WITH "V"	02
AIR MEDAL OR AIR FORCE COMMENDATION MEDAL WITH "V"	03
NAVY COMMENDATION MEDAL WITH "V"	04
BRONZE STAR WITH "V"	05
AIR FORCE CROSS OR DISTINGUISHED FLYING CROSS	06
SILVER STAR	07
DISTINGUISHED SERVICE CROSS	08
MEDAL OF HONOR	09
PURPLE HEART	10
FOREIGN DECORATION FOR VALOR	11
OTHER (SPECIFY)	12

H45. While you were on active duty, did you receive any personal decorations or awards for outstanding or meritorious service? Do not count unit or "automatic" decorations, such as the National Defense Service Medal (NDSM) or combat decorations.

NO	01	→ (H46)
YES	02	

H45a. Which decorations did you receive?

CIRCLE ALL THAT APPLY.

MERITORIOUS SERVICE

DISTINGUISHED SERVICE MEDAL	31
LEGION OF MERIT	32
BRONZE STAR	33
JOINT SERVICE COMMENDATION MEDAL	34
ARMY COMMENDATION MEDAL	35
NAVY COMMENDATION MEDAL	36
AIR MEDAL OR AIR FORCE COMMENDATION MEDAL	37
FOREIGN DECORATION FOR MERITORIOUS SERVICE	38
GOOD CONDUCT MEDAL	39
OTHER (SPECIFY)	40

H46. IF NO DECORATIONS OF ANY KIND (H44 AND H45 = NO) → (H47).

Did you receive any of these personal decorations for combat and/or outstanding or meritorious service in or around Vietnam?

NO . . . . . 01 → (H47)
YES 02

H46a. Which of these decorations did you receive for service in or around Vietnam?

CIRCLE ALL THAT APPLY.

COMBAT
COMBAT INFANTRY BADGE 01
ARMY COMMENDATION MEDAL WITH "V" 02
AIR MEDAL OR AIR FORCE COMMENDATION MEDAL WITH "V" 03
NAVY COMMENDATION MEDAL WITH "V" 04
BRONZE STAR WITH "V" 05
AIR FORCE CROSS OR DISTINGUISHED FLYING CROSS 06
SILVER STAR 07
DISTINGUISHED SERVICE CROSS 08
MEDAL OF HONOR 09
PURPLE HEART 10
FOREIGN DECORATION FOR VALOR 11
OTHER (SPECIFY) 12

MERITORIOUS SERVICE
DISTINGUISHED SERVICE MEDAL 31
LEGION OF MERIT 32
BRONZE STAR 33
JOINT SERVICE COMMENDATION MEDAL 34
ARMY COMMENDATION MEDAL 35
NAVY COMMENDATION MEDAL 36
AIR MEDAL OR AIR FORCE COMMENDATION MEDAL 37
FOREIGN DECORATION FOR MERITORIOUS SERVICE 38
GOOD CONDUCT MEDAL 39
OTHER (SPECIFY) 40

H47. Other than your service in and around Vietnam, did you serve only in the continental United States, or were you also assigned to other overseas or sea duty?

SERVED IN CONTINENTAL U.S. ONLY . 01 → (H49)
OTHER OVERSEAS OR SEA DUTY . . . 02

H47a. Other than your Vietnam-related service, where did you serve (while on active duty in the United States Armed Forces)?

RECORD ANSWER VERBATIM AND THEN CODE USING COUNTRY CODES ON NEXT PAGE.

		CODE
1.	_____	
2.	_____	
3.	_____	
4.	_____	
5.	_____	
6.	_____	
7.	_____	
8.	_____	
9.	_____	
10.	_____	

NORTH AND SOUTH AMERICA

- ALASKA 01
- CANADA, GREENLAND 02
- MEXICO AND CENTRAL AMERICA 03
- SOUTH AMERICA 04

EUROPE

- UNITED KINGDOM AND IRELAND 11
- FRANCE 12
- GERMANY (EAST AND WEST) 13
- SCANDINAVIA AND NORTHERN EUROPE (E.G., BELGIUM, THE NETHERLANDS, ICELAND, SWEDEN) 14
- EASTERN EUROPE (E.G., HUNGARY, POLAND, CZECHOSLOVAKIA) . . . 15
- RUSSIA (USSR) 16
- SOUTHERN EUROPE (E.G., SPAIN, PORTUGAL, ITALY, GREECE) . . . 17

AFRICA

- NORTH AFRICA 21
- SOUTHERN AFRICA 22

ASIA

- NEAR AND MIDDLE EAST, SOUTHWEST ASIA (E.G., SAUDI ARABIA, TURKEY, IRAN) 31
- SOUTH ASIA (E.G., INDIA, PAKISTAN, AFGHANISTAN) 32
- SOUTHEAST ASIA (BURMA, THAILAND, INDOCHINA, MALAYSIA) . . . 33
- EAST INDIES (INDONESIA, THE PHILLIPINES, PAPUA NEW GUINEA) 34
- JAPAN 35
- KOREA (NORTH AND SOUTH) 36
- CHINA, MONGOLIA, AND OTHER EAST ASIA 37

AUSTRALIA AND NEW ZEALAND 40

- ARCTIC OCEAN 51
- ANTARCTICA 52

ATLANTIC OCEAN (AND ISLANDS)

- WEST INDIES, CARIBBEAN ISLANDS (E.G., CUBA, PUERTO RICO) . . 61
- CARIBBEAN SEA, AFLOAT 62
- MEDITERRANEAN SEA ISLANDS (E.G., CRETE, CYPRUS) 63
- MEDITERRANEAN SEA, AFLOAT 64
- NORTH ATLANTIC OCEAN ISLANDS (OTHER) 65
- NORTH ATLANTIC OCEAN, AFLOAT (OTHER) 66
- SOUTH ATLANTIC OCEAN ISLANDS 67
- SOUTH ATLANTIC OCEAN, AFLOAT 68

PACIFIC OCEAN (AND ISLANDS)

- HAWAIIAN ISLANDS 70
- NORTH PACIFIC ISLANDS, OTHER (E.G., MIDWAY ISLANDS, GUAM) . 71
- NORTH PACIFIC OCEAN, AFLOAT 72
- SOUTH PACIFIC ISLANDS (E.G., SAMOA, FIJI, SOLOMON ISLANDS) . 73
- SOUTH PACIFIC OCEAN, AFLOAT 74

INDIAN OCEAN (AND ISLANDS)

- INDIAN OCEAN ISLANDS (E.G., MAURITIUS, MALDIVES, DIEGO GARCIA) 81
- INDIAN OCEAN, AFLOAT 82

OTHER 90

H48. Were you ever in or exposed to combat situations in the places you just told me about?

IF NECESSARY, READ PLACES MENTIONED IN H47a.

DO NOT INCLUDE VIETNAM RELATED COMBAT.

NO . . . . . 01 → (H49)
YES 02

H48a. Did you serve in an area designated as a war zone?

NO 01
YES 02

H48b. Did you fly in aircraft over a combat zone?

NO 01
YES 02

H48c. (Other than your service in or around Vietnam,) were you stationed in a combat zone?

NO 01
YES 02

H48d. Did you fire a weapon in a combat situation?

NO 01
YES 02

H48e. Were you ever under enemy fire?

NO 01
YES 02

H48f. (Other than your service in or around Vietnam,) did you see Americans being killed or wounded?

NO 01
YES 02

H48g. Did you receive any war-related wounds?

NO 01
YES 02

H48h. Were you a prisoner of war?

NO 01
YES 02

H49.

RECORD ENDING DATE AND TIME: [ ][ ] / [ ][ ] [ ][ ] : [ ][ ] A.M. P.M.

MONTH DAY HOUR MINUTE

(THIS PAGE INTENTIONALLY BLANK.)

SECTION J: VIETNAM EXPERIENCE

RECORD BEGINNING DATE AND TIME: ☐☐ / ☐☐ ☐☐ : ☐☐ A.M. P.M.
MONTH DAY HOUR MINUTE

J1. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, H31.

IS R VIETNAM THEATRE VETERAN?

NO . . . . . 01 → (J81)
YES 02

Earlier you told me that while you were in the military you were stationed in or near Vietnam in the hostile fire zone, or had other duty that directly involved Vietnam. The next questions are about your experiences in the Vietnam arena or theatre. I understand that events in or around Vietnam may have been very painful or difficult, and that talking about these matters may be hard for you. If we should come to any question you don't want to answer, let me know and we'll skip over it. But these questions are very important if we are to understand the situation of veterans who served in the Vietnam combat area during the war.

J2. HAND R CARD J-2.

At the time when you first went to Vietnam (or the Vietnam arena), how much were you opposed to or in favor of U.S. involvement in Vietnam--extremely opposed, fairly opposed, somewhat opposed, somewhat in favor, fairly in favor, or extremely in favor?

EXTREMELY OPPOSED 01
FAIRLY OPPOSED 02
SOMEWHAT OPPOSED 03
NEUTRAL; NEITHER OPPOSED NOR IN FAVOR (VOLUNTEERED) 04
SOMEWHAT IN FAVOR 05
FAIRLY IN FAVOR 06
EXTREMELY IN FAVOR 07

J3. During what month and year did you first begin a tour of duty that directly involved Vietnam?

RECORD DATE: ☐☐ AND ☐☐
MONTH YEAR

DON'T KNOW 9494

J4. During what month and year did you end your period of service in or around Vietnam for the last time?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494

J5. In all, how many months did you serve in or around Vietnam?

RECORD NUMBER: ☐☐ MONTHS IF 12 MONTHS OR MORE, → (J5b)

LESS THAN ONE MONTH 00

J5a. Why did you serve less than 12 months?

CIRCLE ALL THAT APPLY.

MEDICAL EVACUATION FOR WOUND 01
MEDICAL EVACUATION FOR ILLNESS 02
MEDICAL EVACUATION FOR PSYCHOLOGICAL REASONS 03
MEDICAL EVACUATION FOR DRUGS 04
TOUR REDUCED 05
UNIT DEACTIVATED 06
ENLISTMENT PERIOD WAS UP 07
WAR WAS ENDING 08
SHORTENED FOR OTHER REASON (SPECIFY) . . 09

→ (J6)

J5b. IF J5 IS EXACTLY 12 MONTHS → J6.
Why did you serve more than twelve months?

CIRCLE ALL THAT APPLY.

ASSIGNED MORE THAN ONCE/ CAREER MILITARY 01
EXTENDED FOR EARLY OUT 02
ENJOYED ASSIGNMENT/PREFERRED TO OTHER ASSIGNMENT 03
TO STAY WITH FRIENDS 04
TO STAY WITH GIRLFRIEND OR WIFE . 05
BECAUSE OF AVAILABILITY OF DRUGS 06
EXTRA PAY 07
STANDARD PERIOD OF DUTY WAS MORE THAN 12 MONTHS 08
OTHER (SPECIFY) 09

J6. Did you serve one--or more than one--period of duty that directly involved Vietnam? By period of duty we mean continuous service without an interruption of one month or more.

ONE . . . . . 01 → (J7)
MORE THAN ONE 02

J6a. How many periods of duty did you serve (that involved Vietnam)?

RECORD NUMBER: ☐☐
PERIODS

J6b. For each of your periods of duty that directly involved Vietnam, please tell me the month and year when they started and the month and year they ended. You told me that your first period of service began on (DATE IN J3) and your (NUMBER OF PERIODS IN J6a) ended on (DATE IN J4)... ENTER THESE BEGINNING AND ENDING DATES IN APPROPRIATE SPACES BELOW.

PERIOD 1:	FROM:	☐☐ MONTH	☐☐ YEAR	TO:	☐☐ MONTH	☐☐ YEAR
PERIOD 2:	FROM:	☐☐ MONTH	☐☐ YEAR	TO:	☐☐ MONTH	☐☐ YEAR
PERIOD 3:	FROM:	☐☐ MONTH	☐☐ YEAR	TO:	☐☐ MONTH	☐☐ YEAR
PERIOD 4:	FROM:	☐☐ MONTH	☐☐ YEAR	TO:	☐☐ MONTH	☐☐ YEAR
PERIOD 5:	FROM:	☐☐ MONTH	☐☐ YEAR	TO:	☐☐ MONTH	☐☐ YEAR
PERIOD 6:	FROM:	☐☐ MONTH	☐☐ YEAR	TO:	☐☐ MONTH	☐☐ YEAR

J7. HAND R CARD J-7.

Some Vietnam veterans were stationed in Vietnam itself, while others were in Laos or Cambodia or had duty in the waters in or around these Southeast Asian countries. Still others flew air missions over these areas, either from aircraft carriers or from places like Guam, Thailand, or Okinawa. Which of these describe your service in or around Vietnam during your period(s) of duty?

PROBE AND CIRCLE ALL THAT APPLY FOR FIRST AND LATER PERIODS.

	1ST PERIOD	2ND PERIOD	3RD PERIOD	4TH PERIOD	LATER PERIODS
NO 2ND/3RD/4TH/LATER PERIOD	00	00	00	00	00
STATIONED IN VIETNAM	01	01	01	01	01
STATIONED IN LAOS OR CAMBODIA	02	02	02	02	02
DUTY IN WATERS IN OR AROUND VIETNAM	03	03	03	03	03
DUTY IN WATERS IN OR AROUND LAOS OR CAMBODIA	04	04	04	04	04
INVOLVED IN AIR MISSIONS OVER VIETNAM	05	05	05	05	05
INVOLVED IN AIR MISSIONS OVER LAOS OR CAMBODIA	06	06	06	06	06
OTHER (SPECIFY)	07	07	07	07	07

1ST _____

2ND _____

3RD _____

4TH _____

LATER _____

J8. HAND R SELF-REPORT BOOKLET TURNED TO J8.

Here is a map of South Vietnam showing some of the places many Vietnam veterans were stationed or served during the war.

Where did you primarily serve during (each of) your period(s) of duty in Southeast Asia?

Please mark the places on the map. If you served any place that does not appear on the map, please mark the place and write the name on the map. If you were (also) stationed outside Vietnam itself during your tour(s)--such as in Laos, Cambodia, the Phillipines, or the South China Sea--please let me know.

ALLOW R TO MARK MAP. RECORD RESPONSES BELOW AND CODE RESPONSES USING THE CODE ON PAGES J-7 AND J-8.

A. FIRST PERIOD	CODE
1. _____	
2. _____	
3. _____	
4. _____	
5. _____	

B. SECOND PERIOD	
1. _____	
2. _____	
3. _____	
4. _____	
5. _____	

C. THIRD PERIOD CODE

1. _____ | | | |
2. _____ | | | |
3. _____ | | | |
4. _____ | | | |
5. _____ | | | |

D. FOURTH PERIOD

1. _____ | | | |
2. _____ | | | |
3. _____ | | | |
4. _____ | | | |
5. _____ | | | |

E. FIFTH PERIOD

1. _____ | | | |
2. _____ | | | |
3. _____ | | | |
4. _____ | | | |
5. _____ | | | |

F. SIXTH PERIOD

1. _____ | | | |
2. _____ | | | |
3. _____ | | | |
4. _____ | | | |
5. _____ | | | |

100 - I Corps--R didn't specify place

101 - An Hoa (An Hoc)
102 - A Shau Valley (Ashau Valley, Ashaw Valley)
103 - Camp Carroll (Rock Pile)
104 - Camp Eagle
105 - Chu Lai (Cu Lai)
106 - Con Thien (Con Tien)
107 - Da Nang (Marble Mountain)
108 - DMZ
109 - Dong Ha
110 - Duc Pho
111 - FSB Tomahawk
112 - GI Valley
113 - Hamburger Hill
114 - Happy Valley
115 - Hoi An
116 - Hue (Camp Evans)
117 - Kham Duc
118 - Khe Sanh
119 - Phu Bai (Phu Ba)
120 - Phu Loc
121 - Quang Nam (Quong Nam) Province
122 - Quang Ngai (Quong Ngai) Province
123 - Quang Tri (Quong Tri) Province
124 - Tam Ky (Tam Kay, Tam Key)
125 - Thua Thien Province
126 - Thuy Phu
127 - Tra Bong
199 - Other I Corps--not specified above

200 - II Corps--R didn't specify place

201 - An Loa Valley
202 - An Khe (Ankhe)
203 - Ban Blech
204 - Ban Don
205 - Ban Me Thuot (Ban Me Thyot)
206 - Bao Loc
207 - Ben Het
208 - Binh Dinh Province
209 - Bong Son (Bon Son)
210 - Camp Enari
211 - Camp Evans
212 - Camp Holloway
213 - Cam Rahn Bay
214 - Che Reo
215 - Cong Son
216 - Dak Pek
217 - Dak To (Dakto)
218 - Da Lat (Dalat)
219 - Darlac Province
220 - Dau Tang
221 - Dong Ba Thin
222 - Dong Tre
223 - Duc Lap
224 - Duc My (Duc Mai)
225 - Firebase Copperhead
226 - Firebase November
227 - Hammond (Hammong)
228 - Ho Bo Woods (Hobo Woods)
229 - Khanh Duong (Kanh Duong)
230 - Khanh Hoa Province
231 - Kontum (Kon Tum) Province
232 - LZ English
233 - LX X-Ray
234 - Nha Trang
235 - Nhon Co
236 - Oasis
237 - Phan Rang Province
238 - Phan Thiet
239 - Phu Cat
240 - Phu Hiep
241 - Phu Tuc
242 - Phu Yen Province
243 - Plei Kleng
244 - Pleiku
245 - Qui Nhon
246 - Rok Valley
247 - Song Mao
248 - Tahn Linh (Tanh Linh)
249 - Tuy Hoa
250 - Van Canh
251 - Vo Dat
299 - Other II Corps--not specified above

300 - III Corps--R didn't specify place

301 - An Loc
302 - Ba Ria Province
303 - Bear Cat
304 - Bien Hoa (Ben Vah) Province
305 - Black Virgin Mountain (Nui Ba Den)
306 - Bu Dop
307 - Cholon Province
308 - Cu Chi (Chu Chi)
309 - Dau Tieng
310 - Duc Phong
311 - Fish Hook
312 - French Fort
313 - Gia Dinh Province
314 - Go Cong Province
315 - Ham Tan (Ham Tam)
316 - Haut Don Nai Province
317 - Iron Triangle
318 - Katum
319 - Lai Khe
320 - Loc Ninh (Loc Nihn)
321 - Long Binh (Long Bihn)
322 - Long Giao
323 - Long Thinh
324 - Parrot's Beak (Parrot's Peak)
325 - Phu Loi
326 - Phu Vinh (Phu Vihn)
327 - Quan Lei
328 - Saigon
329 - Song Be
330 - Tay Ninh (Tay Nihn) Province
331 - Thuan Province
332 - Thu Dau Mot Province
333 - Ton Son Nhut
334 - Vung Tau (Veing Tau)
335 - Xuan Loc (Swan Loc)
399 - Other III Corps--not specified above

400 - IV Corps--R didn't specify place

401 - An Long
402 - Bac Lieu Province
403 - Beh Tre (Tri) Province
404 - Can Tho (Can To) Province
405 - Ca Mau (Cau Mau)
406 - Chau Doc Province
407 - Dong Tam
408 - Ha Tien Province
409 - Long Xuyen Province
410 - Mekong Delta
411 - Moc Hoa
412 - My Tho Province
413 - Rach Gia Province
414 - Sadec Province
415 - Soc Trang (Soctrang) Province
416 - Tan An Province
417 - Tra Vinh Province
418 - U Minh Forest (U Mink Forest)
419 - Vinh Long (Vihn Long) Province
499 - Other IV Corps--not specified above

594 - Place specified--don't know Corp

600 - Locations Other Than South Vietnam--R didn't specify place
601 - North Vietnam
602 - Laos
603 - Cambodia
604 - Phillipines
605 - South China Sea
606 - On board ship
699 - Other non-Vietnam

700 - Location Classified

J9. Overall, during the time(s) you were there, how would you describe your duty in or around Vietnam? Would you say mainly combat (served in a line unit in combat), mainly combat support (served in a unit directly supporting a combat unit in combat), or mainly service support (served in noncombat related duty)?

CODE HEAVIEST COMBAT INVOLVEMENT.

COMPLETELY COMBAT (VOLUNTEERED)	01
MAINLY COMBAT	02
COMPLETELY COMBAT SUPPORT (VOLUNTEERED)	03
MAINLY COMBAT SUPPORT	04
COMPLETELY SERVICE SUPPORT (VOLUNTEERED)	05
MAINLY SERVICE SUPPORT	06

J10. What was your military occupation (MOS, SSI, Rating or NEC, NOBC, or AFSC) in or around Vietnam?

RECORD BOTH CODE (NUMBER) AND TITLE.

	CODE	TITLE	
PRIMARY:	_____	_____	
SECONDARY:	_____	_____	
OCCUPATIONAL: OR DUTY	_____	_____	

J11. What were your primary duties while serving in the Vietnam arena?

_____
_____
_____

J12. Did you ever volunteer for any special jobs, such as a medic, special forces, LRRP, or something else?

NO	01	→ (J13)
YES	02	

J12a. What kind of special job(s)? _____
_____

J13. In general, how often were you satisfied with your duty assignment(s) in Vietnam--all of the time, most of the time, about half of the time, less than half of the time, rarely, or never?

ALL OF THE TIME	01
MOST OF THE TIME	02
ABOUT HALF THE TIME	03
LESS THAN HALF THE TIME	04
RARELY	05
NEVER	06

J14. Regardless of your main duties, how would you describe your exposure to danger and risk of casualty during your tour(s) of duty--constant, frequent, occasional, rare, or none?

CONSTANT	01
FREQUENT	02
OCCASIONAL	03
RARE	04
NONE	05

J15. HAND R SELF-REPORT BOOKLET TURNED TO J15.

Here are some different kinds of situations in Vietnam (or the Vietnam arena) that some veterans found to be unpleasant. Some of these situations may also have been unpleasant for you as well, while others may not have bothered you personally. For each of these situations, please circle the number to indicate whether you found it very unpleasant, somewhat unpleasant, not too bad, or not really a problem while you were in Vietnam. Or, if you didn't experience the situation at all, please circle that number.

AFTER R FILLS OUT AND RETURNS BOOKLET GO TO J16.

		VERY UNPLEASANT	SOMEWHAT UNPLEASANT	NOT TOO BAD	NOT REALLY A PROBLEM	DID NOT EXPERIENCE
A.	Bad climate	01	02	03	04	05
B.	Bad food	01	02	03	04	05
C.	Feeling that the Vietnamese didn't really want us there	01	02	03	04	05
D.	The insects, disease, and filth	01	02	03	04	05
E.	The sight and sound of dying men	01	02	03	04	05
F.	Loss of freedom of movement	01	02	03	04	05
G.	Feeling that our military actions were not worthwhile	01	02	03	04	05
H.	Lack of privacy	01	02	03	04	05
I.	Fear of being injured or killed	01	02	03	04	05
J.	Not counting as an individual	01	02	03	04	05
K.	Feeling out of touch with the rest of the world	01	02	03	04	05
L.	Loss of sleep	01	02	03	04	05
M.	Sense of purposelessness	01	02	03	04	05
N.	Not knowing what was really going on	01	02	03	04	05
O.	Fear of surprise attack	01	02	03	04	05

J16. HAND R CARD J-16.

Along with some of the unpleasant things and conflicts, many veterans found certain experiences they had in Vietnam satisfying in various ways. For each of these experiences, please describe how satisfying it was to you personally--very satisfying, somewhat satisfying, not too satisfying, or not at all satisfying? Or, if you never had that experience, please tell me.

		VERY SATISFYING	SOMEWHAT SATISFYING	NOT TOO SATISFYING	NOT AT ALL SATISFYING	DID NOT EXPERIENCE
A.	Decreased emphasis in the field on military discipline and bearing?	01	02	03	04	05
B.	Camaraderie with friends?	01	02	03	04	05
C.	Sense of doing something important?	01	02	03	04	05
D.	The excitement of combat?	01	02	03	04	05
E.	The opportunity to grow up quickly?	01	02	03	04	05

J17. HAND R CARD J-19 TO USE THROUGH J19.

Now I have a few questions about the unit or units you were assigned to during your tour(s) of duty in or around Vietnam. First, how many different units were you in during your tour(s) of duty in or around Vietnam? By "unit" we mean a company, battery, or similar unit, no larger than 150-200 troops, although it may be that the unit(s) you were in (was/were) quite a bit smaller. Here is a card that shows some examples of what we mean by a unit.

RECORD NUMBER: ☐☐ IF ONLY ONE → (J19)
UNITS

J18. Were you in one unit for six months or more?

NO 01
YES 02

J19. What was the name of (your unit/the unit in which you spent most of your time)?

IF SPENT EQUAL AMOUNT OF TIME IN TWO OR MORE UNITS, PROBE TO SELECT THE ONE WITH GREATEST INVOLVEMENT IN COMBAT-RELATED ACTIVITIES. RECORD UNIT IN AS FULL DETAIL AS POSSIBLE (E.G., PLATOON, COMPANY, BATTERY, BATTALION, SQUADRON, BRIGADE, REGIMENT, DIVISION, ETC.)

J20. Now let's talk a little about that unit. First, about how long were you with this unit (NAME FROM J19)?

INCLUDE TIME SPENT IN SAME UNIT OVER MULTIPLE TOURS.

RECORD NUMBER: ☐☐
MONTHS

J21. HAND R CARD J-21.

In your opinion, how competent and able were the people in charge of your unit--would you say highly competent and able, fairly competent, about average, somewhat incompetent, or totally incompetent?

PROBE: Overall?

HIGHLY COMPETENT AND ABLE 01
FAIRLY COMPETENT 02
ABOUT AVERAGE 03
SOMEWHAT INCOMPETENT 04
TOTALLY INCOMPETENT 05

J21A. How much did you trust the people you served with in (or around) Vietnam--completely, a great deal, somewhat, not very much, or not at all?

PROBE: Overall?

COMPLETELY 01
A GREAT DEAL 02
SOMEWHAT 03
NOT VERY MUCH 04
NOT AT ALL 05

J22. How many of the people you served with in your unit were the kind who looked out for the welfare of others--would you say none, a few, about half, most, or all?

PROBE: Overall? -

NONE 01
A FEW 02
ABOUT HALF 03
MOST 04
ALL 05

J22A. How often did you feel that members of your unit understood you and your problems while in (or around) Vietnam--very often, often, sometimes, rarely or never?

PROBE: Overall?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER 05

J23. And how close or tight were you with the people in your unit--would you say extremely close, very close, fairly close, not very close, or not close at all?

PROBE: Overall?

EXTREMELY CLOSE 01
VERY CLOSE 02
FAIRLY CLOSE 03
NOT VERY CLOSE 04
NOT CLOSE AT ALL 05

J24. Were there any people in this unit you felt especially close to?

NO 01
YES 02

J25. Approximately what was the racial/ethnic composition of your unit? That is,

PROBE: Overall?

		RECORD PERCENT
A.	about what percent were black?	___ %
B.	about what percent were white?	___ %
C.	about what percent were Hispanic (e.g., Puerto Rican, Mexican-American, Cuban-American or other Spanish-speaking people)? .	___ %
D.	about what percent were any other race? (SPECIFY)	___ %
	NOTE: A-D SHOULD TOTAL 100%	100%

J26. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, A4 AND A5.

WHAT IS RESPONDENT'S RACIAL OR ETHNIC GROUP?

WHITE--NOT HISPANIC	01	→ (J32)
BLACK--NOT HISPANIC	02	
ALL HISPANIC (E.G., PUERTO RICAN, CUBAN-, MEXICAN- OR OTHER SPANISH-AMERICAN)	03	
OTHER	04	→ (J32)

J27. Some veterans have reported that they were treated differently in the Armed Forces because of their racial or ethnic background.

How about you personally? Do you think that you were assigned to duty in the Vietnam arena because you're (Black/Hispanic)?

NO	01	
YES	02	→ (J28)

J27a. Do you think that you were assigned or not assigned to certain duty stations elsewhere in the military because you're (Black/Hispanic)?

NO	01
YES	02

J28. Do you think you were ever demoted or denied promotion while you were in or around Vietnam because you're (Black/Hispanic)?

NO	01	
YES	02	→ (J29)

J28a. Did this happen to you anywhere in the military?

NO	01
YES	02

J29. Do you think you were ever given <u>unpleasant</u> duty assignments while you were in (or around) Vietnam because you're (Black/Hispanic)?

NO	01	
YES	02	→ (J30)

J29a. Did this happen to you anywhere in the military?

NO	01
YES	02

J30. Do you think you were ever given <u>dangerous</u> duty assignments while you were in (or around) Vietnam because you're (Black/Hispanic)?

NO	01	
YES	02	→ (J31)

J30a. Did this happen to you anywhere in the military?

NO 01
YES 02

J31. While you were serving in or around Vietnam, do you think there were any (other) ways you were treated unfairly or badly because you're (Black/Hispanic)?

NO 01
YES . . . . . 02 → (J31b)

J31a. Did this happen to you anywhere in the military?

NO . . . . . 01 → (J32)
YES 02

J31b. In what ways were you treated unfairly or badly?

J32. INTERVIEWER CHECKPOINT.

IS RESPONDENT MALE OR FEMALE?

MALE . . . . . 01 → (J34)
FEMALE 02

J33. While serving in or around Vietnam, were there any ways you were treated unfairly or badly because you are a woman?

NO 01
YES . . . . . 02 → (J33b)

J33a. Did this happen to you anywhere in the military?

NO . . . . . 01 → (J34)
YES 02

J33b. In what ways were you treated unfairly or badly?

J34. Now I'd like to ask you some specific questions about your personal experiences with combat and experiences directly related to the war.

First, how would you generally describe your own exposure to combat during the time(s) you were in or around Vietnam--light, moderate, or heavy?

(ALMOST) NONE (IF VOLUNTEERED) . 01
LIGHT 02
MODERATE 03
HEAVY 04

J35. How often (if ever) did you find yourself in a combat situation in which you thought you would never survive? Would you say very often, often, sometimes, rarely (but at least once), or never?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER 05

J36. Did you ever fire a weapon in a combat situation (in or around Vietnam)?

NO . . . . . 01 → (J37)
YES 02

J36a. HAND R CARD J-36a TO USE THROUGH J41.

How often did you fire a weapon? Would you say very often, often, sometimes or rarely?

RECORD NUMBER OF DISTINCT OCCASIONS.

VERY OFTEN (MORE THAN 50 TIMES) . 01
OFTEN (13-50 TIMES) 02
SOMETIMES (3-12 TIMES) 03
RARELY (1-2 TIMES) 04

J37. Were you ever under enemy fire?

NO . . . . . 01 → (J38)
YES 02

J37a. POINT TO CARD J-36a.

How often-- very often, often, sometimes, or rarely?

VERY OFTEN (MORE THAN 50 TIMES) . 01
OFTEN (13-50 TIMES) 02
SOMETIMES (3-12 TIMES) 03
RARELY (1-2 TIMES) 04

J38. Did you ever go on combat patrols or missions, or have other very dangerous duty?

NO	01	→ (J39)
YES	02	

J38a. POINT TO CARD J-36a.

How often did you go on combat patrols or missions, or have other very dangerous duty? (Would you say very often, often, sometimes, or rarely?)

VERY OFTEN (MORE THAN 50 TIMES)	01
OFTEN (13-50 TIMES)	02
SOMETIMES (3-12 TIMES)	03
RARELY (1-2 TIMES)	04

J39. POINT TO CARD J-36a.

In your opinion, how often were you in danger of being killed or wounded in (or around) Vietnam? Would you say very often, fairly often, sometimes, rarely, or never?

VERY OFTEN (MORE THAN 50 TIMES)	01
OFTEN (13-50 TIMES)	02
SOMETIMES (3-12 TIMES)	03
RARELY (1-2 TIMES)	04
NEVER	05

J40. POINT TO CARD J-36a.

How often were you <u>near</u> combat situations, but were not actually involved in combat--very often, often, sometimes, rarely, or never?

NEAR = WITHIN A MILE OR SO

VERY OFTEN	01
OFTEN	02
SOMETIMES	03
RARELY	04
NEVER	05

J41. POINT TO CARD J-36a.

Personnel stationed in or around Vietnam found themselves in a number of different jobs or circumstances. For each of the following, please tell me whether or not you had this experience during your tour(s) of duty in or around Vietnam, and, if so, how often this occurred.

	Were you ever/did you ever . . .	EXPERIENCE OCCURRED? NO	YES	IF YES, ASK: How often? VERY OFTEN	OFTEN	SOMETIMES	RARELY
A.	. . . in relatively unsafe or hostile territory?	01	02 →	01	02	03	04
B.	. . . patrol in the countryside outside of American bases?	01	02 →	01	02	03	04
C.	. . . stationed at a forward observation post or base camp?	01	02 →	01	02	03	04
D.	. . . take care of people who later died?	01	02 →	01	02	03	04
E.	. . . fly fixed-wing aircraft on missions over Vietnam, Laos, and/or Cambodia?	01	02 →	01	02	03	04
F.	. . . fly helicopter missions over Vietnam, Laos, and/or Cambodia?	01	02 →	01	02	03	04
G.	. . . handle dangerous materials, such as ammunition, explosives, or fuels?	01	02 →	01	02	03	04
H.	. . . part of a river patrol or gunboat crew?	01	02 →	01	02	03	04
I.	. . . responsible for taking care of and/or evacuating casualties?	01	02 →	01	02	03	04
J.	. . . serve in a command capacity and were responsible for others' lives and safety?	01	02 →	01	02	03	04
K.	. . . part of a land or naval artillery unit which fired on the enemy?	01	02 →	01	02	03	04
L.	. . . feel personally responsible for life and death decisions?	01	02 →	01	02	03	04

J42. TIME CHECKPOINT:

RECORD (ENDING) DATE AND TIME:	MONTH / DAY	HOUR : MINUTE	A.M. / P.M.
RECORD (BEGINNING) DATE AND TIME:	MONTH / DAY	HOUR : MINUTE	A.M. / P.M.

J43. HAND R CARD J-43.

The next set of questions deals more directly with some particular experiences you may or may not have had related to combat in or around Vietnam. For each of the following experiences tell me how often (if ever) this experience happened to you during your Vietnam (-related) tour(s) using the categories on this card.

CARD J-43

1. VERY OFTEN: Occurred weekly or more (more than 50 times) during my tour(s), or nearly daily for a shorter period of time.
2. OFTEN: Occurred on an average of a few times per month (13-50 times) during my tour(s) or more often for a shorter period.
3. SOMETIMES: Occurred on the average of once a month (or 4-12 times) during my tour(s)
4. RARELY: Occurred a few times (1-3 times) during my tour(s)
5. NEVER: Experience did not occur

During your tour(s) in or around Vietnam, how often (if ever) . . .	VERY OFTEN	OFTEN	SOMETIMES	RARELY	NEVER
A. . . . did you receive small arms fire from the enemy?	01	02	03	04	05
B. . . . did you receive incoming fire from enemy artillery, rockets, and/or mortars?	01	02	03	04	05
C. . . . did you or your unit (patrols) encounter anti-personnel weapons such as (land) mines and/or booby traps?	01	02	03	04	05
D. . . . did your unit receive sniper fire and/or sapper attacks?	01	02	03	04	05
E. . . . was your unit (patrol) ambushed?	01	02	03	04	05

During your tour(s) in or around Vietnam, how often (if ever) . . .	VERY OFTEN	OFTEN	SOMETIMES	RARELY	NEVER
F. . . . was a vehicle in which you were traveling (e.g., truck, tank, APC, helicopter, plane, or boat) disabled by enemy fire?	01	02	03	04	05
G. . . . did your unit (patrol) engage the Vietcong, guerrilla, or unidentified troops in a firefight?	01	02	03	04	05
H. . . . did your unit (patrol) engage the North Vietnamese Army (NVA) or other organized military forces in a firefight? . .	01	02	03	04	05
I. . . . did you experience hand-to-hand combat?	01	02	03	04	05
J. . . . did you fire your weapon at the enemy?	01	02	03	04	05
K. . . . did you have to do certain particularly dangerous tasks (e.g., walk point, check out bunkers or tunnels)?	01	02	03	04	05
L. . . . were you cut off/separated from your unit in hostile territory?	01	02	03	04	05
M. . . . did you find yourself in <u>any other</u> life-threatening situations?	01	02	03	04	05

SPECIFY: _____ | | |

_____ | | |

J44. Did you (ever) see Americans being killed or wounded in (or around) Vietnam?

NO	01	→ (J45)
YES	02	

J44a. Was that killed, wounded, or both?

KILLED	01
WOUNDED	02
BOTH--KILLED AND WOUNDED	03

J44b. How often did you see Americans being killed or wounded--very often, often, sometimes, or rarely?

VERY OFTEN	01
OFTEN	02
SOMETIMES	03
RARELY	04

J45. How often (if ever) did you see Americans after they had been wounded in combat? Would you say very often, often, sometimes, rarely, or never?

VERY OFTEN	01
OFTEN	02
SOMETIMES	03
RARELY	04
NEVER	05

J46. How often (if ever) did you see (the bodies of) dead Americans?

VERY OFTEN	01
OFTEN	02
SOMETIMES	03
RARELY	04
NEVER	05

J47. Did you know any Americans who were killed or wounded in (or around) Vietnam?

NO . . . . . 01 → (J48)
YES 02

J47a. Was that killed, wounded or both?

KILLED 01
WOUNDED 02
BOTH--KILLED AND WOUNDED 03

J47b. Did you have any close personal friends who were killed or seriously wounded in (or around Vietnam)?

NO . . . . . 01 → (J48)
YES 02

J47c. Was that killed, wounded or both?

KILLED 01
WOUNDED 02
BOTH--KILLED AND WOUNDED 03

J47d. Were any of these friends members of your unit(s)?

NO . . . . . 01 → (J48)
YES 02

J47e. How often did you see a close friend from your unit(s) seriously wounded--very often, often, sometimes, rarely, or never?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER 05

J47f. How often did you see a close friend from your unit(s) killed or die?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER 05

J48. Did you know any Americans who were casualties of "friendly fire"?

NO 01
YES 02

J49. Were you yourself ever wounded or injured in or around Vietnam?

NO . . . . . 01 → (J50)
YES 02

J49a. Were you wounded or injured in combat?

NO 01
YES 02

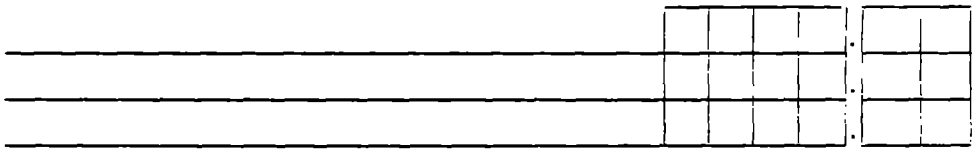
J49b. Were you wounded or injured more than once?

NO . . . . . 01 → (J49d)
YES 02

J49c. How many times were you wounded or injured?

RECORD NUMBER: ☐☐
TIMES

J49d. What (was/were) the nature of your wound(s) or injury(ies)?



J49e. Did you receive a Purple Heart?

NO 01
YES 02

J49f. Were you evacuated or hospitalized for (any of) these during your tour(s)?

NO . . . . . 01 → (J50)
YES 02

J49g. Did you return to your unit(s) later, were you reassigned, or did you receive a discharge?

CIRCLE ALL THAT APPLY.

RETURNED TO PREVIOUS UNIT 01
REASSIGNED TO ANOTHER ACTIVE UNIT 02
DISCHARGED 03

J49h. Did you recover fully from your wound(s) or injury(ies)?

NO 01
YES . . . . . 02 → (J50)

J49i. (Does it/Do they) cause any serious problems in your life today?

NO 01
YES 02

J50. Were you ever a Prisoner of War (POW)?

NO . . . . . 01 → (J51)
YES 02

J50a. How long (were you a prisoner of war); that is, how many months?

IF LESS THAN HALF A MONTH, CODE 000.

RECORD NUMBER: [ ][ ][ ]
MONTHS

J51. IF RESPONDENT IS NOT BLACK OR HISPANIC → (J52).

Did the Vietcong, North Vietnamese, or other enemy soldier ever spare your life because you're (black/Hispanic)?

NO 01
YES 02

J52. Now I have a few questions about the enemy--the Vietcong, the North Vietnamese Army, and other guerrilla or organized military forces involved in Vietnam.

Did you (ever) see any Vietnamese or other enemy being killed or wounded in (or around) Vietnam?

NO . . . . . 01 → (J53)
YES 02

J52a. Was that killed, wounded or both?

KILLED 01
WOUNDED 02
BOTH--KILLED AND WOUNDED 03

J52b. How often did you see Vietnamese (or other enemy) being killed or wounded--very often, often, sometimes or rarely?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04

J53. How often (if ever) did you see the enemy <u>after</u> they had been wounded in combat? Would you say very often, often, sometimes, rarely, or never?

VERY OFTEN	01
OFTEN	02
SOMETIMES	03
RARELY	04
NEVER	05

J54. How often (if ever) did you see (the bodies of) dead enemy soldiers?

VERY OFTEN	01
OFTEN	02
SOMETIMES	03
RARELY	04
NEVER	05

J55. Did you ever kill or think you killed someone in or around Vietnam?

NO	01	→ (J56)
YES	02	

J55a. In the Vietnam arena enemy personnel were often killed or wounded without any one American soldier being able to say definitely that he fired the shot that did it or was otherwise personally responsible for the casualty. But occasionally a soldier did know that he was personally responsible for the death of an enemy. How often (if ever) were you in a combat situation where you were sure that you <u>personally</u> had killed enemy personnel?

VERY OFTEN	01	
OFTEN	02	
SOMETIMES	03	
RARELY	04	
NEVER	05	→ (J56)

J56. Sometimes in (or around) Vietnam it was difficult to clearly identify who the enemy was. How often (if ever) did you have trouble identifying who the enemy was--very often, often, sometimes, rarely, or never?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER . . . . . 05 → (J57)

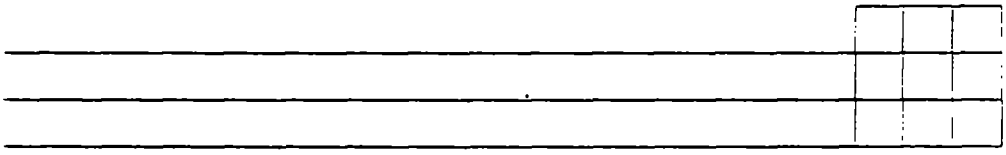
J56a. How often (if ever) did you wound or kill people you <u>weren't sure</u> were the enemy?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER 05

J57. Now think about your primary duties and the various kinds of operations you participated in when you were involved in the Vietnam War. Looking back, were there some things you wish you had not chosen to do or had not been assigned to do?

NO . . . . . 01 → (J58)
YES 02

J57a. What kinds of things were those?



J58. Now I'm going to read you some questions about a number of things that sometimes happen in war which can be especially painful to remember and talk about. While it may be impossible for anyone who wasn't there to really understand, many Vietnam veterans have told us that veterans <u>must</u> be encouraged to tell us about these experiences if we are to learn the full impact of the war on people's lives. As we go through these, let me know how you are feeling and be sure to explain anything to me that I may not understand.

First, were you ever in a combat situation in or around Vietnam where you felt that you let your buddies down?

NO . . . . . 01 → (J59)
YES 02

J58a. How much did this bother you--a lot, some, a little, or not at all?

A LOT 01
SOME 02
A LITTLE 03
NOT AT ALL 04

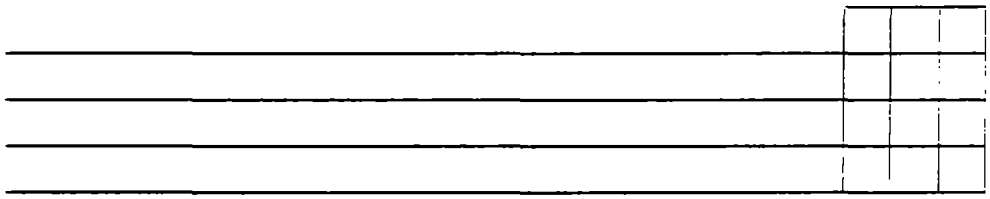
J58b. Does this (still) bother you today? Would you say a lot, some, a little, or not at all?

A LOT 01
SOME 02
A LITTLE 03
NOT AT ALL 04

J59. Were you ever in a combat situation in (or around) Vietnam where you participated in any kind of injury or destruction that seemed necessary then, but that you would consider unnecessary now?

NO . . . . . 01 → (J60)
YES 02

J59a. What was that about?



J60. How often (if ever) were you exposed to the sight, smell, or sound of dead and dying people--would you say very often, often, sometimes, rarely, or never?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER 05

J61. How often (if ever) did you see the bodies of dead (Vietnamese) civilians? (Would you say very often, often, sometimes, rarely, or never?)

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER 05

J62. HAND R CARD J-62.

Now, I'm going to read you a list of actions that sometimes happen in war. For each one, tell me how commonly you think these things were done by the enemy--the Vietcong, the North Vietnamese Army, and other guerrilla or organized military forces involved in Vietnam. Were they very common, common, done occasionally, hardly ever, or were they never done?

		VERY COMMON	COMMON	DONE OCCA-SIONALLY	HARDLY EVER	NEVER DONE
A.	Bombing and shelling of cities to terrorize the population?	01	02	03	04	05
B.	Torturing, wounding, or killing civilians?	01	02	03	04	05
C.	Death or maiming by booby traps or mines?	01	02	03	04	05
D.	Torturing, wounding, or killing hostages or prisoners of war?	01	02	03	04	05
E.	Mutilation of bodies of the enemy or civilians?	01	02	03	04	05

F. IF J62B = NEVER DONE (05) → (J62G)
During the time you were in (or around) Vietnam, did you personally ever see or hear about any Vietnamese civilians being tortured, wounded, or murdered by the enemy?

NO 01
YES, ONLY HEARD ABOUT 02
YES, SAW 03

G. IF J62D = NEVER DONE (05) → (J62H)
During the time you were in (or around) Vietnam, did you personally ever see or hear about an American soldier being tortured by the enemy?

NO 01
YES, ONLY HEARD ABOUT 02
YES, SAW 03

H. IF J62E = NEVER DONE (05) → (J63)
Did you personally ever see or hear about bodies of dead American soldiers mutilated by the enemy?

NO 01
YES, ONLY HEARD ABOUT 02
YES, SAW 03

J63. In combat situations in (or around) Vietnam, women, children, and old people were sometimes seen by our side as the enemy. Were you ever in a situation in Vietnam where women, children, or old people were either injured or killed by American or South Vietnamese (ARVN) soldiers?

NO . . . . . 01 → (J64)
YES 02

J63a. Did you only see this happen or were you (ever) directly involved?

ONLY SAW HAPPEN 01
DIRECTLY INVOLVED 02

J64. In combat situations in (or around) Vietnam, Vietnamese prisoners or civilians were often injured because they were suspected of being enemy sympathizers, or to obtain information, or to avenge the deaths of American soldiers, or for other reasons.

Were you ever in a situation where a Vietnamese prisoner was injured or killed for any reason?

NO . . . . . 01 → (J65)
YES 02

J64a. Did you only see this happen or were you (ever) directly involved?

ONLY SAW HAPPEN . . . . . 01 → (J65)
DIRECTLY INVOLVED 02

J64b. Were you ever personally responsible for the death of a prisoner?

NO 01
YES 02

J65. Were you ever in a situation where a civilian was injured or killed for any reason?

NO . . . . . 01 → (J66)
YES 02

J65a. Did you only see this happen or were you (ever) directly involved?

ONLY SAW HAPPEN . . . . . 01 → (J66)
DIRECTLY INVOLVED 02

J65b. Were you ever personally responsible for the death of a Vietnamese civilian?

NO 01
YES 02

J66. HAND R SELF-REPORT BOOKLET TURNED TO J66.

Now here is a similar list of actions to the one I just asked you about for the enemy. Sometimes these things were also done by our side. Please look at this list again, and after each action, circle the number which best describes the extent to which you were exposed to this type of thing during your tour(s) that directly involved Vietnam.

WHEN RESPONDENT RETURNS BOOKLET, GO IMMEDIATELY TO QUESTION J67.

To what extent were you involved in:	NOT AT ALL	KNEW/ HEARD ABOUT IT	SAW IT	UNIT PARTI-CIPATED	I PARTI-CIPATED	I WAS RESPON-SIBLE
A. Terrorizing, wounding, or killing civilians?	01	02	03	04	05	06
B. Death or maiming by booby traps or mines?	01	02	03	04	05	06
C. Use of napalm, white phosphorous, or cluster bombs on villages?	01	02	03	04	05	06
D. Torturing, wounding, or killing hostages or prisoners of war?	01	02	03	04	05	06
E. Mutilation of bodies of the enemy or civilians?	01	02	03	04	05	06

J67. Was there anything that happened in or around Vietnam that you felt you couldn't discuss with anyone else?

NO . . . . . 01 → (J68)
YES 02

J67a. Could you tell us about it now?

NO . . . . . 01 → (J68)
YES 02

J67b. _____

J68. HAND R CARD J-68.

Apart from the usual stresses of fighting in a war, many people serving in or around Vietnam found different kinds of situations disturbing. For each of the following situations, tell me how often (if ever) you experienced it--very often, often, sometimes, rarely, or never?

How often (if ever) did you experience:	VERY OFTEN	OFTEN	SOMETIMES	RARELY	NEVER
A. . . . not having enough water?	01	02	03	04	05
B. . . . not having adequate food?	01	02	03	04	05
C. . . . not having shelter from the weather?	01	02	03	04	05
D. . . . not having adequate weapons or munitions?	01	02	03	04	05
E. . . . not having adequate equipment or supplies?	01	02	03	04	05
F. . . . being physically fatigued or exhausted?	01	02	03	04	05
G. . . . being <u>emotionally</u> worn out or exhausted?	01	02	03	04	05
H. . . . having a continual stream of casualties?	01	02	03	04	05
I. . . . suffering from diseases and other medical problems?	01	02	03	04	05
J. . . . being forced to decide who to help?	01	02	03	04	05
K. . . . not being able to help the wounded and dying as much as you wanted?	01	02	03	04	05
L. . . . helping someone who asked to be allowed to die?	01	02	03	04	05

J69. HAND R SELF-REPORT BOOKLET TURNED TO J69.

Here is a list of things people sometimes do to deal with difficult periods in their lives. Please circle the number which best describes the extent to which you did each of these to deal with your Vietnam war-related experiences while you were there--a great deal, a lot, some, a little bit, or not at all.

AFTER R FILLS OUT AND RETURNS BOOKLET, GO TO J70.

	A GREAT DEAL	A LOT	SOME	A LITTLE BIT	NOT AT ALL
A. Took some positive action to try to solve the problem?	01	02	03	04	05
B. Thought about how you could have done things differently?	01	02	03	04	05
C. Depended on others to cheer you up and make you feel better?	01	02	03	04	05
D. Refused to think about the situation?	01	02	03	04	05
E. Went over the problem again and again in your mind to try to understand it?	01	02	03	04	05
F. Felt that time would make a difference; the only thing to do was wait?	01	02	03	04	05
G. Tried to find out more about the situation?	01	02	03	04	05
H. Had fantasies or wished about how things might turn out?	01	02	03	04	05
I. Went on as if nothing had happened?	01	02	03	04	05
J. Thought about events in your past life which could help you deal better with the present?	01	02	03	04	05
K. Prayed or got someone to pray for you?	01	02	03	04	05
L. Made a plan of action and tried to follow it?	01	02	03	04	05
M. Tried to understand how other people in the situation were thinking or feeling?	01	02	03	04	05
N. Knew what had to be done, so you doubled your efforts and tried harder to make things work?	01	02	03	04	05

		A GREAT DEAL	A LOT	SOME	A LITTLE BIT	NOT AT ALL
O.	Went to someone to help you feel better?	01	02	03	04	05
P.	Took it out on other people?	01	02	03	04	05
Q.	Tried to think about other things to get your mind off the situation?	01	02	03	04	05
R.	Drank alcohol or used drugs or medicines?	01	02	03	04	05
S.	Told yourself things that helped you feel better?	01	02	03	04	05
T.	Did something to make yourself relax?	01	02	03	04	05
U.	Considered several alternatives for handling the problem?	01	02	03	04	05
V.	Daydreamed or imagined a better time or place than the one you were in?	01	02	03	04	05
W.	Yelled or shouted to let off steam?	01	02	03	04	05
X.	Stood your ground and fought for what you wanted?	01	02	03	04	05
Y.	Wished the situation would go away?	01	02	03	04	05

J70. Now, to sum up on Vietnam I have a few questions about your return from duty in or around Vietnam (for the last time).

HAND R CARD J-70.

When you left the Vietnam theatre, how much were you opposed to or in favor of U.S. involvement in Vietnam--extremely opposed, fairly opposed, somewhat opposed, somewhat in favor, fairly in favor, or extremely in favor?

EXTREMELY OPPOSED	01
FAIRLY OPPOSED	02
SOMEWHAT OPPOSED	03
NEUTRAL; NEITHER OPPOSED NOR IN FAVOR (VOLUNTEERED)	04
SOMEWHAT IN FAVOR	05
FAIRLY IN FAVOR	06
EXTREMELY IN FAVOR	07

J71. Did you spend any time in a military hospital for a physical injury or wound at the time of your return?

NO	01	→ (J72)
YES	02	

J71a. For how many nights were you hospitalized (at the time of your return)?

RECORD NUMBER: [ ][ ][ ]
NIGHTS

J72. Many Vietnam veterans tried to imagine what it would be like to be back home in the United States again. When you actually returned to the U.S., how did the homecoming you received compare to the one you had imagined? Was your actual homecoming much better, somewhat better, somewhat worse, or much worse than you had imagined?

MUCH BETTER	01
SOMEWHAT BETTER	02
NO DIFFERENCE (VOLUNTEERED)	03
SOMEWHAT WORSE	04
MUCH WORSE	05

J73. It has been reported that some veterans experienced negative or even hostile events after returning from Vietnam. Did you ever experience any events like these after you returned from the Vietnam arena?

(For example, some veterans were spit at, called "baby-killers", were challenged to fights in bars, or found that some friends or relatives would not talk to them.)

NO . . . . . 01 → (J74)
YES 02

J73a. What type(s) of event(s) did you experience?

J73b. How often did you experience (this/these) kind(s) of negative or hostile events--very often, often, sometimes, rarely, or never?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER 05

J73c. How much would you say (this/these) event(s) bothered you--a lot, some, a little, or not at all?

A LOT 01
SOME 02
A LITTLE 03
NOT AT ALL 04

J74. Overall, do you feel that the way you were treated by friends, relatives, or the public in general kept you from talking about your experiences in or around Vietnam as much as you may have wanted to?

NO 01
YES 02

J75. Did you ever attempt to discuss your experiences or describe your feelings about your experiences in (or around) Vietnam and find others unwilling or unable to listen?

NO 01
YES 02

J76. HAND R CARD J-76.

Now let me read a few statements we have heard from some veterans who served in the Vietnam combat area during the war. Please tell me how closely each statement matches your feelings--very closely, somewhat closely, not too closely, or not at all?

		VERY CLOSELY	SOMEWHAT CLOSELY	NOT TOO CLOSELY	NOT AT ALL
A.	Being in the Vietnam War was the biggest event in my life up until now.	01	02	03	04
B.	I'm happier when people don't know I'm a Vietnam veteran	01	02	03	04
C.	I sometimes find myself thinking about all the death and dying that went on in Vietnam	01	02	03	04

J77. Do you feel that your service in or around Vietnam has helped you become a better person?

NO 01
YES 02

J78. Overall, do you feel that you personally benefited in the long run or were set back in the long run by having been involved in the Vietnam War?

PROBE: On balance, overall.

PERSONALLY BENEFITTED 01
SET BACK 02
NO IMPACT (VOLUNTEERED) 03

J79. Now, please tell me briefly, in your own words, how your experiences in or around Vietnam have affected your life?

First, what were some of the positive things you gained from your Vietnam experience?

J80. And what were some of the negative things?

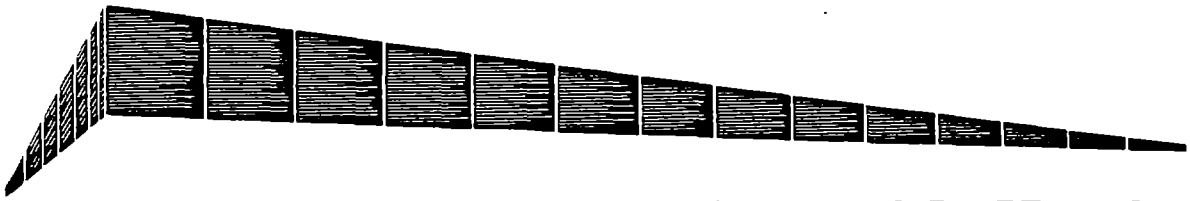
_____

_____

_____ | | | |

_____ | | | |

J81. RECORD ENDING DATE AND TIME: | | / | | | | : | | A.M. P.M.
MONTH DAY HOUR MINUTE



NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
EXPIRES: 12/31/88

MAIN STUDY QUESTIONNAIRE

VOLUME III

SECTION K: POST-SERVICE

SECTION M: STRESSFUL AND TRAUMATIC LIFE EVENTS

SECTION N: SELF-PERCEPTIONS, ATTITUDES AND NONSPECIFIC DISTRESS

SECTION P: PHYSICAL HEALTH STATUS

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SECTION K: POST-SERVICE

RECORD BEGINNING DATE AND TIME: [ ][ ] / [ ][ ] [ ][ ] : [ ][ ] A.M. P.M.
MONTH DAY HOUR MINUTE

K1. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, A10, A11 AND A11a.

DID RESPONDENT EVER SERVE ON ACTIVE DUTY IN THE U.S. ARMED FORCES?

NO . . . . . 01 → (M1)
YES 02

Now let's talk about your experiences when you returned to civilian life after your last release or discharge from active duty military service.

K2. First, on the whole, how do you feel about your military experience--strongly positive, positive, negative, or strongly negative?

STRONGLY POSITIVE 01
POSITIVE 02
NEUTRAL (IF VOLUNTEERED) 03
NEGATIVE 04
STRONGLY NEGATIVE 05

K3. And what effect has military service had on your life? Would you say entirely positive effects, mostly positive effects, an equal balance of positive and negative effects, mostly negative effects, or entirely negative effects?

ENTIRELY POSITIVE EFFECTS 01
MOSTLY POSITIVE EFFECTS 02
AN EQUAL BALANCE OF POSITIVE AND NEGATIVE EFFECTS 03
MOSTLY NEGATIVE EFFECTS 04
ENTIRELY NEGATIVE EFFECTS 05

K4. HAND R SELF-REPORT BOOKLET TURNED TO K4.

Here are a few statements that some veterans have made about the effects of their military service on their lives. For each statement please circle the number that best describes to what extent this has been true for you--very true, somewhat true, not very true, or not at all true?

AFTER R FILLS OUT AND RETURNS BOOKLET, GO TO K5.

	VERY TRUE	SOMEWHAT TRUE	NOT VERY TRUE	NOT AT ALL TRUE
A. It destroyed my initiative or otherwise hurt me psychologically.	01	02	03	04
B. I received a wound or injury that handicapped me later.	01	02	03	04
C. It made me more hateful toward certain types of people.	01	02	03	04
D. It allowed me or forced me to grow up socially or emotionally. .	01	02	03	04
E. It taught me how to get along with different kinds of people . .	01	02	03	04
F. It took me away from my family who needed me at home.	01	02	03	04
G. It hurt my chances for keeping or getting a job.	01	02	03	04
H. I lost my spouse (or intended spouse) as a result.	01	02	03	04
I. Going into the service got me out of serious trouble in my community	01	02	03	04
J. It unfortunately interrupted my education.	01	02	03	04

K5. Do you feel that your service in the military has helped you become a better person?

NO 01
YES 02

K6. Overall, do you feel you personally benefitted in the long run or were set back in the long run by having been in the military service?

PERSONALLY BENEFITTED 01
SET BACK 02
DON'T KNOW/NO OPINION 94

K7. We are especially interested in knowing how you felt about returning to civilian life upon separation from the Armed Forces and how concerned you were about possible problems of readjusting. Would you say that you were very concerned about returning to civilian life, somewhat concerned, only slightly concerned, or not at all concerned about returning to civilian life?

PROBE: On balance, overall?

VERY CONCERNED 01
SOMEWHAT CONCERNED 02
ONLY SLIGHTLY CONCERNED 03
NOT AT ALL CONCERNED 04

K8. Thinking back on when you returned to civilian life, was it better, worse, or about the same as you had anticipated?

BETTER 01
ABOUT THE SAME 02
WORSE 03

K9. HAND R CARD K-9 TO USE THROUGH K10.

When you returned to civilian life, how did you feel about the reception that you received from people in the U.S. who did not serve in the Armed Forces?

TERRIBLE 01
UNHAPPY 02
MOSTLY DISSATISFIED 03
MIXED (ABOUT EQUALLY SATISFIED
AND DISSATISFIED) 04
MOSTLY SATISFIED 05
PLEASED 06
DELIGHTED 07

K10. POINT TO CARD K-9.

How did you feel about the reception that you received from <u>family members</u> <u>and</u> <u>close</u> <u>friends</u> when you returned to civilian life?

TERRIBLE 01
UNHAPPY 02
MOSTLY DISSATISFIED 03
MIXED (ABOUT EQUALLY SATISFIED
AND DISSATISFIED 04
MOSTLY SATISFIED 05
PLEASED 06
DELIGHTED 07

Now, I'm going to mention some problems that some veterans have told us they've had since returning to civilian life. For each one, please tell me if you personally have had such problems since leaving military service.

		A. Since your last release from active duty military service, have you had any . . . IF YES, ASK B.		B. Did you consider this to be a minor problem or a serious one? IF SERIOUS, ASK C.		C. Is it a serious problem for you now?	
		NO	YES	MINOR	SERIOUS	NO	YES
K11.	Problems or difficulties finding jobs?	01	02 →	01	02 →	01	02
K12.	Problems with not having enough money to live on?	01	02 →	01	02 →	01	02
K13.	Problems holding a job?	01	02 →	01	02 →	01	02
K14.	Problems with drugs?	01	02 →	01	02 →	01	02
K15.	Problems with drinking too much?	01	02 →	01	02 →	01	02
K16.	Mental or emotional problems?	01	02 →	01	02 →	01	02
K17.	Problems with your physical health?	01	02 →	01	02 →	01	02
K18.	Problems not knowing what you want out of life?	01	02 →	01	02 →	01	02
K19.	Problems being in and out of trouble with the law?	01	02 →	01	02 →	01	02
K20.	Problems with finishing your schooling?	01	02 →	01	02 →	01	02
K21.	Problems being discriminated against because you were in the Armed Forces?	01	02 →	01	02 →	01	02
K22.	Family problems with your spouse or children?	01	02 →	01	02 →	01	02

K23. Overall, do you feel that after you were last released from active duty military service you had a great deal of difficulty, considerable difficulty, some difficulty, very little difficulty, or practically no difficulty in readjusting to civilian life?

GREAT DEAL OF DIFFICULTY 01
CONSIDERABLE DIFFICULTY 02
SOME DIFFICULTY 03
VERY LITTLE DIFFICULTY 04
NONE, OR PRACTICALLY NO DIFFICULTY 05

K24. How much were the skills and experiences you got in the military helpful in finding a civilian job at any time after your separation from military service--a great deal, pretty much, some, just a little, or not at all?

A GREAT DEAL 01
PRETTY MUCH 02
SOME 03
JUST A LITTLE 04
NOT AT ALL 05

K25. How much were the skills and experiences you got in the military useful in performing any of the jobs that you've had since your separation from the service--a great deal, pretty much, some, just a little, or not at all?

A GREAT DEAL 01
PRETTY MUCH 02
SOME 03
JUST A LITTLE 04
NOT AT ALL 05

K26. HAND R CARD K-26.

Here are a few statements that some veterans have made about how they felt when they returned home to civilian life. For each of these please tell me whether you agree strongly, agree mildly, neither agree nor disagree, disagree mildly or disagree strongly.

	AGREE STRONGLY	AGREE MILDLY	NEITHER AGREE NOR DISAGREE	DISAGREE MILDLY	DISAGREE STRONGLY
A. The American people have done everything they can to make veterans feel at home again.	01	02	03	04	05
B. People at home just didn't understand what you had been through in the Armed Forces.	01	02	03	04	05
C. Most people at home respect you for having served your country in the Armed Forces.	01	02	03	04	05
D. People at home made you feel proud to have served your country in the Armed Forces.	01	02	03	04	05
E. Readjusting to civilian life was more difficult than most people imagine.	01	02	03	04	05

K27. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, H31.

IS R A VIETNAM ERA OR THEATRE VETERAN?

NO . . . . . 01 → (K34)
YES 02

K28. Now we want to talk about the people you knew right after you were last discharged or released from active duty military service. First, when you came home (after your release) from the service, about how many close friends (including relatives) did you have--that is people you felt at ease with and could talk with about what was on your mind?

RECORD NUMBER: ☐☐
CLOSE FRIENDS

NONE . . . . . 00 → (K29)

K28a. How many of these friends (if any) were Vietnam veterans?

RECORD NUMBER: ☐☐
VV FRIENDS

K29. When you came home (after your release) from the service, was there anyone among your friends and relatives, excluding your spouse or partner (if any), to whom you could tell just about anything, someone you could count on for understanding and advice?

NO . . . . . 01 → (K30)
YES 02

K29a. Was this person a Vietnam veteran?

IF MORE THAN ONE PERSON, ANY VIETNAM VETERAN COUNTS.

NO 01
YES 02

K30. What about your spouse or partner at the time? Was (s/he) someone you could tell just about anything to, someone you could count on for understanding and advice?

NO 01
YES 02
NO SPOUSE OR PARTNER AT TIME . . 00

K31. Did you have any problems at that time that you felt you couldn't discuss with any friend or relative?

NO 01
YES 02

K32. HAND R CARD K-32 TO USE THROUGH K32b.

During the first year after you came home (after your release) from the service, who, if anyone, on this card did you talk with about the war in Vietnam?

ASK FOR NON-RELATIVES: (Is this/Are these) person(s) (mainly) male or female?

CIRCLE ALL THAT APPLY.

NO ONE	00	→ (K33)
HUSBAND OR WIFE	01	
PARTNER (LIVE -IN)	02	
FATHER	03	
MOTHER	04	
BROTHER(S)	05	
SISTER(S)	06	
SON(S)	07	
DAUGHTER(S)	08	
OTHER RELATIVE(S) OR FAMILY MEMBER(S) (SPECIFY)	09	
FRIENDS(S)--(MAINLY) MALE	11	
FRIENDS(S)--(MAINLY) FEMALE	12	
NEIGHBOR(S)--(MAINLY) MALE	21	
NEIGHBOR(S)--(MAINLY) FEMALE	22	
CO-WORKER(S)--(MAINLY) MALE	31	
CO-WORKER(S)--(MAINLY) FEMALE	32	
MEMBER(S) OF A GROUP--(MAINLY) MALE (SPECIFY)	41	
MEMBER(S) OF A GROUP--(MAINLY) FEMALE (SPECIFY)	42	
PROFESSIONAL ADVISOR OR CONSULTANT (SPECIFY)	50	
OTHER (SPECIFY)	70	

K32a. (Was this person/Were any of these persons) (a) Vietnam veteran(s)?

NO	01	→ (K32d)
YES	02	

K32b. POINT TO CARD K-32.

Which one(s)?

ASK FOR NON-RELATIVES: (Is this/Are these) person(s) (mainly) male or female?

CIRCLE ALL THAT APPLY.

HUSBAND OR WIFE 01
PARTNER (LIVE -IN) 02
FATHER 03
MOTHER 04
BROTHER(S) 05
SISTER(S) 06
SON(S) 07
DAUGHTER(S) 08
OTHER RELATIVE(S) OR FAMILY MEMBER(S) (SPECIFY) 09

_____

FRIENDS(S)--(MAINLY) MALE 11
FRIENDS(S)--(MAINLY) FEMALE . . . 12
NEIGHBOR(S)--(MAINLY) MALE . . . 21
NEIGHBOR(S)--(MAINLY) FEMALE . . 22
CO-WORKER(S)--(MAINLY) MALE . . . 31
CO-WORKER(S)--(MAINLY) FEMALE . . 32
MEMBER(S) OF A GROUP--(MAINLY) MALE (SPECIFY) 41

_____

MEMBER(S) OF A GROUP--(MAINLY) FEMALE (SPECIFY) 42

_____

PROFESSIONAL ADVISOR OR CONSULTANT (SPECIFY) 50

_____

OTHER (SPECIFY) 70

_____

K32c. During this period, how often (if ever) did you get together with other Vietnam veterans and talk about the war (and your experiences in it)--very often, often, sometimes, rarely, or never?

VERY OFTEN 01
OFTEN 02
SOMETIMES 03
RARELY 04
NEVER . . . . . 05 → (K33)

K32d. On the whole, did talking to (this person/these people) help a lot, some, not at all, or did it make things worse?

HELPED A LOT 01
HELPED SOME 02
HELPED NOT AT ALL 03
MADE THINGS WORSE 04

K33. When you came home (after your release) from the service, was there someone...

		NO	YES
A.	...you could turn to in times of need?	01	02
B.	...who could lend you $100-$200 if you needed it for an emergency?	01	02
C.	...you could count on to look in on you regularly and help you if you had a serious injury or illness, or were recovering from surgery?	01	02
D.	...you could count on to pick you up when you were feeling down?	01	02

K34. Since your last release from active duty military service, have you joined any veterans organizations, such as the American Legion, VFW, Disabled American Veterans, AMVETS, Vietnam Veterans of America, or others?

NO . . . . . 01 → (K35)
YES 02

K34a. Which one(s) did you join?

CIRCLE ALL THAT APPLY.

AMERICAN LEGION (AL)	01
VETERANS OF FOREIGN WARS (VFW)	02
DISABLED AMERICAN VETERANS (DAV)	03
AMVETS (AMERICAN VETERANS OF WORLD WAR II, KOREA, AND VIETNAM)	04
VIETNAM VETERANS AGAINST THE WAR (VVAW)	05
VIETNAM VETERANS OF AMERICA (VVA)	06
AMERICAN VETERANS COMMITTEE (AVC)	07
COMBINED NATIONAL VETERANS ASSOCIATION OF AMERICA (CNVAA)	08
UNITED STATES COUNCIL, WORLD VETERANS FEDERATION (WVF)	09
VIETNAM VETERANS LEADERSHIP PROGRAM (VVLP)	10
ANY STATE VETERANS ORGANIZATION (SPECIFY)	20
_____	
ANY LOCAL VETERANS ORGANIZATION (SPECIFY)	30
_____	
OTHER (SPECIFY)	40

1. _____

2. _____

3. _____

K34b. Are you currently a member of (this/one of these) organizations?

NO	01
YES	02

K35. Now, I would like to ask you some questions about some programs for veterans. Have you ever had any contact at all with the Veterans Administration since you got out of the service?

NO	01	→ (K36)
YES	02	

K35a. What was the <u>first</u> contact about as best as you can recall?

LIFE INSURANCE	01
EDUCATION BENEFITS (E.G., GI BILL)	02
HOME LOAN	03
MEDICAL PROBLEMS/BENEFITS	04
DISABILITY COMPENSATION	05
EMPLOYMENT, JOB ASSISTANCE	06
DENTAL CARE	07
INFORMATION ABOUT BENEFITS	08
OTHER (SPECIFY)	09

_____

K36. Have you <u>ever</u> applied for or received VA <u>service-connected</u> <u>disability compensation</u> from the Veterans Administration?

NO	01	
YES	02	→ (K38)

K37. Do you <u>have</u> a service-connected disability; that is, a health condition or impairment caused or made worse by military service?

NO	01	→ (K40)
YES	02	

K37a. Are you aware of the Veterans Administration's Disability Compensation Program for veterans with disabilities caused by or aggravated by military service?

NO	01	→ (K39)
YES	02	

K37b. What is the main reason you have never applied for VA Disability Compensation?

DO NOT BELIEVE I'M ENTITLED TO OR ELIGIBLE FOR THE BENEFITS	01	
CHOSE TO RECEIVE VA NON-SERVICE CONNECTED PENSION INSTEAD	02	
AM RECEIVING MILITARY RETIREMENT DISABILITY PAY	03	
DO NOT BELIEVE MY DISABILITY IS SEVERE ENOUGH	04	
DID NOT KNOW HOW TO APPLY	05	→ (K39)
DO NOT NEED OR DO NOT WANT FINANCIAL ASSISTANCE FROM THE VA	06	
APPLICATION MIGHT HAVE DELAYED MY RELEASE FROM ACTIVE DUTY	07	
TOO MUCH TROUBLE TO APPLY (RED TAPE)	08	
NEVER CONSIDERED APPLYING	09	
OTHER (SPECIFY)	10	

K38. Was your claim allowed, denied, or is it still pending?

CIRCLE FIRST APPLICABLE CODE.

CLAIM ALLOWED OR BENEFIT RECEIVED	01	
CLAIM DENIED	02	→ (K39)
CLAIM PENDING	03	→ (K39)

K38a. What is your current VA (percent) disability rating?

ZERO	000
10 PERCENT	010
20 PERCENT	020
30 PERCENT	030
40 PERCENT	040
50 PERCENT	050
60 PERCENT	060
70 PERCENT	070
80 PERCENT	080
90 PERCENT	090
100 PERCENT	100

K38b. What is the current amount of your VA Disability Compensation monthly checks?

ROUND DOWN TO NEAREST DOLLAR.

RECORD NUMBER: $ [| | | |] PER MONTH
DOLLARS

K38c. Are you currently applying for a disability upgrade?

NO 01
YES 02

K39. What is the nature of your disability?

RECORD VERBATIM, THEN CODE BELOW.

_____

_____

_____

_____

CIRCLE ALL THAT APPLY

BLINDNESS 01
DEAFNESS 02
MISSING LIMB(S) 03
PERMANENT STIFFNESS OR DEFORMITY OF BACK, FOOT OR LEG 04
PERMANENT STIFFNESS OR DEFORMITY OF FINGERS, HAND, OR ARM 05
PARALYSIS 06
PSYCHIATRIC (INCLUDING PTSD). . . 07
ARTHRITIS 08
HEART CONDITION 09
OTHER (SPECIFY) 10

_____

K40. Have you ever applied for or received a VA non-service connected pension from the Veterans Administration?

NO . . . . . 01 → (K42)
YES 02

K40a. Was your claim allowed, denied, or is it still pending?

CIRCLE FIRST APPLICABLE CODE.

CLAIM ALLOWED OR BENEFIT RECEIVED 01
CLAIM DENIED . . . . . 02 } → (K42)
CLAIM PENDING . . . . . 03 }

K41. Are you currently receiving a non-service connected pension from the VA?

NO . . . . . 01 → (K42)
YES 02

K41a. What is the current amount of your VA non-service connected pension monthly checks?

ROUND DOWN TO NEAREST DOLLAR

RECORD NUMBER: $ [| | |] PER MONTH
DOLLARS

K41b. Some service-disabled veterans are eligible for VA Disability Compensation and a VA non-service connected pension and may elect to receive the one paying the most. Did you choose to receive the VA (non-service connected) pension instead of the VA Disability Compensation?

NO 01
YES 02

K42. HAND R SELF-REPORT BOOKLET TURNED TO K42. POINT OUT THAT THE SERIES EXTENDS OVER SEVERAL PAGES.

Here is a list of questions which ask for your opinions about various aspects of your life since you were last released from active duty military service. Please circle the number that best describes how you feel about each statement.

WHEN RESPONDENT RETURNS BOOKLET, GO TO M1.

A. Before I entered the military I had more close friends than I have now.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

B. I do not feel guilt over things that I did in the military.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALWAYS TRUE

C. If someone pushes me too far, I am likely to become violent.

01	02	03	04	05
VERY UNLIKELY	UNLIKELY	SOMEWHAT UNLIKELY	VERY LIKELY	EXTREMELY LIKELY

D. If something happens that reminds me of the military, I become very distressed and upset.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

E. The people who know me best are afraid of me.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

F. I am able to get emotionally close to others.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

G. I have nightmares of experiences in the military that really happened.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

H. When I think of some of the things that I did in the military, I wish I were dead.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

I. It seems as if I have no feelings.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

J. Lately, I have felt like killing myself.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

K. I fall asleep, stay asleep and awaken only when the alarm goes off.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

L. I wonder why I am still alive when others died in the military.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

M. Being in certain situations makes me feel as though I am back in the military.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

N. My dreams at night are so real that I waken in a cold sweat and force myself to stay awake.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

O. I feel like I cannot go on.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALMOST ALWAYS TRUE

P. I do not laugh or cry at the same things other people do.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

Q. I still enjoy doing many things that I used to enjoy.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALWAYS TRUE

R. Daydreams are very real and frightening.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

S. I have found it easy to keep a job since my separation from the military.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

T. I have trouble concentrating on tasks.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

U. I have cried for no good reason.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

V. I enjoy the company of others.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

W. I am frightened by my urges.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

X. I fall asleep easily at night.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

Y. Unexpected noises make me jump.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

Z. No one understands how I feel, not even my family.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

AA. I am an easy-going, even-tempered person.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	USUALLY	VERY MUCH SO

BB. I feel there are certain things that I did in the military that I can never tell anyone, because no one would ever understand.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	TRUE	VERY TRUE

CC. There have been times when I used alcohol (or other drugs) to help me sleep or to make me forget about things that happened while I was in the service.

01	02	03	04	05
NEVER	INFREQUENTLY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

DD. I feel comfortable when I am in a crowd.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	USUALLY	ALWAYS

EE. I lose my cool and explode over minor everyday things.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

FF. I am afraid to go to sleep at night.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

GG. I try to stay away from anything that will remind me of things which happened while I was in the military.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

HH. My memory is as good as it ever was.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE

II. I have a hard time expressing my feelings, even to the people I care about.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

JJ. At times I suddenly act or feel as though something that happened while I was in the military were happening all over again.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

KK. I am not able to remember some important things that happened while I was in the military.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE

LL. I feel "superalert" or "on guard" much of the time.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

MM. If something happens that reminds me of the military, I get so anxious or panicky that my heart pounds hard; I have trouble getting my breath, I sweat, tremble or shake; or feel dizzy, tingly, or faint.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

SECTION M: STRESSFUL AND TRAUMATIC LIFE EVENTS

M1. Now I'll ask you about a number of specific experiences that people have. Some of these things happen to most people at one time or another, while some of these things happen only to a few people. Please tell me which of these you have experienced during the past 12 months.

	A. During the past year, did . . . IF YES, ASK AND CODE B.	NO	YES	B. Did this have a negative, neutral or positive effect on you? IF RESPONDENT VOLUNTEERS BOTH POSITIVE AND NEGATIVE, CODE 02.		
				NEGATIVE	NEUTRAL/ MIXED	POSITIVE
	. . . you experience a serious illness or personal injury (get sick or get hurt)?	01	02 →	01	02	03
M2.	. . . a member of your family or household experience a serious illness or serious injury?	01	02 →	01	02	03
M3.	. . . you separate (begin living apart) for a few weeks or longer from (your wife/your husband/ someone with whom you were living as though married)?	01	02 →	01	02	03
M4.	. . . you get a divorce or have a love relationship or important friendship end?	01	02 →	01	02	03
M5.	. . . (your wife/your husband/someone with whom you were living as though married) die?	01	02 →	01	02	03

	A. During the past year, did . . . IF YES, ASK AND CODE B.	NO	YES	B. Did this have a negative, neutral or positive effect on you? IF RESPONDENT VOLUNTEERS BOTH POSITIVE AND NEGATIVE, CODE 02. NEGATIVE	NEUTRAL/ MIXED	POSITIVE
M6.	. . . a loved one (other than wife/ husband/person you lived with as though married) die?	01	02 →	. . . 01	. . . 02	. . . 03
	IF YES: How was this person related to you? RECORD:_____ IF MORE THAN ONE PERSON, ASK RESPONDENT TO FOCUS ON DEATH THAT HAD THE GREATEST EFFECT FOR PART B.					
M7.	Were you unemployed (looking for work) and unable to find work for at least a month? . . .	01	02 →	. . . 01	. . . 02	. . . 03
M8.	Were you laid off or fired from a job?	01	02 →	. . . 01	. . . 02	. . . 03
M9.	. . . your (or your family's) financial situation get considerably worse?	01	02 →	. . . 01	. . . 02	. . . 03
M10.	. . . you or a family member get arrested, have trouble with the law, or have any other legal problem?	01	02 →	. . . 01	. . . 02	. . . 03
M11.	Were you or a member of your family or household burglarized, robbed, swindled, or a victim of any other crime?	01	02 →	. . . 01	. . . 02	. . . 03
M12.	. . . you have a serious problem with a close friend, neighbor or relative?	01	02 →	. . . 01	. . . 02	. . . 03

TRAUMATIC EVENTS BOOKLET INTRODUCTION:
We've just been talking about events that happen to most people. Now we'd like to talk about unusual events that are extraordinarily stressful or disturbing--things that do not happen to most people but when they do they can be frightening, upsetting, or distressing to almost everyone. By that I mean things like being in a war or heavy combat, being physically assaulted or raped, being in a major earthquake or flood, or a very serious accident or fire, seeing other people killed or dead, or some other type of disastrous event. During your life, have any of the following types of things happened to you or have you seen any of these things happen?

ASK M13-M23 AND THEN FOR EACH "YES" RESPONSE, GO TO TRAUMATIC EVENTS BOOKLET.

		NO	YES	
M13.	Any specific combat or war-related traumatic experiences?	01	02	
M14.	A serious accident or crash involving a car, plane, boat, train, or other similar serious accident or crash? (not war-related).	01	02	
M15.	A large fire or explosion? (not war-related) . .	01	02	
M16.	A serious accident involving industrial or farm equipment or other similar accident?	01	02	
M17.	A natural disaster such as a tornado, hurricane, flood, major earthquake or similar natural disaster?	01	02	
M18.	Physical assault, torture, rape, abuse, mugging or similar assault? (not war-related). . .	01	02	
M19.	Seeing someone who was mutilated, seriously injured, or violently killed? (not war-related) .	01	02	
M20.	Being in serious danger of losing your life or of being seriously injured? (not war-related) . . .	01	02	
M21.	Receiving news of the mutilation, serious injury or violent or very unexpected death, of someone close to you? (not war-related).	01	02	
M22.	Have you ever experienced any other very stressful event like these?	01	02	
M23.	Have you had any experiences like these that you feel you can't tell us about?	01	02	→ DO NOT RECORD IN BOOKLET.

M24. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME:		/			:		A.M. P.M.
	MONTH		DAY	HOUR		MINUTE	

SECTION N: SELF-PERCEPTIONS, ATTITUDES AND NONSPECIFIC DISTRESS

RECORD BEGINNING DATE AND TIME: [ ][ ] / [ ][ ] [ ][ ] : [ ][ ] A.M. P.M.
MONTH DAY HOUR MINUTE

N1. HAND R THE SELF-REPORT BOOKLET TURNED TO N1.

Next we have some questions about you.

First, listed on this page in your booklet are a number of statements concerning personal attitudes and traits. Read each item and decide whether the statement is true or false as it applies to you personally.

AFTER R FILLS OUT BOOKLET AND RETURNS IT, TURN TO N2.

		FALSE (NO)	TRUE (YES)
A.	There have been times when I was quite jealous of the good fortune of others.	01	02
B.	No matter who I'm talking to, I'm always a good listener.	01	02
C.	I never resent being asked to return a favor . .	01	02
D.	I sometimes try to get even rather than forgive or forget.	01	02
E.	I sometimes feel resentful when I don't get my way	01	02
F.	I have never deliberately said something that hurt someone's feelings.	01	02
G.	There have been occasions when I felt like smashing things	01	02
H.	I have never intensely disliked anyone	01	02
I.	There have been occasions when I took advantage of someone	01	02
J.	I'm always willing to admit it when I make a mistake.	01	02

N2. HAND R CARD N-2.

Now I'm going to read you some other statements made by people about themselves, their work, and the government. Please tell me to what extent you agree or disagree with each statement using the categories on this card--agree strongly, agree mildly, neither agree nor disagree, disagree mildly, disagree strongly. Remember, there are no right or wrong answers, so tell me whether you agree or disagree according to your own personal opinions.

	AGREE STRONGLY	AGREE MILDLY	NEITHER AGREE NOR DISAGREE	DISAGREE MILDLY	DISAGREE STRONGLY
A. The people running the country don't really care what happens to you	01	02	03	04	05
B. In spite of what some people say, the lot of the average man is getting worse, not better	01	02	03	04	05
C. People like me don't have any say about what the government does	01	02	03	04	05
D. People like myself have a pretty good chance of getting ahead	01	02	03	04	05
E. Sometimes government and politics seem so complicated that a person like me can't really understand what's going on	01	02	03	04	05
F. There is at least one political group in America that effectively represents my views	01	02	03	04	05
G. Having elections makes the government pay a good deal of attention to what people think	01	02	03	04	05

N3. Would you say the government is pretty much run for a few big interests or would you say it is run for the benefit of all the people?

BIG INTERESTS 01
ALL THE PEOPLE 02

N4. HAND R SELF-REPORT BOOKLET TURNED TO QUESTION N4.

Now I'd like you to look at this page of your booklet which lists some other attitudes and opinions with which you might agree or disagree. As you will see, a lot of the items are very strongly worded. This is to help you decide how much you agree or disagree with each one. Please indicate how strongly you agree or disagree with each of these statements as they apply to you.

WHEN R RETURNS BOOKLET, GO TO QUESTION N5.

Circle the number which best describes how strongly you agree with the following statements.

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
A.	When I make plans I am certain I can make them work	01	02	03	04
B.	I don't like conversations when others are confused about what they mean to say	01	02	03	04
C.	It is a sign of weakness for a person to admit that he has problems	01	02	03	04
D.	I feel very much loved and supported by people in my life	01	02	03	04
E.	As long as I keep smiling, difficulties don't get the best of me	01	02	03	04
F.	When you marry you have lost your freedom of choice	01	02	03	04
G.	I often wake up eager to take up my life where it left off the day before	01	02	03	04
H.	Planning ahead can help avoid most future problems	01	02	03	04
I.	I am a person who tries to tell himself that everything is always O.K.	01	02	03	04

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
J.	When things are going badly, I tend to show it rather than hold it inside	01	02	03	04
K.	These days I really don't know who I can count on for help	01	02	03	04
L.	I really look forward to my work	01	02	03	04
M.	I usually try to talk out my problems with other people	01	02	03	04
N.	I won't answer a person's question until I am very clear as to what he is asking	01	02	03	04
O.	Sometimes I feel all alone in the world	01	02	03	04
P.	I find it difficult to imagine enthusiasm concerning work	01	02	03	04
Q.	It is difficult for me to talk about myself to other people	01	02	03	04
R.	It doesn't bother me to step aside for a while from something I'm involved in	01	02	03	04
S.	For me, laughing is a good way to keep from feeling bad	01	02	03	04
T.	The most exciting thing for me is my own fantasies	01	02	03	04
U.	Most of my problems are just a state of mind	01	02	03	04
V.	When I am at work doing a difficult task I know when I need to ask for help	01	02	03	04
W.	No one cares much what happens to me	01	02	03	04

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
X.	I feel uncomfortable if I need to make any changes in my everyday schedule	01	02	03	04
Y.	I'm better off when I look only on the positive side of life	01	02	03	04
Z.	No matter how hard I try, my efforts will accomplish nothing	01	02	03	04
AA.	A person who seldom changes his mind can usually be depended upon to have reliable judgment	01	02	03	04
BB.	It's exciting for me to learn something about myself	01	02	03	04

N5. We are also interested in the ways people are generally feeling these days. First, taking things all together, how would you say things are these days--would you say you're very happy, pretty happy, or not too happy these days?

VERY HAPPY 01
PRETTY HAPPY 02
NOT TOO HAPPY 03

N6. Some people have so many problems in their everyday life that they worry that they might have a nervous breakdown. When problems have come up, have you ever felt that you were going to have or were close to having a nervous breakdown?

NO 01
YES . . . . . 02 → (N7)

N6a. Has there ever been a time when you had a personal problem that made you feel so nervous you couldn't do much of anything?

NO 01
YES . . . . . 02 → (N7)

N6b. Has there ever been a time when you felt down and depressed, so low that you felt you just couldn't get going?

NO 01
YES . . . . . 02 → (N7)

N6c. Have you ever had a personal problem you couldn't handle by yourself?

NO 01
YES . . . . . 02 → (N7)

N6d. Have you ever had what you thought was a serious problem that you tried to handle by yourself?

NO 01
YES . . . . . 02 → (N7)

N6e. Can you imagine ever being bothered by a serious personal problem?

NO 01
YES 02
} → (N9)

N7. Have you felt that way more than once?

NO 01
YES 02

N8. Thinking about the (last) time you felt this way, what was the problem about?

N9. Here are some more questions mostly about how you have felt <u>during</u> <u>the past</u> year.

During the past year, how often have you been bothered by feelings of sadness or depression--feeling blue? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N10. During the past year, how often have you felt that nothing turns out for you the way you want it to? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N11. HAND R CARD N-11.

I'm going to read a series of statements. Please tell me if you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree. First, you are the kind of person...

	Do you:				
	STRONGLY AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	STRONGLY DISAGREE
A. ...who feels (he/she) has much to be be proud of	01	02	03	04	05
B. ...who is the worrying type--you know, a worrier	01	02	03	04	05
C. ...who feels that (he/she) is a failure generally, in life	01	02	03	04	05

N12. HAND R CARD N-12 TO USE THROUGH N-27. READ ANSWER CHOICES ONLY AS NECESSARY.

During the past year, how often have you felt confused and had trouble thinking? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N13. (During the past year,) how often have you felt useless? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N14. (During the past year,) how often have you had times when you couldn't help wondering if anything was worthwhile anymore? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N15. (During the past year,) how often have you had attacks of sudden fear or panic? (Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N16. (During the past year,) how often have you felt you were bothered by all different kinds of ailments in different parts of your body? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N17. During the past year, how often have you been bothered by nervousness, being fidgety or tense? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N18. (During the past year,) how often has your appetite been poor? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N19. (During the past year,) how often have you felt lonely--very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N20. (During the past year,) how often have you feared being left all alone or abandoned? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N21. (During the past year,) how often have you been bothered by feelings of restlessness? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N22. During the past year, how often have you had trouble with headaches or pains in the head? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N23. (During the past year,) how often have you had trouble concentrating or keeping your mind on what you were doing? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N24. (During the past year,) how often have you been bothered by cold sweats? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N25. (During the past year,) how often have you felt completely helpless? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N26. (During the past year,) how often have you feared something terrible would happen to you? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N27. During the past year, how often have you felt anxious? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N28. In general, how satisfied have you been with yourself in the last year? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

VERY SATISFIED 01
SOMEWHAT SATISFIED 02
SOMEWHAT DISSATISFIED 03
VERY DISSATISFIED 04

N29. In general, if you had to compare yourself with the average (man/woman) your age, what grade would you give yourself for the past year? Would you say excellent, good, average, below average, or a lot below average?

EXCELLENT 01
GOOD 02
AVERAGE 03
BELOW AVERAGE 04
A LOT BELOW AVERAGE 05

N30. HAND R CARD N-12 TO USE THROUGH N41. READ ANSWER CHOICES ONLY AS NECESSARY.

During the past year, how often have you felt completely hopeless about everything? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN	01
FAIRLY OFTEN	02
SOMETIMES	03
ALMOST NEVER	04
NEVER	05

N31. (During the past year,) how often have you felt confident? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN	01
FAIRLY OFTEN	02
SOMETIMES	03
ALMOST NEVER	04
NEVER	05

N32. (During the past year,) how often have you feared going crazy or losing your mind? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN	01
FAIRLY OFTEN	02
SOMETIMES	03
ALMOST NEVER	04
NEVER	05

Everyone gets angry or annoyed sometimes. Think about the times that you have gotten angry or annoyed during the past year. In the next questions we would like to ask about those times.

IF R SAYS S/HE WAS NEVER ANGRY OR ANNOYED: Think about the times when you were even a little angry or annoyed.

N33. During the past year, when you have gotten angry, how often have you sworn and cursed? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN	01
FAIRLY OFTEN	02
SOMETIMES	03
ALMOST NEVER	04
NEVER	05

N34. (In the last year,) when you have gotten angry, how often have you gotten into an argument? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N35. (In the last year,) when you have gotten angry, how often did you hide your anger, try not to show it? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N36. When you have gotten angry in the past year, how often have you felt uncomfortable, like getting headaches, stomach pains, cold sweats and things like that? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N37. (When you have gotten angry in the past year,) how often have you yelled or shouted? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N38. (When you have gotten angry in the past year,) how often have you tried to calmly explain your feelings or opinions? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N39. When you have gotten angry in the past year, how often have you just stopped talking, avoided arguing and started to do something else? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N40. (When you have gotten angry in the past year,) how often have you made a fist and shown an angry expression on your face? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

N41. (When you have gotten angry in the past year,) how often did you take out your anger by kicking things, like a chair, giving a door a good slam, punching the wall, or looking for something to throw or smash? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

HAND R CARD N-42.

No matter how hard they try to get along, there are times when people have problems with one another, when they have conflicts or disagreements. They also use many different ways of trying to settle their differences. I'm going to read a list of some things that you may have done when you had a dispute and would like you to tell me how often you did this in the past year.

	A. During the past year, how often did you . . . IF "NEVER" OR "DON'T KNOW", ASK B	ONCE	TWICE	3-5 TIMES	6-10 TIMES	11-20 TIMES	MORE THAN 20 TIMES	NEVER	DON'T KNOW	B. (Other than in combat) Did you ever . . . NO	YES
N42.	...threaten to hit or throw something at another person?	01	02	03	04	05	06	00 →	94 →	01	02
N43.	...actually throw something at someone?	01	02	03	04	05	06	00 →	94 →	01	02
N44.	...push, grab, or shove someone?	01	02	03	04	05	06	00 →	94 →	01	02
N45.	...slap another person?	01	02	03	04	05	06	00 →	94 →	01	02
N46.	...kick, bite, or hit someone with a fist?	01	02	03	04	05	06	00 →	94 →	01	02
N47.	...hit or try to hit anyone with something (an object)?	01	02	03	04	05	06	00 →	94 →	01	02
N48.	...beat up someone?	01	02	03	04	05	06	00 →	94 →	01	02
N49.	...threaten anyone with a knife or gun?	01	02	03	04	05	06	00 →	94 →	01	02
N50.	...actually use a knife or gun on another person?	01	02	03	04	05	06	00 →	94 →	01	02

N51. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, A10, A11 AND A11a.

DID RESPONDENT EVER SERVE ON ACTIVE DUTY IN THE U.S. ARMED FORCES?

NO 01
YES . . . . . 02 → (P1)

N52. HAND R SELF-REPORT BOOKLET TURNED TO N52. POINT OUT THAT THE SERIES EXTENDS OVER SEVERAL PAGES.

Here is a list of questions which ask for your opinions about various aspects of your life. Please circle the number that best describes how you feel about each statement.

WHEN RESPONDENT RETURNS BOOKLET, GO TO P1.

A. In the past I had more close friends than I have now.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

B. I do not feel guilt over things that I did in the past.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALWAYS TRUE

C. If someone pushes me too far, I am likely to become violent.

01	02	03	04	05
VERY UNLIKELY	UNLIKELY	SOMEWHAT UNLIKELY	VERY LIKELY	EXTREMELY LIKELY

D. If something happens that reminds me of the past, I become very distressed and upset.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

E. The people who know me best are afraid of me.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

F. I am able to get emotionally close to others.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

G. I have nightmares of experiences in my past that really happened.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

H. When I think of some of the things I have done in the past, I wish I were dead.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

I. It seems as if I have no feelings.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

J. Lately, I have felt like killing myself.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

K. I fall asleep, stay asleep and awaken only when the alarm goes off.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

L. I wonder why I am still alive when others have died.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

M. Being in certain situations makes me feel as though I am back in the past.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

N. My dreams at night are so real that I waken in a cold sweat and force myself to stay awake.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

O. I feel like I cannot go on.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALMOST ALWAYS TRUE

P. I do not laugh or cry at the same things other people do.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

Q. I still enjoy doing many things that I used to enjoy.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALWAYS TRUE

R. Daydreams are very real and frightening.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

S. I have found it easy to keep a job.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

T. I have trouble concentrating on tasks.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

U. I have cried for no good reason.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

V. I enjoy the company of others.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

W. I am frightened by my urges.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

X. I fall asleep easily at night.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

Y. Unexpected noises make me jump.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

Z. No one understands how I feel, not even my family.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

AA. I am an easy-going, even-tempered person.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	USUALLY	VERY MUCH SO

BB. I feel there are certain things that I have done that I can never tell anyone, because no one would ever understand.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	TRUE	VERY TRUE

CC. There have been times when I used alcohol (or other drugs) to help me sleep or to make me forget about things that happened in the past.

01	02	03	04	05
NEVER	INFREQUENTLY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

DD. I feel comfortable when I am in a crowd.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	USUALLY	ALWAYS

EE. I lose my cool and explode over minor everyday things.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

FF. I am afraid to go to sleep at night.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

GG. I try to stay away from anything that will remind me of things which happened in the past.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

HH. My memory is as good as it ever was.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE

II. I have a hard time expressing my feelings, even to the people I care about.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

JJ. At times I suddenly act or feel as though something that happened in the past were happening all over again.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

KK. I am not able to remember some important things that happened in the past.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE

LL. I feel "superalert" or "on guard" much of the time.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

MM. If something happens that reminds me of the past, I get so anxious or panicky that my heart pounds hard; I have trouble getting my breath, I sweat, tremble or shake; or feel dizzy, tingly, or faint.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

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SECTION P: PHYSICAL HEALTH STATUS

P1. Now I'd like to ask you some questions about your physical health. First, would you say your health in general is excellent, very good, good, fair, or poor?

EXCELLENT	01
VERY GOOD	02
GOOD	03
FAIR	04
POOR	05

P2. Compared to other people your age, would you say that your health is much better than others, better, about the same, worse, or much worse than others?

MUCH BETTER	01
BETTER	02
ABOUT THE SAME	03
WORSE	04
MUCH WORSE	05

P3. HAND R CARD P-3.

When was the last time you had to stay in bed all or part of a day because of any physical illness or injury, including times you may have been a patient in a hospital? Was it within the past two weeks; more than two weeks ago, but during the past three months; more than three months ago, but within the past year; or more than a year ago?

WITHIN PAST TWO WEEKS	01	
WITHIN PAST THREE MONTHS	02	→ (P3b)
WITHIN THE PAST YEAR	03	→ (P3c)
MORE THAN A YEAR AGO	04	→ (P4)
NEVER	05	
DON'T KNOW	94	
REFUSE	97	

P3a. During that 2-week period, how many days did you stay in bed all or most of the day because of illness or injury?

RECORD NUMBER: [ ][ ]
DAYS

NONE	00
DON'T KNOW	94
REFUSED	97

P3b. During the past three months, how many days did you stay in bed all or most of the day because of illness or injury?

RECORD NUMBER: [ ][ ]
DAYS

NONE	00
DON'T KNOW	94
REFUSED	97

P3c. During this past year, how many days did you stay in bed all or most of the day because of illness or injury?

RECORD NUMBER: [ ][ ][ ]
DAYS

NONE	000
DON'T KNOW	994
REFUSED	997

P4. HAND R CARD P-3.

When was the last time that illness or injury kept you from work, not counting work around the house? Was it within the past two weeks; more than two weeks ago, but during the past three months; more than three months ago, but within the past year; or more than a year ago?

WITHIN PAST TWO WEEKS	01	
WITHIN PAST THREE MONTHS	02	→ (P4b)
WITHIN THE PAST YEAR	03	→ (P4c)
MORE THAN A YEAR AGO	04	→ (P5)
NEVER	05	
DON'T KNOW	94	
REFUSE	97	

P4a. During that 2-week period, how many days did illness or injury keep you from work all or most of the day?

RECORD NUMBER: [ ][ ]
DAYS

NONE	00
DON'T KNOW	94
REFUSED	97

P4b. During the past three months, how many days did illness or injury keep you from work all or most of the day?

RECORD NUMBER: [ ][ ]
DAYS

NONE	00
DON'T KNOW	94
REFUSED	97

P4c. During this past year, how many days did illness or injury keep you from work all or most of the day?

RECORD NUMBER: [ ][ ][ ]
DAYS

NONE	000
DON'T KNOW	994
REFUSED	997

P5. HAND R CARD P-3.

(Not counting the days [in bed/lost from work] that you already told me about), when was the last time you had to cut down on the things you usually do because of any illness or injury? Was it within the past two weeks; more than two weeks ago, but during the past three months; more than three months ago, but within the past year; or more than a year ago?

WITHIN PAST TWO WEEKS	01	
WITHIN PAST THREE MONTHS	02	→ (P5b)
WITHIN THE PAST YEAR	03	→ (P5c)
MORE THAN A YEAR AGO	04	→ (P6)
NEVER	05	
DON'T KNOW	94	
REFUSE	97	

P5a. During that 2-week period, how many days did you cut down (on the things you usually do) for all or most of the day (not counting the days [in bed/lost from work] because of illness or injury?

RECORD NUMBER: [ ][ ]
DAYS

NONE	00
DON'T KNOW	94
REFUSED	97

P5b. During the past three months, how many days did you cut down (on the things you usually do) for all or most of the day (not counting the days [in bed/lost from work]) because of illness or injury?

RECORD NUMBER: [ ][ ]
DAYS

NONE	00
DON'T KNOW	94
REFUSED	97

P5c. During this past year, how many days did you cut down (on the things you usually do) for all or most of the day (not counting the days [in bed/lost from work]) because of illness or injury?

RECORD NUMBER: [ ][ ][ ]
DAYS

NONE	000
DON'T KNOW	994
REFUSED	997

P6. Some people are limited in their daily activities because of their general health. In the next series of questions we'll ask about limitations you might have because of your health in general. Please don't include limitations due to short term illness.

Does your health keep you from driving a car?

NO . . . . . 01 → (P7)
YES 02

P6a. Have you been unable to drive a car because of your health for more than three months?

NO 01
YES 02

P7. When you travel around your community, does someone have to assist you because of your health?

NO . . . . . 01 → (P8)
YES 02

P7a. Have you needed someone to assist you (in traveling around your community) for more than three months?

NO 01
YES 02

P8. Do you have to stay indoors all or most of the day because of your health?

NO . . . . . 01 → (P9)
YES 02

P8a. Have you had to stay indoors all or most of the day because of your health for more than three months?

NO 01
YES 02

P9. Are you in bed or in a chair for all or most of the day because of your health?

NO . . . . . 01 → (P10)
YES 02

P9a. Have you been in bed or in a chair all or most of the day because of your health for more than three months?

NO 01
YES 02

P10. Does your health limit the kind of vigorous activities you can do, such as running, lifting heavy objects, or participating in strenuous sports?

NO . . . . . 01 → (P11)
YES 02

P10a. Has your health limited the kind of vigorous activities you can do for more than three months?

NO 01
YES 02

P11. Do you have trouble bending, lifting, or stooping because of your health?

NO . . . . . 01 → (P12)
YES 02

P11a. Have you had trouble bending, lifting, or stooping because of your health for more than three months?

NO 01
YES 02

P12. Do you have trouble either walking <u>one</u> block or climbing <u>one</u> flight of stairs because of your health?

NO . . . . . 01 → (P13)
YES 02

P12a. Have you had trouble walking one block or climbing one flight of stairs because of your health for more than three months?

NO 01
YES 02

P13. Do you have any trouble either walking <u>several</u> blocks or climbing a <u>few</u> flights of stairs because of your health?

NO . . . . . 01 → (P14)
YES 02

P13a. Have you had trouble walking several blocks or climbing a few flights of stairs because of your health for more than three months?

NO 01
YES 02

P14. Are you unable to walk unless you are assisted by another person or by a cane, crutches, artificial limbs, or braces?

NO . . . . . 01 → (P15)
YES 02

P14a. Have you been unable to walk without assistance (by another person or by a cane, crutches, artificial limbs, or braces) for more than three months?

NO 01
YES 02

P15. Does your health keep you from working at a job, doing work around the house, or going to school?

NO . . . . . 01 → (P16)
YES 02

P15a. Has your health kept you from working at a job, doing work around the house, or going to school for more than three months?

NO 01
YES 02

P16. Are you unable to do certain kinds or amounts of work, housework, or schoolwork because of your health?

NO . . . . . 01 → (P17)
YES 02

P16a. Have you been unable to do certain kinds or amounts of work, housework, or schoolwork because of your health for more than three months?

NO 01
YES 02

P17. Does your health limit the kinds or amounts of other activities you can do (such as sports, hobbies, reading, watching TV, and so forth)?

NO . . . . . 01 → (P18)
YES 02

P17a. Has your health limited the kinds or amounts of other activities you can do for more than three months?

NO 01
YES 02

P18. Do you need help with eating, dressing, bathing, or using the toilet because of your health?

NO . . . . . 01 → (P19)
YES 02

P18a. Have you needed help with eating, dressing, bathing, or using the toilet (because of your health) for more than three months?

NO 01
YES 02

P19. Does your health limit you in any (other) way from doing anything you want to do?

NO . . . . . 01 → (P20)
YES 02

P19a. Has your health limited you in doing things you want to do for more than three months?

NO 01
YES 02

P20. Now I'm going to read you a list of medical conditions. Please tell me if you have ever had any of these conditions, even if you have mentioned them before.

CONTINUE ON NEXT PAGE.

		A. Have you ever had . . . IF YES, ASK B AND C, IF APPLICABLE.			B. How old were you when this (CONDITION) (was diagnosed/happened)?			C. During the past 12 months have you had or been bothered by (CONDITION)?	
		NO	YES		AGE	DK	RE	NO	YES
P20.	...asthma?	01	02	→	___ ___	94	97	01	02
P21.	...tuberculosis?	01	02	→	___ ___	94	97	01	02
P22.	...any other trouble breathing, such as emphysema, chronic bronchitis, or brown lung?	01	02	→	___ ___	94	97	01	02
P23.	...arthritis, rheumatism, or gout?	01	02	→	___ ___	94	97	01	02
P24.	...high sugar or diabetes?	01	02	→	___ ___	94	97	01	02
P25.	...rheumatic fever or rheumatic heart disease?	01	02	→	___ ___	94	97	01	02
P26.	...hardening of the arteries (arteriosclerosis)?	01	02	→	___ ___	94	97	01	02
P27.	...high blood pressure or hypertension?	01	02	→	___ ___	94	97	01	02
P28.	...a stroke (or cerebro-vascular accident)?	01	02	→	___ ___	94	97	01	02
P29.	...a myocardial infarction or any other heart attack?	01	02	→	___ ___	94	97	01	02
P30.	...any other heart trouble or condition affecting blood circulation?	01	02	→	___ ___	94	97	01	02
P31.	...cancer of any kind, including leukemia?	01	02	→	___ ___	94	97	01	02
P32.	...a non-cancerous or benign tumor, growth, or cyst?	01	02	→	___ ___	94	97	01	02
P33.	...cirrhosis of the liver, hepatitis, jaundice, or other liver condition?	01	02	→	___ ___	94	97	01	02
P34.	...ulcers of the digestive system?	01	02	→	___ ___	94	97	01	02

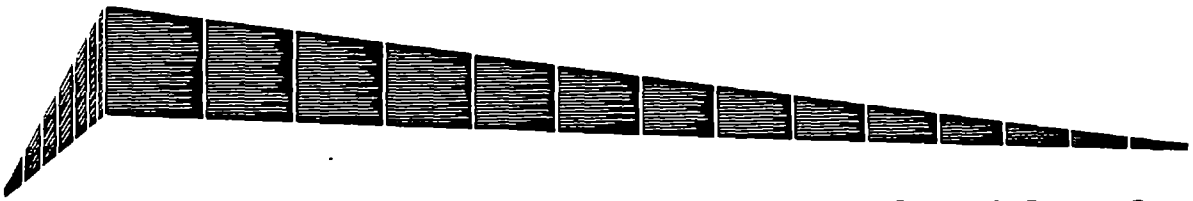
	A. Have you ever had . . . IF YES, ASK B AND C, IF APPLICABLE.	NO	YES	B. How old were you when this (CONDITION) (was diagnosed/happened)? AGE	DK	RE	C. During the past 12 months have you had or been bothered by (CONDITION)? NO	YES
P35.	...a digestive disorder other than ulcers or liver problems, such as gall bladder trouble, stomach or intestinal problems?	01	02 →	___ ___	94	97	01	02
P36.	...anemia or "tired blood?"	01	02 →	___ ___	94	97	01	02
P37.	...a chronic skin condition such as eczema, psoriasis, chloracne, or dermatitis?	01	02 →	___ ___	94	97	01	02
P38.	...a skin condition such as pressure sores, skin ulcers, or severe burns?	01	02 →	___ ___	94	97	01	02
P39.	...deafness in one or both ears, or any other serious trouble with hearing?	01	02 →	___ ___	94	97	01	02
P40.	...blindness in one or both eyes, or any other serious trouble with seeing, even when wearing glasses?	01	02 →	___ ___	94	97	01	02
P41.	...stammering, stuttering or any other speech defect or impairment?	01	02 →	___ ___	94	97	01	02
P42.	...a kidney, bladder or urinary tract problem?	01	02 →	___ ___	94	97	01	02
P43.	...(IF MALE) prostate trouble?	01	02 →	___ ___	94	97	01	02
P44.	...(IF FEMALE) amenorrhea, irregular menstrual periods, or other trouble with menstruation?	01	02 →	__ ___	94	97	01	02
P45.	...(IF FEMALE) a tumor, cyst, or growth of the uterus or ovaries?	01	02 →	___ ___	94	97	01	02
P46.	...(IF FEMALE) a hysterectomy?	01	02 →	_ ___	94	97	→ (P47)	

		A. Have you ever had . . . IF YES, ASK B AND C, IF APPLICABLE.		B. How old were you when this (CONDITION) (was diagnosed/happened)?				C. During the past 12 months have you had or been bothered by (CONDITION)?	
		NO	YES	AGE	DK	RE		NO	YES
P47.	...(IF FEMALE) any other disease of the uterus or ovaries?	01	02 →	__ __	94	97		01	02
P48.	...(IF FEMALE) any other female trouble?	01	02 →	__ __	94	97		01	02
P49.	...repeated seizures, convulsions, blackouts, or fainting spells (including epilepsy)?	01	02 →	__ __	94	97		01	02
P50.	...a missing finger, hand, or arm? (SPECIFY: _____)	01	02 →	__ __	94	97	→ (P51)		
P51.	...a missing toe, foot, or leg? (SPECIFY: _____)	01	02 →	__ __	94	97	→ (Q52)		
P52.	...a missing (breast), kidney, or lung? (SPECIFY: _____)	01	02 →	__ __	94	97	→ (P53)		
P53.	...repeated trouble with your neck, back, or spine?	01	02 →	__ __	94	97		01	02
P54.	...permanent stiffness or any deformity of the foot, leg, or back (PERMANENT STIFFNESS MEANS JOINTS WILL NOT MOVE AT ALL)?	01	02 →	__ __	94	97	→ (P55)		
P55.	...permanent stiffness or any deformity of the fingers, hand, or arm?	01	02 →	__ __	94	97	→ (P56)		
P56.	...paralysis of any kind?	01	02 →	__ __	94	97		01	02
P57.	...any other physical or mental problem or illness that seriously affects your health? (SPECIFY)	01	02 → SPECIFY BELOW AND ASK B AND C FOR EACH.						
	1. _____	→ CONTINUE WITH B AND C		__ __	94	97		01	02
	2. _____	→ CONTINUE WITH B AND C		__ __	94	97		01	02
	3. _____	→ CONTINUE WITH B AND C		__ __	94	97		01	02

P58. TIME CHECKPOINT

RECORD ENDING DATE AND TIME: [ ][ ] / [ ][ ] [ ][ ] : [ ][ ] A.M. P.M.

MONTH DAY HOUR MINUTE



NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
EXPIRES: 12/31/88

MAIN STUDY QUESTIONNAIRE

VOLUME IV

SECTION R: DIAGNOSTIC INTERVIEW SCHEDULE (DIS)

CONDUCTED BY:

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R. DIAGNOSTIC INTERVIEW SCHEDULE

THIS SECTION IS FOR ALL RESPONDENTS

RECORD BEGINNING DATE AND TIME: ___ ___ / ___ ___ ___ ___ : ___ ___ A.M. P.M.

MONTH DAY HOUR MINUTE

START USING FORMAL PROBES HERE.

BE SURE TO RECORD ALL DIAGNOSES GIVEN BY DOCTORS AND/OR RESPONDENT IN SPACES PROVIDED.

R1. Now I'm going to ask you about health problems that may have occurred at any time in your life. For any problems that you may have experienced, I will also be asking you when you first had such a problem, how recently you've had the problem, and how you've handled the problem.

Have you ever considered yourself a nervous person?

IF YES: Do you now consider yourself a nervous person?

NO (NEVER NERVOUS).....01 → (R3)
IN PAST.....02
CURRENT.....05
DK.....94 } → (R3)
RE.....97 }

R2. At what age did this nervousness begin?

AGE..... ☐☐
DK/BEFORE 30.....01
WHOLE LIFE.....02
DK/AFTER 30.....95
RE.....97
STILL DK.....98

IF WHOLE LIFE, CODE 02.
IF DK AND R UNDER 30, CODE 01.
IF DK AND R IS 30 OR MORE, ASK:
Would you say it was before or after you were 30?
IF BEFORE 30, CODE 01.
IF AFTER 30, CODE 95.
IF STILL DK, CODE 98.

1 2 3 4 5

R3. Have you ever had a **spell or attack** when all of a sudden you felt frightened, anxious or very uneasy in situations when most people would not be afraid?

IF YES, ASK BEFORE PROBING: Could you tell me about one spell or attack like that?

EXAMPLE _____

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R21)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94 |	.....94 |
		RE.....97 |	.....97 |
		↓	↓
		RECORD AGE ☐☐	☐☐

START USING TALLY SHEET 1 FOR ITEMS THAT MEET CRITERIA (=05*)

R4. During one of your worst spells of suddenly feeling frightened or anxious or uneasy, did you ever notice that you had any of the following problems?

	NO	YES	RE
During this spell were you short of breath-- having trouble catching your breath?	01	05*	97
R5. During this spell did your heart pound?	01	05*	97
R6. During this spell were you dizzy or light-headed?	01	05*	97
R7. During this spell did your fingers or feet tingle?	01	05*	97
R8. During this spell did you have tightness or pain in your chest?	01	05*	97
R9. During this spell did you feel like you were choking or smothering?	01	05*	97
R10. During this spell did you feel faint?	01	05*	97
R11. During this spell did you sweat?	01	05*	97
R12. During this spell did you tremble or shake?	01	05*	97
R13. During this spell did you feel hot or cold flashes?	01	05*	97

	NO	YES	RE
R14. During this spell did things around you seem unreal?	01	05*	97
R15. During this spell were you afraid either that you might die or that you might act in a crazy way?	01	05*	97

R16. How old were you the first time you had one of these sudden spells of feeling frightened or anxious?

AGE..... ☐☐
DK/BEFORE 40.....01
WHOLE LIFE.....02
DK/AFTER 40.....95
RE.....97
STILL DK.....98

IF WHOLE LIFE, CODE 02.
IF DK AND R UNDER 40, CODE 01.
IF DK AND R IS 40 OR MORE, ASK:
Would you say it was before or after you were 40?
IF BEFORE 40, CODE 01.
IF AFTER 40, CODE 95.
IF STILL DK, CODE 98.

R17. Have you ever had three spells like this close together--say within a three-week period?

NO.....01
YES.....05
DK.....94
RE.....97

R18. Have spells like this occurred during at least six different weeks of your life?

NO.....01
YES.....05
DK.....94
RE.....97

R19. How recently have you had a spell like this?

CODE MOST RECENT TIME POSSIBLE.

WITHIN LAST 2 WEEKS OR CURRENT.....01
WITHIN LAST MONTH.....02
WITHIN LAST 6 MONTHS.....03 → (R21)
WITHIN LAST YEAR.....04
MORE THAN 1 YEAR AGO.....05
DK.....94
RE.....97 → (R21)

R20. How old were you then?

AGE

☐☐

DK.....94
RE.....97

R21. I've asked you about spells or attacks of feeling anxious or afraid. Now I want to ask you about longer periods of feeling anxious or afraid. Have you ever had a period of a month or more when most of the time you felt worried or anxious, perhaps afraid that something bad was going to happen either to you yourself, or to someone you cared about?

NO.....01 → (R49)
YES.....05
DK.....94
RE.....97 → (R49)

TALLY SHEET 1

USE THESE Sx FOR QUESTIONS R60 AND R73.

4 ☐ Short of breath

5 ☐ Heart pound(ed)

6 ☐ Dizzy or light-headed

7 ☐ Fingers or feet tingle(d)

8 ☐ Tightness or pain in chest

9 ☐ Choking or smothering

10 ☐ Feeling faint

11 ☐ Sweating

12 ☐ Trembling or shaking

13 ☐ Hot or cold flashes

USE THESE Sx FOR QUESTION R60 ONLY (NOT R73).

14 ☐ Things seemed unreal

15 ☐ Afraid you might die or act in a crazy way

R22. START USING TALLY SHEET 2 HERE FOR SYMPTOMS MEETING CRITERIA (= 05*).

R23. During a period when you were worried or anxious most of the time...

USE STEM AS OFTEN AS NEEDED.

		NO	YES	RE
	... were you jittery or fidgety?	01	05*	97
R24.	... were you very tense or jumpy?	01	05*	97
R25.	... did you have trouble relaxing?	01	05*	97
R26.	... did you get tired very easily?	01	05*	97
R27.	... were you easily startled?	01	05*	97
R28.	... did your body tremble or shake?	01	05*	97
R29.	... were you restless?	01	05*	97
R30.	... did your eyelids twitch?	01	05*	97
R31.	... were you having trouble sleeping?	01	05*	97
R32.	... did you have trouble keeping your mind on what you were doing?	01	05*	97
R33.	... were you feeling irritable, on edge, or impatient?	01	05*	97

INTERVIEWER CHECKPOINT. REVIEW TALLY SHEET 2.

R34. HAVE ANY CONDITIONS IN R23-R33 BEEN CHECKED/CODED YES (=05*)?

NO.....01 → (R49)
YES.....02

CONTINUE USING TALLY SHEET 2.

R35. During a time when you felt anxious or worried most of the time, did you have an unusual amount of trouble...

USE STEM AS OFTEN AS NEEDED.

	NO	YES	RE
... with sweating a lot?	01	05*	97
R36. ... with your heart pounding or racing?	01	05*	97
R37. ... with your hands feeling cold and clammy?	01	05*	97
R38. ... with dizziness or light-headedness?	01	05*	97
R39. ... with tingling in your hands or feet?	01	05*	97
R40. ... with your mouth feeling dry?	01	05*	97
R41. ... with diarrhea?	01	05*	97
R42. ... with an upset stomach much of the time?	01	05*	97
R43. ... with having to urinate frequently?	01	05*	97
R44. ... with your face flushing or turning pale a lot?	01	05*	97
R45. ... with being bothered by breathing too fast?	01	05*	97

R46. How old were you the first time you were worried or anxious or afraid most of the time for at least a month?

AGE..... ☐☐

DK/BEFORE 30.....01
WHOLE LIFE.....02
DK/AFTER 30.....95
RE.....97
STILL DK.....98

IF WHOLE LIFE, CODE 02.
IF DK AND R UNDER 30, CODE 01.
IF DK AND R IS 30 OR MORE, ASK:
Would you say it was before or after you were 30?
IF BEFORE 30, CODE 01.
IF AFTER 30, CODE 95.
IF STILL DK, CODE 98.

R47. When did you last have a period of a month or more when you felt anxious most of the time and had some of these other problems like (READ PROBLEMS CHECKED ON TALLY SHEET 2)?

-2 WEEKS.....01
-1 MONTH.....02
-6 MONTHS.....03
-1 YEAR.....04
→ (R49)

+1 YEARS.....05
DK.....94
RE.....97
→ (R49)

TALLY SHEET 2

23 ☐ (Were) jittery or fidgety

24 ☐ (Were) tense or jumpy

25 ☐ (Had) trouble relaxing

26 ☐ (Were) tired very easily

27 ☐ (Were) easily startled

28 ☐ (Your) body tremble(d) or shake (shook)

29 ☐ (Were) restless

30 ☐ (Your) eyelids twitch(ed)

31 ☐ (Had) trouble sleeping

32 ☐ (Had) trouble keeping your mind on what you were doing

33 ☐ (Were) feeling irritable, on edge, or impatient

---

35 ☐ Sweat(ed) a lot

36 ☐ Heart pound(ed)

37 ☐ (Your) hands felt cold and clammy

38 ☐ (Had) dizziness or light-headedness

39 ☐ (Had) tingling in hands or feet

40 ☐ (Your) mouth felt dry

41 ☐ (Had) diarrhea

42 ☐ (Had) upset stomach

43 ☐ (Had to) urinate frequently

44 ☐ (Had) face flushing or turning pale

45 ☐ (Were) breathing too fast

R48. How old were you then?

AGE

DK.....94
RE.....97

R49. START USING TALLY SHEET 3 FOR SYMPTOMS THAT MEET CRITERIA (= 05*).

R50. Some people have phobias, that is, such a strong fear of something or some situation that they try to avoid it, even though they know there is no real danger. Have you ever had such an unreasonable fear of _____ that you tried to avoid (it/them)?

FOR ANY PHOBIA, IF RESPONDENT SAYS, "IT DOESN'T INTERFERE WITH MY LIFE A LOT BECAUSE I AVOID IT," ASK: Does having to avoid _____ interfere with your life or activities a lot?

RECORD EXAMPLES OF EACH "YES" BEFORE PROBING.

1 2 5

...tunnels or bridges?

EXAMPLE: _____

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE	

[1 2 5]

R51. Have you ever had such an <u>unreasonable</u> fear of being in a crowd that you <u>tried to avoid it</u>?

EXAMPLE: _____

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

[1 2 5]

R52. Have you ever had such an <u>unreasonable</u> fear of being on any kind of public transportation like airplanes, buses, or elevators that you <u>tried to avoid them</u>?

EXAMPLE: _____

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

[1 2 5]

R53. Have you ever had such **an** <u>unreasonable</u> **fear of going out of the house alone** that you <u>tried to avoid it</u>?

EXAMPLE: _____

<u>CRITERIA</u>	<u>SEVERITY</u>	<u>ONSET</u>	<u>RECENCY</u>
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE [ ][ ]	[ ][ ]

[1 2 5]

R54. Have you ever had such **an** <u>unreasonable</u> **fear of being alone** that you <u>tried to avoid it</u>?

EXAMPLE: _____

<u>CRITERIA</u>	<u>SEVERITY</u>	<u>ONSET</u>	<u>RECENCY</u>
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE [ ][ ]	[ ][ ]

1 2	5

R54A. Is there anything else you have ever been unreasonably terrified to do or to be near?

PROBE: Is there anything else?

SX: ANY OTHER UNREASONABLE FEARS (SUCH AS _____)?

EXAMPLES: _____

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 3.

R55. DID ANY PHOBIAS MEET CRITERIA (= 05*) IN R50-R54A?

NO.....01 → (R61)
YES.....05

R56. How old were you the first time you were bothered by (this/any of these) fears, such as (LIST ALL FEARS ON TALLY SHEET 3 THAT MEET CRITERIA (= 05*))?

AGE..... [ ][ ]
DK/UNDER 40.....01
WHOLE LIFE.....02
DK/OVER 40.....95
RE.....97
STILL DK.....98

IF WHOLE LIFE, CODE 02.
IF DK AND R UNDER 40, CODE 01.
IF DK AND R IS 40 OR MORE, ASK:
Would you say it was before or after you were 40?
IF BEFORE 40, CODE 01.
IF AFTER 40, CODE 95.
IF STILL DK, CODE 98.

R57. How recently (has this fear/have any of these fears) been so strong that you tried to avoid the situation?

CODE MOST RECENT TIME POSSIBLE.

WITHIN LAST 2 WEEKS OR CURRENT.....01
WITHIN LAST MONTH.....02
WITHIN LAST 6 MONTHS.....03 → (R59)
WITHIN LAST YEAR.....04
MORE THAN 1 YEAR AGO.....05
DK.....94 → (R59)
RE.....97

R58. How old were you then?

AGE

DK.....94
RE.....97

INTERVIEWER CHECKPOINT: REVIEW R3 ON PAGE R-1.

R59. IS R3 CRITERIA = 02, 03, 04, 05?

NO (CRITERIA = 01, 94, 97).....01 → (R61)
YES (CRITERIA = 02, 03, 04, 05)...05

R60. You mentioned spells of feeling frightened or anxious when you (LIST UP TO 3 SYMPTOMS CODED "YES (= 05)" ON TALLY SHEET 1). Did those spells occur only when you (READ ALL FEARS/PHOBIAS ON TALLY SHEET 3 THAT MEET CRITERIA (= 05*)) or did they occur at other times too?

ONLY IN FEAR SITUATIONS....01
OTHER TIMES AS WELL.....05
DK.....94
RE.....97

TALLY SHEET 3

For Q.56 (For Q.60)

50 ☐ Tunnels or bridges (were in tunnels or on bridges)

51 ☐ Being in a crowd (were in a crowd)

52 ☐ Being on any kind of public transportation (were on any kind of public transportation)

53 ☐ Going out of the house alone (went out of the house alone)

54 ☐ Being alone (were alone)

54A ☐ Any other unreasonable fears such as _____ (were around/in situation where there were _____)

R61. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME	__ __ / __ __	__ __	:	__ __	A.M. P.M.
	MONTH	DAY	HOUR	MINUTE	
RECORD BEGINNING DATE AND TIME:	__ __ / __ __	__ __	:	__ __	A.M. P.M.
	MONTH	DAY	HOUR	MINUTE	

R62. START USING TALLY SHEET 4 HERE FOR SYMPTOMS THAT MEET CRITERIA (= 05*). START USING TRAUMATIC EVENTS LIST HERE. HAND LIST TO RESPONDENT WHEN ASKING ABOUT EVENT NUMBER.

1 2 3 4 5

R63. Has there ever been a period of a week or more during which you had a lot of trouble concentrating or keeping your mind on what you were doing, even when you tried to concentrate?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE	

1 2 3 4 5

R64. Has there ever been a period of a week or more during which you lost interest in activities which usually meant a lot to you?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

1 2 3 4 5

R65. Has there ever been a period of a week or more during which you felt you had to stay on guard much of the time?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

1 2	5

R66. Has there ever been a period of a week or more when you deliberately tried very hard not to think about something that had happened to you?

CRITERIA	SEVERITY	ONSET	RECENCY

NO.....01 → (R71)

BLW CRIT...02	NO.....01	-2 WEEKS.....01.....01
		-1 MONTH.....02.....02
CRITERIA...05*	MD.....02	-6 MONTHS.....03.....03
RE.....97	OTPROF...03	-1 YEAR.....04.....04
	MEDS.....04	-3 YEARS.....05.....05
	INTER....05	+3 YEARS.....06↓.....06↓
	RE.....97	DK ±3 YEARS....94|.....94|
		RE.....97|.....97|
		↓ ↓
		RECORD AGE [ ][ ] [ ][ ]

R67. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R70.**
Are any of the experiences that you tried not to think about on this list?

NO	01	→ (R70)
YES	05	
DK	94	
RE	97	→ (R69)

R68. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.

[ ][ ] [ ][ ] [ ][ ] [ ][ ] [ ][ ]

R69. Are there any experiences that you tried not to think about that are not on this list?

NO	01	→ (R71)
YES	05	
DK	94	→ (R71)
RE	97	

R70. What experiences that you tried not to think about do we not have on this list?

USE PROCEDURES FOR TRAUMATIC EVENTS BOOKLET, PUT ON LIST, AND RECORD EXPERIENCE NUMBER HERE.

PROMPT: Were there others?

1 2 3 4 5

R71. Has there ever been a period of a week or more when you had difficulty falling asleep?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97

RECORD AGE

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 1.

R72. ARE ANY SX IN R4-R13 CODED "05" (YES)?

NO.....01 → (R78)
YES.....05

R73. You said earlier that you had one or more spells or attacks when you felt frightened, anxious or very uneasy and (READ SX R4-R13 CHECKED ON TALLY SHEET 1). When this happened, was it ever because you were reminded of something else that had happened in your life?

NO.....01 → (R78)
YES.....05*
DK.....94
RE.....97

R74. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS ARE LISTED → R77.** Are any of the experiences you were reminded of one of those <u>on this list</u>?

NO.....01 → (R77)
YES.....05
DK.....94
RE.....97 → (R76)

R75. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST:

R76. Are there any experiences you were reminded of that are <u>not on</u> this list?

NO.....01 → (R78)
YES.....05
DK.....94 } → (R78)
RE.....97 }

R77. Which experiences that you were reminded of do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE. PROMPT: Were there any others?

[1 2 5]

R78. Has there ever been a period of a week or more when you felt numb or empty inside?

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE [ ][ ]	[ ][ ]

[1 2 3 4 5]

R79. Has there ever been a period of a week or more during which you stopped caring about activities in your life that used to be important to you?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE [ ][ ]	[ ][ ]

1 2 3 4 5

R80. Has there ever been a period of a week or more when unexpected noises startled you more than usual?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE [ ][ ]	[ ][ ]

1 2 5

R81. Has there ever been a period of a week or more when you kept having unpleasant memories, or seeing them in your mind?

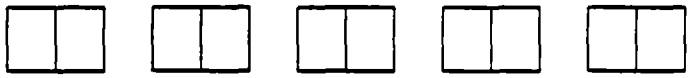
CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R86)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE [ ][ ]	[ ][ ]

R82. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R85.**
Are any of the experiences about which you had unpleasant memories <u>on this list</u>?

NO.....01 → (R85)
YES.....05
DK.....94
RE.....97 → (R84)

R83. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.



R84. Are there any experiences about which you had unpleasant memories that are <u>not on</u> this list?

NO.....01 → (R86)
YES.....05
DK.....94 → (R86)
RE.....97

R85. Which experiences about which you had unpleasant memories do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?

1	2	3		5

R86. Has there ever been a period of a week or more when you often felt as if you might get out of control?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R88)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
CRITERIA...05*	OTPROF...03	-1 YEAR.....04	04
RE.....97	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE	

R87. Have you ever actually lost control?

NO.....01
YES.....05
DK.....94
RE.....97

1	2	3		5

R88. Has there ever been a period of a week or more when you had repeated bad dreams or nightmares?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R94)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
CRITERIA...05*	OTPROF...03	-1 YEAR.....04	04
RE.....97	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE	

R89. Did the bad dreams or nightmares remind you in some way of an experience or experiences that you had?

NO.....01 → (R94)
YES.....05
DK.....94 } → (R94)
RE.....97 }

R90. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R93.**
Are any of the experiences about which you were having the bad dreams or nightmares <u>on this list</u>?

NO.....01 → (R93)
YES.....05
DK.....94
RE.....97 → (R92)

R91. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.

R92. Are there any experiences about which you were having the bad dreams or nightmares that are <u>not on</u> this list?

NO.....01 → (R94)
YES.....05
DK.....94 } → (R94)
RE.....97 }

R93. Which experiences about which you were having the bad dreams or nightmares do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?

1 2	5

R94. Has there ever been a period of a week or more when you went out of your way to avoid certain places or activities which might remind you of something that had happened to you in the past?

CRITERIA	SEVERITY	ONSET	RECENCY

NO.....01 → (R100)

BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R95. THERE IS NO R95.

R96. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R99.**
Are any of the experiences that you went out of your way to avoid being reminded of on this list?

NO.....01 → (R99)
YES.....05
DK.....94
RE.....97 → (R98)

R97. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.

[ ][ ] [ ][ ] [ ][ ] [ ][ ] [ ][ ]

R98. Are there any experiences that you went out of your way to avoid being reminded of that are <u>not on</u> this list?

NO.....01 → (R100)
YES.....05
DK.....94 } → (R100)
RE.....97 }

R99. Which experiences that you went out of your way to avoid being reminded of do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?

☐☐	☐☐	☐☐	☐☐	☐☐

1 2 3 4 5

R100. Has there ever been <u>a period of a week or more</u> during which you seemed to <u>**forget things easily**</u> or had trouble remembering everyday things?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97

RECORD AGE ☐☐ ☐☐

1 2 . 5

R101. Has there ever been a period of a week or more when you deliberately tried to avoid having any feelings about something that happened to you?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R106)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		RECORD AGE	

R102. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R105.**
Are any of the experiences that you tried to avoid having feelings about on this list?

NO.....01 → (R105)
YES.....05
DK.....94
RE.....97 → (R104)

R103. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.

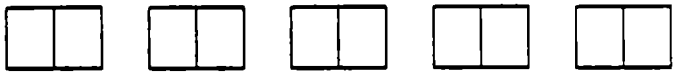
R104. Are there any experiences that you tried to avoid having feelings about that are not on this list?

NO.....01 → (R106)
YES.....05
DK.....94 } → (R106)
RE.....97 }

R105. Which experiences that you tried to avoid having feelings about do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?



1 2 5

R106. Has there ever been a period of a week or more when you felt guilty about surviving something that happened to you?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R111)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97

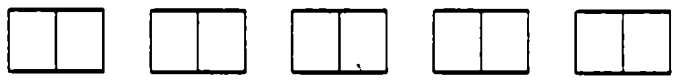
RECORD AGE

R107. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R110.**
Are any of the experiences about which you feel guilty (about) surviving on this list?

NO.....01 → (R110)
YES.....05
DK.....94
RE.....97 → (R109)

R108. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.



R109. Are there any experiences you feel guilty (about) surviving that are not on this list?

NO.....01 → (R111)
YES.....05
DK.....94 → (R111)
RE.....97

R110. Which experiences you feel guilty (about) surviving do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?

☐☐ ☐☐ ☐☐ ☐☐ ☐☐

1 2 5

R111. Has there ever been a period of a week or more during which you felt cut off from other people or found it difficult to feel close to other people?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
			↓ ↓
		RECORD AGE ☐☐	☐☐

[1 2 4 5]

R112. Has there ever been a period of a week or more when it seemed you could not feel things anymore or that you had much less emotion than you used to?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
MED EXPL...04	MD.....02	-6 MONTHS.....03	03
CRITERIA...05*	OTPROF...03	-1 YEAR.....04	04
RE.....97	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

[1 2 3 4 5]

R113. Has there ever been a time when you found yourself suddenly feeling very anxious, fearful, or panicky?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01 → (R119)]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

R114. When you found yourself feeling anxious, fearful, or panicky, was it because you were reminded of something that happened to you in the past?

NO.....01 → (R119)
YES.....05
DK.....94 } → (R119)
RE.....97 }

R115. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R118.**
Are any of the experiences about which you felt very anxious, fearful or panicky <u>on this list</u>?

NO.....01 → (R118)
YES.....05
DK.....94
RE.....97 → (R117)

R116. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.

☐☐ ☐☐ ☐☐ ☐☐ ☐☐

R117. Are there any experiences about which you felt very anxious, fearful, or panicky that are <u>not on</u> this list?

NO.....01 → (R119)
YES.....05
DK.....94 } → (R119)
RE.....97 }

R118. Which experiences about which you felt very anxious, fearful, or panicky are <u>not on</u> this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?

☐☐ ☐☐ ☐☐ ☐☐ ☐☐

[1 2 3 4 5]

R119. Has there ever been a period of a week or more when little things bothered you a lot or could make you very angry?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

[1 2 5]

R120. Has there ever been a period of a week or more when disturbing memories kept coming into your mind whether you wanted to think of them or not?

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01 → (R125)]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05*	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

R121. REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R124.
Are any of the experiences about which you had disturbing memories <u>on this list</u>?

NO.....01 → (R124)
YES.....05
DK.....94
RE.....97 → (R123)

R122. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.

R123. Are there any experiences about which you had disturbing memories that are <u>not on</u> this list?

NO.....01 → (R125)
YES.....05
DK.....94 } → (R125)
RE.....97 }

R124. Which experiences about which you had disturbing memories do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?

1 2 3	5

R125. Have you ever had a "flashback"--that is, have you ever had an experience in which you imagined that something that happened to you in the past was happening all over again?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R130)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
CRITERIA...05*	OTPROF...03	-1 YEAR.....04	04
RE.....97	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97
		↓	↓
		RECORD AGE	

R126. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R129.** Are any of the experiences about which you had a flashback on this list?

NO.....01 → (R129)
YES.....05
DK.....94
RE.....97 → (R128)

R127. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.

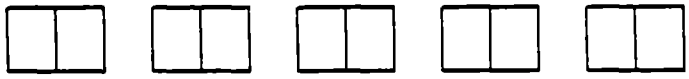
R128. Are there any experiences about which you had a flashback that are not on this list?

NO.....01 → (R130)
YES.....05
DK.....94 → (R130)
RE.....97

R129. Which experiences about which you had a flashback do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?



1 2 3 4 5

R130. Throughout the interview we've talked about distressing experience(s) that you may have had. Have you ever felt that there were parts of any such experiences that you couldn't remember?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R135)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
RE.....97	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ± 3 YEARS...94	94
		RE.....97	97

RECORD AGE

R131. **REVIEW TRAUMATIC EVENTS LIST. IF NO EVENTS LISTED → R134.**
Are any of the experiences that you couldn't remember parts of on this list?

NO.....01 → (R134)
YES.....05
DK.....94
RE.....97 → (R133)

R132. Which ones?

PROMPT: Are there any others?
RECORD EXPERIENCE NUMBER FROM LIST.

R133. Are there any experiences that you couldn't remember parts of that are not on this list?

NO.....01 → (R135)
YES.....05
DK.....94 } → (R135)
RE.....97 }

R134. Which experiences that you couldn't remember parts of do we not have on this list?

USE PROCEDURES AND PROBES FROM TRAUMATIC EVENTS BOOKLET. RECORD EVENT ON LIST AND NEW EVENT NUMBER HERE.

PROMPT: Were there any others?

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 4.

R135. DOES AT LEAST ONE SYMPTOM MEET CRITERIA (= 05*)?

NO.....01 → (R167)
YES.....05

R136. You said you had times when (READ ALL ITEMS CIRCLED ON TALLY SHEET 4).

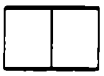
Was there ever a period of a month or more when you had (this/any of these) problem(s) most of the time?

NO.....01
YES.....05 → (R137A)
DK.....94
RE.....97

R137. So there's never been a period of a month or more when most of the time you were having (this/these) problem(s)?

NO, NEVER HAD PERIOD.....01 → (R167)
YES, HAS HAD PERIOD.....05
DK.....94 } → (R167)
RE.....97 }

R137A. In your lifetime, how many different periods of a month or more have you had when you experienced (this/any of these) problem(s) most of the time?

PERIODS..... 

90 OR MORE.....90
DK/2 OR MORE.....94
RE.....97
STILL DK.....98

IF DK: Have you had more than one period like this?
IF 2 OR MORE PERIODS, CODE 94.
IF STILL DK, CODE 98.

R137B. How old were you (the first time/when) you had (this/any of these) problem(s) for a month or more most of the time?

AGE

☐☐

DK.....94
RE.....97

R137C. **IF ONLY ONE PERIOD IN R137A → R138.**
Now I'd like to know about the time when you had the largest number of these problems for a month or more. How old were you at that time?

IF CAN'T CHOOSE: Then pick the worst period you remember.

AGE

☐☐

DK.....94
RE.....97

R138. During this/that time (when you were ____ years old)...

READ ONLY THOSE ITEMS CHECKED ON TALLY SHEET 4.

	NO	YES	RE
... did you have trouble concentrating or keeping your mind on what you were doing (for a month or more)?	01	05	97
R139. ... did you lose interest in activities which usually meant a lot to you (for a month or more)?	01	05	97
R140. ... did you feel you had to stay on guard much of the time (for a month or more)?	01	05	97
R141. ... did you deliberately try very hard not to think about something that had happened to you (for a month or more)?	01	05	97
R142. ... did you have difficulty falling asleep (for a month or more)?	01	05	97
R143. ... did you have a spell or attack of feeling frightened, anxious or very uneasy (for a month or more)?	01	05	97
R144. ... did you feel numb or empty inside (for a month or more)?	01	05	97

During this/that time (when you were ____ years old)...

READ ONLY THOSE ITEMS CHECKED ON TALLY SHEET 4.

		NO	YES	RE
R145.	... did you stop caring about activities in your life that used to be important to you (for a month or more)?	01	05	97
R146.	... did unexpected noises startle you more than usual (for a month or more)?	01	05	97
R147.	... did you keep having unpleasant memories, or seeing them in your mind (for a month or more)?	01	05	97
R148.	... did you often feel as if you might get out of control (for a month or more)?	01	05	97
R149.	... did you have repeated bad dreams or nightmares (for a month or more)?	01	05	97
R150.	... did you go out of your way to avoid certain places or activities which might remind you of something that had happened to you in the past (for a month or more)?	01	05	97
R151.	... did you seem to forget things easily or have trouble remembering everyday things (for a month or more)?	01	05	97
R152.	... did you deliberately try to avoid having any feelings about something that happened to you (for a month or more)?	01	05	97
R153.	... did you feel guilty about surviving something that happened to you (for a month or more)?	01	05	97
R154.	... did you feel cut off from other people or find it difficult to feel close to other people (for a month or more)?	01	05	97
R155.	... did it seem that you couldn't feel things anymore or that you had much less emotion than you used to (for a month or more)?	01	05	97

During (this/that) time (when you were _____ years old)...

READ ONLY THOSE ITEMS CHECKED ON TALLY SHEET 4.

		NO	YES	RE
R156.	... did you find yourself suddenly feeling very anxious, fearful, or panicky (for a month or more)?.....	01	05	97
R157	... did little things bother you a lot or make you very angry (for a month or more)?.....	01	05	97
R158.	... did disturbing memories keep coming into your mind whether you wanted to think of them or not (for a month or more)?.....	01	05	97
R159.	... did you have a "flashback experience" (where you imagined that something that happened to you in the past was happening all over again) (for a month or more)?.....	01	05	97
R160.	... did you feel that there were parts of a distressing experience that you couldn't remember (for a month or more)?.....	01	05	97

R161. There's been a lot of talk lately about stress and the effect of traumatic events on people's lives. Have you ever heard of post-traumatic stress disorder?

NO.....01 → (R167)
YES.....05
DK.....94 } → (R167)
RE.....97 }

R162. Have you ever thought you had post-traumatic stress disorder?

NO.....01 → (R167)
YES.....05
DK.....94 } → (R167)
RE.....97 }

R163. How old were you the first time you experienced problems related to post-traumatic stress disorder?

AGE

DK.....94
RE.....97

TALLY SHEET 4

63	☐	(138) Trouble concentrating
64	☐	(139) Lost interest in activities
65	☐	(140) Had to stay on guard
66	☐	(141) Tried not to think about something
71	☐	(142) Had difficulty falling asleep
73	☐	(143) Spell or attack when you felt frightened, anxious, or very uneasy
78	☐	(144) Felt numb or empty inside
79	☐	(145) Stopped caring about activities
80	☐	(146) Unexpected noises startled you
81	☐	(147) (Had) unpleasant memories
86	☐	(148) Felt out of control
88	☐	(149) (Had) repeated bad dreams or nightmares
94	☐	(150) Avoid(ed) places or activities that remind(ed) you of the past
100	☐	(151) Forgot things easily
101	☐	(152) Tried to avoid feelings
106	☐	(153) Felt guilty about surviving
111	☐	(154) Felt cut off from others
112	☐	(155) Couldn't feel things anymore
113	☐	(156) Felt anxious, fearful, or panicky
119	☐	(157) Little things bothered you
120	☐	(158) Had disturbing memories
125	☐	(159) Had a flashback
130	☐	(160) Couldn't remember some experiences

R164. Do you think that you have post-traumatic stress disorder now?

NO.....01
YES.....05 → (R167)
DK.....94
RE.....97

R165. When did you last experience problems related to post-traumatic stress disorder?

WITHIN LAST 2 WEEKS.....01
WITHIN LAST MONTH.....02
WITHIN LAST 6 MONTHS.....03 → (R167)
WITHIN LAST YEAR.....04
WITHIN LAST 3 YEARS.....05
MORE THAN 3 YEARS AGO.....06
DK+ 3 YEARS.....94
RE.....97

R166. How old were you then?

AGE

DK.....94
RE.....97

R167. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME:	__ __ /	__ __ /	__ __ :	__ __	A.M. P.M.
	MONTH	DAY	HOUR	MINUTE	
RECORD BEGINNING DATE AND TIME:	__ __ /	__ __ /	__ __ :	__ __	A.M. P.M.
	MONTH	DAY	HOUR	MINUTE	

R168. START USING TALLY SHEET 5 HERE FOR SYMPTOMS THAT MEET CRITERIA (=05*)

1 5

R169. In your lifetime, have you ever had two weeks or more during which you **felt sad, blue, depressed** or when you lost all interest and pleasure in things you usually cared about or enjoyed?

RECORD RESPONDENT'S EQUIVALENT* _____

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
CRITERIA...05*	NO.....01	-2 WEEKS.....01	01
RE.....97	MD.....02	-1 MONTH.....02	02
	OTPROF...03	-6 MONTHS.....03	03
	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

[1 2 5]

R170. Have you had two years or more in your life when you felt depressed or sad most days, even if you felt OK sometimes?

SX = PERIOD OF FEELING DEPRESSED.

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05	MD.....02	-6 MONTHS.....03	03
RE.....97	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ±3 YEARS....94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

[1 3 4 5]

R171. Has there ever been a period of two weeks or longer when you lost your appetite?

MD DX _____ OTHER DX _____ A

CAN MEET CRITERIA (=05*) EVEN IF FOOD INTAKE IS NORMAL.

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
MED EXPL...04	MD.....02	-1 MONTH.....02	02
CRITERIA...05*	OTPROF...03	-6 MONTHS.....03	03
RE.....97	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
		↓	↓
		RECORD AGE [ ][ ]	[ ][ ]

1	3	4	5

R172. Have you ever <u>lost weight</u> without trying to--as much as two pounds a week for several weeks <or as much as 10 pounds altogether>?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
MED EXPL...04	MD.....02	-1 MONTH.....02	02
CRITERIA...05*	OTPROF...03	-6 MONTHS.....03	03
RE.....97	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
			↓ ↓
		RECORD AGE	[ ][ ] [ ][ ]

1	3	4	5

R173. Have you ever had a period when your eating increased so much that you <u>gained as much as two pounds a week</u> for <u>several weeks</u> <or 10 pounds altogether>?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
MED EXPL...04	MD.....02	-1 MONTH.....02	02
CRITERIA...05*	OTPROF...03	-6 MONTHS.....03	03
RE.....97	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
			↓ ↓
		RECORD AGE	[ ][ ] [ ][ ]

1	3	4	5

R174. Have you ever had a period of two weeks or more when you had trouble falling asleep, staying asleep, or with waking up too early?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
MED EXPL...04	MD.....02	-1 MONTH.....02	02
CRITERIA...05*	OTPROF...03	-6 MONTHS.....03	03
RE.....97	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
			↓ ↓
		RECORD AGE	[ ][ ] [ ][ ]

1	3	4	5

R175. Have you ever had a period of two weeks or longer when you were sleeping too much?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
MED EXPL...04	MD.....02	-1 MONTH.....02	02
CRITERIA...05*	OTPROF...03	-6 MONTHS.....03	03
RE.....97	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
			↓ ↓
		RECORD AGE	[ ][ ] [ ][ ]

1	3	4	5

R176. Has there ever been a period lasting two weeks or more when you felt **tired out** all the time?

MD DX _____ OTHER DX _____ A

CRITERIA

NO.....01

DRUGS/ALC..03
MED EXPL...04
CRITERIA...05*
RE.....97

SEVERITY

NO.....01
MD.....02
OTPROF...03
RE.....97

ONSET RECENCY

-2 WEEKS.....01.....01
-1 MONTH.....02.....02
-6 MONTHS.....03.....03
-1 YEAR.....04.....04
-3 YEARS.....05.....05
+3 YEARS.....06↓.....06↓
DK ±3 YEARS....94|.....94|
RE.....97|.....97|
↓ ↓

RECORD AGE [ ][ ] [ ][ ]

1	3	4	5

R177. Has there ever been a period of two weeks or more when you talked or **moved** more **slowly** than is normal for you?

MD DX _____ OTHER DX _____ A

CRITERIA

NO.....01

DRUGS/ALC..03
MED EXPL...04
CRITERIA...05*
RE.....97

SEVERITY

NO.....01
MD.....02
OTPROF...03
RE.....97

ONSET RECENCY

-2 WEEKS.....01.....01
-1 MONTH.....02.....02
-6 MONTHS.....03.....03
-1 YEAR.....04.....04
-3 YEARS.....05.....05
+3 YEARS.....06↓.....06↓
DK ±3 YEARS....94|.....94|
RE.....97|.....97|
↓ ↓

RECORD AGE [ ][ ] [ ][ ]

[1 3 4 5]

R178. Has there ever been a period of two weeks or more when you had to be **moving all the time**--that is, you couldn't sit still and paced up and down?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
MED EXPL...04	MD.....02	-1 MONTH.....02	02
CRITERIA...05*	OTPROF...03	-6 MONTHS.....03	03
RE.....97	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE [ ][ ]	[ ][ ]

[1 2 3 4 5]

R179. Was there ever a period of several weeks when your **interest in sex** was a lot **less** than usual?

MD DX _____ OTHER DX _____ A

IF VOLUNTEERS NO INTEREST EVER, CODE CRITERIA 06 AND SKIP TO R180.

CRITERIA	SEVERITY	ONSET	RECENCY
[NO.....01]			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
DRUGS/ALC..03	MD.....02	-6 MONTHS.....03	03
MED EXPL...04	OTPROF...03	-1 YEAR.....04	04
CRITERIA...05*	MEDS.....04	-3 YEARS.....05	05
QUALIFIED..06 → (R180)	INTER....05	+3 YEARS.....06↓	.....06↓
RE.....97	RE.....97	DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE [ ][ ]	[ ][ ]

1	5

R180. Has there ever been a period of two weeks or more when you felt worthless, sinful, or guilty?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
CRITERIA...05*	NO.....01	-2 WEEKS.....01	01
RE.....97	MD.....02	-1 MONTH.....02	02
	OTPROF...03	-6 MONTHS.....03	03
	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE	

1	3	4	5

R181. Has there ever been a period of two weeks or more when you had a lot more trouble concentrating than is normal for you?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
MED EXPL...04	MD.....02	-1 MONTH.....02	02
CRITERIA...05*	OTPROF...03	-6 MONTHS.....03	03
RE.....97	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE	

1	3	4	5

R182. Have you ever had a period of two weeks or more when your thoughts came much slower than usual or seemed mixed up?

MD DX _____ OTHER DX _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
MED EXPL...04	MD.....02	-1 MONTH.....02	02
CRITERIA...05*	OTPROF...03	-6 MONTHS.....03	03
RE.....97	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
			↓ ↓
		RECORD AGE	[ ][ ] [ ][ ]

1			5

R183. Has there ever been a period of two weeks or more when you thought a lot about death--either your own, someone else's, or death in general?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
CRITERIA...05*	NO.....01	-2 WEEKS.....01	01
RE.....97	MD.....02	-1 MONTH.....02	02
	OTPROF...03	-6 MONTHS.....03	03
	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06↓	.....06↓
		DK ±3 YEARS....94	94
		RE.....97	97
			↓ ↓
		RECORD AGE	[ ][ ] [ ][ ]

1	5

R184. Has there ever been a period of two weeks or more when you felt like you wanted to die?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
CRITERIA...05*	NO.....01	-2 WEEKS.....01	01
RE.....97	MD.....02	-1 MONTH.....02	02
	OTPROF...03	-6 MONTHS.....03	03
	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06	06
		DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE	

1	5

R185. Have you ever felt so low you thought of committing suicide?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
CRITERIA...05*	NO.....01	-2 WEEKS.....01	01
RE.....97	MD.....02	-1 MONTH.....02	02
	OTPROF...03	-6 MONTHS.....03	03
	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06	06
		DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE	

1	5

R186. Have you ever attempted suicide?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
CRITERIA...05*	NO.....01	-2 WEEKS.....01	01
RE.....97	MD.....02	-1 MONTH.....02	02
	OTPROF...03	-6 MONTHS.....03	03
	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06	06
		DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE	

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 5.

R187. HAVE THREE OR MORE BOXES BEEN CHECKED?

NO.....01 → (R225)
YES.....02

R188. DID R169 MEET CRITERIA?

NO.....01 → (R191)
YES.....02

R189. You said you've had a period of feeling (depressed or blue/RESPONDENT'S OWN EQUIVALENT) and also said you've had some other experiences like (READ ALL ITEMS CHECKED ON TALLY SHEET 5). Has there ever been a time when the feelings of depression and some of these other experiences occurred together--that is, within the same month?

NO.....01
YES.....05 → (R193)
DK.....94 → (R225)
RE.....97

R190. So there's never been a period when you felt sad, blue, or depressed at the same time you were having some of these other experiences?

NEVER HAD PERIOD.....01 → (R225)
HAS HAD PERIOD.....05 → (R193)
DK.....94 → (R225)
RE.....97

R191. You said you have had periods when (MENTION ALL CHECKS ON TALLY SHEET 5). Was there ever a time when several of these experiences occurred together--that is, within the same month?

NO.....01 → (R225)
YES.....05
DK.....94 } → (R225)
RE.....97 }

R192. When you were having some of these experiences at about the same time were you feeling okay, or were you feeling low, gloomy, blue, or uninterested in everything?

OKAY.....01 → (R225)
BLUE.....05*
DK.....94 } → (R225)
RE.....97 }

R193. What's the longest spell you've ever had when you felt blue and had several of these other experiences at the same time?

WEEKS..... ☐☐☐ *

LESS THAN 14 DAYS.....001 → (R225)
DK, 14 DAYS OR MORE....994*
19 YEARS OR MORE 995*
WHOLE LIFE.....996*
RE.....997
STILL DK.....998*

IF LESS THAN 2 WEEKS, CIRCLE 001.
IF DK: Did it last two weeks?
IF DK, BUT GREATER THAN 14 DAYS, CODE 994.
IF STILL DK, CODE 998.
YEARS X 52 = NUMBER OF WEEKS
MONTHS X 4 = NUMBER OF WEEKS

R194. Now I'd like to ask about spells when you felt both (depressed/RESPONDENT'S OWN EQUIVALENT) and had some of these other experiences like (READ 2 OR 3 ITEMS CHECKED ON TALLY SHEET 5). In your lifetime, how many spells like that have you had that lasted two weeks or more?

SPELLS..... ☐☐ *

DK/2 OR MORE.....94*
95 OR MORE.....95*
RE.....97
STILL DK.....98

IF DK: Have you had more than one of these spells?
IF DK BUT 2 OR MORE SPELLS, CODE 94.
IF STILL DK, CODE 98.

R195. Did you tell a doctor about (that spell/any of those spells)?

NO.....01
YES.....05 → (R199)
DK.....94
RE.....97

R196. Did you tell any other professional about (it/any of them)?

NO.....01
YES.....05 → (R199)
DK.....94
RE.....97

R197. Did you take medicine more than once because of (that spell/any of those spells)?

NO.....01
YES.....05 → (R199)
DK.....94
RE.....97

R198. Did (that spell/those spells) interfere with your life or activities a lot?

NO.....01
YES.....05
DK.....94
RE.....97

R199. How old were you the first time you had a spell for two weeks or more where you felt(sad/RESPONDENT'S OWN EQUIVALENT) and had some of these other experiences (such as (READ 2 OR 3 ITEMS FROM TALLY SHEET 5))?

AGE

DK.....94
RE.....97

R200. Did (this spell/any of those spells) occur just after someone close to you died?

IF VOLUNTEERS BEGAN MORE THAN 2 MONTHS AFTER DEATH, CODE 01.

NO.....01 → (R202)
YES.....05
DK.....94
RE.....97

R201. Have you had any spell of (depression/RESPONDENT'S OWN EQUIVALENT) along with these other experiences like (READ 3 ITEMS FROM TALLY SHEET 5) at times when it wasn't just after a death?

NO (ONLY DUE TO DEATH).....01
YES (OTHER TIMES TOO).....05
DK.....94
RE.....97

R202. Are you now in one of these spells of feeling (low/uninterested/OWN EQUIVALENT) while having some of these other experiences?

NO.....01
YES.....05 → (R205)
DK.....94
RE.....97

R203. When did your last spell like that end?

WITHIN LAST 2 WEEKS.....01
WITHIN LAST MONTH.....02 → (R205)
WITHIN LAST 6 MONTHS.....03
WITHIN LAST YEAR.....04
MORE THAN 1 YEAR AGO.....05
DK.....94
RE.....97

R204. How old were you then?

AGE

☐☐

DK.....94
RE.....97

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 5.

R205. IS MORE THAN ONE SPELL CODED IN R194?

NO.....01
YES, MORE THAN ONE.....05 → (R207)

R206. DOES R193 EQUAL 52 OR MORE WEEKS? TREAT DK AS MORE THAN 52 WEEKS.

LESS THAN 52 WEEKS.....01 → (R208)
52 WEEKS OR MORE, DK.....05

R207. Now I'd like to know about the time when you were feeling (depressed/RESPONDENT'S OWN EQUIVALENT) for at least two weeks, and had the largest number of these other experiences at the same time.

How old were you at that time?

IF R CAN'T CHOOSE: Then pick one bad spell.

AGE

☐☐

DK.....94
RE.....97

R208. I'd like to know which of these other experiences you had during (this/that spell) of (depression/RESPONDENT'S OWN EQUIVALENT). For instance, during (this/that) spell (when you were _____ years old)...

USE STEM AS OFTEN AS NEEDED.

READ ONLY THOSE ITEMS CHECKED ON TALLY SHEET 5.

		NO	YES	RE
	...did you lose your appetite?	01	05	97
R209.	...did you lose weight without trying to--as much as two pounds a week for several weeks, or as much as ten pounds altogether?	01	05	97
R210.	...did your eating increase so much that you gained as much as two pounds a week for several weeks, or ten pounds altogether?	01	05	97
R211.	...did you have trouble falling asleep, staying asleep, or with waking up too early?	01	05	97
R212.	...were you sleeping too much?	01	05	97
R213.	...did you feel tired out all the time?	01	05	97
R214.	...did you talk or move more slowly than is normal for you?	01	05	97
R215.	...did you have to be moving all the time, that is, you couldn't sit still and paced up and down?	01	05	97
R216.	...was your interest in sex a lot less than usual?	01	05	97
R217.	...did you feel worthless, sinful or guilty?	01	05	97
R218.	...did you have a lot more trouble concentrating than is normal for you?	01	05	97
R219.	...did your thoughts come much slower than usual or seem mixed up?	01	05	97
R220.	...did you think a lot about death, either your own, someone else's, or death in general?	01	05	97
R221.	...did you feel like you wanted to die?	01	05	97
R222	...did you feel so low you thought about committing suicide?	01	05	97
R223.	...did you attempt suicide?	01	05	97

TALLY SHEET 5

169 ___ Two weeks of feeling sad, blue, depressed

RECORD R's EQUIVALENT _____

171 ___ (208) Lost appetite
172 ___ (209) Lost weight
173 ___ (210) Gained weight

174 ___ (211) Trouble falling asleep
175 ___ (212) Sleeping too much

176 ___ (213) Tired all the time

177 ___ (214) Talked or moved more slowly
178 ___ (215) Moving all the time

179 ___ (216) Interested in sex less

180 ___ (217) Felt worthless, sinful, guilty

181 ___ (218) Trouble concentrating
182 ___ (219) Thoughts came much slower

183 ___ (220) Thought about death
184 ___ (221) Wanted to die
185 ___ (222) Thought of committing suicide
186 ___ (223) Attempted suicide

192 ___ Felt low, gloomy, blue, uninterested

193 Longest spell

___ Less than 52 weeks (but at least 2 weeks)

___ 52 weeks or longer (includes "DK, 14 or more days," "19 years or more" and "whole life")

194 Number of spells coded:

___ Only one spell

___ More than one spell (includes "DK, 2 weeks or more" and "95 or more")

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R224. THERE IS NO R224.

R225. START USING TALLY SHEET 6 HERE FOR SYMPTOMS THAT MEET CRITERIA (=05*).

1 3 5

R226. Has there ever been a period of one week or more when you were so happy or excited or high that you got into trouble, or your family or friends worried about it, or a doctor said you were manic?

RECORD RESPONDENT'S EQUIVALENT* _____

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03 CRITERIA...05* RE.....97	NO.....01 MD.....02 OTPROF...03 RE.....97	-2 WEEKS.....01 -1 MONTH.....02 -6 MONTHS.....03 -1 YEAR.....04 -3 YEARS.....05 +3 YEARS.....06 DK ±3 YEARS....94 RE.....97	.....01 .....02 .....03 .....04 .....05 .....06 .....94 97
		RECORD AGE	

1	3	5

R227. Has there ever been a period of a week or more when you were so much more active than usual that you or your family or friends were concerned about it?

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03 CRITERIA...05* RE.....97	NO.....01 MD.....02 OTPROF...03 RE.....97	-2 WEEKS.....01 -1 MONTH.....02 -6 MONTHS.....03 -1 YEAR.....04 -3 YEARS.....05 +3 YEARS.....06 DK ±3 YEARS....94 RE.....97	.....01 .....02 .....03 .....04 .....05 .....06 .....94 97

RECORD AGE [ ][ ] [ ][ ]

1	3	5

R228. Has there ever been a period of a week or more when you went on spending sprees--spending so much money that it caused you or your family some financial trouble?

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03 CRITERIA...05* RE.....97	NO.....01 MD.....02 OTPROF...03 RE.....97	-2 WEEKS.....01 -1 MONTH.....02 -6 MONTHS.....03 -1 YEAR.....04 -3 YEARS.....05 +3 YEARS.....06 DK ±3 YEARS....94 RE.....97	.....01 .....02 .....03 .....04 .....05 .....06 .....94 97

RECORD AGE [ ][ ] [ ][ ]

1	3	5

R229. Have you ever had a period of a week or more when your interest in sex was so much stronger than is typical for you that you wanted to have sex a lot more frequently than is normal for you or with people you normally wouldn't be interested in?

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
CRITERIA...05*	MD.....02	-1 MONTH.....02	02
RE.....97	OTPROF...03	-6 MONTHS.....03	03
	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06	06
		DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE	

1	3	5

R230. Has there ever been a period of a week or more when you talked so fast that people said they couldn't understand you?

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03	NO.....01	-2 WEEKS.....01	01
CRITERIA...05*	MD.....02	-1 MONTH.....02	02
RE.....97	OTPROF...03	-6 MONTHS.....03	03
	RE.....97	-1 YEAR.....04	04
		-3 YEARS.....05	05
		+3 YEARS.....06	06
		DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE	

1	3	5

R231. Have you ever had a period of a week or more when thoughts raced through your head so fast that you couldn't keep track of them?

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03 CRITERIA...05* RE.....97	NO.....01 MD.....02 OTPROF...03 RE.....97	-2 WEEKS.....01 -1 MONTH.....02 -6 MONTHS.....03 -1 YEAR.....04 -3 YEARS.....05 +3 YEARS.....06 DK ±3 YEARS....94 RE.....97	.....01 .....02 .....03 .....04 .....05 .....06 .....94 97
		RECORD AGE	

1	3	5

R232. Have you ever had a period of a week or more when you felt that you had a special gift or special powers to do things others couldn't do or that you were a specially important person?

ASK FOR EXAMPLE BEFORE PROBING: _____

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03 CRITERIA...05* RE.....97	NO.....01 MD.....02 OTPROF...03 RE.....97	-2 WEEKS.....01 -1 MONTH.....02 -6 MONTHS.....03 -1 YEAR.....04 -3 YEARS.....05 +3 YEARS.....06 DK ±3 YEARS....94 RE.....97	.....01 .....02 .....03 .....04 .....05 .....06 .....94 97
		RECORD AGE	

1	3	5

R233. Has there ever been a period of a week or more when you **hardly slept** at all but still didn't feel tired or sleepy?

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03 CRITERIA...05* RE.....97	NO.....01 MD.....02 OTPROF...03 RE.....97	-2 WEEKS.....01 -1 MONTH.....02 -6 MONTHS.....03 -1 YEAR.....04 -3 YEARS.....05 +3 YEARS.....06↓ DK ±3 YEARS....94 RE.....97	.....01 .....02 .....03 .....04 .....05 .....06↓ 94 97
		RECORD AGE	

1	3	5

R234. Was there ever a period of a week or more when you were **easily distracted** so that any little interruption could get you off the track?

RECORD DRUGS/ALC/MED: _____ A

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01			
DRUGS/ALC..03 CRITERIA...05* RE.....97	NO.....01 MD.....02 OTPROF...03 RE.....97	-2 WEEKS.....01 -1 MONTH.....02 -6 MONTHS.....03 -1 YEAR.....04 -3 YEARS.....05 +3 YEARS.....06↓ DK ±3 YEARS....94 RE.....97	.....01 .....02 .....03 .....04 .....05 .....06↓ 94 97
		RECORD AGE	

CHECK TALLY SHEET 6.

R235. HOW MANY ITEMS IN R227-R234 MEET CRITERIA (=05*)?

NONE OR ONLY ONE.....01 → (R262)
TWO.....02 → (R237)
THREE OR MORE.....03

CHECK TALLY SHEET 6.

R236. DOES R226 MEET CRITERIA (=05*)?

NO, DOESN'T MEET CRITERIA..01 → (R240)
YES, MEETS CRITERIA.....05 → (R238)

R237. CHECK TALLY SHEET 6.

DOES R226 MEET CRITERIA (=05*)?

NO, DOESN'T MEET CRITERIA..01 → (R262)
YES, MEETS CRITERIA.....02

R238. You said you've had a period of feeling (happy/excited/manic/OWN EQUIVALENT) and also said you've had some feelings or experiences like (READ ITEMS CHECKED ON TALLY SHEET 6). Has there ever been a time when the feelings of being excited or manic and some of these other feelings or experiences occurred together--that is, within the same month?

NO.....01
YES.....05 → (R242)
DK.....94 } → (R262)
RE.....97 }

R239. So there's never been a period when you felt (very/happy/excited/manic/OWN EQUIVALENT) at the same time you were having any of these other experiences?

NO, NEVER.....01 → (R262)
YES, WAS A PERIOD.....05 → (R242)
DK.....94 } → (R262)
RE.....97 }

R240. You said you had times when (READ ITEMS CHECKED ON TALLY SHEET 6). Was there ever a time when some of these feelings or experiences occurred together--that is, within the same month?

NO.....01 → (R262)
YES.....05
DK.....94
RE.....97

R241. When you were feeling that way, were you unusually irritable or likely to fight or argue?

NO, NOT IRRITABLE.....01 → (R262)
YES, IRRITABLE.....05
DK.....94
RE.....97

R242. What's the longest spell you've ever had when you felt (happy/high/manic/irritable/OWN EQUIVALENT)) for at least a week and had several of these other experiences like (READ ALL ITEMS CHECKED ON TALLY SHEET 6.)

WEEKS..... ☐☐☐

LESS THAN ONE WEEK.....000 → (R262)
7 TO 13 DAYS.....001
DK, 7 DAYS OR MORE.....994
RE.....997 } → (R262)
STILL DK.....998

NOTE SPECIAL CODE: LESS THAN ONE WEEK
YEARS X 52 = NUMBER OF WEEKS
MONTHS X 4 = NUMBER OF WEEKS
IF DK: Did it last a week?
IF DK, BUT 7 DAYS OR MORE, CODE 994.
IF STILL DK, CODE 998.

R243. In your lifetime, how many spells like that have you had that lasted one week or more?

SPELLS
☐☐*

93 OR MORE.....93*
DK.....94*
RE.....97*

R244. Did you tell a doctor about (that spell/any of those spells)?

NO.....01
YES.....05 → (R248)
DK.....94
RE.....97

R245. Did you tell any other professional about (that spell/any of those spells)?

NO.....01
YES.....05 → (R248)
DK.....94
RE.....97

R246. Did you take medicine more than once because of (that spell/any of those spells)?

NO.....01
YES.....05 → (R248)
DK.....94
RE.....97

R247. Did (that spell/any of those spells) interfere with your life or activities a lot?

NO.....01
YES.....05
DK.....94
RE.....97

R248. How old were you the first time you had a spell for one week or more where you felt (high/happy/manic/excited/irritable/OWN EQUIVALENT) and had some of these experiences like (READ ITEMS CHECKED ON TALLY SHEET 6)?

AGE

DK.....94
RE.....97

R249. Are you in one of these spells of feeling (high/happy/excited/irritable/OWN EQUIVALENT) and having some of these experiences now?

NO.....01
YES.....05 → (R252)
DK.....94
RE.....97

R250. How long ago did your last period like that end?

CODE MOST RECENT TIME POSSIBLE.

WITHIN LAST 2 WEEKS.....01
WITHIN LAST MONTH.....02 → (R252)
WITHIN LAST 6 MONTHS.....03
WITHIN LAST YEAR.....04
MORE THAN 1 YEAR AGO.....05
DK.....94
RE.....97

R251. How old were you then?

AGE

DK.....94
RE.....97

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 6.

R252. IS R243 CODED "MORE THAN ONE(01)," "DK," "RE"?

NO (CODED ONE (01)).....01 → (R254)
YES (CODED MORE THAN ONE, DK, OR RE).....05

R253. Now I'd like to know about the time when you were feeling (high/happy/manic/irritable/OWN EQUIVALENT) and had the largest number of these other experiences at the same time.

How old were you at that time?

IF R CAN'T CHOOSE: Then pick one bad spell.

AGE

☐☐

DK.....94
RE.....97

R254. During (this/that) spell of being (happy/high/manic/irritable/OWN EQUIVALENT), which of these experiences did you have? For instance, during (this/that) spell (when you were _____ years old)...

USE STEM AS OFTEN AS NEEDED.

READ ONLY THOSE ITEMS CHECKED ON TALLY SHEET 6.

	NO	YES	RE
...were you so much more active than usual that you or your family or friends were concerned about it?	01	05	97
R255. ...did you go on spending sprees--spending so much money that it caused you or your family some financial trouble?	01	05	97
R256. ...was your interest in sex so much stronger than is typical for you that you wanted to have sex a lot more frequently than is normal for you or with people you normally wouldn't be interested in?	01	05	97
R257. ...did you talk so fast that people said they couldn't understand you?	01	05	97
R258. ...did thoughts race through your head so fast that you couldn't keep track of them?	01	05	97
R259. ...did you feel that you had a special gift or special powers to do things others couldn't do or that you were a specially important person?	01	05	97
R260. ...did you hardly sleep at all but still didn't feel tired or sleepy?	01	05	97
R261. ...were you easily distracted so that any little interruption could get you off track?	01	05	97

TALLY SHEET 6

226 ☐ One week of feeling very happy, excited, manic
Record R's Equivalent _____

227 ☐ (254) More active

228 ☐ (255) Spending sprees

229 ☐ (256) Interest in sex stronger

230 ☐ (257) Talked fast

231 ☐ (258) Thoughts raced

232 ☐ (259) Special gift or powers

233 ☐ (260) Hardly slept

234 ☐ (261) Easily distracted

243 Number of spells ___ ___

R262. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME:	___ ___ /	___ ___	___ ___ :	___ ___	A.M. P.M.
	MONTH	DAY	HOUR	MINUTE	
RECORD BEGINNING DATE AND TIME:	___ ___ /	___ ___	___ ___ :	___ ___	A.M. P.M.
	MONTH	DAY	HOUR	MINUTE	

R263. Now I'm going to ask you some questions about using alcohol <including beer and wine>. First, have you had any alcoholic beverages--that is, any beer, any wine, or any hard liquor <such as whiskey, or mixed drinks>--during the past 12 months, that is since (DATE)?

NO.....01
YES.....05 → (R266)

R264. Was there ever a time when you had any alcoholic beverages including beer, wine, hard liquor, or mixed drinks?

IF RESPONDENT SAYS ONLY CHILDHOOD SIPS FROM AN OLDER PERSON'S DRINK, CODE "01."

NO.....01
YES.....05 → (R272)

R265. So you've never in your life drunk any beer, wine, or liquor?

NO, NEVER DRANK ANY ALCOHOLIC BEVERAGE.....01 → (R318)
YES, HAVE HAD SOME KIND OF ALCOHOL BEVERAGE AT SOME TIME.....05 → (R272)

R266. **HAND R CARD R-266.**
Now think about your drinking of beer. During the past 12 months, about how often did you drink beer (on the average)?

ABOUT EVERY DAY.....01
5-6 DAYS PER WEEK.....02
3-4 DAYS PER WEEK.....03
1-2 DAYS PER WEEK.....04
1-3 TIMES PER MONTH.....05
3-11 DAYS IN PAST 12 MONTHS.....06
ONCE OR TWICE IN PAST 12 MONTHS.....07
NEVER--DID NOT DRINK BEER IN PAST 12 MONTHS.....08 → (R268)

R267. During the past 12 months, on days that you drank beer, about how many bottles, cans, or glasses of beer did you usually drink?

CONVERT UNITS GIVEN TO GLASSES. BEER IS MOST COMMONLY SOLD AND SERVED IN 12 OUNCE BOTTLES, CANS, AND GLASSES.

☐☐ NUMBER OF GLASSES OF BEER

DK.....94
RE.....97

R268. **HAND R CARD R-266.**
Now think about your drinking of wine. During the past 12 months, about how often did you drink wine (on the average)?

ABOUT EVERY DAY.....01
5-6 DAYS PER WEEK.....02
3-4 DAYS PER WEEK.....03
1-2 DAYS PER WEEK.....04
1-3 TIMES PER MONTH.....05
3-11 DAYS IN PAST 12 MONTHS.....06
ONCE OR TWICE IN PAST 12 MONTHS.....07
NEVER--DID NOT DRINK WINE IN PAST 12 MONTHS.....08 → (R270)

R269. During the past 12 months, on days that you drank wine, about how many glasses of wine did you usually drink?

CONVERT UNITS GIVEN TO GLASSES. THE STANDARD WINE GLASS HOLDS ABOUT 4 OUNCES OF WINE, THE STANDARD WINE BOTTLE HOLDS ABOUT 6 STANDARD GLASSES, AND A HALF GALLON OF WINE HOLDS ABOUT 16 STANDARD GLASSES.

☐☐ NUMBER OF GLASSES OF WINE

DK.....94
RE.....97

R270. **HAND R CARD R-266.**
Now think about your drinking of hard liquor. During the past 12 months, how often did you drink hard liquor (on the average)?

ABOUT EVERY DAY.....01
5-6 DAYS PER WEEK.....02
3-4 DAYS PER WEEK.....03
1-2 DAYS PER WEEK.....04
1-3 TIMES PER MONTH.....05
3-11 DAYS IN PAST 12 MONTHS.....06
ONCE OR TWICE IN PAST 12 MONTHS.....07
NEVER--DID NOT DRINK HARD LIQUOR IN PAST 12 MONTHS.....08 → (R272)

R271. During the past 12 months, on days that you drank hard liquor, about how many drinks did you usually drink?

CONVERT UNITS GIVEN TO NUMBER OF DRINKS. THE AVERAGE BAR DRINK CONTAINS A JIGGER, OR 1 1/2 OUNCES OF LIQUOR. A FIFTH OF LIQUOR CONTAINS ABOUT 20 STANDARD DRINKS.

☐☐ NUMBER OF DRINKS

DK.....94
RE.....97

R272. Now a few more questions about using alcohol in general. How old were you the first time you ever drank enough to get drunk?

NOTE SPECIAL CODES FOR NEVER, BABY AND INFANT.

AGE..... ☐☐

NEVER.....00 → (R277)
DK/UNDER 15.....01 → (R274)
BABY/INFANT.....02
DK/OVER 15.....95 → (R275)
RE.....97
STILL DK.....98 → (R275)

IF DK, ASK: Do you think it was before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R273. IN R272, IS AGE GIVEN 15 OR OLDER?

NO, LESS THAN 15.....01
YES, 15 OR OLDER.....05 → (R275)

R274. Did you get drunk more than once before you were 15?

NO.....01
YES.....05
DK.....94
RE.....97

R275. When was the last time you drank enough alcohol to get drunk?

WITHIN LAST 2 WEEKS.....01
WITHIN LAST MONTH.....02
WITHIN LAST 6 MONTHS.....03
WITHIN LAST YEAR.....04
WITHIN LAST 3 YEARS.....05
→ (R277)
MORE THAN 3 YEARS AGO.....06
DK ± 3 YEARS.....94
RE.....97

R276. How old were you then?

AGE

DK.....94
RE.....97

R277. START USING TALLY SHEET 7, PART A, HERE FOR SYMPTOMS ANSWERED "YES" (=05*).
NOTE: IF R CAN'T REMEMBER SPECIFIC OCCASION CODE NO ("01").

R278. Has your family ever objected because you were drinking too much?

IF YES, ASK:

ONSET: When was the first time your family objected?

RECENCY: When was the last time your family objected?

IF VOLUNTEERS THAT FAMILY OBJECTS TO MODERATE DRINKING BY ANYONE, CODE 02.

IF VOLUNTEERS "ONLY ONCE," CODE "01."

NO.....01
QUALIFIED.....02
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06	06
DK ±3 YEARS	94	94
RE	97	97
RECORD AGE		

R279. Have you ever spent a great deal of time thinking about drinking or making sure that you had alcohol available?

IF YES, ASK:

ONSET: When was the first time you spent a great deal of time thinking about drinking?

RECENCY: When was the last time you spent a great deal of time thinking about drinking?

NO.....01
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06↓	06↓
DK ±3 YEARS	94	94
RE	97	97
	↓	↓
RECORD AGE	[ ][ ]	[ ][ ]

R280. Have you ever found that when you started drinking you ended up drinking much more than you thought you would?

IF YES: **CODE 05 AND ASK: "ONSET" AND "RECENCY."**

IF NO: Did you ever end up drinking for a much longer period of time than you thought you would?
IF YES, CODE = 05, AND ASK "ONSET" AND "RECENCY":

ONSET: When was the first time you ended up drinking (much more than you thought/for a much longer period of time than you thought)?

RECENCY: When was the last time you ended up drinking (much more than you thought/for a much longer period of time than you thought)?

NO.....01
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06↓	06↓
DK ±3 YEARS	94	94
RE	97	97
	↓	↓
RECORD AGE	[ ][ ]	[ ][ ]

R281. Did you ever find that you needed to drink a lot more in order to get high than you did when you first started drinking?

IF NO: Did you ever find that when you drank the same amount it had much less effect than before?

IF YES, CODE "05" AND ASK "ONSET" AND "RECENCY."

IF YES: CODE 05 AND ASK "ONSET" AND "RECENCY."

ONSET: When was the first time you found (you needed to drink a lot more to get high/that drinking the same amount had less effect)?

RECENCY: When was the last time you found (you needed to drink a lot more to get high/that drinking the same amount had less effect)?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	↓	↓
	RECORD AGE	

R282. Have you ever drunk as much as a fifth of liquor in one day, that would be about 20 drinks, or 3 bottles of wine, or as much as 3 six-packs of beer in one day?

IF VOLUNTEERS ONLY ONCE, CODE 02 AND ASK: When was that?
RECORD IN ONSET AND RECENCY.

IF YES, ASK:

ONSET: When was the first time you drank as much as that in one day?

RECENCY: When was the last time you drank as much as that in one day?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
ONLY ONCE.....02	-1 MONTH.....02	02
YES.....05*	-6 MONTHS.....03	03
RE.....97	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	↓	↓
	RECORD AGE	

R283. Has there ever been a period of two weeks when every day you were drinking 7 or more beers, 7 or more drinks, or 7 or more glasses of wine?

IF YES, ASK:

ONSET: When was the first time you drank that much every day for a period of two weeks or more?

RECENCY: When was the last time you drank that much every day for a period of two weeks or more?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE	

R284. Has there ever been a couple of months or more when at least one evening a week you drank 7 drinks, or 7 bottles of beer, or 7 glasses of wine?

IF YES, ASK:

ONSET: When was the first time you drank that much at least one evening a week for a couple of months or more?

RECENCY: When was the last time you drank that much at least one evening a week for a couple of months or more?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE	

R285. Have you ever told a doctor about a problem you had with drinking?

IF YES, ASK:

ONSET: When was the first time you told a doctor about a problem you had with drinking?

RECENCY: When was the last time you told a doctor about a problem you had with drinking?

NO.....01
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06	06
DK ±3 YEARS	94	94
RE	97	97
RECORD AGE	[ ][ ]	[ ][ ]

R286. Have friends, your doctor, your clergyman, or any other professional ever said you were drinking too much for your own good?

EXCLUDE FAMILY.

IF YES: Was this only because you needed to lose weight?
IF YES, ONLY NEEDED TO LOSE WEIGHT: CODE 01 AND GO TO R287.

ONSET: When was the first time any of them said you were drinking too much?

RECENCY: When was the last time any of them said you were drinking too much?

NO.....01
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06	06
DK ±3 YEARS	94	94
RE	97	97
RECORD AGE	[ ][ ]	[ ][ ]

R287. Have you ever wanted to stop drinking but could not?

IF NO: Have you ever wanted to cut down (on) drinking but couldn't?

IF YES (WANTED TO CUT DOWN): CODE = 02 AND ASK "ONSET" "RECENCY."

IF YES (WANTED TO STOP DRINKING) CODE = 05 AND ASK: "ONSET" AND "RECENCY."

ONSET: When was the first time you wanted to (stop/cut down) drinking (but could not)?

RECENCY: When was the last time you wanted to (stop/cut down) drinking (but could not)?

	ONSET	RECENCY
NO.....01 → (R289)	-2 WEEKS.....01	01
QUALIFIED=.....02	-1 MONTH.....02	02
YES.....05*	-6 MONTHS.....03	03
RE.....97	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06	06
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE [ ][ ]	[ ][ ]

R288. How many times have you wanted or tried to (cut down/stop) drinking?

ONLY ONCE.....01
TWO OR MORE TIMES.....05

R289. Some people promise themselves not to drink before 5 o'clock or never to drink alone, in order to control their drinking. Have you ever done anything like that?

IF YES, ASK:

ONSET: When was the first time you did something like that?

RECENCY: When was the last time you did something like that?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	↓	↓
	RECORD AGE [ ][ ]	[ ][ ]

R290. Did you ever need a drink just after you had gotten up <that is, before breakfast>?

IF YES, ASK:

ONSET: When was the first time you needed a drink just after you had gotten up?

RECENCY: When was the last time you needed a drink just after you had gotten up?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	↓	↓
	RECORD AGE [ ][ ]	[ ][ ]

R291. Has there ever been a period when you spent so much time drinking that you had little time for your family, friends, or hobbies?

IF YES, ASK:

ONSET: When was the first time you had little time for them because of drinking?

RECENCY: When was the last time you had little time for them because of drinking?

	ONSET	RECENCY
NO.....01		
YES.....05*		
RE.....97		
	-2 WEEKS.....01	01
	-1 MONTH.....02	02
	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE ☐☐	☐☐

R292. Have you ever had job or school troubles because of drinking--like missing too much work or drinking on the job <or at school>?

IF YES, ASK:

ONSET: When was the first time you had job or school trouble because of drinking?

RECENCY: When was the last time you had job or school trouble because of drinking?

	ONSET	RECENCY
NO.....01		
YES.....05*		
RE.....97		
	-2 WEEKS.....01	01
	-1 MONTH.....02	02
	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE ☐☐	☐☐

R293. Did you ever lose a job or get kicked out of school on account of drinking?

IF YES, ASK:

ONSET: When was the first time you lost a job or got kicked out of school because of drinking?

RECENCY: When was the last time you lost a job or got kicked out of school because of drinking?

NO.....01
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06	06
DK ±3 YEARS	94	94
RE	97	97
RECORD AGE	☐☐	☐☐

R294. Have you ever gotten into trouble driving because of drinking--like having an accident or being arrested for drunk driving?

IF YES, ASK:

ONSET: When was the first time you got into trouble driving because of drinking?

RECENCY: When was the last time you got into trouble driving because of drinking?

NO.....01
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06	06
DK ±3 YEARS	94	94
RE	97	97
RECORD AGE	☐☐	☐☐

R295. Did you ever drink in a situation where having anything to drink could have resulted in you or someone else getting hurt, not including drinking while driving?

IF YES, ASK:

ONSET: When was the first time you drank where someone could have gotten hurt?

RECENCY: When was the last time you drank where someone could have gotten hurt?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	↓	↓
	RECORD AGE [ ][ ]	[ ][ ]

R296. Have you ever been arrested or held at the police station because of drinking or for disturbing the peace while drinking <not including drunken driving>?

IF YES, ASK:

ONSET: When was the first time you were arrested or held by the police due to drinking?

RECENCY: When was the last time you were arrested or held by the police due to drinking?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	↓	↓
	RECORD AGE [ ][ ]	[ ][ ]

R297. Have you ever gotten into physical fights while drinking?

IF YES, ASK:

ONSET: When was the first time you got into a (physical) fight while drinking?

RECENCY: When was the last time you got into a (physical) fight while drinking?

NO.....01
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06	06
DK ±3 YEARS	94	94
RE	97	97

RECORD AGE

R298. Have you ever continued to drink when you knew that it was increasing problems you were having with other people, such as with family members or people at work or school?

IF YES, ASK:

ONSET: When was the first time you continued to drink even though it was increasing problems with others?

RECENCY: When was the last time you continued to drink even though it was increasing problems with others?

NO.....01
YES.....05*
RE.....97

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06	06
DK ±3 YEARS	94	94
RE	97	97

RECORD AGE

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 7, PART A.

R299. HOW MANY 05*'s HAVE BEEN CHECKED?

NONE.....01 → (R318)
ONE OR MORE.....02 → (R301)

R300. THERE IS NO R300.

R301. START USING TALLY SHEET 7, PART B, HERE FOR SYMPTOMS ANSWERED "YES" (=05*).

R302. Have you ever gone on binges or benders where you kept drinking for a couple of days or more without sobering up?

IF YES, ASK:

ONSET: When was the first time you went on a binge or bender?

RECENCY: When was the last time you went on a binge or bender?

NO.....01 → (R305)
YES.....05
RE.....97 → (R305)

	ONSET	RECENCY
-2 WEEKS	01	01
-1 MONTH	02	02
-6 MONTHS	03	03
-1 YEAR	04	04
-3 YEARS	05	05
+3 YEARS	06	06
DK ±3 YEARS	94	94
RE	97	97
RECORD AGE	[ ][ ]	[ ][ ]

R303. Did you neglect some of your usual responsibilities then?

NO.....01
YES.....05*
DK.....94
RE.....97

R304. How many times have you gone on benders that lasted a couple of days?

BENDERS..... [ ][ ]
ONCE.....01
93+.....93
DK, MORE THAN ONCE.....95
RE.....97
STILL DK.....98

IF DK: Was it just once or more than that?
IF MORE THAN ONCE, CODE 95.
IF STILL DK, CODE 98.

R305. Have you ever had blackouts while drinking, that is, where you drank enough so that you couldn't remember the next day what you had said or done?

IF YES, ASK:

ONSET: When was the <u>first</u> time you had a blackout while drinking?

RECENCY: When was the <u>last</u> time you had a blackout while drinking?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE ☐☐	☐☐

R306. Have you ever had "the shakes" after stopping or cutting down on drinking <that is, your hands shake so that your coffee cup rattles in the saucer or you have trouble lighting a cigarette>?

STOPPING INCLUDES NOT DRINKING FOR A FEW HOURS OR OVERNIGHT.

IF YES, ASK:

ONSET: When was the <u>first</u> time you had "the shakes" (after stopping or cutting down drinking)?

RECENCY: When was the <u>last</u> time you had "the shakes" (after stopping or cutting down drinking)?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE ☐☐	☐☐

R307. Have you ever had fits or seizures after stopping or cutting down on drinking?

STOPPING INCLUDES NOT DRINKING FOR A FEW HOURS OR OVERNIGHT.

IF YES, ASK:

ONSET: When was the <u>first</u> time you had a fit or seizure (after stopping or cutting down drinking)?

RECENCY: When was the <u>last</u> time you had a fit or seizure (after stopping or cutting down drinking)?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	↓	↓
	RECORD AGE [ ][ ]	[ ][ ]

R308. Have you ever had the DT's <hallucinations and fever> when you quit drinking?

QUITTING INCLUDES NOT DRINKING FOR A FEW HOURS OR OVERNIGHT.

IF YES, ASK:

ONSET: When was the <u>first</u> time you had DT's (when you quit drinking)?

RECENCY: When was the <u>last</u> time you had DT's (when you quit drinking)?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	↓	↓
	RECORD AGE [ ][ ]	[ ][ ]

R309. After not drinking for a few hours or more, have you often drunk to keep yourself from getting the shakes or becoming sick?

IF NO: What about drinking when you were having the shakes or feeling sick so that you would feel better?
IF YES, CODE "05" AND ASK "ONSET" AND "RECENCY."

IF YES: **CODE 05 AND ASK: "ONSET" AND "RECENCY."**

ONSET: When was the first time you drank to keep yourself from getting sick or to feel better?

RECENCY: When was the last time you drank to keep yourself from getting sick or to feel better?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE	

R310. Have you ever continued to drink when you knew you had a serious physical illness that might be made worse by drinking?

IF YES, ASK:

ONSET: When was the first time you continued to drink in spite of a serious illness?

RECENCY: When was the last time you continued to drink in spite of a serious illness?

	ONSET	RECENCY
NO.....01	-2 WEEKS.....01	01
YES.....05*	-1 MONTH.....02	02
RE.....97	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06↓	.....06↓
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE	

R311. Has there ever been a period in your life when you could not do your ordinary daily work well unless you had had something to drink?

IF YES, ASK:

ONSET: When was the first time you couldn't do your work well without something to drink?

RECENCY: When was the last time you couldn't do your work well without something to drink?

	ONSET	RECENCY
NO.....01		
YES.....05*		
RE.....97		
	-2 WEEKS.....01	01
	-1 MONTH.....02	02
	-6 MONTHS.....03	03
	-1 YEAR.....04	04
	-3 YEARS.....05	05
	+3 YEARS.....06	06
	DK ±3 YEARS....94	94
	RE.....97	97
	RECORD AGE [ ][ ]	[ ][ ]

R312. I'm going to mention some things you told me about drinking. You mentioned (READ ALL * ITEMS CHECKED ON TALLY SHEET 7, PARTS A AND B). Has there ever been a period of one month or more when these things were happening?

NO.....01
YES.....05
DK.....94
RE.....97

R313. Did you ever tell a doctor about any of these experiences you had with drinking?

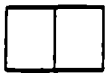
NO.....01
YES.....05 → (R315)
DK.....94
RE.....97

R314. Did you talk to any other professional about any of these experiences you had with drinking?

NO.....01
YES.....05
DK.....94
RE.....97

R315. How old were you when you first had any of these experiences with drinking?

AGE



DK.....94
RE.....97

R316. When was the last time any of these things happened (READ * ITEMS ON TALLY SHEET 7 IF NEEDED)?

CODE MOST RECENT TIME POSSIBLE.

WITHIN LAST 2 WEEKS.....01
WITHIN LAST MONTH.....02
WITHIN LAST 6 MONTHS.....03 → (R318)
WITHIN LAST YEAR.....04
WITHIN 3 YEARS.....05
MORE THAN 3 YEARS AGO.....06
DK+3 YEARS.....94
RE.....97

R317. How old were you then?

AGE

DK.....94
RE.....97

TALLY SHEET 7

PART A

278 ☐ Family objected to drinking

279 ☐ A great deal of time thinking about drinking

280 ☐ Drinking more than you thought

281 ☐ Needed to drink more to get high

282 ☐ Drunk a fifth of liquor in one day

283 ☐ Two weeks drinking seven or more drinks every day

285 ☐ Told a doctor about problem with drinking

286 ☐ Friends, doctor, clergyman, other professional said drinking too much

287 ☐ Wanted to stop drinking but could not

289 ☐ Promised yourself to control drinking

290 ☐ Needed a drink after getting up, before breakfast

291 ☐ Drinking took away from family, friends, hobbies

292 ☐ Job or school problems from drinking

293 ☐ Lost a job because of drinking

294 ☐ Gotten into trouble driving because of drinking

295 ☐ Drinking when it could have resulted in someone getting hurt

296 ☐ Arrested or held because of drinking

297 ☐ Gotten into physical fights while drinking

298 ☐ Drinking when it caused trouble with other people

PART B

303 ☐ Neglected responsibilities while on benders

305 ☐ Blackouts while drinking

306 ☐ Shakes

307 ☐ Seizures or fits

308 ☐ DTs

309 ☐ Drank to keep from getting sick or the shakes

310 ☐ Continued to drink despite serious illness

311 ☐ Could not work well without something to drink

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R318. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME:	___ ___ MONTH	/ ___ ___ DAY	___ ___ HOUR	: ___ ___ MINUTE	A.M. P.M.
RECORD BEGINNING DATE AND TIME	___ ___ MONTH	/ ___ ___ DAY	___ ___ HOUR	: ___ ___ MINUTE	A.M. P.M.

R319. I want to ask you next about whether you have ever been bothered by having certain unpleasant thoughts all the time. An example would be the persistent idea that you might harm or kill someone you loved, even though you really didn't want to. Have you ever been bothered by <u>that</u> or <u>any other unpleasant and persistent thought</u>?

NO	01	→ (R326)
YES	05	
DK	94	→ (R326)
RE	97	

R320. Was this only for a short time or was it over a period of several weeks?

LESS THAN 3 WEEKS	01	→ (R326)
3 OR MORE WEEKS	05	
DK	94	→ (R326)
RE	97	

1	2		5

R321. Did these thoughts keep coming into your mind no matter how hard you tried to get rid of them?

IF YES, PROBE: Could you give me an example of the kinds of thoughts that bothered you?

EXAMPLE: _____

SX = UNPLEASANT AND PERSISTENT THOUGHT

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R326)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05	MD.....02	-6 MONTHS.....03	03
RE.....97 → (R326)	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ±3 YEARS....94	94
		RE.....97	97

RECORD AGE | | | | | |

R322. IN R321, IS ONSET CODED 94, OR AGE OF ONSET CODED "DK?"

NO.....01 → (R325)
YES (94 OR DK).....05

R323. IF RESPONDENT IS UNDER 40 CODE "01" IN R324 AND SKIP TO QUESTION R325.

R324. Were you under 40 or older than that when you first had a problem with this kind of thought or worry?

DK, UNDER 40.....01
DK, 40 OR OVER.....95
STILL DK.....98

R325. DOES R321 MEET CRITERIA (=05)?

NO.....01
YES.....05 → (R334)

R326. Other unpleasant thoughts that keep bothering some people, even when they know they are silly, are that their hands are dirty or have germs on them, no matter how much they wash them, or that relatives who are away have been hurt or killed. Have you ever had any kind of <u>unreasonable thought</u> like that?

NO.....01 → (R334)
YES.....05
DK.....94 → (R334)
RE.....97

R327. Was this only for a short time or did these thoughts keep coming into your mind over a period of several weeks?

LESS THAN 3 WEEKS.....01 → (R334)
3 OR MORE WEEKS.....05
DK.....94 → (R334)
RE.....97

1	2		5

R328. Did these thoughts keep coming into your mind no matter how hard you tried to get rid of them?

IF YES PROBE: Could you give me an example of your kinds of unreasonable thoughts?

EXAMPLE: _____

SX = UNREASONABLE THOUGHT

CRITERIA	SEVERITY	ONSET	RECENCY

NO.....01 → (R334)

BLW CRIT...02

CRITERIA...05
RE.....97 → (R334)

NO.....01

MD.....02
OTPROF...03
MEDS.....04
INTER....05
RE.....97

-2 WEEKS.....01.....01
-1 MONTH.....02.....02
-6 MONTHS.....03.....03
-1 YEAR.....04.....04
-3 YEARS.....05.....05
+3 YEARS.....06↓.....06↓
DK ±3 YEARS....94|.....94|
RE.....97|.....97|
↓ ↓

RECORD AGE | | | | |

R329. IN R328, IS ONSET CODED "94," OR AGE OF ONSET CODED "DK"?

NO.....01 → (R334)
YES, 94 OR DK.....05

R330. IF RESPONDENT IS UNDER 40 CODE "01" IN R331 AND SKIP TO QUESTION R334.

R331. Were you under 40 or older than that when you first had a problem with this kind of thought or worry?

DK, UNDER 40.....01
DK, 40 OR OVER.....95
STILL DK.....98

R332. THERE IS NO R332.

R333. THERE IS NO R333.

1 2 5

R334. Some people have problems with feeling that they have to do something over and over again even though they know it is really foolish--but they can't resist doing it--things like washing their hands again and again or going back several times to be sure they've locked a door or turned off the stove. Have you ever had to do something like that over and over?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R339)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05	MD.....02	-6 MONTHS.....03	03
RE.....97 → (R339)	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ±3 YEARS....94	94
		RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R335. IN R334, IS ONSET CODED "94" OR AGE OF ONSET CODED "DK"?

NO.....01 → (R338)
YES (94 OR DK).....05

R336. IF RESPONDENT IS UNDER 40 CODE "01" IN R337 AND SKIP TO QUESTION R338.

R337. Were you less than 40, or older than that when you first had to check on things?

DK, UNDER 40.....01
DK, 40 OR OVER.....95
STILL DK.....98

R338. DOES R334 MEET CRITERIA (=05)?

NO.....01
YES.....05 → (R344)

1 2 5

R339. Was there a time when you always had to do something--like getting dressed perhaps--in a certain order, and had to start all over again if you got the order wrong?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R345)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05	MD.....02	-6 MONTHS.....03	03
RE.....97 → (R345)	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06↓	.....06↓
	RE.....97	DK ±3 YEARS....94	94
		RE.....97	97

RECORD AGE

R340. IN R339, IS ONSET CODED "94" OR AGE OF ONSET CODED "DK"?

NO.....01 → (R343)
YES (94 OR DK).....05

R341. IF RESPONDENT IS UNDER 40 CODE "01" IN R342 AND SKIP TO QUESTION R343.

R342. Were you less than 40 or older than that when you first had to do things in a special order?

DK, UNDER 40.....01
DK, 40 OR OVER.....95
STILL DK.....98

R343. DOES R339 MEET CRITERIA (=05)?

NO.....01 → (R345)
YES.....05

R344. Did you have to do this only for a short time, or did you feel you had to do this over a period of several weeks?

SHORT TIME.....01
SEVERAL WEEKS.....05
DK.....94
RE.....97

1 2 5

R345. Has there ever been a period of several weeks when you felt you had to **count something**, like the squares in a tile floor, and couldn't resist doing it even when you tried to?

CRITERIA	SEVERITY	ONSET	RECENCY
NO.....01 → (R351)			
BLW CRIT...02	NO.....01	-2 WEEKS.....01	01
		-1 MONTH.....02	02
CRITERIA...05	MD.....02	-6 MONTHS.....03	03
RE.....97 → (R351)	OTPROF...03	-1 YEAR.....04	04
	MEDS.....04	-3 YEARS.....05	05
	INTER....05	+3 YEARS.....06	06
	RE.....97	DK ±3 YEARS....94	94
		RE.....97	97
		RECORD AGE	

R346. IN R345, IS ONSET CODED "94" OR AGE OF ONSET CODED "DK"?

NO.....01 → (R351)
YES (94 OR DK).....05

R347. IF RESPONDENT IS UNDER 40 CODE "01" IN R348 AND SKIP TO QUESTION R351.

R348. Were you less than 40 or older than that when you first had to count things?

DK, UNDER 40.....01
DK, 40 OR OVER.....95
STILL DK.....98

R349. THERE IS NO R349.

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R350. THERE IS NO R350.

R351. **HAND R CARD R-351.**
Now I'd like to ask about your experience with drugs. Have you ever used any drug on this list to get high or without a prescription, or more than was prescribed--that is, on your own?

NO.....01
YES.....05 → (R353)
DK.....94 → (R388)
RE.....97

"TAKING AS PRESCRIBED" REFERS TO TAKING MEDICATION AS PRESCRIBED BY A DOCTOR, OR AS PRESCRIBED BY PACKAGE DIRECTIONS FOR OVER-THE-COUNTER MEDICATIONS. "TAKING WITHOUT A PRESCRIPTION" REFERS TO TAKING PRESCRIPTION DRUGS OR MEDICINES WITHOUT A PRESCRIPTION OR TAKING ANY MEDICATION MORE THAN IS PRESCRIBED BY DIRECTIONS.

R352. Have you taken any other drugs on your own either to get high or for other mental effects?

NO.....01 → (R388)
YES.....05
DK.....94 → (R388)
RE.....97

R353. How old were you when you first took (this drug/any of these drugs) on your own?

AGE..... ☐☐
DK/UNDER 15.....01 → (R355)
DK/OVER 15.....95 → (R356)
RE.....97
STILL DK.....98 → (R356)

IF DK, ASK: Were you younger or older than 15?
IF UNDER 15, CODE 01.
IF OVER 15, CODE 95.
IF STILL DK, CODE 98.

R354. IN R353, IS AGE GIVEN 15 OR MORE?

AGE LESS THAN 15.....01
AGE 15 OR MORE.....05 → (R356)

R355. Had you tried any of these drugs more than once before you were 15?

NO.....01
YES.....05
DK.....94
RE.....97

R356. START USING TALLY SHEET 8, PART I HERE. TURN FLASH CARDS TO R-358.
NOTE: IF R CAN'T REMEMBER SPECIFIC OCCASION CODE NO ("01").

R357. Have you ever used (this drug/one of these drugs) on your own more than 5 times in your life?

NO.....01 → (R388)
YES.....05
RE.....97

R358. Have you used marijuana, hashish, pot, or grass on your own more than 5 times in your life? CODE RESPONSE IN THE 1ST COLUMN BELOW.

IF YES: CHECK BOX ON TALLY SHEET. (PROMPT: Which one(s)?), CIRCLE EXACT DRUG(S) ON TALLY SHEET, THEN ASK:

When was the first time you used (marijuana/hashish, etc.) on your own? CODE IN SECOND COLUMN BELOW.

When was the last time you used (marijuana/hashish, etc.) on your own? CODE IN THIRD COLUMN BELOW.

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used (marijuana, hashish, etc.) during the past 12 months on your own? CODE IN FREQUENCY COLUMN BELOW.

USED > 5 TIMES	USE:	1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R359)				
YES.....05*	-2 WEEKS	01	01	EVERY DAY.....01
RE.....97	-1 MONTH	02	02	5-6 TIMES PER WEEK.....02
	-6 MONTHS	03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR	04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS	05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS	06	06	ABOUT ONCE PER MONTH.....06
	DK +3 YEARS	94	94	< ONCE PER MONTH.....07
	RE	97	97	DK.....94
				RE.....97
	RECORD AGE	[ ][ ]	[ ][ ]	

R359. Have you used amphetamines, stimulants, uppers, or speed on your own more than 5 times in your life? CODE RESPONSE IN 1ST COLUMN BELOW.

IF YES: CHECK BOX ON TALLY SHEET. (PROMPT: Which one(s)?), CIRCLE EXACT DRUG(S) ON TALLY SHEET, THEN ASK:

When was the first time you used (amphetamines, etc.) on your own? CODE IN SECOND COLUMN BELOW.

When was the last time you used (amphetamines, etc.) on your own? CODE IN THIRD COLUMN BELOW.

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used (amphetamines, etc.) during the past 12 months on your own? CODE IN FREQUENCY COLUMN BELOW.

USED > 5 TIME	USE:	1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R360)				
YES.....05*	-2 WEEKS	01	01	EVERY DAY.....01
RE.....97	-1 MONTH	02	02	5-6 TIMES PER WEEK.....02
	-6 MONTHS	03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR	04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS	05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS	06	06	ABOUT ONCE PER MONTH.....06
	DK ±3 YEARS	94	94	< ONCE PER MONTH.....07
	RE	97	97	DK.....94
		↓	↓	RE.....97
	RECORD AGE	[ ][ ]	[ ][ ]	

R360. Have you used barbiturates, sedatives, downers, sleeping pills, Seconal, or Quaaludes on your own more than 5 times in your life? CODE RESPONSE IN 1ST COLUMN BELOW.

IF YES: CHECK BOX ON TALLY SHEET. (PROMPT: Which one(s)?), CIRCLE EXACT DRUG(S) ON TALLY SHEET, THEN ASK:

When was the first time you used (barbiturates, etc.) on your own? CODE IN SECOND COLUMN BELOW.

When was the last time you used (barbiturates, etc.) on your own? CODE IN THIRD COLUMN BELOW.

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used (barbiturates, etc.) during the past 12 months on your own? CODE IN FREQUENCY COLUMN BELOW.

USED > 5 TIME	USE:	1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R361)				
YES.....05*	-2 WEEKS	01	01	EVERY DAY.....01
RE.....97	-1 MONTH	02	02	5-6 TIMES PER WEEK.....02
	-6 MONTHS	03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR	04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS	05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS	06	06	ABOUT ONCE PER MONTH.....06
	DK ±3 YEARS	94	94	< ONCE PER MONTH.....07
	RE	97	97	DK.....94
				RE.....97
	RECORD AGE	☐☐	☐☐	

R361. Have you used tranquilizers, valium, or librium on your own more than 5 times in your life? **CODE RESPONSE IN 1ST COLUMN BELOW.**

IF YES: **CHECK BOX ON TALLY SHEET.** (PROMPT: Which one(s)?), **CIRCLE EXACT DRUG(S) ON TALLY SHEET, THEN ASK:**

When was the first time you used (tranquilizers, etc.) on your own? **CODE IN SECOND COLUMN BELOW.**

When was the last time you used (tranquilizers, etc.) on your own? **CODE IN THIRD COLUMN BELOW.**

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used (tranquilizers, etc.) during the past 12 months on your own? **CODE IN FREQUENCY COLUMN BELOW.**

USED > 5 TIME	USE:	1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R362)				
YES.....05*	-2 WEEKS	01	01	EVERY DAY.....01
RE.....97	-1 MONTH	02	02	5-6 TIMES PER WEEK.....02
	-6 MONTHS	03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR	04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS	05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS	06	06	ABOUT ONCE PER MONTH.....06
	DK ±3 YEARS	94	94	< ONCE PER MONTH.....07
	RE	97	97	DK.....94
				RE.....97
	RECORD AGE			

R362. Have you used cocaine or coke <or crack> on your own more than 5 times in your life? **CODE RESPONSE IN 1ST COLUMN BELOW.**

IF YES: **CHECK BOX ON TALLY SHEET.** (PROMPT: Which one(s)?), **CIRCLE EXACT DRUG(S) ON TALLY SHEET, THEN ASK:**

When was the first time you used (cocaine/coke/<crack>) on your own? **CODE IN SECOND COLUMN BELOW.**

When was the last time you used (cocaine/coke/<crack>) on your own? **CODE IN THIRD COLUMN BELOW.**

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used (cocaine/coke/<crack>) during the past 12 months on your own? **CODE IN FREQUENCY COLUMN BELOW.**

USED > 5 TIME	USE:	1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R363)				
YES.....05*	-2 WEEKS	01	01	EVERY DAY.....01
RE.....97	-1 MONTH	02	02	5-6 TIMES PER WEEK.....02
	-6 MONTHS	03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR	04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS	05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS	06	06	ABOUT ONCE PER MONTH.....06
	DK +3 YEARS	94	94	< ONCE PER MONTH.....07
	RE	97	97	DK.....94
				RE.....97
	RECORD AGE	☐☐	☐☐	

R363. Have you used heroin on your own more than 5 times in your life? CODE RESPONSE IN 1ST COLUMN BELOW.

IF YES: CHECK BOX ON TALLY SHEET AND ASK:

When was the first time you used heroin on your own? CODE IN SECOND COLUMN BELOW.

When was the last time you used heroin on your own? CODE IN THIRD COLUMN BELOW.

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used heroin on your own during the past 12 months on your own? CODE IN FREQUENCY COLUMN BELOW.

USED > 5 TIME	USE:	1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R364)				
YES.....05*	-2 WEEKS	01	01	EVERY DAY.....01
RE.....97	-1 MONTH	02	02	5-6 TIMES PER WEEK.....02
	-6 MONTHS	03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR	04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS	05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS	06	06	ABOUT ONCE PER MONTH.....06
	DK ±3 YEARS	94	94	< ONCE PER MONTH.....07
	RE	97	97	DK.....94
				RE.....97
	RECORD AGE	☐☐	☐☐	

R364. Have you used opiates other than heroin (codeine, Demerol, morphine, methadone, Darvon, opium) on your own more than 5 times in your life? **CODE RESPONSE IN 1ST COLUMN BELOW.**

IF YES: **CHECK BOX ON TALLY SHEET.** (PROMPT: Which one(s)?), **CIRCLE EXACT DRUG(S) ON TALLY SHEET, THEN ASK:**

When was the first time you used (other opiates) on your own? **CODE IN SECOND COLUMN BELOW.**

When was the last time you used (other opiates) on your own? **CODE IN THIRD COLUMN BELOW.**

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used (other opiates) during the past 12 months on your own? **CODE IN FREQUENCY COLUMN BELOW.**

USED > 5 TIME	USE: 1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R365)			
YES.....05*	-2 WEEKS.....01	01	EVERY DAY.....01
RE.....97	-1 MONTH.....02	02 →	5-6 TIMES PER WEEK.....02
	-6 MONTHS.....03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR.....04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS.....05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS.....06	06	ABOUT ONCE PER MONTH.....06
	DK ±3 YEARS.....94	94	< ONCE PER MONTH.....07
	RE.....97	97	DK.....94
			RE.....97
	RECORD AGE		

R365. Have you used psychedelics (LSD, mescaline, peyote, psilocybin, DMT, PCP) on your own more than 5 times in your life? CODE RESPONSE IN 1ST COLUMN BELOW.

IF YES: CHECK BOX ON TALLY SHEET. (PROMPT: Which one(s)?), CIRCLE EXACT DRUG(S) ON TALLY SHEET, THEN ASK:

When was the first time you used (psychedelics, LSD, etc.) on your own? CODE IN SECOND COLUMN BELOW.

When was the last time you used (psychedelics, LSD, etc.) on your own? CODE IN THIRD COLUMN BELOW.

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used (psychedelics, LSD, etc.) during the past 12 months on your own? CODE IN FREQUENCY COLUMN BELOW.

USED > 5 TIME	USE:	1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R366)				
YES.....05*	-2 WEEKS	01	01	EVERY DAY.....01
RE.....97	-1 MONTH	02	02	5-6 TIMES PER WEEK.....02
	-6 MONTHS	03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR	04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS	05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS	06	06	ABOUT ONCE PER MONTH.....06
	DK ±3 YEARS	94	94	< ONCE PER MONTH.....07
	RE	97	97	DK.....94
				RE.....97
	RECORD AGE	[ ][ ]	[ ][ ]	

R366. Have you used any other drug(s) on your own more than 5 times in your life? CODE RESPONSE IN 1ST COLUMN BELOW.

IF YES: What are they? LIST BELOW AND ON TALLY SHEET, THEN ASK:

When was the first time you used (DRUG(S)) on your own? CODE IN SECOND COLUMN BELOW.

When was the last time you used (DRUG(S)) on your own? CODE IN THIRD COLUMN BELOW.

IF "LAST USE" CODED 01-04: REFER R TO CARD R-358 AND ASK:

How often have you used (DRUG(S)) during the past 12 months on your own? CODE IN FREQUENCY COLUMN BELOW.

OTHER DRUGS USED:

_____

_____

USED > 5 TIME	USE:	1ST	LAST	FREQUENCY USED LAST 12 MOS.
NO.....01 → (R367)				
YES.....05*	-2 WEEKS	01	01	EVERY DAY.....01
RE.....97	-1 MONTH	02	02	5-6 TIMES PER WEEK.....02
	-6 MONTHS	03	03	3-4 TIMES PER WEEK.....03
	-1 YEAR	04	04	1-2 TIMES PER WEEK.....04
	-3 YEARS	05	05	2-3 TIMES PER MONTH.....05
	+3 YEARS	06	06	ABOUT ONCE PER MONTH.....06
	DK ±3 YEARS	94	94	< ONCE PER MONTH.....07
	RE	97	97	DK.....94
				RE.....97
	RECORD AGE			

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R367. START USING TALLY SHEET 8, PART II, HERE.

R368. Have you ever used any of these drugs every day for one week or more?

IF YES, ASK:

ONSET: When was the first time you used any of these drugs every day for one week or more?

RECENCY: When was the last time you used any of these drugs every day for one week or more?

			ONSET	RECENCY
NO.....01	→	(R369)		
YES.....05			-2 WEEKS.....01	01
RE.....97			-1 MONTH.....02	02
			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R368A. IF YES, ASK: Have you used (ASK ABOUT EACH DRUG CHECKED ON TALLY SHEET 8, PART I.) every day for at least one week?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH YES IF NO "03" UNDER "TYPE USE":

CODE TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II. ASK 2. BELOW.

FOR EACH YES, IF "TYPE USE" INCLUDES "03," ASK 1. AND 2. BELOW.

1. When you were taking (DRUG) every day, were you taking it on your own, or only as prescribed by a doctor (Rx)?
BOTH = OWN. CODE TYPE OF USE BELOW AND IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

2. HAND R CARD R-368.
Which of these best describes the longest period you ever used (DRUG) every day? CODE FREQUENCY BELOW.

		1. TYPE USE				2. FREQUENCY		
		NO	RX	BOTH/ OWN	RE	1 WK	2 WKS	1 MO
	Marijuana, hashish, pot, grass (TYPE USE = 05)	01		05*	97	01	02	03
R368B.	Amphetamines, stimulants, uppers, speed	01	03	05*	97	01	02	03
R368C.	Barbiturates, sedatives, downers, sleeping pills, Seconal, Quaaludes	01	03	05*	97	01	02	03
R368D.	Tranquilizers, Valium, Librium	01	03	05*	97	01	02	03
R368E.	Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97	01	02	03
R368F.	Heroin (TYPE USE = 05)	01		05*	97	01	02	03
R368G.	Opiates other than Heroin (codeine, Demerol, morphine, methadone, Darvon, opium)	01	03	05*	97	01	02	03
R368H.	Psychedelics (LSD, mescaline, peyote, psilocybin, DMT, PCP) (TYPE USE = 05)	01		05*	97	01	02	03
R368I.	Any other (drug)? LIST:	01	03	05*	97	01	02	03

R369. Have you ever used any of these drugs or any other illicit drug enough so that you felt like you needed it or were dependent on it?

IF YES, ASK:

ONSET: When was the first time you felt like you needed (or were dependent on) any of these drugs? **CODE.**

RECENCY: When was the last time you felt like you needed (or were dependent on) any of these drugs? **CODE.**

			ONSET	RECENCY
NO.....01	→	(R370)		
YES.....05			-2 WEEKS.....01	01
RE.....97			-1 MONTH.....02	02
			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97
			↓	↓
			RECORD AGE [ ][ ]	[ ][ ]

R369A. Have you ever felt you needed or were dependent on (ASK ABOUT EACH DRUG ON TALLY SHEET 8, PART I).

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you felt you needed or were dependent on (DRUG), were you taking it on your own or only as prescribed by a doctor (RX)?
BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R369B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R369C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R369D. Tranquilizers/Valium/Librium	01	03	05*	97
R369E. Cocaine, coke,<crack> (TYPE USE = 05)	01		05*	97
R369F. Heroin (TYPE USE = 05)	01		05*	97
R369G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R369H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R369I. Any other drugs?	01	03	05*	97

LIST: _____

_____

_____

R370. Have you ever spent a lot of time thinking about taking any of these drugs, or making sure you had them available?

IF YES, ASK:

ONSET: When was the first time you spent a lot of time thinking about taking any of these drugs? CODE.

RECENCY: When was the last time you spent a lot of time thinking about taking any of these drugs? CODE.

			ONSET	RECENCY
NO.....01	→	(R371)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK +3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R370A. Have you ever spent a lot of time thinking about taking (DRUG)?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you spent a lot of time thinking about taking (DRUG), were you taking it on your own or only as prescribed by a doctor (RX)? BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R370B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R370C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R370D. Tranquilizers/Valium/Librium	01	03	05*	97
R370E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R370F. Heroin (TYPE USE = 05)	01		05*	97
R370G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R370H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R370I. Any other drugs?	01	03	05*	97

LIST: _____

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R371. Have you ever found that when you started using any of these drugs you ended up taking much more than you thought you would--or over a longer period of time than you thought?

IF YES, ASK:

ONSET: When was the first time you took more than you thought you would of any of these drugs? CODE.

RECENCY: When was the last time you took more than you thought you would of any of these drugs? CODE.

			ONSET	RECENCY
NO.....01	→	(R372)		
YES.....05			-2 WEEKS.....01	01
RE.....97			-1 MONTH.....02	02
			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97
			RECORD AGE	

R371A. Have you ever found that when you started using (DRUG) you ended up taking much more than you thought you would or over a longer period of time than you thought?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you ended up taking more (DRUG) than you thought, were you taking it on your own or only as prescribed by a doctor (RX)? BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R371B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R371C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R371D. Tranquilizers/Valium/Librium	01	03	05*	97
R371E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R371F. Heroin (TYPE USE = 05)	01		05*	97
R371G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R371H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R371I. Any other drugs?	01	03	05*	97

LIST: _____

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R372. Have you ever <wanted or> tried to cut down on any <of these> drugs, but found you couldn't do it?

IF YES, ASK:

ONSET: When was the first time you (wanted to/tried), but couldn't cut down on any of these drugs? CODE.

RECENCY: When was the last time you (wanted to/tried), but couldn't cut down on any of these drugs? CODE.

			ONSET	RECENCY
NO.....01	→	(R373)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06↓	.....06↓
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R372A. Have you ever <wanted to> or tried to cut down on (DRUG)?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you wanted to or tried to cut down on (DRUG), were you taking it on your own or only as prescribed by a doctor (RX)?
BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R372B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R372C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R372D. Tranquilizers/Valium/Librium	01	03	05*	97
R372E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R372F. Heroin (TYPE USE = 05)	01		05*	97
R372G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R372H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R372I. Any other drugs?	01	03	05*	97

LIST: _____

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R373. Did you ever find you <u>needed larger amounts</u> of these drugs to get an effect--or that you could no longer get high on the amount you used to use?

IF YES, ASK:

ONSET: When was the <u>first</u> time you needed larger amounts of any of these drugs to get an effect? CODE.

RECENCY: When was the <u>last</u> time you needed larger amounts of any of these drugs to get an effect? CODE.

			ONSET	RECENCY
NO.....01	→	(R374)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R373A. Did you ever need larger amounts of (DRUG)?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you needed larger amounts of (DRUG), were you taking it on your own or only as prescribed by a doctor (RX)?
BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R373B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R373C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R373D. Tranquilizers/Valium/Librium	01	03	05*	97
R373E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R373F. Heroin (TYPE USE = 05)	01		05*	97
R373G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R373H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R373I. Any other drugs?	01	03	05*	97

LIST: _____

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R374. Have you ever had withdrawal symptoms--that is, have you ever felt sick because you stopped or cut down on any of these drugs?

STOPPING INCLUDES NOT USING FOR A FEW HOURS OR OVERNIGHT.

IF YES, ASK:

ONSET: When was the first time you felt sick because you cut down on your use of any of these drugs? **CODE.**

RECENCY: When was the last time you felt sick because you cut down on your use of any of these drugs? **CODE.**

			ONSET	RECENCY
NO.....01	→	(R375)		
YES.....05				
RE.....97				
			-2 WEEKS.....01	01
			-1 MONTH.....02	02
			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R374A. Did (DRUG) make you sick because you stopped or cut down?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When (DRUG) made you sick, were you taking it on your own or only as prescribed by a doctor (RX)?
BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R374B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R374C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R374D. Tranquilizers/Valium/Librium	01	03	05*	97
R374E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R374F. Heroin (TYPE USE = 05)	01		05*	97
R374G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R374H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R374I. Any other drugs?	01	03	05*	97

LIST: _____

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R375. After not taking any of these drugs for a few hours or more did you often take them to keep yourself from getting sick--or when you were feeling sick so that you would feel better?

IF YES, ASK:

ONSET: When was the first time you took any of these drugs to keep from getting sick or to feel better? CODE.

RECENCY: When was the last time you took any of these drugs to keep from getting sick or to feel better? CODE.

			ONSET	RECENCY
NO.....01	→	(R376)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R375A. Have you ever taken (DRUG) to keep yourself from getting sick?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you took (DRUG) to keep from getting sick, were you taking it on your own or only as prescribed by a doctor (RX)?
BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R375B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R375C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R375D. Tranquilizers/Valium/Librium	01	03	05*	97
R375E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R375F. Heroin (TYPE USE = 05)	01		05*	97
R375G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R375H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R375I. Any other drugs?	01	03	05*	97

LIST: _____

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R376. Did you have any health problems like fits, an accidental overdose, a persistent cough, or any infection as a result of using any of these drugs?

IF YES, ASK:

ONSET: When was the first time you had health problems as a result of using any of these drugs? **CODE.**

RECENCY: When was the last time you had health problems as a result of using any of these drugs? **CODE.**

			ONSET	RECENCY
NO.....01	→	(R377)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R376A. Did (DRUG) cause health problems?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When (DRUG) caused you health problems, were you taking it on your own or only as prescribed by a doctor (RX)?
BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R376B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R376C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R376D. Tranquilizers/Valium/Librium	01	03	05*	97
R376E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R376F. Heroin (TYPE USE = 05)	01		05*	97
R376G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R376H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R376I. Any other drugs?	01	03	05*	97

LIST: _____

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R377. Have you ever kept taking any of these drugs when you knew you had a physical problem or illness that might be made worse by using them?

IF YES, ASK:

ONSET: When was the first time you kept taking any of these drugs although you had a physical illness they might make worse? CODE.

RECENCY: When was the last time you kept taking any of these drugs although you had a physical illness they might make worse? CODE.

			ONSET	RECENCY
NO.....01	→	(R378)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R377A. Did you ever take (DRUG) although you had a physical illness they might make worse?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you took (DRUG) despite a physical illness, were you taking it on your own or only as prescribed by a doctor (RX)?
BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R377B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R377C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R377D. Tranquilizers/Valium/Librium	01	03	05*	97
R377E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R377F. Heroin (TYPE USE = 05)	01		05*	97
R377G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R377H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R377I. Any other drugs?	01	03	05*	97

LIST: _____

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R378. Has there ever been a period when you spent so much time using any of these drugs that you had <u>little time</u> for your <u>family</u>, friends, or hobbies?

IF YES, ASK:

ONSET: When was the <u>first</u> time you had little time for these activities because you were using drugs? CODE.

RECENCY: When was the <u>last</u> time you had little time for these activities because you were using drugs? CODE.

			ONSET	RECENCY
NO.....01	→	(R379)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06↓	.....06↓
			DK ±3 YEARS.....94	94
			RE.....97	97
			↓	↓
			RECORD AGE	

R378A. Have you spent so much time using (DRUG) that you had little time for your family, friends, or hobbies?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you had little time for family, friends, or hobbies because of (DRUG), were you taking it on your own or only as prescribed by a doctor (RX)? BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R378B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R378C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R378D. Tranquilizers/Valium/Librium	01	03	05*	97
R378E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R378F. Heroin (TYPE USE = 05)	01		05*	97
R378G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R378H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R378I. Any other drugs?	01	03	05*	97

LIST: _____

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R379. Did you ever have a time when you were intoxicated or high from any drugs while you were doing something important, like being at school or work or taking care of children--or when you missed something important because you were high or intoxicated?

IF YES, ASK:

ONSET: When was the first time you were intoxicated or high on drugs when you were doing something important? **CODE.**

RECENCY: When was the last time you were intoxicated or high on drugs when you were doing something important? CODE.

			ONSET	RECENCY
NO.....01	→	(R380)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R379A. Were you intoxicated or high on (DRUG) when you were doing something important?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When you were high on (DRUG) while doing something important, were you taking it on your own or only as prescribed by a doctor (RX)? BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R379B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R379C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R379D. Tranquilizers/Valium/Librium	01	03	05*	97
R379E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R379F. Heroin (TYPE USE = 05)	01		05*	97
R379G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R379H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R379I. Any other drugs?	01	03	05*	97

LIST: _____

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R380. Did any of these drugs cause you considerable problems, with your family, friends, on the job, at school, or with the police?

IF YES, ASK:

ONSET: When was the first time any of these drugs caused you such problems? CODE.

RECENCY: When was the last time any of these drugs caused you such problems? CODE.

			ONSET	RECENCY
NO.....01	→	(R381)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R380A. Did (DRUG) cause you considerable problems with family, friends, job, school, or police?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When (DRUG) caused you considerable problems with these individuals, were you taking it on your own or only as prescribed by a doctor (RX)? BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R380B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R380C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R380D. Tranquilizers/Valium/Librium	01	03	05*	97
R380E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R380F. Heroin (TYPE USE = 05)	01		05*	97
R380G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R380H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R380I. Any other drugs?	01	03	05*	97

LIST: _____

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R381. Did you have any emotional or psychological problems from using drugs--such as feeling crazy or paranoid or depressed or uninterested in things <or have loss of memory>?

IF YES, ASK:

ONSET: When was the first time you had emotional or psychological problems from using drugs? CODE.

RECENCY: When was the last time you had emotional or psychological problems from using drugs? CODE.

			ONSET	RECENCY
NO.....01	→	(R382)	-2 WEEKS.....01	01
YES.....05			-1 MONTH.....02	02
RE.....97			-6 MONTHS.....03	03
			-1 YEAR.....04	04
			-3 YEARS.....05	05
			+3 YEARS.....06	06
			DK ±3 YEARS.....94	94
			RE.....97	97

RECORD AGE [ ][ ] [ ][ ]

R381A. Did (DRUG) give you any emotional or psychological problems?

FOR EACH NO, CIRCLE 01 UNDER "TYPE USE."

FOR EACH "YES," IF NO "03" CODE UNDER "TYPE USE":

CODE TYPE USE = 05, AND RECORD ON TALLY SHEET 8, PART II.

FOR EACH "YES," IF "TYPE USE" INCLUDES "03," ASK:

When (DRUG) gave you emotional problems, were you taking it on your own or only as prescribed by a doctor (RX)?
BOTH = OWN. CODE TYPE USE. IF TYPE USE = 05, RECORD ON TALLY SHEET 8, PART II.

	Type Use			
	NO	RX	BOTH/ OWN	RE
Marijuana/hashish/pot/grass (TYPE USE = 05)	01		05*	97
R381B. Amphetamines/stimulants/uppers/speed	01	03	05*	97
R381C. Barbiturates/sedatives/downers/ sleeping pills/Seconal/Quaaludes	01	03	05*	97
R381D. Tranquilizers/Valium/Librium	01	03	05*	97
R381E. Cocaine, coke, <crack> (TYPE USE = 05)	01		05*	97
R381F. Heroin (TYPE USE = 05)	01		05*	97
R381G. Opiates other than heroin (codeine/ Demerol/morphine/methadone/Darvon/ opium)	01	03	05*	97
R381H. Psychedelics (LSD/mescaline/peyote/ psilocybin/DMT/PCP) (TYPE USE = 05)	01		05*	97
R381I. Any other drugs?	01	03	05*	97

LIST: _____

_____

_____

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 8, PART II.

R382. ARE ANY DRUGS CHECKED?

NO.....01 → (R388)
YES.....05

R383. Let's go over the experiences you told me you had with drugs such as (READ PROBLEMS CHECKED ON TALLY SHEET 8, PART II FOR ANY DRUGS). Did you ever tell a doctor that these experiences were causing problems for you?

NO.....01
YES.....05 → (R387A)
DK.....94
RE.....97

R384. Did you talk to any other professional about a problem with drugs?

NO.....01
YES.....05 → (R387A)
DK.....94
RE.....97

R385. Did you use medication more than once for a problem with drugs?

NO.....01
YES.....05 → (R387A)
DK.....94
RE.....97

R386. Did any problem with drugs interfere with your life or activities a lot?

NO.....01
YES.....05
DK.....94
RE.....97

R387A. REVIEW TALLY SHEET 8, PARTS I AND II TO DETERMINE DRUGS WHICH ARE CHECKED AND/OR FOR WHICH PROBLEMS ARE LISTED:

FOR DRUGS CHECKED IN PART I WITH NO PROBLEMS LISTED IN PART II, CIRCLE "00" BELOW (FOR DRUGS NOT CHECKED IN PART I, LEAVE BLANK).
FOR EACH DRUG WITH ONE OR MORE PROBLEMS, ASK:

When was the first time you had (this/any of these) problems/experiences with (DRUG)? CODE REPLY.

When was the last time you had (this/any of these) problems/experiences with (DRUG)? CODE REPLY.

		FIRST TIME HAD PROBLEM/EXPERIENCE:								LAST TIME HAD PROBLEM/EXPERIENCE:						
	NO PRB	-2 WKS	-1 MO	-6 MOS	-1 YR	1+ YR	DK± 1 YR	RE		-2 WKS	-1 MO	-6 MOS	-1 YR	1+ YRS	DK± 1 YR	RE
Marijuana, hashish, pot, grass	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
						↓								↓		
						RECORD AGE ☐☐								RECORD AGE ☐☐		
R387B. Amphetamines, stimulants, uppers, speed	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
						↓								↓		
						RECORD AGE ☐☐								RECORD AGE ☐☐		
R387C. Barbiturates, sedatives, downers, sleeping pills, Seconal, Quaaludes	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
						↓								↓		
						RECORD AGE ☐☐								RECORD AGE ☐☐		
R387D. Tranquilizers, Valium, Librium	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
						↓								↓		
						RECORD AGE ☐☐								RECORD AGE ☐☐		
R387E. Cocaine, coke, <crack>	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
						↓								↓		
						RECORD AGE ☐☐								RECORD AGE ☐☐		
R387F. Heroin	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
						↓								↓		
						RECORD AGE ☐☐								RECORD AGE ☐☐		
R387G. Opiates other than Heroin (codeine, Demerol, morphine methadone, Darvon, opium)	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
						↓								↓		
						RECORD AGE ☐☐								RECORD AGE ☐☐		
R387H. Psychedelics (LSD, mescaline, peyote, psilocybin, DMT, PCP)	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
						↓								↓		
						RECORD AGE ☐☐								RECORD AGE ☐☐		
R387I Any others? LIST:	00	01	02	03	04	05	94	97		01	02	03	04	05	94	97
_____ _____ _____						↓								↓		
_____ _____ _____						RECORD AGE ☐☐								RECORD AGE ☐☐		

TALLY SHEET 8

Circle the drug mentioned	Part I	Part II						
	358-366 Drugs used more than five times	368 Used drugs every day for one week	369 Felt dependent on drugs	370 Thought a lot about taking	371 Taking more than you thought	372 Tried to cut down but couldn't	373 Needed larger amounts	374 Had withdrawal symptoms
A. Marijuana, hashish pot, grass	A	A	A	A	A	A	A	A
B. Amphetamines, stimulants, uppers, speed	B	B	B	B	B	B	B	B
C. Barbiturates, sedatives, downers, sleeping pills, seconal, quaaludes	C	C	C	C	C	C	C	C
D. Tranquilizers, Valium, Librium	D	D	D	D	D	D	D	D
E. Cocaine, coke, crack	E	E	E	E	E	E	E	E
F. Heroin, H, horse, brown	F	F	F	F	F	F	F	F
G. Opiates other than Heroin (Codeine, Demerol, morphine, methadone, Darvon, opium)	G	G	G	G	G	G	G	G
H. Psychedelics (LSD, mescaline, peyote, psilocybin, DMT, PCP)	H	H	H	H	H	H	H	H
I. Others *(specify)*	I	I	I	I	I	I	I	I
_____								
_____								
_____								
_____								
_____								

Circle the drug mentioned	Part I	Part II						
	358-366 Drugs used more than five times	375 Took to keep from getting sick	376 Had health problems due to drugs	377 Took despite illness	378 Kept from family, friends, hobbies	379 Took while doing something important	380 Problems with friends, job, school, police	381 Emotional or psychological problems
A. Marijuana, hashish pot, grass	A	A	A	A	A	A	A	A
B. Amphetamines, stimulants, uppers, speed	B	B	B	B	B	B	B	B
C. Barbiturates, sedatives, downers, sleeping pills, seconal, quaaludes	C	C	C	C	C	C	C	C
D. Tranquilizers, Valium, Librium	D	D	D	D	D	D	D	D
E. Cocaine, coke, crack	E	E	E	E	E	E	E	E
F. Heroin, H, horse, brown	F	F	F	F	F	F	F	F
G. Opiates other than Heroin (Codeine, Demerol, morphine, methadone, Darvon, opium)	G	G	G	G	G	G	G	G
H. Psychedelics (LSD, mescaline, peyote, psilocybin, DMT, PCP)	H	H	H	H	H	H	H	H
I. Others *(specify)*	I	I	I	I	I	I	I	I
_____								
_____								
_____								
_____								
_____								

R388. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME:	___ ___ /	___ ___	___ ___ :	___ ___	A.M. P.M.
	MONTH	DAY	HOUR	MINUTE	
RECORD BEGINNING DATE AND TIME:	___ ___ /	___ ___	___ ___ :	___ ___	A.M. P.M.
	MONTH	DAY	HOUR	MINUTE	

START USING TALLY SHEET 9, PART A.

R389. Now I'd like to ask about your life as a child. Let's begin with some questions about school. Did you ever repeat a grade?

IF YES: Did you get held back more than once?

NO.....01
ONLY ONCE.....02
MORE THAN ONCE.....05
NO SCHOOL.....06 → (R404)
DK.....94
RE.....97

R390. How were your grades in school--better than average, average, or not so good?

BETTER THAN AVERAGE.....01 } → (R393)
AVERAGE.....02 }
NOT SO GOOD.....03
DK.....94
RE.....97

R391. Did your teachers think you did about as well as you could or did they think you had the ability to do much better?

AS WELL AS COULD.....01 → (R393)
CAPABLE OF BETTER.....05
DK.....94 } → (R393)
RE.....97 }

R392. How old were you when your teachers first felt that way?

AGE.....☐☐

DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R393. Did you frequently get into trouble with the teacher or principal for misbehaving in school?

ELEMENTARY, JUNIOR HIGH, OR HIGH SCHOOL. DOES NOT INCLUDE FIGHTING.

NO.....01 → (R395)
YES.....05
DK.....94
RE.....97

R394. How old were you when you first got into trouble for misbehaving in school?

AGE.....☐☐

DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R395. Were you ever expelled or suspended from school?

ELEMENTARY, JUNIOR HIGH OR HIGH SCHOOL.

NO.....01 → (R397)
YES.....05
DK.....94 } → (R397)
RE.....97 }

R396. How old were you when you were first expelled or suspended?

AGE.....☐☐

DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R397. Did you ever play hooky from school at least twice in one year?

IF YES: Was that only in your last year in school or before that?

NO.....01 } → (R400)
ONLY LAST YEAR.....02 }
BEFORE.....05
DK.....94
RE.....97

R398. Did you play hooky as much as 5 days a year in at least two school years, not counting your last year in school?

NO.....01
YES.....05
DK.....94
RE.....97

R399. How old were you when you first played hooky?

AGE..... ☐☐

DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R400. START USING TALLY SHEET 9, PART A HERE.

R401. Did you ever get into trouble at school for fighting?

INCLUDE PHYSICAL FIGHTS ONLY

IF YES: Did that happen more than once?

NO.....01 } → (R404)
ONLY ONCE.....02 }
MORE THAN ONCE.....05*
DK.....94 } → (R404)
RE.....97 }

R402. Were you sometimes the one who started the fight?

NO.....01
YES.....05
DK.....94
RE.....97

R403. How old were you when you first got into trouble for fighting at school?

AGE.....☐☐
DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R404. Before age 18, did you ever get into trouble with the police, your parents, or neighbors because of fighting (other than for fighting at school)?

NO.....01 → (R407)
ONLY ONCE.....02 → (R406)
MORE THAN ONCE.....05*
DK.....94
RE.....97

R405. Were you sometimes the one who started the fight?

NO.....01
YES.....05
DK.....94
RE.....97

R406. At what age did you first get into trouble because of fighting (away from school)?

AGE.....☐☐
DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

INTERVIWER CHECKPOINT: REVIEW TALLY SHEET 9, PART A.

R407. IS R401 CHECKED ON TALLY SHEET 9?

NO.....01
YES.....05 → (R410)

R408. IS R404 CHECKED ON TALLY SHEET 9?

NO.....01
YES.....05 → (R410)

R409. Even though you didn't get into trouble <more than once> for fighting, did you start fights more than once before you were 15?

NO.....01
YES.....05
DK.....94
RE.....97

R410. When you were a kid, did you ever run away from home overnight?

IF YES: Did you run away more than once?

NO.....01 → (R412)
ONLY ONCE.....02
MORE THAN ONCE.....05
DK.....94
RE.....97

R411. How old were you when you first ran away from home overnight?

AGE..... ☐☐
DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R412. Not counting times when you were sick, did you ever have a problem with bed-wetting when you were older than 5?

NO.....01 → (R414)
YES.....05
DK.....94
RE.....97

R413. How old were you the last time you wet the bed at night?

AGE..... ☐☐
DK/UNDER 12.....01
DK/OVER 12.....95
RE.....97
STILL DK.....98

IF DK, ASK: Do you think it was before you were 12 or later than that?
IF BEFORE 12, CODE 01.
IF AFTER 12, CODE 95.
IF STILL DK, CODE 98.

R414. When you were a child, did you ever physically hurt or injure someone on purpose?

IF YES: Did you do it more than once?

NO.....01
ONLY ONCE.....02
MORE THAN ONCE.....05
DK.....94
RE.....97

R415. When you were a kid, did you ever set fires on purpose at home or in school?

EXCLUDE FIRES IN A STOVE OR FIREPLACE.

IF YES: Did you do it more than once?

NO.....01 → (R417)
ONLY ONCE.....02
MORE THAN ONCE.....05
DK.....94
RE.....97

R416. How old were you when you first set fires?

AGE..... ☐☐
DK/BEFORE HIGH SCHOOL.....01
DK/LATER THAN HIGH SCHOOL.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was it before you went to high school or later than that?
IF BEFORE HIGH SCHOOL, CODE 01.
IF LATER THAN THAT, CODE 95.
IF STILL DK, CODE 98.

R417. Of course, no one tells the truth all the time, but did you tell a lot of lies when you were a child or teenager?

NO.....01 → (R419)
YES.....05
DK.....94
RE.....97

R418. How old were you when you first told a lot of lies?

AGE..... ☐☐
DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R419. When you were a child, did you more than once swipe things from stores or from other children or steal from your parents or from anyone else?

EXCLUDE STEALING CANDY.

NO.....01 → (R421)
YES.....05
DK.....94
RE.....97

R420. How old were you when you first stole things?

AGE..... ☐☐
DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R421. When you were a kid, did you ever intentionally damage someone's car or do anything else to destroy or severely damage someone else's property?

NO.....01 → (R423)
YES.....05
DK.....94
RE.....97

R422. How old were you when you first did that?

AGE..... ☐☐
DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R423. Were you ever arrested <or charged> as a juvenile?

NO.....01
YES.....05
DK.....94
RE.....97

R424. Did you ever have to go before juvenile authorities, including for a complaint or petition?

IF YES: Were you sent to (did you appear in) juvenile court?

NO.....01
YES, JUVENILE AUTHORITIES, NOT COURT.....02 → (R427)
YES, JUVENILE COURT.....05
DK.....94
RE.....97

R425. THERE IS NO R425.

R426. When you were growing up, did you ever have any contact with the police or legal authorities for something they thought you had done, not including trouble with parking tickets?

NO.....01 → (R428)
YES.....05
DK.....94
RE.....97

R427. How old were you the first time (you had contact with the police or authorities/you were arrested as a juvenile or sent to juvenile court)?

AGE..... ☐☐

DK/UNDER 15.....01
DK/OVER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R428. When you were a teenager, did your friends ever get into trouble with school or legal authorities?

NO.....01 → (R431)
YES.....05
DK.....94
RE.....97

R429. In general, how often did your friends get into trouble--very often, often, sometimes, or rarely?

VERY OFTEN.....01
OFTEN 02
SOMETIMES.....03
RARELY.....04
DK.....94
RE.....97

R430. THERE IS NO R430.

R431. START USING TALLY SHEET 9, PART B FOR ITEMS THAT MEET CRITERIA (=05*).

R432. Have you ever been arrested since you were 18 for anything other than traffic violations?

IF YES: Have you been arrested more than once?

IF VOLUNTEERS NO CONVICTION, CODE 01.

NO.....01 → (R438)
ONLY ONCE.....02 → (R435)
MORE THAN ONCE.....05*
DK.....94 → (R438)
RE.....97

R433. How many times?

TIMES

MORE THAN 992.....993
DK.....994
RE.....997

R434. How old were you the first time you were arrested since you were 18?

AGE

DK.....94
RE.....97

R435. When was the (most recent) time that you were arrested?

CODE MOST RECENT TIME POSSIBLE.

WITHIN LAST TWO WEEKS.....01
WITHIN LAST MONTH.....02
WITHIN LAST 6 MONTHS.....03 → (R437)
WITHIN LAST YEAR.....04
WITHIN LAST 3 YEARS.....05
MORE THAN 3 YEARS AGO.....06
DK ± 3 YEARS.....94 → (R438)
RE.....97

R436. How old were you then?

AGE

DK	94
RE	97

R437. IS R PRESENTLY IN JAIL OR PRISON?

NO	01	
YES	05	→ (R439)

R438. Have you ever been held overnight or longer in a jail or prison?

NO	01	→ (R440)
YES	05	
DK	94	→ (R440)
RE	97	

R439. Since you were 18, how many nights have you been held overnight (or longer) in a jail or prison?

NIGHTS

MORE THAN 992	993
DK	994
RE	997

R440. Have you ever been convicted of a felony?

NO	01	→ (R450)
YES	05*	
DK	94	→ (R450)
RE	97	

R441. How many times?

TIMES

MORE THAN 92	93
DK	94
RE	97

R442. IS R441 MORE THAN ONE (01)?

NO.....01 → (R444)
YES.....05

R443. How old were you the first time you were convicted of a felony since you were 18?

AGE

☐☐

DK.....94
RE.....97

R444. When were you (last) convicted of a felony?

WITHIN LAST TWO WEEKS.....01
WITHIN LAST MONTH.....02 → (R446)
WITHIN LAST 6 MONTHS.....03
WITHIN LAST YEAR.....04
WITHIN LAST 3 YEARS.....05
MORE THAN 3 YEARS AGO.....06
DK ± 3 YEARS.....94
RE.....97

R445. How old were you then?

AGE

☐☐

DK.....94
RE.....97

R446. **HAND R CARD R-446.**
How many times have you been convicted of the following offense categories?

How many times have you been convicted of assaultive offenses (murder, manslaughter, robbery, rape)?

TIMES

☐☐

NEVER.....00
MORE THAN 92.....93
DK.....94
RE.....97

R447. ...property or income offenses (burglary, larceny, arson, theft, buying-receiving-possessing stolen property, vandalism, embezzlement, fraud, forgery-counterfeiting)?

TIMES

NEVER.....00
MORE THAN 92.....93
DK.....94
RE.....97

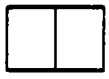
R448. ...public order offenses (prostitution, drunkenness, disorderly conduct, vagrancy, gambling)?

TIMES

NEVER.....00
MORE THAN 92.....93
DK.....94
RE.....97

R448A. ...driving under the influence of alcohol or drugs?

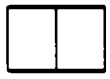
TIMES



NEVER.....00
MORE THAN 92.....93
DK.....94
RE.....97

R449. ...drug-related offenses (sale, possession or manufacture of illegal drugs)?

TIMES



NEVER.....00
MORE THAN 92.....93
DK.....94
RE.....97

R450. Have you had at least four <u>traffic tickets</u> in your life for speeding or running a light or causing an accident?

NO.....01
YES.....05*
DK.....94
RE.....97

R451. Now I'm going to ask you a few questions about your sexual experiences. How old were you when you first had sexual relations?

AGE.....☐☐
DK/BEFORE 15.....01
DK/AFTER 15.....95
RE.....97
STILL DK.....98

IF DK, ASK: Was that before or after you were 15?
IF BEFORE 15, CODE 01.
IF AFTER 15, CODE 95.
IF STILL DK, CODE 98.

R452. Have you ever had sex with as many as ten different people within a single year (including your wife/husband)?

HOMOSEXUAL OR HETEROSEXUAL

NO.....01
YES.....05*
DK.....94
RE.....97

R453. Have you ever been paid for having sex with someone?

HOMOSEXUAL OR HETEROSEXUAL

NO.....01
YES.....05*
DK.....94
RE.....97

R454. Have you ever made money by finding customers for prostitutes or call girls?

NO.....01
YES.....05*
DK.....94
RE.....97

R455. Have you ever made money outside the law by buying or selling stolen property or selling drugs or running numbers?

NO.....01
YES.....05*
DK.....94
RE.....97

R456. Have you ever been sued for a bad debt or had things you bought taken back because you didn't meet the payments?

IF YES: Did this happen more than twice?

NO.....01
ONLY ONCE OR TWICE.....02
THREE OR MORE TIMES.....05*
DK.....94
RE.....97

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, C1.

R457. IS "NEVER MARRIED" BOX CHECKED?

NO.....01 → (R459)
YES.....05

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, C16.

R458. HAS RESPONDENT EVER LIVED AS MARRIED?

NO.....01 → (R462)
YES, LIVED AS MARRIED.....05

R459. Did you ever walk out on your (husband/wife/partner with whom you were living as married) either permanently or for at least several weeks?

ASK ABOUT ALL MARRIAGES OR TIMES WHEN LIVING AS MARRIED

NO.....01
YES.....05*
DK.....94
RE.....97

R460. Did you ever hit or throw things at your (wife/husband/partner)?

NO.....01 → (R462)
YES.....05
DK.....94
RE.....97

R461. Were you ever the one who hit or threw things first, regardless of who started the argument?

IF YES, ASK:

Did you hit or throw things first on more than one occasion?

NO.....01
ONCE.....02
MORE THAN ONCE.....05*
DK.....94
RE.....97

R462. Have you ever spanked or hit a child (yours or anyone else's) hard enough so that he or she had bruises or had to stay in bed or see a doctor?

NO.....01
YES.....05*
DK.....94
RE.....97

R463. Since age 18, have you been in more than one fight that came to swapping blows (other than fights with your [husband/wife/partner])?

CODE 01 IF ONLY AS REQUIRED BY JOB.

NO.....01
YES.....05*
DK.....94
RE.....97

R464. Have you ever used a weapon, like a stick, knife, or gun, in a fight since you were 18?

CODE 01 IF VOLUNTEERS ONLY AS REQUIRED BY OCCUPATION.
CODE 05 IF RESPONDENT VOLUNTEERS "WIELDED BUT MISSED."

NO.....01
YES.....05*
DK.....94
RE.....97

R465. Since you were 18, did you ever hold three or more different jobs within a five-year period?

OMIT CHANGES VOLUNTEERED AS DUE TO JOB ENDING, RETURN TO SCHOOL, ILLNESS OR MATERNITY, TRANSFER OF SPOUSE, BECOMING HOUSEWIFE. COUNT CHANGES IN MAIN JOB ONLY.

NO.....01
NEVER WORKED.....02 → (R471)
YES.....05*
DK.....94
RE.....97

R466. Have you been fired from more than one job?

NO.....01
YES.....05*
DK.....94
RE.....97

R467. Since you were 18, have you quit a job three times or more before you already had another job lined up?

OMIT QUITTING VOLUNTEERED AS DUE TO RETURN TO SCHOOL, ILLNESS OR MATERNITY, TRANSFER OF SPOUSE, BECOMING HOUSEWIFE.

NO.....01
YES.....05*
DK.....94
RE.....97

R468. On any job you have had since you were 18, were you late or absent an average of 3 days a month or more?

IF YES, ASK BEFORE CODING:

Was being late or absent 3 days a month or more always the result of a physical illness or injury?

IF YES, CODE 04 AND RECORD PHYSICAL ILLNESS/INJURY:

_____

IF NOT ALWAYS DUE TO PHYSICAL ILLNESS/INJURY, CODE 05.

IF NO SET SCHEDULE OR ABSENCES OF THIS QUANTITY EXCUSED BY PRIOR ARRANGEMENT WITH EMPLOYER, CODE 01.

NO.....01
PHYSICAL ILLNESS/INJURY...04
YES.....05*
DK.....94
RE.....97

R469. How many months out of the last five years have you been without a job?

MONTHS SHOULD NOT EXCEED 60 MONTHS..... ☐☐

NONE.....00
DK/LESS THAN 6 MONTHS.....01 → (R476)
DK/6 MONTHS OR MORE.....95 → (R471)
RE.....97
STILL DK.....98

IF DK, ASK: Do you think it was less 6 months or more than that?
IF LESS THAN 6 MONTHS, CODE 01.
IF 6 MONTHS OR MORE, CODE 95.
IF STILL DK, CODE 98.

R470. IS R469 LESS THAN 6 MONTHS?

6 MONTHS OR MORE.....01
LESS THAN 6 MONTHS....05 → (R476)

R471. For how much of (that time/the last five years) did you want to work but were not able to find a job?

MONTHS

☐☐

DK.....94
RE.....97

R471A. IS R471 SIX MONTHS OR MORE?

LESS THAN 6 MONTHS.....01
6 MONTHS OR MORE.....05 → (R475)

R472. For how much of that time were you not looking for work because of emotional or mental problems or because of problems with drugs or alcohol?

MONTHS--**SHOULD NOT EXCEED NUMBER IN R469.**

☐☐

DK.....94
RE.....97

R473. IS R471 + R472 LESS THAN 6 MONTHS?

6 MONTHS OR MORE.....01 → (R475)
LESS THAN 6 MONTHS....05

R474. How much time (besides that) were you just not interested in working but not in school, or physically ill (or retired or a housewife)?

MONTHS--**SHOULD NOT EXCEED NUMBER IN R469.**

☐☐

DK.....94
RE.....97

R475. DO R471, R472 AND R474 ADD UP TO 6 MONTHS OR MORE?

LESS THAN 6 MONTHS.....01
6 MONTHS OR MORE.....05*

R476. Have you ever used an alias or an assumed name?

NO.....01
YES.....05*
DK.....94
RE.....97

R477. Have you thought that you lied pretty often since you have been an adult?

NO.....01
YES.....05
DK.....94
RE.....97

R478. Have you ever traveled around for a month or more without having any arrangements ahead of time and not knowing how long you were going to stay or where you were going to work?

ONLY ON VACATION FROM JOB = 01.

NO.....01
YES.....05*
DK.....94
RE.....97

R479. Has there ever been a period when you had no regular place to live, for at least a month or so?

NO.....01
YES.....05*
DK.....94
RE.....97

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, D11.

R480. DOES RESPONDENT HAVE CHILD OR HAS RESPONDENT ACTED AS PARENT FOR CHILDREN?

NO.....01 → (R484)
YES.....05

R481. Have you sometimes left young children under 6 years old home alone while you were shopping or out doing anything else?

IF VOLUNTEERS ONLY IN EMERGENCY FOR LESS THAN 30 MINUTES AND GIVES A CONVINCING EXAMPLE, OR CHILD COULD BE HEARD OR COULD COME THERE, CODE 01.

IF VOLUNTEERS NEVER LIVED WITH CHILD, CODE = 08.

NO.....01
YES.....05*
VOLUNTEER NEVER LIVED WITH CHILD.....08 → (R484)
DK.....94
RE.....97

R482. Have there been times when a neighbor fed a child (of yours/you were caring for) because you didn't get around to shopping for food or cooking, or kept your child overnight because no one was taking care of him at home?

ONLY IN EMERGENCY = CODE 01.

NO.....01
YES.....05*
DK.....94
RE.....97

R483. Has a nurse, or social worker or teacher ever said that any child (of yours/you were caring for) wasn't being given enough to eat or wasn't being kept clean enough or wasn't getting medical care when it was needed?

NO.....01
YES.....05*
DK.....94
RE.....97

R484. Have you more than once run out of money for food for your family because you had spent the food money on yourself or on going out?

NO.....01
YES.....05*
DK.....94
RE.....97

INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET 9, PART B.

R485. HOW MANY (=05*'s) HAVE BEEN CODED?

NONE, ONE, OR TWO.....01 → (R492)
THREE OR MORE.....02

R486 Did you ever talk to a doctor about any of these things you did like (READ ITEMS CHECKED ON TALLY SHEET 9, PART B.)?

NO.....01
YES.....05
DK.....94
RE.....97

R487. IS RESPONDENT AGE 25 OR YOUNGER?

OVER 25.....01
25 OR YOUNGER.....05 → (R490)

R488. Did you do any of these things between the ages of 18 and 25?

NO.....01
YES.....05 → (R490)
DK.....94
RE.....97

R489. Was there some reason you couldn't have done these things between 18 and 25, for instance, because you were ill in bed that whole time (or in jail/not married/had no children)?

NO, HAD OPPORTUNITY.....01
YES, NO OPPORTUNITY.....05
DK.....94
RE.....97

R490. When was the last time you did any of these things like (MENTION ITEMS ON TALLY SHEET 9, PART B)?

CODE MOST RECENT TIME POSSIBLE.

WITHIN LAST 2 WEEKS	01	→ (R492)
WITHIN LAST MONTH	02	
WITHIN LAST 6 MONTHS	03	
WITHIN LAST YEAR	04	
WITHIN LAST 3 YEARS	05	
MORE THAN 3 YEARS AGO	06	
DK ± 3 YEARS	94	→ (R492)
RE	97	

R491. How old were you the last time you did any of those things?

AGE

DK	94
RE	97

R492. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME:	___ ___ MONTH	/ ___ ___ DAY	___ ___ HOUR	: ___ ___ MINUTE	A.M. P.M.
RECORD BEGINNING DATE AND TIME:	___ ___ MONTH	/ ___ ___ DAY	___ ___ HOUR	: ___ ___ MINUTE	A.M. P.M.

R493. THESE QUESTIONS ARE ONLY TO BE COMPLETED IF YOU QUESTION THE RELIABILITY OF THE RESPONDENT'S ANSWERS. OTHERWISE GO TO R522.

R494. Have you ever had occasion to talk to a doctor about problems with your memory?

NO.....01
YES.....05
DK.....94
RE.....97

PART A

401 ☐ Trouble at school for fighting

404 ☐ Trouble outside of school for fighting

PART B

432 ☐ Arrested more than once since age 18

440 ☐ Convicted of a felony

450 ☐ At least four traffic tickets

452 ☐ Had sex with 10 people in a year

453 ☐ Was paid for having sex

454 ☐ Found customers for prostitutes

455 ☐ Made money outside the law

456 ☐ Was sued or had things taken back

459 ☐ Walked out on (husband/wife/partner)

461 ☐ Hit or threw things first more than once

462 ☐ Spanked or hit a child enough to give bruises

463 ☐ More than one (physical) fight

464 ☐ Used a weapon

465 ☐ Held three or more jobs in five years

466 ☐ Fired from more than one job

467 ☐ Quit a job three times or more

468 ☐ Late or absent three days a month or more

475 ☐ Been without a job for more than six months

476 ☐ Used an alias

478 ☐ Traveled around for a month or more

479 ☐ No regular place to live

481 ☐ Left young children at home alone

482 ☐ Neighbors fed or kept a child in your care

483 ☐ Child in your care wasn't properly cared for

484 ☐ Ran out of food money

R495. Now I would like to ask you some (more general questions/questions to check your memory and concentration). Some of them may be easy and some of them may be hard.

	REPEAT: What is the...	RECORD ANSWERS:	RIGHT	ERROR/ CAN'T DO	REFUSAL
	...year?		01	05	97
R496.	...season of the year?		01	05	97
R497.	...date?		01	05	97
R498.	...day of the week?		01	05	97
R499.	...month?		01	05	97
R500.	Can you tell me where you are right now? For instance, what state are we in?		01	05	97
R501.	What county are we in?		01	05	97
R502.	What (city/town) are we in?		01	05	97
R503.	What floor of the building are we on?		01	05	97
R504.	What is this address? IF INSTITUTIONALIZED: What is the name of this place?	DON'T RECORD ADDRESS! CHECK AGAINST CONTROL FORM	01	05	97

R505.-
R507. I am going to name three objects. After I have said them, I want you to repeat them. Remember what they are because I am going to ask you to name them again in a few minutes.

		RIGHT	ERROR/ CAN'T DO	REFUSAL
"Apple" (PAUSE), "Table" (PAUSE), "Penny"	APPLE:	01	05	97
Could you repeat the three items for me?	TABLE:	01	05	97
	PENNY:	01	05	97

SCORE FIRST TRY. REPEAT OBJECTS UNTIL ALL THREE ARE LEARNED.

R508. Would you subtract 7 from 100, and then subtract 7 from the answer you get and keep subtracting 7 until I tell you to stop?

COUNT ERROR ONLY WHEN DIFFERENCE BETWEEN NUMBERS IS NOT 7.

		CORRECT	ERROR	CAN'T DO	OTHER REFUSAL
a.	(93) _____	01	05	97	99
b.	(86) _____	01	05	97	99
c.	(79) _____	01	05	97	99
d.	(72) _____	01	05	97	99
e.	(65) _____	01	05	97	99

STOP

R509. Now I am going to spell a word forwards and I want you to spell it backwards. The word is WORLD, W-O-R-L-D. Spell "world" backwards.

REPEAT SPELLING IF NECESSARY, BUT NOT AFTER SPELLING STARTS:

PRINT LETTERS: ___ ___ ___ ___ ___ ___ ___ ___ ___

NUMBER OF ERRORS: 00 01 02 03 04 05

RE: REFUSAL.....97

R510.-
R512. Now what were the three objects I asked you to remember?

			RIGHT	ERROR/ CAN'T DO	HANDICAP	REFUSAL
		APPLE:	01	05		97
		TABLE:	01	05		97
		PENNY:	01	05		97
R513.	**SHOW WRIST WATCH.** What is this called?	WATCH:	01	05	06	97
R514.	**SHOW PENCIL.** What is this called?	PENCIL:	01	05	06	97
R515.	I'd like you to repeat a phrase after me: (The phrase is) "No if's and's or but's." **ALLOW ONLY ONE TRIAL.**		01	05	06	97
R516.	Read the words on this page and then do what it says. **HAND "CLOSE YOUR EYES" SHEET. CODE 01 IF RESPONDENT CLOSES EYES.**		01	05	06	97
R517.	**READ FULL STATEMENT BELOW BEFORE HANDING OVER THE PAPER.** I'm going to give you a piece of paper. When I do, take the paper in your right hand, fold the paper in half with both hands, and put the paper down on your lap. **DO NOT REPEAT INSTRUCTIONS OR COACH.**	RIGHT HAND:	01	05	06	97
		FOLD:	01	05	06	97
		IN LAP:	01	05	06	97
R518.	Write any complete sentence on that piece of paper for me. **SENTENCE SHOULD HAVE A SUBJECT AND A VERB, AND MAKE SENSE. SPELLING AND GRAMMATICAL ERRORS ARE OKAY.**		01	05	06	97
R519.	Here is a drawing. Please copy the drawing on the same paper. **CORRECT IF TWO CONVEX FIVE-SIDED FIGURES INTERSECT TO FORM A FOUR-SIDED FIGURE.**		01	05	06	97

R520. THERE IS NO R520.

R521. ARE 12 OR MORE "05's" AND "97's" CODED IN R495-R507 AND R510-R519? **EXCLUDE R508-R509.**

NO.....01
YES.....05

IF SKIPPED TO THIS SECTION BUT LESS THAN 13 "05's" OR "97's" ARE CODED, RETURN TO MAIN QUESTIONNAIRE AND CONTINUE. IF FAIL, GO TO SECTION S AND END THE INTERVIEW.

R522. INTERVIEWER OBSERVATION:

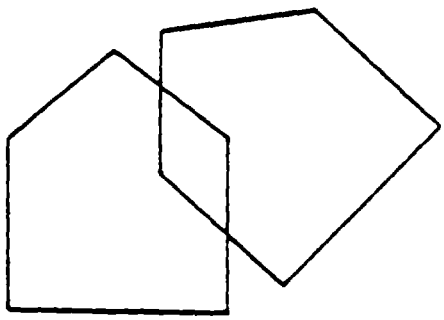
HOW MUCH OF THE DIS INTERVIEW WAS HELD IN PRIVATE?

ALL (9/10 OR MORE).....01
MOST (3/4 TO 9/10).....02
SOME (1/4 TO 3/4).....03
NONE (LESS THAN 1/4).....04

R523. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME: ___ ___ / ___ ___ : ___ ___ A.M. P.M.
MONTH DAY HOUR MINUTE

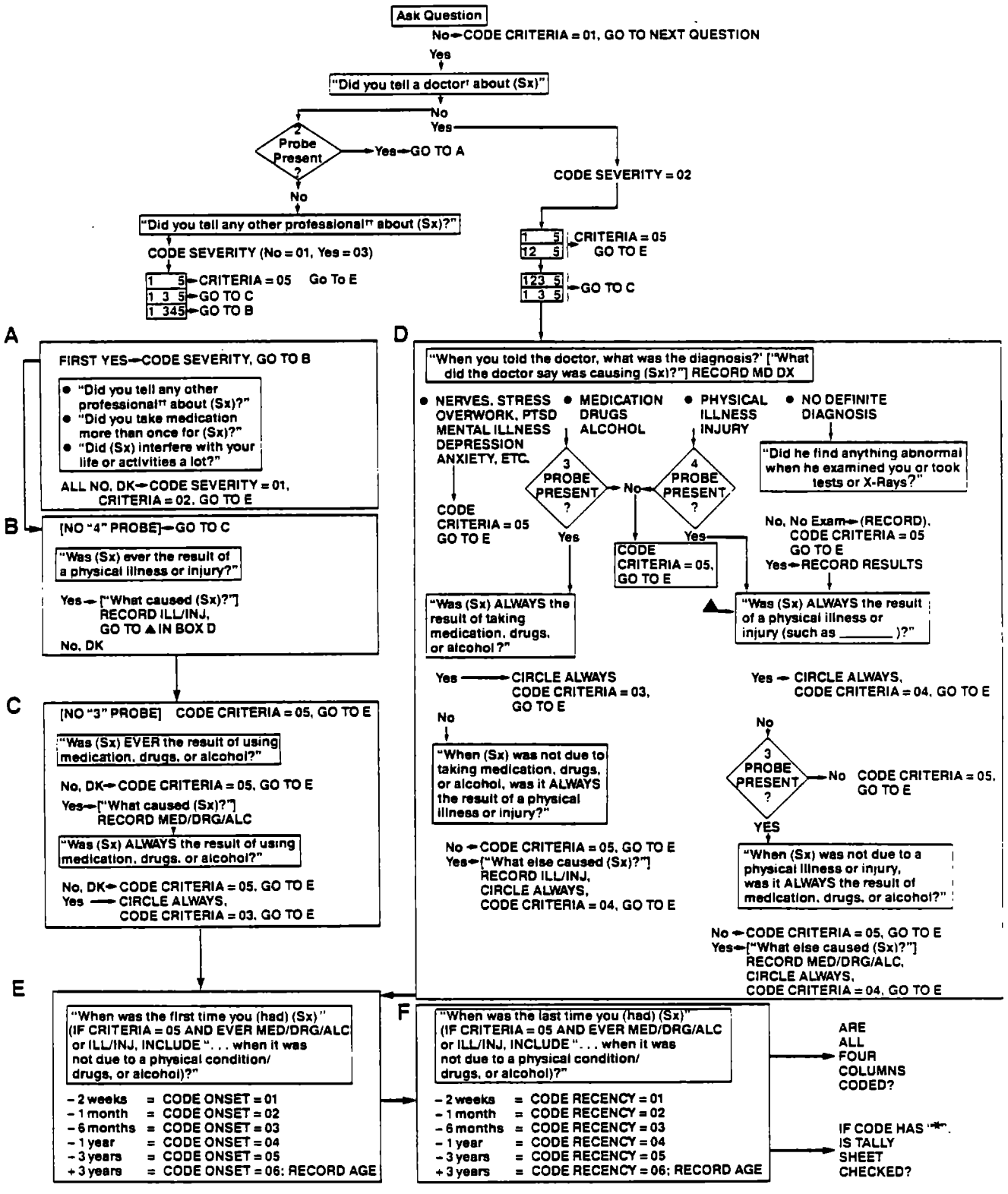
CARD A



CARD B

CLOSE YOUR EYES

FORMAL PROBE STRUCTURE



[1] A doctor includes psychiatrists, other medical doctors, osteopaths, students in training to be medical doctors or osteopaths, nurse practitioners, and physician's assistants."

[2] "An other professional includes psychologists, social workers, counselors, nurses, clergy, dentists, chiropractors, and podiatrists" [Exclude police, attorneys and bartenders]

Onset/Recency

Within the past two weeks

More than 2 weeks ago but within the past month

More than 1 month ago but within the past 6 months

More than 6 months ago but within the past year

More than 1 year ago but within the past 3 years

More than 3 years ago

NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
EXPIRES: 12/31/88

MAIN STUDY QUESTIONNAIRE

VOLUME V

SECTION S: USE OF HEALTH AND MENTAL HEALTH SERVICES
SECTION T: SOCIAL SUPPORT
SECTION U: DEMOGRAPHICS
NSVG FOLLOW-UP LOCATOR UPDATE
SECTION X: INTERVIEWER OBSERVATIONS

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SECTION S: USE OF HEALTH AND MENTAL HEALTH SERVICES

RECORD BEGINNING DATE AND TIME: [ ][ ] / [ ][ ] [ ][ ] : [ ][ ] A.M. P.M.
MONTH DAY HOUR MINUTE

S1. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, A10, A11 AND A11a.

DID RESPONDENT EVER SERVE ON ACTIVE DUTY IN THE U.S. ARMED FORCES?

NO . . . . . 01 → FOLLOW SKIPS AFTER PHRASE "IF R IS NOT A VETERAN."

YES 02

S2. Now I'd like to ask you some questions about your use of health services--things like visits to a doctor, stays in a hospital, etc. Is there a particular doctor's office, clinic, health center, or other place that you usually go to if you are sick or need advice about your health?

NO . . . . . 01 → (S3)
YES 02

S2a. What kind of place is that--a clinic, a health center, a hospital, a doctor's office or some other place?

PHYSICIAN'S OFFICE, INCLUDING GROUP PRACTICE AND DOCTOR'S CLINIC 01
VA MEDICAL CENTER--VA HOSPITAL OR CLINIC 02
MILITARY (DOD) HOSPITAL OR CLINIC . . 03
HOSPITAL OUTPATIENT DEPARTMENT OR CLINIC 04
HOSPITAL EMERGENCY ROOM 05
HEALTH CENTER; E.G. PUBLIC HEALTH DEPARTMENT, NEIGHBORHOOD, OR COMMUNITY HEALTH CENTER 06
HEALTH MAINTENANCE ORGANIZATION (HMO) OR OTHER PREPAID HEALTH PLAN TO WHICH YOU BELONG 07
COMPANY/UNION/INDUSTRIAL/SCHOOL CLINIC 08
RESPONDENT'S HOME 09
HERE--RESPONDENT IS INPATIENT 10
OTHER (SPECIFY) 11

_____

S3. During the past 12 months, were you a patient overnight in a hospital, convalescent home, nursing home, rehabilitation center, or similar facility because of a physical health problem?

NO	01	→ (S4)
YES	02	

S3a. How many times in the last 12 months did you stay at least one night in a hospital, nursing home, or other medical care facility because of your physical health?

RECORD NUMBER: ☐☐
TIMES

S3b. Altogether, how many nights did you spend in a hospital or similar facility in the past twelve months?

RECORD NUMBER: ☐☐
NIGHTS

S3c. In what kind(s) of facilities did you stay overnight?

CIRCLE ALL THAT APPLY.

SHORT TERM GENERAL HOSPITAL . . .	01	
VA MEDICAL CENTER OR HOSPITAL . .	02	→ (S3e)
MILITARY (DOD) HOSPITAL	03	
NURSING HOME, CONVALESCENT HOME OR DOMICILIARY	04	
REHABILITATION CENTER	05	
OTHER (SPECIFY)	06	

_____

S3d. IF R IS NOT A VETERAN → (S5)

Were any of these stays at a Veterans Administration (VA) Hospital or Medical Center (VAMC) or paid for by the VA?

NO	01	→ (S4)
YES, STAYED AT VA HOSPITAL OR VAMC	02	
YES, PAID FOR BY VA	03	→ (S4)
YES, BOTH	04	

S3e. How many times in the past year have you been a patient overnight or longer in a VA hospital or VAMC?

RECORD NUMBER: ☐☐
TIMES

S3f. How many nights, in total, did you spend as a patient in a VA hospital in the last year?

RECORD NUMBER: ☐☐☐ → (S4a)
NIGHTS

S4. IF R IS NOT A VETERAN → (S5)

Have you ever stayed overnight or longer as a patient in a VA hospital since you were last released from active duty (military service)?

NO . . . . . 01 → (S5)
YES 02

S4a. How old were you the first time you ever went to a VA hospital or VAMC for inpatient care?

RECORD AGE: ☐☐
YEARS OLD

S4b. How many times, in all, have you been hospitalized in VA facilities since your release from active duty?

RECORD NUMBER: ☐☐
TIMES

S5. (Not counting any care you may have received while you were a bed patient overnight in a hospital or nursing home) during the past six months, did you receive any care or treatment for a physical health problem from a doctor or other medical person (such as a nurse, physician's assistant, chiropractor, or physical therapist) in an office, clinic, or emergency room?

NO . . . . . 01 → (S6)
YES 02

S5a. Counting all kinds of health providers, how many visits have you made in the past six months because of a physical problem?

RECORD NUMBER: ☐☐
VISITS

S5b. During (this visit/any of these visits), did you and the health professional you saw talk about any problems you had with your emotions or nerves (that might have been connected to or in addition to the reason for your visit)? (PAUSE) How about problems with alcohol or drugs?

NO 01
YES, EMOTIONS/NERVES 02
YES, ALCOHOL/DRUGS 03
YES, BOTH 04

S5c. You said that you made (NUMBER OF VISITS IN S5a) visits to health providers during the past six months because of a physical problem. Where did you go?

PROBE: At what kind(s) of place(s) did you receive care?

CIRCLE ALL THAT APPLY.

PHYSICIAN'S OFFICE (INCLUDING GROUP PRACTICE AND DOCTOR'S CLINIC)	01	
VA HOSPITAL OUTPATIENT DEPARTMENT OR CLINIC	02	→ (S5e)
MILITARY (DOD) HOSPITAL OUTPATIENT DEPARTMENT OR CLINIC	03	
HOSPITAL OUTPATIENT DEPARTMENT OR CLINIC	04	
HOSPITAL EMERGENCY ROOM	05	
HEALTH CENTER (PUBLIC HEALTH DEPARTMENT, NEIGHBORHOOD OR COMMUNITY HEALTH CENTER)	06	
HEALTH MAINTENANCE ORGANIZATION (HMO) OR OTHER PREPAID HEALTH PLAN	07	
COMPANY/UNION/SCHOOL CLINIC . . .	08	
RESPONDENT'S HOME	09	
OTHER (SPECIFY)	10	

S5d. IF R IS NOT A VETERAN → (S7)

Were any of these clinic or outpatient visits to a VA facility or paid for by the VA?

NO	01	→ (S6)
YES, VA FACILITY	02	
YES, PAID FOR BY VA	03	→ (S6)
YES, BOTH	04	

S5e. How many times <u>in the past six months</u> have you been seen at a VA clinic or VA hospital outpatient department?

RECORD NUMBER: ☐☐ → (S6a)
TIMES

S6. IF R IS NOT A VETERAN → (S7)

Have you ever been treated or examined on an outpatient basis at a VA clinic or VA hospital outpatient department, since you were last released from active duty?

NO . . . . . 01 → (S7)
YES 02

S6a. How old were you the first time you were ever treated in a VA clinic or VA hospital outpatient department?

RECORD AGE: ☐☐
YEARS OLD

S6b. Since your first visit for outpatient care, how often have you been back to a VA hospital or clinic for outpatient care--several times a year, once a year, only occasionally, or never?

SEVERAL TIMES A YEAR 01
ONCE A YEAR 02
ONLY OCCASIONALLY 03
NEVER 04

S7. Now I'd like to ask a few questions about health insurance coverage. There are many kinds of health insurance plans, and some people are covered by more than one type. For each of the following insurance types, please tell me if you are currently covered under that plan.

First, are you now covered by CHAMPUS (which covers both active duty and retired career military personnel and their dependents and survivors) or CHAMPVA (which covers disabled veterans and their dependents and survivors)?

NO 01
YES 02
DON'T KNOW 94

S8. Are you now covered by (Medicaid/STATE NAME FOR MEDICAID PROGRAM)?

NO 01
YES 02
DON'T KNOW 94

S9. Are you now covered by Medicare that is, the Social Security health insurance program for certain disabled people and for people 65 years old or older?

NO 01
YES 02
DON'T KNOW 94

S10. Are you now covered by any other government health program?

NO	01	→ (S11)
YES	02	
DON'T KNOW	94	→ (S11)

S10a. What is the name of that program? _____

_____

S11. (Not counting the insurance coverage that you have already told me about,) are you now covered by a health insurance plan which pays any part of hospital bills, doctor bills, or surgeon bills? Don't include any insurance that pays only for accidents, dread diseases, or extra cash while in the hospital.

NO	01
YES	02
DON'T KNOW	94

S12. Problems often come up in life. Sometimes they're personal problems--people are very unhappy, or nervous and irritable all the time. Sometimes they're problems in a marriage--a husband and wife just can't get along with each other. Or, sometimes it's a personal problem with a child or a job.

Sometimes when people have problems like that, they go someplace for help. Sometimes they go to a doctor or a minister. Sometimes they go to a special place for handling personal problems--like a psychiatrist or a marriage counselor or social agency or clinic. How about you--have you ever gone anywhere like that for advice or help with any personal problems?

NO	01	→ (S13)
YES	02	

S12a. What was that about?

PROBE FOR FULL RESPONSE:

_____

_____

_____

_____

(THIS PAGE INTENTIONALLY BLANK.)

S12b. Where did you go for help?

PROBE FOR FULL RESPONSE.

_____

_____

_____

_____

S12c. IF R MENTIONS AGENCY, PLACE, OR ORGANIZATION IN S12b → (S12d)

Is that person connected with an agency, place, or other organization?

NO . . . . . 01 → (S12f)
YES 02

S12d. What type of place was it?

_____

_____

_____

_____

S12e. IF R IS NOT A VETERAN → (S12f)

(Was this/Were any of these) connected with the Veterans Administration (VA)?

NO 01
YES 02

S12f. REVIEW S12b AND S12d, THEN CIRCLE ALL THAT APPLY.

FRIEND OR RELATIVE (PROFESSIONAL) . . 01
MINISTER, PRIEST OR RABBI 02

PSYCHIATRIST 03
OTHER MEDICAL DOCTOR 04
PSYCHIATRIC NURSE 05
OTHER NURSE 06

PSYCHOLOGIST 07
SOCIAL WORKER 08
COUNSELOR 09

TEACHER OR PRINCIPAL 10
POLICE 11
LAWYER OR JUDGE 12
PROBATION OFFICER 13

MENTAL HEALTH CENTER 14
PSYCHIATRIC HOSPITAL OR CLINIC . . . 15
OTHER HOSPITAL OR CLINIC 16
HOSPITAL EMERGENCY ROOM 17
ALCOHOL CLINIC OR CENTER 18
DRUG CLINIC OR CENTER 19
VETERANS ADMINISTRATION (VA) HOSPITAL
OR MEDICAL CENTER (VAMC) 20

VETERANS OUTREACH (VET) CENTER . . . 21
CRISIS CENTER 22
SELF-HELP OR "RAP" GROUP 23
FAMILY OR SOCIAL SERVICE AGENCY . . . 24
SPIRITUALIST, HERBALIST, NATURAL
THERAPIST, FAITH HEALER 25

OTHER PROFESSIONAL (SPECIFY) 26

MARK * RESPONSES ON TALLY SHEET X.

S13. Now I'm going to read you a list of some different kinds of places and people where someone might get help with their emotions, nerves, drugs, alcohol, or their mental health. Please tell me if you have gone or talked to any of these places or people even if you've already mentioned it before.

Have you ever gone to or talked with...	NO	YES
A. ...a minister, priest, or rabbi for help with any of these?	01	02*
B. ...a psychiatrist or other mental health specialist at a health plan or family clinic for help with any of these?	01	02*
C. ...a psychiatrist, psychologist, social worker or counselor in private practice for help with your emotions, nerves, drugs, alcohol, or your mental health?	01	02*
D. ...a medical doctor in private practice (except for a psychiatrist) or to any medical person at a health plan or primary care clinic about things like these?	01	02*
E. ...a (community) mental health center?	01	02*
F. ...a psychiatric outpatient clinic at a general hospital or university hospital?	01	02*
G. ...an outpatient clinic in a psychiatric hospital?	01	02*
H. ...an outpatient clinic in a Veterans Administration (VA) Hospital or Medical Center (VAMC) for help with your emotions, nerves, alcohol, or mental health?	01	02*
I. ...a Veterans Outreach (Vet) Center for help with any of these?	01	02*
J. ...to a drug clinic (or center)?	01	02*
K. ...an alcohol clinic (or center)?	01	02*
L. ...a hospital emergency room for help with your emotions, nerves, alcohol, or mental health?	01	02*

Have you ever gone to...		NO	YES
M.	...a family service, child counseling, or social service agency for help with any of these?	01	02*
N.	...someone at a self-help group like Alcoholics Anonymous, a veterans "rap" group, etc.?	01	02*
O.	...or used a community program like a crisis center or hotline?	01	02*
P.	...a spiritualist, herbalist, natural therapist, reader or faith healer for help with your emotions, nerves, drugs, alcohol, or mental health?	01	02*
Q.	...a curandero, santero, or sobador?	01	02*
R.	Other than the places and people we've already mentioned, have you ever seen anyone else for help with your emotions, nerves, drugs, alcohol, or mental health? (SPECIFY)	01	02*

_____

_____

IF "NO" TO ALL OF S13(A-R), → S15; OTHERWISE CONTINUE ON NEXT PAGE.

REVIEW TALLY SHEET X, S13A-R. ASK FOR EACH ITEM CHECKED ON TALLY SHEET.

S14. CIRCLE PLACE/PERSON MENTIONED FIRST THEN
COMPLETE ONLY ONE COLUMN PER LETTER.

	FIRST MENTION	SECOND MENTION	THIRD MENTION	FOURTH MENTION	FIFTH MENTION
	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R
S14a. You mentioned that you went to (PLACE/PERSON). How old were you the first time in your life that you (went to/talked with) (PLACE/PERSON) for help with any of these problems? RECORD AGE:	YEARS	YEARS	YEARS	YEARS	YEARS
S14b. HAND R CARD S-14b. And when was the last (most recent) time you (went to/talked with) (PLACE/PERSON)?	-2 WKS. . 01 -1 MO . . 02 → (S14d) -6 MOS. . 03 -1 YR . . 04 -2 YRS. . 05 → (S14e) -3 YRS. . 06 +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 → (S14d) -6 MOS. . 03 -1 YR . . 04 -2 YRS. . 05 → (S14e) -3 YRS. . 06 +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 → (S14d) -6 MOS. . 03 -1 YR . . 04 -2 YRS. . 05 → (S14e) -3 YRS. . 06 +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 → (S14d) -6 MOS. . 03 -1 YR . . 04 -2 YRS. . 05 → (S14e) -3 YRS. . 06 +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 → (S14d) -6 MOS. . 03 -1 YR . . 04 -2 YRS. . 05 → (S14e) -3 YRS. . 06 +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)
S14c. How old were you then? RECORD AGE:	YEARS → (S14e)	YEARS → (S14e)	YEARS → (S14e)	YEARS → (S14e)	YEARS → (S14e)
S14d. How many times did you (go to/talk with) (PLACE/PERSON) about these problems in the last six months? RECORD NUMBER	TIMES/VISITS	TIMES/VISITS	TIMES/VISITS	TIMES/VISITS	TIMES/VISITS
S14e. How did it turn out? Would you say that they helped you a lot, some, not at all, or did they make things worse? IF MULTIPLE VISITS, CODE MOST RECENT.	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04
	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15

S14. CIRCLE PLACE/PERSON MENTIONED	SIXTH MENTION	SEVENTH MENTION	EIGHTH MENTION	NINTH MENTION	TENTH MENTION
	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R
S14a. You mentioned that you went to (PLACE/PERSON). How old were you the first time in your life that you (went to/talked with) (PLACE/PERSON) for help with any of these problems? RECORD AGE:	__ __ YEARS	__ __ YEARS	__ __ YEARS	__ __ YEARS	__ __ YEARS
S14b. HAND R CARD S-14b. And when was the last (most recent) time you (went to/talked with) (PLACE/PERSON)?	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)
S14c. How old were you then? RECORD AGE:	__ __ YEARS → (S14e)	__ __ YEARS → (S14e)	__ __ YEARS → (S14e)	__ __ YEARS → (S14e)	__ __ YEARS → (S14e)
S14d. How many times did you (go to/talk with) (PLACE/PERSON) about these problems in the last six months? RECORD NUMBER	__ __ TIMES/VISITS	__ __ TIMES/VISITS	__ __ TIMES/VISITS	__ __ TIMES/VISITS	__ __ TIMES/VISITS
S14e. How did it turn out? Would you say that they helped you a lot, some, not at all, or did they make things worse? IF MULTIPLE VISITS, CODE MOST RECENT.	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04
	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15

S14. CIRCLE PLACE/PERSON MENTIONED	ELEVENTH MENTION	TWELFTH MENTION	THIRTEENTH MENTION	FOURTEENTH MENTION	FIFTEENTH MENTION
	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R	A B C D E F G H I J K L M N O P Q R
S14a. You mentioned that you went to (PLACE/PERSON). How old were you the first time in your life that you (went to/ talked with) (PLACE/PERSON) for help with any of these problems? RECORD AGE:	YEARS	YEARS	YEARS	YEARS	YEARS
S14b. HAND R CARD S-14b. And when was the last (most recent) time you (went to/talked with) (PLACE/PERSON)?	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)	-2 WKS. . 01 -1 MO . . 02 -6 MOS. . 03 → (S14d) -1 YR . . 04 -2 YRS. . 05 -3 YRS. . 06 → (S14e) +3 YRS. . 07 DK ±3 YRS . . 94 → (S14e)
S14c. How old were you then? RECORD AGE:	YEARS → (S14e)	YEARS → (S14e)	YEARS → (S14e)	YEARS → (S14e)	YEARS → (S14e)
S14d. How many times did you (go to/talk with) (PLACE/PERSON) about these problems in the last six months? RECORD NUMBER	TIMES/VISITS	TIMES/VISITS	TIMES/VISITS	TIMES/VISITS	TIMES/VISITS
S14e. How did it turn out? Would you say that they helped you a lot, some, not at all, or did they make things worse? IF MULTIPLE VISITS, CODE MOST RECENT.	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04	A LOT . . . . 01 SOME . . . . 02 NOT AT ALL. . 03 MADE THINGS WORSE . . . 04
	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15	GO TO NEXT MENTION OR QUESTION S15

S15. Some people don't see a doctor or other professional about emotional or mental problems or problems with drugs or alcohol when perhaps they should. Were there ever (other) times when you thought you should go to a doctor or other professional for a mental or emotional problem but you didn't go?

IF NO ASK: Can you think of anything that's happened to you, any problems you've had in the past, where going to someone like this might have helped you in any way?

NO 01
YES . . . . . 02 → (S16)

S15a. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, S13A-R.

ARE ANY ITEMS CHECKED?

NO 01
YES . . . . . 02 → (S18)

S15b. Do you think you could ever have a problem like this that got so bad that you might want to go someplace for help--or do you think you could always handle things like that yourself?

RECORD VERBATIM, THEN CODE BELOW.

_____

_____

_____

SELF-HELP, UNQUALIFIED: COULD ALWAYS HANDLE IT MYSELF 01

SELF-HELP, QUALIFIED: I THINK I COULD HANDLE IT MYSELF 02

NEED FOR HELP POSSIBLE QUALIFIED: I SUPPOSE MAYBE I COULD NEED HELP, BUT I DON"T KNOW WHAT IT COULD BE . . . . . 03 → (S18)

NEED FOR HELP POSSIBLE, UNQUALIFIED: I MIGHT NEED HELP: THERE'S ALWAYS A POSSIBILITY OF A PROBLEM THAT YOU CAN"T SOLVE YOURSELF 04

OTHER (SPECIFY) 05

_____

_____

S16. Why do you suppose that you didn't go for help? Did any of the following reasons play a part in your decision not to go?

		NO	YES
A.	Did you think your problem wasn't serious enough or would get better by itself?	01	02
B.	Were you concerned about the cost?	01	02
C.	Were you unsure about where to go for help?	01	02
D.	Did you think that the treatment (going for help) probably wouldn't help (do any good)?	01	02
E.	Was it too difficult to get health care because of distance or transportation problems?	01	02
F.	Were you concerned about what others might think if you went for help?	01	02
G.	Did you feel that seeing a professional would take too much time or be inconvenient?	01	02
H.	Were you concerned that others might find out about your problem if you went for help?	01	02
I.	Did you want to solve the problem on your own?	01	02
J.	Were you afraid of what they might find, such as something which might require hospitalization or some treatment you wouldn't want?	01	02
K.	Do you just distrust or dislike mental health professionals (like psychologists or psychiatrists) in general?	01	02
L.	Was there some other reason why you didn't go for help (SPECIFY)?	01	02

_____

_____

RECORD HERE ONLY IF REASON CANNOT BE INCLUDED UNDER ONE OF THE CATEGORIES ABOVE.

S17. IF MORE THAN ONE REASON GIVEN IN ITEMS A-L IN QUESTION S16, ASK: Which one of these was the most important reason you didn't go?

RECORD LETTER A-L: ☐

S18. IS R CURRENTLY IN A PSYCHIATRIC FACILITY?

NO 01
YES . . . . . 02 → (S19a)

S19. Now I would like to ask you about hospitalizations you might have had for reasons other than physical health. Have you ever (stayed at/been admitted to) a hospital or other treatment program because of family or personal problems, a mental or emotional problem, trouble with nerves, or a problem with drugs or alcohol?

NO . . . . . 01 → (T1)
YES 02

S19a. How old were you the first time you ever (stayed at/were admitted to) a hospital or other treatment program because of family or personal problems, a mental or emotional problem, trouble with nerves, or a problem with drugs or alcohol?

RECORD AGE: ☐☐ YEARS

S19b. How old were you the last time you (stayed at/were admitted to) a hospital or other treatment program because of problems like these?

RECORD AGE: ☐☐ YEARS

S20. How many (different) times have you ever:

IF NONE, ENTER 00 IN BOX.

		RECORD NUMBER:
A.	...(stayed at/been admitted to) a state psychiatric hospital?	☐☐ TIMES
B.	...(stayed at/been admitted to) a private psychiatric hospital?	☐☐ TIMES
C.	...(stayed at/been admitted to) a community mental health center?	☐☐ TIMES
D.	...(stayed at/been admitted to) a VA hospital because of family or personal problems, a mental or emotional problem, trouble with your nerves, or a problem with drugs or alcohol? . . .	☐☐ TIMES

How many (different) times have you ever:

IF NONE, ENTER 00 IN BOX.

RECORD NUMBER:

E. ...(stayed at/been admitted to) a general hospital because of family or personal problems, a mental or emotional problem, trouble with your nerves, or a problem with drugs or alcohol (on either a general ward or psychiatric ward)? . . . . . ☐☐ TIMES

F. ...stayed overnight or longer in an alcohol treatment unit or center? AVOID DOUBLE CODING . . . . . ☐☐ TIMES

G. ...stayed overnight or longer in a drug treatment unit or center? AVOID DOUBLE CODING . . . . . ☐☐ TIMES

S21. Have you ever stayed overnight anyplace else because of family or personal problems, a mental or emotional problem, trouble with your nerves, or a problem with drugs or alcohol?

IF YES: How many (different) times?

NO . . . . . 00 → (T1)

RECORD NUMBER: ☐☐
TIMES

S21a. Where (else) did you stay overnight (for a mental health problem/for any of these problems)?

_____

_____

SECTION T: SOCIAL SUPPORT

T1. Now I'd like to talk with you about your family and friends and other people you know today. First, in general, how well are you getting along with other people these days--would you say better than usual, about the same, or not as well as usual?

BETTER THAN USUAL 01
ABOUT THE SAME 02
NOT AS WELL AS USUAL 03

T2. HAND R CARD T-2.

Where do most--that is, more than half--of your immediate family members live? By immediate family members we mean your spouse, children, parents, brothers, and sisters.

CIRCLE FIRST APPLICABLE CODE.

NO IMMEDIATE FAMILY 00
IN THIS HOUSEHOLD 01
IN THIS SAME NEIGHBORHOOD 02
IN THIS SAME CITY 03
IN THIS SAME COUNTY 04
IN THIS SAME STATE (OR COUNTRY IF R LIVES IN PUERTO RICO) 05
IN ANOTHER STATE 06
OUTSIDE THE COUNTRY R LIVES IN 07

T3. About how many families in your neighborhood are you well enough acquainted with that you visit each other in your homes?

RECORD NUMBER: ☐☐
FAMILIES

T4. About how many close friends do you have--people you feel at ease with and can talk with about what is on your mind? You may include relatives.

RECORD NUMBER: [ ][ ]
CLOSE FRIENDS

NONE . . . . . 00 → (T5)

T4a. How many of these (if any) are Vietnam veterans?

RECORD NUMBER: [ ][ ]
VV FRIENDS

T5. How many relatives do you have that you feel close to--that is, people that you feel at ease with, can talk to about private matters, and can call on for help?

RECORD NUMBER: [ ][ ]
CLOSE RELATIVES

T6. HAND R CARD T-6.

Over a year's time, about how often do you get together with friends or relatives, like going out together or visiting in each other's homes?

EVERY DAY 01
SEVERAL DAYS A WEEK 02
ABOUT ONCE A WEEK 03
2 OR 3 TIMES A MONTH 04
ABOUT ONCE A MONTH 05
5 TO 10 TIMES A YEAR 06
LESS THAN 5 TIMES A YEAR 07

T7. HAND R CARD T-7.

During the past month, about how often have you had friends over to your home? Do not count relatives.

EVERY DAY 01
SEVERAL DAYS A WEEK 02
ABOUT ONCE A WEEK 03
2 OR 3 TIMES IN PAST MONTH . . . 04
ONCE IN PAST MONTH 05
NOT AT ALL IN PAST MONTH 06

T8. POINT TO CARD T-7.

About how often have you visited with friends at their homes during the past month? (Do not count relatives.)

EVERY DAY 01
SEVERAL TIMES A WEEK 02
ABOUT ONCE A WEEK 03
2 OR 3 TIMES IN PAST MONTH . . . 04
ONCE IN PAST MONTH 05
NOT AT ALL IN PAST MONTH 06

T9. HAND R CARD T-9.

About how often were you on the telephone with close friends or relatives during the past month?

EVERY DAY 01
SEVERAL DAYS A WEEK 02
ABOUT ONCE A WEEK 03
2 OR 3 TIMES 04
ONCE 05
NOT AT ALL 06

T10. Overall, do you feel that you have enough close friends or relatives?

NO 01
YES 02

T11. Can you talk about your deepest problems with at least some of your family or friends: most of the time, some of the time, or hardly ever?

MOST OF THE TIME 01
SOME OF THE TIME 02
HARDLY EVER 03

T12. When you are talking with your family or friends, do you feel you are being listened to most of the time, some of the time, or hardly ever?

MOST OF THE TIME 01
SOME OF THE TIME 02
HARDLY EVER 03

T13. Does it seem that your family or friends understand you most of the time, some of the time, or hardly ever?

MOST OF THE TIME 01
SOME OF THE TIME 02
HARDLY EVER 03

T14. Among your friends and relatives, (excluding your wife/husband/partner), is there someone you feel you can tell just about anything to, someone you can count on for understanding and advice?

NO . . . . . 01 → (T15)
YES 02

T14a. Is this person a Vietnam veteran?

NO 01
YES 02

T15. Do you have any problems that you feel you can't discuss with any friend or relative?

NO 01
YES 02

T16. IF R IS NOT A VIETNAM ERA OR THEATRE VETERAN → (T17).

HAND R CARD T-16.

Now think back over the last few months or so. Who, if anyone, on this card did you talk with about the war in Vietnam during that period?

ASK FOR NON-RELATIVES: (Is this/Are these) person(s) (mainly) male or female?

CIRCLE ALL THAT APPLY.

NO ONE	00	→ (T17)
HUSBAND OR WIFE	01	
PARTNER (LIVE -IN)	02	
FATHER	03	
MOTHER	04	
BROTHER(S)	05	
SISTER(S)	06	
SON(S)	07	
DAUGHTER(S)	08	
OTHER RELATIVE(S) OR FAMILY MEMBER(S) (SPECIFY)	09	
FRIENDS(S)--(MAINLY) MALE	11	
FRIENDS(S)--(MAINLY) FEMALE	12	
NEIGHBOR(S)--(MAINLY) MALE	21	
NEIGHBOR(S)--(MAINLY) FEMALE	22	
CO-WORKER(S)--(MAINLY) MALE	31	
CO-WORKER(S)--(MAINLY) FEMALE	32	
MEMBER(S) OF A GROUP--(MAINLY) MALE (SPECIFY)	41	
MEMBER(S) OF A GROUP--(MAINLY) FEMALE (SPECIFY)	42	
PROFESSIONAL ADVISOR OR CONSULTANT (SPECIFY)	50	
OTHER (SPECIFY)	70	

T16a. (Is this person/Are any of these persons) (a) Vietnam veteran(s)?

NO . . . . . 01 → (T16c)
YES 02

T16b. Which one(s)?

HUSBAND OR WIFE 01
PARTNER (LIVE -IN) 02
FATHER 03
MOTHER 04
BROTHER(S) 05
SISTER(S) 06
SON(S) 07
DAUGHTER(S) 08
OTHER RELATIVE(S) OR FAMILY MEMBER(S) (SPECIFY) 09

FRIENDS(S)--(MAINLY) MALE 11
FRIENDS(S)--(MAINLY) FEMALE . . . 12
NEIGHBOR(S)--(MAINLY) MALE . . . 21
NEIGHBOR(S)--(MAINLY) FEMALE . . 22
CO-WORKER(S)--(MAINLY) MALE . . . 31
CO-WORKER(S)--(MAINLY) FEMALE . . 32
MEMBER(S) OF A GROUP--(MAINLY) MALE (SPECIFY) 41

MEMBER(S) OF A GROUP--(MAINLY) FEMALE (SPECIFY) 42

PROFESSIONAL ADVISOR OR CONSULTANT (SPECIFY) 50

OTHER (SPECIFY) 70

T16c. On the whole, did talking to (this person/these people) help a lot, some, not at all, or did it make things worse?

HELPED A LOT 01
HELPED SOME 02
HELPED NOT AT ALL 03
MADE THINGS WORSE 04

T17. HAND R SELF-REPORT BOOKLET TURNED TO T17.

These questions deal with your friends or relatives. Please circle an answer for each.

WHEN R FILLS OUT AND RETURNS BOOKLET GO TO T18.

Among your friends and relatives, is there someone:

		NO	YES
A.	...you can turn to in times of need?	01	02
B.	...you know whose advice you really trust?	01	02
C.	...you can call at the last minute to invite out for a drink or meal or to go to a movie? . . .	01	02
D.	...who would lend you $100-$200 if you needed it for an emergency?	01	02
E.	...you can talk to about family or personal problems?	01	02
F.	...who would lend you a car or drive you to a doctor, the airport, shopping, or somewhere else if you really needed it?	01	02
G.	...you could call who would bail you out if you were arrested and put in jail for some reason?	01	02
H.	...with whom you can share your private worries or fears?	01	02
I.	you can count on to look in on you regularly and help you if you had a serious injury or illness, or were recovering from surgery?	01	02
J.	...you can count on to pick you up when you are feeling down?	01	02

T18. About how many voluntary groups or organizations do you belong to--like church groups, clubs or lodges, parent groups, etc. ("Voluntary" means because you want to.)

RECORD NUMBER: ☐☐
GROUPS OR ORGANIZATIONS

NONE . . . . . 00 → (T19)

T18a. How active are you in the affairs of these groups or clubs you belong to? Would you say very active (attend most meetings), fairly active (attend fairly often), or not active (belong but hardly every go)?

If you belong to a great many, just count those you feel closest to.

VERY ACTIVE, ATTEND MOST MEETINGS 01
FAIRLY ACTIVE, ATTEND FAIRLY OFTEN 02
NOT ACTIVE, BELONG BUT HARDLY EVER GO 03

T19. In the past three months, have you participated in any activities or meetings run by any of the following groups?

		NO	YES
A.	A labor union, commercial group, or professional organization?	01	02
B.	A church group?	01	02
C.	A group concerned with children, such as the PTA, Boy Scouts, Girl Scouts, etc.?	01	02
D.	Any <u>other</u> group that is concerned with community betterment, charity, or service?	01	02
E.	Any other group that is mainly social fraternal or recreational?	01	02

T20. In general, how satisfying do you find the way you're spending your life these days? Would you call it completely satisfying, pretty satisfying, or not very satisfying?

PROBE: Overall or in general.

COMPLETELY SATISFYING 01
PRETTY SATISFYING 02
NOT VERY SATISFYING 03

SECTION U: DEMOGRAPHICS

U1. Now we would like a little more background information. In studies like this, we often compare the ideas of men and women, younger and older people, people of different economic backgrounds, and one group with another.

First, is your current religious preference Protestant, Roman Catholic, Jewish or something else?

PROTESTANT	01	
ROMAN CATHOLIC	02	
JEWISH	03	
BLACK MUSLIM	04	→ (U2)
NONE; NO PREFERENCE	05	
OTHER (SPECIFY)	06	

U1a. What church or denomination is that?

NON-DENOMINATIONAL PROTESTANT CHURCH	01
BAPTIST	02
METHODIST	03
LUTHERAN	04
PRESBYTERIAN	05
EPISCOPALIAN, ANGLICAN, CHURCH OF ENGLAND	06
CHURCH OF CHRIST	07
PENTECOSTAL OR ASSEMBLY OF GOD	08
CONGREGATIONAL	09
PRIMITIVE BAPTIST, FREE WILL BAPTIST OR MISSIONARY BAPTIST.	10
LATTER DAY SAINTS, MORMONS	11
"CHRISTIAN"	12
OTHER (SPECIFY)	13

U2. Other than for weddings or funerals, have you attended services at a church or other place of worship since you were 18 years old?

NO	01	→ (U4)
YES	02	

U2A. How often have you attended a religious service during the past month? Every day, more than once a week, once a week, 2 or 3 times, once, or not at all?

EVERY DAY 01
MORE THAN ONCE A WEEK 02
ONCE A WEEK 03
2 OR 3 TIMES IN PAST MONTH . . . 04
ONCE IN PAST MONTH 05
NOT AT ALL IN PAST MONTH 06

U3. How often do you usually attend religious services (attend church or other religious meetings)--more than once a week, once a week, two or three times a month, once a month, a few times a year, or less than once a year?

MORE THAN ONCE A WEEK 01
ONCE A WEEK 02
TWO OR THREE TIMES A MONTH . . . 03
ONCE A MONTH 04
A FEW TIMES A YEAR (1-3 TIMES) . 05
LESS THAN ONCE A YEAR 06
NEVER 07

U4. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, C1 AND C18.

IS R MARRIED OR LIVING WITH PARTNER AS THOUGH MARRIED?

NO . . . . . 01 → (U14)
YES 02

U5. Now I have a few questions about your (wife/husband/partner). First, how old was your (wife/husband/partner) on (his/her) last birthday?

RECORD AGE: [|]
YEARS

DON'T KNOW 94
REFUSED 97

U6. And what is the highest grade of school or year of college your (wife/husband/partner) has completed?

NONE, NO FORMAL SCHOOLING	00							
ELEMENTARY:	01	02	03	04	05	06	07	08
HIGH SCHOOL:	09	10	11	12				
COLLEGE:	13	14	15	16	→ (U6b)			
GRADUATE/PROFESSIONAL:	17	18	19	20+	→ (U6b)			

U6a. Did (s/he) get a high school graduation diploma or pass a high school equivalency test?

NO . . . . . 01 → (U7)
YES . . . . . 02 → (U7)

U6b. Does (s/he) have a college degree?

NO 01
YES 02

U7. Is your (wife/husband/partner) doing any work for pay at the present time?

NO 01
YES . . . . . 02 → (U8)

U7a. Is your (wife/husband/partner) currently unemployed, retired, (a housewife), (a student), or what?

CODE ONLY PRIMARY ACTIVITY.

UNEMPLOYED OR LAID OFF 01
RETIRED 02
KEEPING HOUSE 03
GOING TO SCHOOL OR TRAINING PROGRAM 04
PERMANENTLY DISABLED: SICK LEAVE FOR MORE THAN 6 MONTHS 05
SICK LEAVE (6 MOS. OR LESS); MATERNITY LEAVE 06
ON STRIKE 07

U7b. Has your (wife/husband/partner) ever worked for pay since you've been (married to/living with) (her/him)?

NO . . . . . 01 → (U14)
YES 02

U7c. When did (s/he) last work for pay at a regular job or business, either full-time or part-time?

RECORD DATE: [ ][ ] [ ][ ]
MONTH AND YEAR

DON'T KNOW 9494
REFUSED 9797

U8. For how many years in total has your (wife/husband/partner) worked for pay since you've been (married to/living with) (him/her)?

RECORD NUMBER: [|]
YEARS

DON'T KNOW 94
REFUSED 97

U9. What kind of work (does/did) (s/he) do in (his/her) (last) job? What (is/was) (his/her) main occupation?

RECORD JOB TITLE: E.G., TYPIST, SALES CLERK, ELECTRICAL ENGINEER, ETC.

_____

_____

U10. What (are/were) (her/his) most important activities or duties? Tell me a little more about what (she/he) actually (does/did) in that job? E.G., TYPE, SELL SHOES, FILE, KEEP ACCOUNT BOOKS, ETC.

_____ OCCUPATIO[illegible]

_____ [|]

U11. For whom (does/did) (s/he) work (last)?

_____
NAME OF COMPANY, BUSINESS OR OTHER EMPLOYER.

U12. What kind of business or industry (is/was) that? What (do/did) they do or make at the place where s/he (work/worked)?

E.G., TV AND RADIO MANUFACTURING, RETAIL SHOE STORE, STATE LABOR DEPARTMENT, FARM, ETC.

_____ INDUSTRY

_____ [ ]

U13. (Does/did) (s/he) work for (herself/himself) or for someone else?

SELF-EMPLOYED 01
SOMEONE ELSE 02
BOTH 03

U14. INTERVIEWER CHECKPOINT: REVIEW TALLY SHEET X, A5.

IS RESPONDENT OF HISPANIC ORIGIN?

NO	01	→ (U22)
YES	02	

U15. Do you speak any Spanish?

NO	01	→ (U20)
YES	02	
VOLUNTEERS: UN POQUITO, A FEW WORDS, ETC.	03	→ (U20)

U16. What was your first language as a child?

ENGLISH	01
SPANISH	02
OTHER (SPECIFY)	03

U17. Would you say that you speak mostly Spanish, or do you speak mostly English, or do you speak Spanish and English about the same?

SPANISH ONLY	01
MOSTLY SPANISH	02
BOTH ABOUT THE SAME	03
MOSTLY ENGLISH	04

U18. What language do you prefer: Spanish only, mostly Spanish, mostly English, English only, or Spanish and English about equally?

SPANISH ONLY	01
MOSTLY SPANISH	02
BOTH EQUALLY	03
MOSTLY ENGLISH	04
ENGLISH ONLY	05

U19. What language do you read better?

ENGLISH	01
BOTH THE SAME	02
SPANISH	03
CAN'T READ	04
OTHER (SPECIFY)	05

U20. Can you write in Spanish?

NO	01	→ (U21)
YES	02	

U20a. Can you write in English?

NO	01	→ (U21)
YES	02	

U20b. In what language do you write better?

ENGLISH	01
BOTH THE SAME	02
SPANISH	03

U21. REVIEW TALLY SHEET X, A5a.

About how many of your friends are (HISPANIC GROUP MENTIONED IN A5a)--would you say all, most, about half, a few, or none of your friends are (HISPANIC GROUP)?

ALL	01	→ (U22)
MOST	02	
ABOUT HALF	03	
A FEW	04	
NONE	05	

U21a. And how many are members of <u>other</u> Hispanic groups?

ALL	01
MOST	02
ABOUT HALF	03
A FEW	04
NONE	05

U22. HAND R CARD U-22 TO USE THROUGH U24.

In this survey of people all over the country, we are trying to get a clear picture of people's financial situations. Please look at this card and tell me which letter (will best represent/best represents) the total income before taxes of all persons living in your household in the calendar year of 1986. This should include not only wages, salaries, tips and commissions, but also net income from a business or farm, social security, pensions, unemployment or disability compensation, alimony or child support, welfare, dividends, interest, rent or sale of property, and any other money income received by all family members--by you or anyone else in the family living with you.

IF DON'T KNOW, PROBE ONCE: Give me your best estimate.

A.	NOTHING, OR LOSS	01
B.	LESS THAN $1,000	02
C.	$1,000 - 1,999	03
D.	$2,000 - 2,999	04
E.	$3,000 - 3,999	05
F.	$4,000 - 4,999	06
G.	$5,000 - 5,999	07
H.	$6,000 - 6,999	08
I.	$7,000 - 7,999	09
J.	$8,000 - 8,999	10
K.	$9,000 - 9,999	11
L.	$10,000 - 10,999	12
M.	$11,000 - 12,499	13
N.	$12,500 - 14,999	14
O.	$15,000 - 17,499	15
P.	$17,500 - 19,999	16
Q.	$20,000 - 24,999	17
R.	$25,000 - 29,999	18
S.	$30,000 - 39,999	19
T.	$40,000 - 49,999	20
U.	$50,000 OR MORE	21
	DON'T KNOW	94
	REFUSED	97

U23. Including yourself, how many persons are supported by the household's total income?

RECORD NUMBER: [ ][ ]
PEOPLE

DON'T KNOW	94
REFUSED	97

U24. POINT TO CARD U-22.

Now look at the card and tell me which letter (will) represent(s) your total (personal) income before taxes for 1986. (About how much of this total (household) income (was/will be) earned or brought in by you personally in 1986?)

IF DON'T KNOW, PROBE ONCE: Give me your best estimate.

A.	NOTHING, OR LOSS	01
B.	LESS THAN $1,000	02
C.	$1,000 - 1,999	03
D.	$2,000 - 2,999	04
E.	$3,000 - 3,999	05
F.	$4,000 - 4,999	06
G.	$5,000 - 5,999	07
H.	$6,000 - 6,999	08
I.	$7,000 - 7,999	09
J.	$8,000 - 8,999	10
K.	$9,000 - 9,999	11
L.	$10,000 - 10,999	12
M.	$11,000 - 12,499	13
N.	$12,500 - 14,999	14
O.	$15,000 - 17,499	15
P.	$17,500 - 19,999	16
Q.	$20,000 - 24,999	17
R.	$25,000 - 29,999	18
S.	$30,000 - 39,999	19
T.	$40,000 - 49,999	20
U.	$50,000 OR MORE	21
	DON'T KNOW	94
	REFUSED	97

U25. How many individuals live in your household, counting yourself?

RECORD NUMBER: ☐☐ PEOPLE IF ONLY ONE → (U26)

DON'T KNOW 94
REFUSED 97

U25a. (Other than your [wife/husband/partner/children]) does anyone else live in your household with you now?

NO . . . . . 01 → (U26)
YES 02

U25b. I would like to know the first name, age, sex, and relationship to you of each person other than your (wife/husband/partner/children) who lives in your household. Please start with the oldest person.

#	FIRST NAME (OPTIONAL)	SEX CODE M=01 F=02	AGE	RELATION CODE
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				

RELATION CODES

PARENT	01
PARENT-IN-LAW	02
SIBLING	03
SIBLING-IN-LAW	04
GRANDPARENT	05
AUNT OR UNCLE	06
NIECE OR NEPHEW	07
COUSIN	08
GRANDCHILD	09
OTHER RELATIVE	10
FRIEND/ROOMMATE	11
ROOMER/TENANT	12
EMPLOYEE OR SERVANT	13
OTHER NONRELATIVE	14

EXCLUDE SPOUSE, PARTNER AND CHILDREN

U26. How long have you (personally) lived here in . . . (NAME OF CITY, TOWN, OR COUNTY)?

RECORD ACTUAL NUMBER: ☐☐ YEARS AND ☐ MONTHS

DON'T KNOW 9494
REFUSED 9797

U26a. IF U26 = 10 OR MORE YEARS → (U27)

How many different communities (towns, cities, or military bases) have you lived in the last 10 years (even if only for a short period of time)?

RECORD NUMBER: ☐☐☐ DIFFERENT COMMUNITIES

DON'T KNOW 994
REFUSED 997

U27. How long have you (personally) lived (here) at this address (that is, how many years and months)?

PROBE: That is, how long have you been here at this place?

IF R IN INSTITUTION, LENGTH OF STAY = LENGTH OF CURRENT ADMISSION.

RECORD ACTUAL NUMBER: ☐☐ YEARS AND ☐☐ MONTHS

DON'T KNOW 9494
REFUSED 9797

U27a. IF U27 = 10 OR MORE YEARS → (U28).

Altogether, how many different addresses have you lived at in the last 10 years, even if only for a short period of time?

RECORD NUMBER: ☐☐ PLACES

DON'T KNOW 94
REFUSED 97

U28. HAND R CARD U-28.

What is the size of this community?

VERY LARGE CITY
(OVER 1,500,000) 01
LARGE CITY (250,000-1,499,999) . 02
SUBURB NEAR A LARGE CITY 03
MEDIUM-SIZED CITY
(50,000-249,999) 04
SMALL TOWN OR CITY
(UNDER 50,000) 05
ON A FARM OR RANCH 06
IN OPEN COUNTRY BUT NOT ON A
FARM OR RANCH 07

U29.

RECORD ENDING DATE AND TIME: ☐☐ MONTH / ☐☐ DAY ☐☐ HOUR : ☐☐ MINUTE A.M. P.M.

ID NO.:

NSVG FOLLOWUP LOCATOR UPDATE

1. Finally, please tell me for our records, what is your complete name, address, including city or town, state, county and Zip code, and telephone number.

   a. NAME: _____

   b. ADDRESS: _____
   STREET ADDRESS

   _____ _____
   CITY/TOWN COUNTY

   _____ _____
   STATE OR COUNTRY ZIP CODE

   c. TELEPHONE: ( ) _____

2. Do you expect to change your name, address or telephone number within the next year?

   NO 01
   YES 02

   ENTER AS MUCH NEW INFORMATION AS POSSIBLE.

   a. NAME: _____

   b. ADDRESS: _____

   _____

   _____

   c. TELEPHONE: ( ) _____
   AREA CODE

   _____

We may need to contact you for further information some time in the future. Please give me the name, address and telephone number of two people who do not live with you who will always know how to get in touch with you.

3. FIRST PERSON:

a. NAME: _____

b. ADDRESS: _____

_____

_____

c. TELEPHONE: (_____) _____
AREA CODE

d. How is this person related to you?

_____

4. SECOND PERSON:

a. NAME: _____

b. ADDRESS: _____

_____

_____

c. TELEPHONE: (_____) _____
AREA CODE

d. How is this person related to you?

_____

CONCLUDING STATEMENT:

Those are all the questions that I have. Thank you very much for your help.

GIVE RESPONDENT CHECK AND COLLECT SIGNED RECEIPT.

SECTION X: INTERVIEWER OBSERVATIONS

TO BE COMPLETED BY THE INTERVIEWER IMMEDIATELY AFTER THE INTERVIEW

X1. HOW DIFFICULT WAS IT TO MAKE CONTACT WITH THE RESPONDENT?

VERY DIFFICULT	01
ABOVE AVERAGE	02
AVERAGE	03
BELOW AVERAGE	04
NOT DIFFICULT AT ALL	05

X2. HOW MANY VISITS (OR MEETINGS) DID IT TAKE TO COMPLETE THE INTERVIEW?

ONE	01
TWO	02
THREE	03
FOUR OR MORE	04

X3. WHERE WAS THE INTERVIEW CONDUCTED?

	SESSION 1	(IF APPLICABLE) SESSION 2	(IF APPLICABLE) SESSION 3
RESPONDENT'S HOME	01	01	01
LIBRARY	02	02	02
R'S WORKPLACE/OFFICE	03	03	03
YMCA/YWCA	04	04	04
OTHER COMMUNITY CENTER (SPECIFY) _____	05	05	05
RESTAURANT	06	06	06
OTHER (SPECIFY) _____	07	07	07

X4. WERE THERE OTHER PERSONS PRESENT DURING THE INTERVIEW?

NO	01	→ (GO TO X5)
YES	02	

X4a. WHO WERE THE OTHER PERSONS PRESENT DURING THE INTERVIEW?

CIRCLE ALL THAT APPLY.

CHILDREN UNDER SIX 01
OTHER CHILDREN 02
SPOUSE 03
OTHER RELATIVES (SPECIFY) 04

_____

OTHER ADULTS (SPECIFY) 05

_____

X4b. FOR WHICH SECTIONS OF THE QUESTIONNAIRE WERE THEY PRESENT FOR ALL OR PART OF THE ADMINISTRATION?

CIRCLE ALL THAT APPLY.

PREAMBLE AND ELIGIBILITY (SECTION A) 01
MARITAL HISTORY AND ADJUSTMENT (SECTION C) 02
PARENTING HISTORY AND ADJUSTMENT (SECTION D) . . . 03
EDUCATIONAL HISTORY (SECTION E) 04
OCCUPATIONAL HISTORY AND WORK ROLE ADJUSTMENT (SECTION F) 05
CHILDHOOD AND FAMILY HISTORY (SECTION G) 06
MILITARY SERVICE HISTORY (SECTION H) 07
VIETNAM EXPERIENCE (SECTION J) 08
POST-SERVICE (SECTION K) 09
STRESSFUL AND TRAUMATIC LIFE EVENTS (SECTION M) . . 10
SELF-PERCEPTIONS, ATTITUDES AND NONSPECIFIC DISTRESS (SECTION N) 11
PHYSICAL HEALTH STATUS (SECTION P) 12
DIAGNOSTIC INTERVIEW SCHEDULE (SECTION R) 13
USE OF HEALTH AND MENTAL HEALTH SERVICES (SECTION S) 14
SOCIAL SUPPORT (SECTION T) 15
DEMOGRAPHICS (SECTION U) 16

X4c. HOW MUCH DO YOU THINK THE PRESENCE OF OTHER PEOPLE INFLUENCED THE ANSWERS OF THE RESPONDENT?

A GREAT DEAL 01
SOME 02
VERY LITTLE 03
NONE 04

X5. OVERALL, HOW GREAT WAS THE RESPONDENT'S INTEREST IN THE INTERVIEW?

VERY HIGH 01
ABOVE AVERAGE 02
AVERAGE 03
BELOW AVERAGE 04
VERY LOW 05

X6. OVERALL, HOW DIFFICULT WERE THE QUESTIONS FOR THE RESPONDENT TO UNDERSTAND?

VERY DIFFICULT 01
ABOVE AVERAGE 02
AVERAGE 03
BELOW AVERAGE 04
NOT DIFFICULT AT ALL 05

X7. HOW WOULD YOU RATE THE TRUTHFULNESS OF THE RESPONDENT'S ANSWERS?

VERY TRUTHFUL 01
ABOVE AVERAGE 02
AVERAGE 03
BELOW AVERAGE 04
NOT TRUTHFUL AT ALL 05

X8. OVERALL, HOW EMOTIONALLY UPSETTING WERE THE QUESTIONS?

VERY UPSETTING 01
ABOVE AVERAGE 02
AVERAGE 03
BELOW AVERAGE 04
NOT UPSETTING AT ALL . . . . . 05 → (X9)

X8a. WHICH QUESTIONS OR SECTIONS IN PARTICULAR WERE UPSETTING TO THE RESPONDENT?

_____

_____

_____

_____

X9. HOW DID THE RESPONDENT FEEL ABOUT THE LENGTH OF THE INTERVIEW?

TOO LONG 01
ABOUT RIGHT 02
TOO SHORT 03
OTHER 04

SPECIFY: _____

_____

_____

X10. HOW WOULD YOU RATE R'S I.Q.?

HIGH 01
AVERAGE 02
LOW, BUT SUFFICIENT 03
TOO LOW TO ENSURE COMPREHENSION . 04

X11. DID THE RESPONDENT USE NEOLOGISMS? (MADE-UP MEANINGLESS WORDS.)

NO 01
YES 02

EXAMPLES: _____

_____

_____

X12. DID S/HE BEHAVE AS IF EXPERIENCING FLASHBACKS DURING ANY PART OF THE INTERVIEW?

NO 01
YES 02

EXAMPLES: _____

_____

_____

X13. DID THE RESPONDENT BEHAVE AS IF S/HE WAS HALLUCINATING DURING ANY PART OF THE INTERVIEW?

NO 01
YES 02

EXAMPLES: _____

_____

_____

X14. DID THE RESPONDENT EXPERIENCE FLAT AFFECT EMOTIONALLY? (LACK OF EMOTIONAL RESPONSIVENESS SUCH AS SMILING, SADNESS, IRRITABILITY, ETC.--I.E., LACK OF FACIAL EXPRESSION, SHOULD PERSIST THROUGHOUT INTERVIEW TO BE CODED YES.)

NO 01
YES 02

X15. WAS THERE ANY EVIDENCE OF A THOUGHT DISORDER? (VERBAL PRODUCTION THAT MAKES COMMUNICATION DIFFICULT BECAUSE OF A LACK OF LOGICAL OR UNDERSTANDABLE ORGANIZATION.)

NO 01
YES 02

EXAMPLES: _____

_____

_____

X16. DOES R HAVE ANY OF THE FOLLOWING ABNORMALITIES?

(CIRCLE ONE CODE FOR EACH.)

		NO	YES
A.	GROSSLY OBESE	01	02
B.	VERY THIN, SKELETON-LIKE	01	02
C.	SPEECH IMPEDIMENT (ENOUGH TO IMPAIR COMMUNICATION)	01	02
D.	BLIND	01	02
E.	DEAF	01	02

X17. IS R CRIPPLED IN ANY WAY?

NO . . . . . 01 → (X18)
YES 02

X17a. WHICH PART OF THE BODY IS AFFECTED?

_____

X17b. HOW SEVERE IS THE PROBLEM?

VERY SEVERE 01
MODERATELY SEVERE 02
NOT SEVERE 03

X18. IS R DISFIGURED IN ANY WAY?

NO . . . . . 01 → (X19)
YES 02

X18a. WHICH PART OF THE BODY IS DISFIGURED? (DESCRIBE TYPE)

_____

X18b. HOW SEVERE IS THE DISFIGUREMENT?

VERY SEVERE 01
MODERATELY SEVERE 02
NOT SEVERE 03

X19. DOES R HAVE ANY OTHER APPARENT ILLNESS? (REFER TO QUESTION E1.)

NO . . . . . 01 → (X20)
YES 02

X19a. DESCRIBE THE TYPE OF ILLNESS R HAS.

_____

X20. AT THE END OF THE INTERVIEW, WAS THE RESPONDENT DISTRESSED OR UPSET IN ANY WAY?

NO . . . . . 01 → (X21)
YES 02

X20a. PLEASE DESCRIBE:

_____

_____

_____

_____

X21. WHAT OTHER COMMENTS DO YOU HAVE?

_____

_____

_____

_____

TALLY SHEET X

A4-5. Race/Ethnicity: ☐ Black Non-Hispanic ☐ Hispanic ☐ White Non-Hispanic

A5a. National origin: _____

A10, 11, 11a. Active duty status: ☐ Active

C1. Marital status:

☐ Married ☐ Separated ☐ Divorced ☐ Widowed ☐ Never Married

C1a. Currently living with spouse: ☐ Yes ☐ No

C16. Ever live as though married: ☐ Yes

C18. Living with someone as though married: ☐ Yes

D11. Parental status: ☐ Is/Acted as a Parent

G5., G5a., G5e. Raised by couple: ☐ Yes

H31. Vietnam theatre status: ☐ Vietnam Theatre Vet ☐ Vietnam Era Vet

S13.

____ A. Minister, priest, or rabbi

____ B. Psychiatrist or other mental health specialist at a health plan or family clinic

____ C. Psychiatrist, social worker, or counselor in private practice

____ D. Medical doctor in private practice

____ E. Mental health center

____ F. Psychiatric outpatient clinic at a general or university hospital

____ G. Outpatient clinic in a psychiatric hospital

____ H. Outpatient clinic in a VA hospital

____ I. Veterans Outreach (Vet) Center

____ J. Drug clinic or center

____ K. Alcohol clinic or center

____ L. Hospital emergency room

____ M. Family service, child counseling, or social service agency

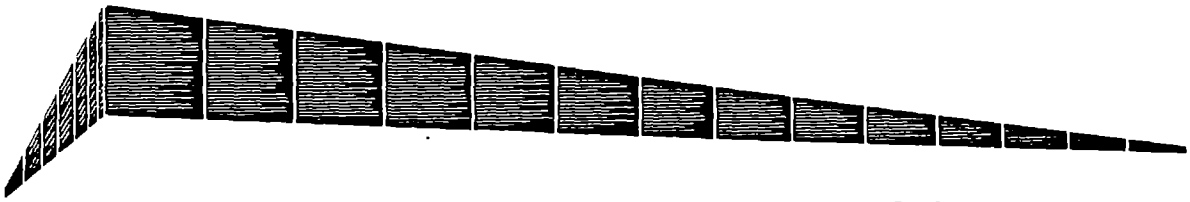
____ N. Self-help group

____ O. Community program such as a crisis center or hotline

____ P. Natural therapist (spiritualist, herbalist, faith healer, etc.)

____ Q. Curandero, santero, sobador

____ R. Anyone else



NATIONAL SURVEY OF THE VIETNAM GENERATION

FLASHCARD BOOKLET

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A-4

A American Indian

B Alaskan Native

C Asian

D Pacific Islander

E Black

F White

G Other

A-5

A Puerto Rican

B Cuban

C Cuban-American

D Mexican

E Mexicano

F Mexican-American

G Chicano

H Central or South American-Spanish Country

I Other Spanish or Hispanic

C-22

Almost always agree

Occasionally disagree

Frequently disagree

Almost always disagree

One decides without discussion

C-23a

Strongly agree

Somewhat agree

Neither agree nor disagree

Somewhat disagree

Strongly disagree

C-27

Very often

Fairly often

Sometimes

Almost never

Never

E-8

Went to college

Worked for a year or two and then went to college

Got a part-time job and went to college

Got a full-time job and went to college

Went to trade school or took special training

Got a job

Became an apprentice

Military service

Other

F-2

Working now

With a job, but not at work (because of temporary illness, on sick leave, vacation, labor dispute, on strike, bad weather, or other temporary layoff)

Unemployed or permanent layoff

Retired

Going to school or training program

Keeping house

Disabled (unable to work)

Not working - institutionalized

Other

F-14

An employee of a private company, business, or individual for wages, salary, or commissions

A government employee (federal, state, county, or local government)

Self-employed in own business, professional practice, or farm

Working for pay in a family business or farm

Working *without pay* in a family business or farm

Other

F-29

An employee of a private company, business, or individual for wages, salary, or commissions

A government employee (federal, state, county, or local government)

Self-employed in own business, professional practice, or farm

Working for pay in a family business or farm

Working *without pay* in a family business or farm

Other

G-12

Poor	01
	02
Fair	03
	04
Average	05
	06
Good	07
	08
Excellent	09

G-13

Not at all

Just a little

Some

Pretty much

A great deal

G-24

Poor	01
	02
Fair	03
	04
Average	05
	06
Good	07
	08
Excellent	09

G-25

Not at all

Just a little

Some

Pretty much

A great deal

H-3

I-A:	Available for military service
I-A-0:	Conscientious objector, available for non-combatant military service
I-A-OM:	Medical, dental or allied specialist available for non-combatant military service
I-AM:	Medical, dental, or allied specialist
I-C:	Member of environmental or public health commissions or military
I-H:	Won draft lottery, too young (registrant not subject to processing for induction)
I-D:	Qualified member of reserve or student in ROTC or accepted aviation cadet
I-O:	Conscientious objector available only for civilian work
I-OM:	Medical, dental or allied specialist available for alternative service
I-S:	Student until graduates from high school or 20th birthday or until completes academic university career
I-W:	Conscientious objector in civilian work, or who has completed civilian work requirements
I-Y:	Registrant who qualifies only in time of war or national emergency
II-A:	Occupational deferment—apprentice
II-AM:	Medical, dental or allied specialist deferred because of community service
II-C:	Agricultural
II-D:	Divinity student
II-M:	Medical student
II-S:	Student (not different from I-S)
III-A:	Extreme hardship deferment or has children
IV-A:	Registrant with sufficient prior active service or sole surviving son
IV-B:	Public official deferred by law
IV-C:	Aliens or dual national — not liable for military service
IV-D:	Minister of religion or divinity
IV-F:	Registrant not qualified for any service
IV-FM:	Medical specialist not qualified for military service
IV-W:	Registrant who has completed alternative service in lieu of induction
IV-G:	Registrant exempted from service during peacetime
V-A:	Over age of liability (over 35) for service

H-5

Applied for noncombatant status

Applied for conscientious objector status

Applied for psychiatric deferment

Applied for medical deferment

Pursued active draft resistance

Arranged for a doctor to write a letter to the draft board which exaggerated a problem in order to get a deferment

Used student deferment

Other

MILITARY PAY GRADES AND RANK TITLES (ENLISTED MEN)

PAY GRADE	ARMY NCOs	ARMY SPECIALISTS	NAVY	AIR FORCE	MARINE CORPS
E-1	Private		Seaman Recruit	Airman Basic; Pre-1968: Airman	Private
E-2	Private		Seaman Apprentice	Airman; Pre-1968: Airman Third Class	Private First Class
E-3	Private First Class		Seaman	Airman First Class; Pre-1968: Airman Second Class	Lance Corporal
E-4	Corporal	Specialist 4	Petty Officer, Third Class	Sergeant; Pre-1968: Airman First Class	Corporal
E-5	Sergeant	Specialist 5	Petty Officer, 2nd Class	Staff Sergeant	Sergeant
E-6	Staff Sergeant	Specialist 6	Petty Officer, 1st Class	Technical Sergeant	Staff Sergeant
E-7	Platoon Sergeant; Sergeant First Class	Specialist 7	Chief Petty Officer	Master Sergeant	Gunnery Sergeant
E-8	Master Sergeant; First Sergeant		Senior Chief Petty Officer	Senior Master Sergeant	Master Sergeant; First Sergeant
E-9	Sergeant Major		Master Chief Petty Officer	Chief Master Sergeant	Sergeant Major; Master Gunnery Sergeant

MILITARY PAY GRADES AND RANK TITLES (OFFICERS)

PAY GRADE	ARMY	Navy	AIR FORCE	MARINE CORPS
O-1	Second Lieutenant	Ensign	Second Lieutenant	Second Lieutenant
O-2	First Lieutenant	Lieutenant Junior Grade	First Lieutenant	First Lieutenant
O-3	Captain	Lieutenant	Captain	Captain
O-4	Major	Lieutenant Commander	Major	Major
O-5	Lieutenant Colonel	Commander	Lieutenant Colonel	Lieutenant Colonel
O-6	Colonel	Captain	Colonel	Colonel
O-7	Brigadier General	Commodore	Brigadier General	Brigadier General
O-8	Major General	Rear Admiral	Major General	Major General
O-9	Lieutenant General	Vice Admiral	Lieutenant General	
O-10	General	Admiral	General	General

MILITARY PAY GRADES AND RANK TITLES (WARRANT OFFICERS)

PAY GRADE	ARMY	Navy	AIR FORCE	MARINE CORPS
W-1	Warrant Officer	Warrant Officer	Warrant Officer	Warrant Officer
W-2	Chief Warrant Officer	Chief Warrant Officer	Chief Warrant Officer	Chief Warrant Officer
W-3	Chief Warrant Officer	Chief Warrant Officer	Chief Warrant Officer	Chief Warrant Officer
W-4	Chief Warrant Officer	Chief Warrant Officer	Chief Warrant Officer	Chief Warrant Officer

H-24

Honorable

General (under honorable conditions)

Undesirable (under other than honorable conditions)

Bad conduct

Dishonorable

Dismissal (applies to officers only)

Other

H-25

Release or separation at end of normal term of service contract (not medical or disability) with less than 20 years of service

Release due to reduction in force

Military retirement for length of service (20 or more years)

Medical or disability release

Military retirement for disability

Release due to marriage, pregnancy, or children

Early Out program

Other release

Before World War II (before September 16, 1940)

World War II (September 16, 1940 — July 25, 1947)

Between World War II and Korean Conflict
(July 26, 1947 — June 26, 1950)

Korean Conflict (June 27, 1950 — January 31, 1955)

Between Korean Conflict and Vietnam Era
(February 1, 1955 — August 4, 1964)

Vietnam Era (August 5, 1964 — May 7, 1975)

After Vietnam Era (after May 7, 1975)

J-2

Extremely opposed

Fairly opposed

Somewhat opposed

Somewhat in favor

Fairly in favor

Extremely in favor

J-7

Stationed in Vietnam

Stationed in Laos or Cambodia

Duty in waters in or around Vietnam

Duty in waters in or around Laos or Cambodia

Involved in air missions over Vietnam

Involved in air missions over Laos or Cambodia

Other

J-16

Very satisfying

Somewhat satisfying

Not too satisfying

Not at all satisfying

Did not experience

SOME EXAMPLES OF MILITARY UNITS INVOLVED IN THE VIETNAM WAR:

Company A, 2nd Battalion, 12th Calvary, 1st Calvary Division (Airmobile)

310th Tactical Airlift Squadron, Phan Rang Air Base, Republic of Vietnam

USNS Subic Bay

Headquarters Battery, 3rd Battalion, 18th Artillery, 23rd Infantry (Americal) Division

67th Tactical Fighter Squadron, Kadena Air Base, Okinawa

Company B, 123rd Combat Aviation Group (Aeroscouts), 23rd Infantry Division

A Company, 3rd Medical Battalion, 3rd Marine Division

Company B, 4th Battalion, 39th Infantry, 9th Infantry Division

Company D, 1st Battalion, 4th Marines (Rein), 3rd Marine Division (Reinf)

USS Glennon

12th Aerial Port Squadron, Cam Rahn Bay Air Base, Vietnam, Pacific Air Force

Company D, 1st Battalion, 35th Infantry, 4th Infantry Division

Company M, 3rd Battalion, 4th Regiment, 3rd Marine Division

J-21

Highly competent and able

Fairly competent

About average

Somewhat incompetent

Totally incompetent

J-36a

Very often

Often

Sometimes

Rarely

Never

J-43

Very Often: Occurred *weekly or more* (more than 50 times) during my tour(s), or nearly daily for a shorter period of time.

Often: Occurred on an average of *a few times per month* (13-50 times) during my tour(s) or more often for a shorter period.

Sometimes: Occurred on the average of *once a month* (or 4-12 times) during my tour(s).

Rarely: Occurred a *few times* (1-3 times) during my tour(s)

Never: Experience did *not occur.*

J-62

Very common

Common

Done occasionally

Hardly ever

Never done

J-68

Very often

Often

Sometimes

Rarely

Never

J-70

Extremely opposed

Fairly opposed

Somewhat opposed

Somewhat in favor

Fairly in favor

Extremely in favor

J-76

Very closely

Somewhat closely

Not too closely

Not at all

K-9

Terrible

Unhappy

Mostly dissatisfied

Mixed (about equally satisfied and dissatisfied)

Mostly satisfied

Pleased

Delighted

K-26

Agree strongly

Agree mildly

Neither agree nor disagree

Disagree mildly

Disagree strongly

K-32

No one
Husband or wife
Partner (live-in)
Father
Mother
Brother(s)
Sister(s)
Son(s)
Daughter(s)
Other relative(s) or family members

Friend(s)
Neighbor(s)
Co-worker(s)
Member(s) of a group
Professional advisor or consultant
Other

N-2

Strongly agree

Agree mildly

Neither agree nor disagree

Disagree mildly

Disagree strongly

N-11

Strongly agree

Somewhat agree

Neither agree nor disagree

Somewhat disagree

Strongly disagree

N-12

Very often

Fairly often

Sometimes

Almost never

Never

N-42

Never

Once

Twice

3-5 times

6-10 times

11-20 times

More than 20 times

P-3

Within past two weeks

Within past three months

Within the past year

More than a year ago

Onset/Recency

Within the past two weeks

More than 2 weeks ago but within the past month

More than 1 month ago but within the past 6 months

More than 6 months ago but within the past year

More than 1 year ago but within the past 3 years

More than 3 years ago

R-266, 268, 270

About every day

5-6 days per week

3-4 days per week

1-2 days per week

1-3 times per month

3-11 days in past 12 months

Once or twice in past 12 months

Never - not in past 12 months

R-351

Marijuana: Hashish, pot, grass

Amphetamines: Stimulants, uppers, speed

Barbiturates: Sedatives, downers, sleeping pills, seconal, quaaludes

Tranquilizers: Valium, librium

Cocaine: Coke, crack

Heroin: H, horse, brown

Opiates: Codeine, demerol, morphine, methadone, darvon, opium

Psychedelics: LSD, mescaline, peyote, psilocybin, DMT, PCP

R-358

Every day

5-6 times per week

3-4 times per week

1-2 times per week

2-3 times per month

About once per month

Less than once per month

R-368

Used every day for at least 1 week

Used every day for at least 2 weeks

Used every day for at least 1 month

R-446

Assaultive Offenses: Murder, manslaughter, robbery, rape

Property or Income Offenses: Burglary, larceny, arson, theft, buying/receiving/possessing stolen property, vandalism, embezzlement, fraud, forgery/counterfeiting

Public Order Offenses: Prostitution, drunkeness, vagrancy, disorderly conduct, gambling

Driving under the influence of alcohol or other drugs

Sale, possession or manufacture of illegal drugs

S14b

Within the past two weeks

More than 2 weeks ago but within the past month

More than 1 month ago but within the past 6 months

More than 6 months ago but within the past year

More than 1 year ago but within the past 3 years

More than 3 years ago

T-2

No immediate family

In this household

In this same neighborhood

In this same city

In this same county

In this same state

In another state

Outside the country

T-6

Every day

Several days a week

About once a week

Two or three times a month

About once a month

Five to ten times a year

Less than five times a year

T-7

Every day

Several days a week

About once a week

Two or three times in past month

Once in past month

Not at all in past month

T-9

Every day

Several days a week

About once a week

Two or three times

Once

Not at all

T-16

No one
Husband or wife
Partner (live-in)
Father
Mother
Brother(s)
Sister(s)
Son(s)
Daughter(s)
Other relative(s) or family members

Friend(s)
Neighbor(s)
Co-worker(s)
Member(s) of a group
Professional advisor or consultant
Other

U-22

A. Nothing, or loss
B. Less than $1,000
C. $1,000 - 1,999
D. $2,000 - 2,999
E. $3,000 - 3,999
F. $4,000 - 4,999
G. $5,000 - 5,999
H. $6,000 - 6,999
I. $7,000 - 7,999
J. $8,000 - 8,999
K. $9,000 - 9,999
L. $10,000 - 10,999
M. $11,000 - 12,499
N. $12,500 - 14,999
O. $15,000 - 17,499
P. $17,500 - 19,999
Q. $20,000 - 24,999
R. $25,000 - 29,999
S. $30,000 - 39,999
T. $40,000 - 49,999
U. $50,000 or more

U-28

Very large city (over 1,500,000)

Large city (250,000 - 1,499,999)

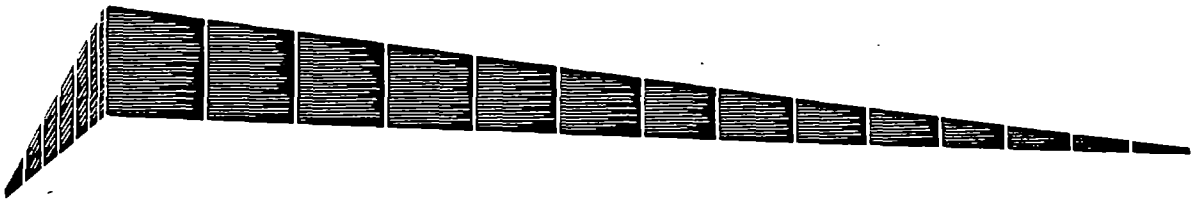
Suburb near a large city

Medium sized city (50,000 - 249,000)

Small town or city (under 50,000)

On a farm or ranch

In open country but not on a farm or ranch



NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
EXPIRES: 12/31/88

SELF-REPORT BOOKLET

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Ty 5

C25

C25

Please indicate how often you do each of the following things by circling one of the numbers.

	ALL THE TIME	MOST OF THE TIME	MORE OFTEN THAN NOT	OCCA-SIONALLY	RARELY	NEVER
A. How often do you discuss or have you considered divorce, separation, or terminating your relationship?	01	02	03	04	05	06
B. In general, how often do you think that things between you and your partner are going well?	01	02	03	04	05	06
C. How often do you and your partner quarrel?	01	02	03	04	05	06
D. How often do you and your partner "get on each others nerves?"	01	02	03	04	05	06

C26. How often have you been upset about how you and your spouse or partner were getting along in the sexual part of your life?

OFTEN.....01
SOMETIMES.....02
RARELY.....03
NEVER.....04

D19

D19

FOR RESPONDENTS WITH CHILDREN LIVING WITH THEM

Please indicate how often each of these describes your family at the present time.

Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOME-TIMES	FRE-QUENTLY	ALMOST ALWAYS
A. Family members are supportive of each other during difficult times	01	02	03	04	05
B. Family members sometimes get so angry they throw things	01	02	03	04	05
C. In our family, it is easy for everyone to express his/her opinion	01	02	03	04	05
D. It is easier to discuss problems with people outside the family than with other family members	01	02	03	04	05
E. Each family member has input in major family decisions	01	02	03	04	05
F. Our family gathers together in the same room	01	02	03	04	05
G. Family members sometimes hit each other	01	02	03	04	05
H. Children have a say in their discipline	01	02	03	04	05
I. Our family does things together	01	02	03	04	05
J. Family members discuss problems and feel good about the solutions	01	02	03	04	05
K. In our family, everyone goes his/her own way	01	02	03	04	05
L. We shift household responsibilities from person to person	01	02	03	04	05
M. Family members know each other's close friends	01	02	03	04	05
N. It is hard to know what the rules are in our family	01	02	03	04	05

CONTINUE ON NEXT PAGE

D19

D19

	Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOME-TIMES	FRE-QUENTLY	ALMOS ALWA
O.	Family members consult other family members on their decision	01	02	03	04	0
P.	We fight a lot in our family	01	02	03	04	0
Q.	Family members say what they want	01	02	03	04	0
R.	We have difficulty thinking of things to do as a family	01	02	03	04	0
S.	In solving problems, the children's suggestions are followed	01	02	03	04	0
T.	Family members feel very close to each other	01	02	03	04	0
U.	Family members rarely criticize each other	01	02	03	04	0
V.	Discipline is fair in our family	01	02	03	04	0
W.	Family members feel closer to people outside the family than to other family members	01	02	03	04	0
X.	Our family tries new ways of dealing with problems	01	02	03	04	0
Y.	Family members go along with what the family decides to do	01	02	03	04	0
Z.	In our family, everyone shares responsibilities	01	02	03	04	0
AA.	Family members like to spend their free time with each other	01	02	03	04	0
BB.	It is difficult to get a rule changed in our family	01	02	03	04	0
CC.	Family members avoid each other at home	01	02	03	04	0

CONTINUE ON NEXT PAGE

D19

D19

Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOME-TIMES	FRE-QUENTLY	ALMOST ALWAYS
DD. When problems arise, we compromise	01	02	03	04	05
EE. We approve of each other's friends	01	02	03	04	05
FF. Family members are afraid to say what is on their minds	01	02	03	04	05
GG. Family members pair up rather than do things as a total family	01	02	03	04	05
HH. Family members share interests and hobbies with each other	01	02	03	04	05
II. Family members hardly ever lose their tempers	01	02	03	04	05

D20

D20

FOR COUPLES WITHOUT CHILDREN

Please indicate how often each of these describe your family at the present time.

Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
A. We are supportive of each other during difficult times	01	02	03	04	05
B. We sometimes get so angry we throw things	01	02	03	04	05
C. In our relationship, it is easy for both of us to express our opinion	01	02	03	04	05
D. It is easier to discuss problems with people outside the marriage/ relationship than with my partner	01	02	03	04	05
E. We each have input regarding major family decisions	01	02	03	04	05
F. We spend time together when we are home	01	02	03	04	05
G. We sometimes hit each other	01	02	03	04	05
H. We are flexible in how we handle differences	01	02	03	04	05
I. We do things together	01	02	03	04	05
J. We discuss problems and feel good about the solutions	01	02	03	04	05
K. In our marriage/relationship, we each go our own way	01	02	03	04	05
L. We shift household responsibilities between us	01	02	03	04	05
M. We know each other's close friends	01	02	03	04	05
N. It is hard to know what the rules are in our relationship	01	02	03	04	05
O. We consult each other on personal decisions	01	02	03	04	05

CONTINUE ON NEXT PAGE

D20

D20

	Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
P.	We fight a lot	01	02	03	04	05
Q.	We freely say what we want	01	02	03	04	05
R.	We have difficulty thinking of things to do together	01	02	03	04	05
S.	We have a good balance of leadership in our family	01	02	03	04	05
T.	We feel very close to each other	01	02	03	04	05
U.	We rarely criticize each other	01	02	03	04	05
V.	We operate on the principle of fairness in our marriage/relationship	01	02	03	04	05
W.	I feel closer to people outside the marriage/relationship than to my partner	01	02	03	04	05
X.	We try new ways of dealing with problems	01	02	03	04	05
Y.	I go along with what my partner decides to do	01	02	03	04	05
Z.	In our marriage/relationship, we share responsibilities	01	02	03	04	05
AA.	We like to spend our free time with each other	01	02	03	04	05
BB.	It is difficult to get a rule change in our relationship	01	02	03	04	05
CC.	We avoid each other at home	01	02	03	04	05
DD.	When problems arise, we compromise	01	02	03	04	05
EE.	We approve of each other's friends	01	02	03	04	05

CONTINUE ON NEXT PAGE

D20

D20

	Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
FF.	We are afraid to say what is on our minds	01	02	03	04	05
GG.	We tend to do more things separately	01	02	03	04	05
HH.	We share interests and hobbies with each other	01	02	03	04	05
II.	We hardly ever lose our tempers	01	02	03	04	05

H26

H25

Here is a list of feelings that people in the military sometimes have. Please read each one carefully, then circle the number to the right that best describes how much you felt that way while you were on active duty in the military. Please circle only one number for each item and do not skip any items.

	How much did you ...	A GREAT DEAL	PRETTY MUCH	SOME	JUST A LITTLE	NOT AT ALL
A.	feel unfairly treated while you were in the military?	01	02	03	04	05
B.	enjoy your time in the military?	01	02	03	04	05
C.	feel that nothing turned out the way you wanted it to?	01	02	03	04	05
D.	feel that you got less than you deserved in the military when it came to rewards and benefits?	01	02	03	04	05
E.	feel that there was nothing worthwhile about military life to look forward to except discharge?	01	02	03	04	05
F.	feel that you were acquiring a variety of experiences in the military that would be useful later in life?	01	02	03	04	05
G.	How bitter did you feel about being in the military then?	01	02	03	04	05
H.	feel that you were in control of what went on in your life while you were in the military?	01	02	03	04	05
I.	feel that you were completely helpless?	01	02	03	04	05
J.	feel that your efforts and contributions were appreciated and rewarded?	01	02	03	04	05
K.	feel that you had a lot of things to look forward to once you returned to civilian life?	01	02	03	04	05

J8

SOUTH VIETNAM

J15

J15

For each of these situations, please circle the number to indicate whether you found it very unpleasant, somewhat unpleasant, not too bad, or not really a problem while you were in Vietnam. Or, if you didn't experience the situation at all, please circle that number.

		VERY UNPLEASANT	SOMEWHAT UNPLEASANT	NOT TOO BAD	NOT REALLY A PROBLEM	DID NOT EXPERIENCE
A.	Bad Climate	01	02	03	04	05
B.	Bad food	01	02	03	04	05
C.	Feeling that the Vietnamese didn't really want us there	01	02	03	04	05
D.	The insects, disease, and filth	01	02	03	04	05
E.	The sight and sound of dying men	01	02	03	04	05
F.	Loss of freedom of movement	01	02	03	04	05
G.	Feeling that our military actions were not worthwhile	01	02	03	04	05
H.	Lack of privacy	01	02	03	04	05
I.	Fear of being injured or killed	01	02	03	04	05
J.	Not counting as an individual	01	02	03	04	05
K.	Feeling out of touch with the rest of the world	01	02	03	04	05
L.	Loss of sleep	01	02	03	04	05
M.	Sense of purposeless-ness	01	02	03	04	05
N.	Not knowing what was really going on	01	02	03	04	05
O.	Fear of surprise attack	01	02	03	04	05

J66

J66

Please look at this list, and after each action, circle the number which best describes the extent to which you were exposed to this type of thing during your tour(s) that directly involved Vietnam.

To what extent were you involved in:	NOT AT ALL	KNEW/ HEARD ABOUT IT	SAW IT	UNIT PARTI-CIPATED	I PARTI-CIPATED	I WAS RESPON-SIBLE
A. Terrorizing, wounding, or killing civilians?	01	02	03	04	05	06
B. Death or maiming by booby traps or mines?	01	02	03	04	05	06
C. Use of napalm, white phosphorous, or cluster bombs on villages?	01	02	03	04	05	06
D. Torturing, wounding, or killing hostages or prisoners of war?	01	02	03	04	05	06
E. Mutilation of bodies of the enemy or civilians?	01	02	03	04	05	06

J69

J69

Please circle the number which best describes the extent to which you did each of these to deal with your Vietnam war-related experiences while you were there--a great deal, a lot, some, a little bit, or not at all.

	A GREAT DEAL	A LOT	SOME	A LITTLE BIT	NOT A ALL
A. Took some positive action to try to solve the problem?	01	02	03	04	05
B. Thought about how you could have done things differently?	01	02	03	04	05
C. Depended on others to cheer you up and make you feel better?	01	02	03	04	05
D. Refused to think about the situation?	01	02	03	04	05
E. Went over the problem again and again in your mind to try to understand it?	01	02	03	04	05
F. Felt that time would make a difference; the only thing to do was wait?	01	02	03	04	05
G. Tried to find out more about the situation?	01	02	03	04	05
H. Had fantasies or wished about how things might turn out?	01	02	03	04	05
I. Went on as if nothing had happened?	01	02	03	04	05
J. Thought about events in your past life which could help you deal better with the present?	01	02	03	04	05
K. Prayed or got someone to pray for you?	01	02	03	04	05
L. Made a plan of action and tried to follow it?	01	02	03	04	05
M. Tried to understand how other people in the situation were thinking or feeling?	01	02	03	04	05

CONTINUE ON NEXT PAGE

J69

J69

		A GREAT DEAL	A LOT	SOME	A LITTLE BIT	NOT AT ALL
N.	Knew what had to be done, so you doubled your efforts and tried harder to make things work?	01	02	03	04	05
O.	Went to someone to help you feel better?	01	02	03	04	05
P.	Took it out on other people?	01	02	03	04	05
Q.	Tried to think about other things to get your mind off the situation?	01	02	03	04	05
R.	Drank alcohol or used drugs or medicines?	01	02	03	04	05
S.	Told yourself things that helped you feel better?	01	02	03	04	05
T.	Did something to make yourself relax?	01	02	03	04	05
U.	Considered several alternatives for handling the problem?	01	02	03	04	05
V.	Daydreamed or imagined a better time or place than the one you were in?	01	02	03	04	05
W.	Yelled or shouted to let off steam?	01	02	03	04	05
X.	Stood your ground and fought for what you wanted?	01	02	03	04	05
Y.	Wished the situation would go away?	01	02	03	04	05

K4

K4

Here are a few statements that some veterans have made about the effects of their military service on their lives. For each statement, please circle the number that best describes to what extent this has been true for you--very true, somewhat true, not very true, or not at all true?

	VERY TRUE	SOMEWHAT TRUE	NOT VERY TRUE	NOT AT ALL TRUE
A. It destroyed my initiative or otherwise hurt me psychologically	01	02	03	04
B. I received a wound or injury that handicapped me later	01	02	03	04
C. It made me more hateful toward certain types of people	01	02	03	04
D. It allowed me or forced me to grow up socially or emotionally	01	02	03	04
E. It taught me how to get along with different kinds of people	01	02	03	04
F. It took me away from my family who needed me at home	01	02	03	04
G. It hurt my chances for keeping or getting a job	01	02	03	04
H. I lost my spouse (or intended spouse) as a result	01	02	03	04
I. Going into the service got me out of serious trouble in my community	01	02	03	04
J. It unfortunately interrupted my education	01	02	03	04

K42

Please circle the number that best describes how you feel about each statement.

A. Before I entered the military, I had more close friends than I have now.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

B. I do not feel guilt over things that I did in the military.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALWAYS TRUE

C. If someone pushes me too far, I am likely to become violent.

01	02	03	04	05
VERY UNLIKELY	UNLIKELY	SOMEWHAT UNLIKELY	VERY LIKELY	EXTREMELY LIKELY

D. If something happens that reminds me of the military, I become very distressed and upset.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

E. The people who know me best are afraid of me.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

F. I am able to get emotionally close to others.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

G. I have nightmares of experiences in the military that really happened.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

CONTINUE ON NEXT PAGE

K42

H. When I think of some of the things that I did in the military, I wish I were dead.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

I. It seems as if I have no feelings.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

J. Lately, I have felt like killing myself.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

K. I fall asleep, stay asleep and awaken only when the alarm goes off.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

L. I wonder why I am still alive when others died in the military.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

M. Being in certain situations makes me feel as though I am back in the military.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

N. My dreams at night are so real that I waken in a cold sweat and force myself to stay awake.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

CONTINUE ON NEXT PAGE

K42

O. I feel like I cannot go on.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALMOST ALWAYS TRUE

P. I do not laugh or cry at the same things other people do.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

Q. I still enjoy doing many things that I used to enjoy.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALWAYS TRUE

R. Daydreams are very real and frightening.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

S. I have found it easy to keep a job since my separation from the military.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

T. I have trouble concentrating on tasks.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

U. I have cried for no good reason.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

CONTINUE ON NEXT PAGE

K42

V. I enjoy the company of others.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

W. I am frightened by my urges.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

X. I fall asleep easily at night.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

Y. Unexpected noises make me jump.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

Z. No one understands how I feel, not even my family.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

AA. I am an easy-going, even-tempered person.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	USUALLY	VERY MUCH SO

BB. I feel there are certain things that I did in the military that I can never tell anyone, because no one would ever understand.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	TRUE	VERY TRUE

CC. There have been times when I used alcohol (or other drugs) to help me sleep or to make me forget about things that happened while I was in the service.

01	02	03	04	05
NEVER	INFREQUENTLY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

CONTINUE ON NEXT PAGE

K42

DD. I feel comfortable when I am in a crowd.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	USUALLY	ALWAYS

EE. I lose my cool and explode over minor everyday things.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

FF. I am afraid to go to sleep at night.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

GG. I try to stay away from anything that will remind me of things which happened while I was in the military.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

HH. My memory is as good as it ever was.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE

II. I have a hard time expressing my feelings, even to the people I care about.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

JJ. At times I suddenly act or feel as though something that happened while I was in the military were happening all over again.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

CONTINUE ON NEXT PAGE

K42

KK. I am not able to remember some important things that happened while I was in the military.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE

LL. I feel "superalert" or "on guard" much of the time.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

MM. If something happens that reminds me of the military, I get so anxious or panicky that my heart pounds hard; I have trouble getting my breath, I sweat, tremble or shake; or feel dizzy, tingly, or faint.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

N1 N1

Listed on this page in your booklet are a number of statements concerning personal attitudes and traits. Read each item and decide whether the statement is true or false as it applies to you personally.

		FALSE (NO)	TRUE (YES)
A.	There have been times when I was quite jealous of the good fortune of others	01	02
B.	No matter who I'm talking to, I'm always a good listener	01	02
C.	I never resent being asked to return a favor	01	02
D.	I sometimes try to get even rather than forgive or forget	01	02
E.	I sometimes feel resentful when I don't get my way	01	02
F.	I have never deliberately said something that hurt someone's feelings	01	02
G.	There have been occasions when I felt like smashing things	01	02
H.	I have never intensely disliked anyone	01	02
I.	There have been occasions when I took advantage of someone	01	02
J.	I'm always willing to admit it when I make a mistake	01	02

N4

Circle the number which best describes how strongly you agree or disagree with each of the following statements.

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
A.	When I make plans, I am certain I can make them work	01	02	03	04
B.	I don't like conversations when others are confused about what they mean to say	01	02	03	04
C.	It is a sign of weakness for a person to admit that he has problems	01	02	03	04
D.	I feel very much loved and supported by people in my life	01	02	03	04
E.	As long as I keep smiling, difficulties don't get the best of me	01	02	03	04
F.	When you marry, you have lost your freedom of choice	01	02	03	04
G.	I often wake up eager to take up my life where it left off the day before	01	02	03	04
H.	Planning ahead can help avoid most future problems	01	02	03	04
I.	I am a person who tries to tell himself that everything is always O.K	01	02	03	04
J.	When things are going badly, I tend to show it rather than hold it inside	01	02	03	04
K.	These days I really don't know who I can count on for help	01	02	03	04
L.	I really look forward to my work	01	02	03	04

CONTINUE ON NEXT PAGE

N4

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
M.	I usually try to talk out my problems with other people	01	02	03	04
N.	I won't answer a person's question until I am very clear as to what he is asking	01	02	03	04
O.	Sometimes I feel all alone in the world	01	02	03	04
P.	I find it difficult to imagine enthusiasm concerning work	01	02	03	04
Q.	It is difficult for me to talk about myself to other people	01	02	03	04
R.	It doesn't bother me to step aside for a while from something I'm involved in	01	02	03	04
S.	For me, laughing is a good way to keep from feeling bad	01	02	03	04
T.	The most exciting thing for me is my own fantasies	01	02	03	04
U.	Most of my problems are just a state of mind	01	02	03	04
V.	When I am at work doing a difficult task, I know when I need to ask for help	01	02	03	04
W.	No one cares much what happens to me	01	02	03	04
X.	I feel uncomfortable if I need to make any changes in my everyday schedule	01	02	03	04
Y.	I'm better off when I look only on the positive side of life	01	02	03	04
Z.	No matter how hard I try, my efforts will accomplish nothing	01	02	03	04

CONTINUE ON NEXT PAGE

N4

N4

	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
AA. A person who seldom changes his mind can usually be depended upon to have reliable judgment	01	02	03	04
BB. It's exciting for me to learn something about myself	01	02	03	04

N52

Please circle the number that best describes how you feel about each statement.

A. In the past, I had more close friends than I have now.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

B. I do not feel guilt over things that I did in the past.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALWAYS TRUE

C. If someone pushes me too far, I am likely to become violent.

01	02	03	04	05
VERY UNLIKELY	UNLIKELY	SOMEWHAT UNLIKELY	VERY LIKELY	EXTREMELY LIKELY

D. If something happens that reminds me of the past, I become very distressed and upset.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

E. The people who know me best are afraid of me.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

F. I am able to get emotionally close to others.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

G. I have nightmares of experiences in my past that really happened.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

CONTINUE ON NEXT PAGE

N52

H. When I think of some of the things I have done in the past, I wish I were dead.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

I. It seems as if I have no feelings.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

J. Lately, I have felt like killing myself.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

K. I fall asleep, stay asleep and awaken only when the alarm goes off.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

L. I wonder why I am still alive when others have died.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

M. Being in certain situations makes me feel as though I am back in the past.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

N. My dreams at night are so real that I waken in a cold sweat and force myself to stay awake.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

CONTINUE ON NEXT PAGE

N52

O. I feel like I cannot go on.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALMOST ALWAYS TRUE

P. I do not laugh or cry at the same things other people do.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

Q. I still enjoy doing many things that I used to enjoy.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALWAYS TRUE

R. Daydreams are very real and frightening.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

S. I have found it easy to keep a job.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

T. I have trouble concentrating on tasks.

01	02	03	04	05
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE

U. I have cried for no good reason.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

CONTINUE ON NEXT PAGE

N52

V. I enjoy the company of others.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

W. I am frightened by my urges.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

X. I fall asleep easily at night.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

Y. Unexpected noises make me jump.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

Z. No one understands how I feel, not even my family.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE

AA. I am an easy-going, even-tempered person.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	USUALLY	VERY MUCH SO

BB. I feel there are certain things that I have done that I can never tell anyone, because no one would ever understand.

01	02	03	04	05
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	TRUE	VERY TRUE

CC. There have been times when I used alcohol (or other drugs) to help me sleep or to make me forget about things that happened in the past.

01	02	03	04	05
NEVER	INFREQUENTLY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

CONTINUE ON NEXT PAGE

N52

DD. I feel comfortable when I am in a crowd.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	USUALLY	ALWAYS

EE. I lose my cool and explode over minor everyday things.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

FF. I am afraid to go to sleep at night.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

GG. I try to stay away from anything that will remind me of things which happened in the past.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS

HH. My memory is as good as it ever was.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE

II. I have a hard time expressing my feelings, even to the people I care about.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

JJ. At times I suddenly act or feel as though something that happened in the past were happening all over again.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

CONTINUE ON NEXT PAGE

N52

KK. I am not able to remember some important things that happened in the past.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE

LL. I feel "superalert" or "on guard" much of the time.

01	02	03	04	05
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE

MM. If something happens that reminds me of the past, I get so anxious or panicky that my heart pounds hard; I have trouble getting my breath, I sweat, tremble or shake; or feel dizzy, tingly, or faint.

01	02	03	04	05
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY

T17

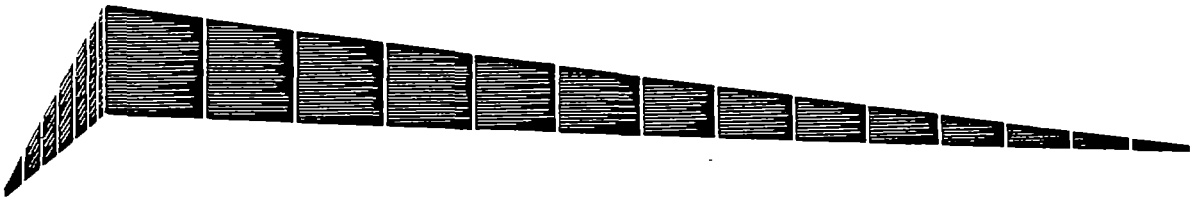
T17

These questions deal with your friends or relatives. Please circle an answer for each one.

Among your friends and relatives, is there someone:

		NO	YES
A.	...you can turn to in times of need?	01	02
B.	...you know whose advice you really trust?	01	02
C.	...you can call at the last minute to invite out for a drink or meal or to go to a movie?	01	02
D.	...who would lend you $100-$200 if you needed it for an emergency?	01	02
E.	...you can talk to about family or personal problems?	01	02
F.	...who would lend you a car or drive you to a doctor, the airport, shopping, or somewhere else if you really needed it?	01	02
G.	...you could call who would bail you out if you were arrested and put in jail for some reason?	01	02
H.	...with whom you can share your private worries or fears?	01	02
I.	...you can count on to look in on you regularly and help you if you had a serious injury or illness, or were recovering from surgery?	01	02
J.	...you can count on to pick you up when you are feeling down?	01	02

SOUTH VIETNAM



NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
EXPIRES: 12/31/88

TRAUMATIC EVENTS BOOKLET

CONDUCTED BY:

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PROTOCOL AND SPECIFICATIONS FOR TRAUMATIC EVENTS BOOKLET AND LIST

Traumatic events are covered in questions M13 through M23. After reading the introduction at the top of the page, ask each of the 11 questions listed and record a "Yes" or "No" response for each one. Then, for each of the "Yes" responses, use the booklet to obtain and record some details of each event. Every event that goes in the booklet must also be recorded on the list. It is essential that the event numbers in the booklet, on the list, and, if applicable, in the DIS, must match for any given event.

Traumatic events are defined in the introduction to these questions. When you read this introduction, be sure to emphasize the underlined words to impress on the respondent that we are asking about extraordinary and disastrous events. Once you have done that, however, the respondent is the sole judge of whether a particular event was traumatic or not. Do NOT try to explain or embellish or define what is meant, beyond what is included in the introduction. Of course, you can repeat the introductory paragraph for the respondent at any time you think it would be helpful.

There must be an answer recorded for every booklet question; however, not all of the questions are appropriate for every event. For example, it is unlikely that someone would die a natural death in a sniper attack or lose substantial property as a victim of child abuse. If some answers are obvious, record them and go on. List to the respondent. Use your good sense. And, as always, IF IN DOUBT, ASK.

In response to question M13 about specific combat or war-related events, the respondent may say that the "whole war was traumatic" or "just being in Vietnam was traumatic." Probe for specific incidents by asking "Is there any particular event that sticks in your mind?" If the respondent insists on "the whole thing" or "Vietnam in general" and can't pick out a specific incident, accept that and enter it in the booklet and on the list. The questions in the booklet may seem awkward when they are asked about "the whole thing" but do the best you can. The respondent will usually understand. In addition, these questions might remind the respondent of a particular event. If they do, record it on the next page as a discrete event with its own event number and booklet responses.

A few of the booklet questions deserve particular attention. Question 1 reads "Please give me a couple of words we can use as a title to refer to this event." We have phrased the question this way in order to cut down on the tendency of some veterans to go into great detail about these events. Detailed descriptions of the events really are not necessary for the purposes of this study. The details we need will be elicited by the booklet questions. A descriptive title such as "sniper attack" or "helicopter crash" is ideal.

Question 3 asks for the ending date or the date of the most recent occurrence for multiple occurrence events. For example, a respondent may have been a victim of child abuse that went on for months or even years. Get the dates of the first and last occurrences in questions 2 and 3.

Question 5 reads "Was what you saw very bloody or grotesque?" We mean that literally. If they didn't see it in person, the answer is no.

Question 11. In most cases, the events described to you will be one-time events, unrelated to others of that type. For example, someone might have been in several serious accidents--say a plane crash and 2 car accidents. These events are single occurrence events but are of the same type. Each would be recorded on a separate page in the booklet. However, if there have been several or many related events, you would record yes on question 11 and put a note in the margin saying "typical of many" or "multiple occurrence event" and would not "record on next page in booklet."

Another thing that can occur is that respondents may say "yes" to more than one of the questions, M13 through M23, in the Stressful and Traumatic Life Events section of the questionnaire in reference to the same event. For example, if someone says yes to question 14--serious accident or crash involving car, plane, etc.--and to question 20--being in serious danger of losing your life, etc. You would enter an event--let's say it's a car crash and it's event number 3--in the booklet for the serious accident or crash. Then later you would ask about an event for question 20--being in serious danger--and the respondent might say "Well that was the car crash I already told you about." Use a new page in the booklet so that it has its own event number and then write "same as event #3" on the line where the event name goes. Also write "same as event #3" on the Traumatic Events List so that your event numbers don't become mismatched.

When you get to the DIS, the booklet and list will once again be needed. Questions 61 through 166 cover post-traumatic stress disorder, and it is in this part of the questionnaire that the list becomes important. As an example, question 88 of the DIS. This question reads "Has there ever been a period of a week or more when you had repeated bad dreams or nightmares?" If the respondent says "Yes," you will be asking certain follow-up questions including questions 89 through 93. Question 89 reads "Did the bad dreams or nightmares remind you in some way of an experience or experiences that you had?" If the respondent says "Yes," hand him or her the list and ask question 90 "Are any of the experiences about which you were having the bad dreams or nightmares on this list?" If the respondent says "Yes," ask question 91 "Which ones?" You then prompt with "Are there any others?" Get the event numbers of all the events on the list about which the respondent was having repeated bad dreams or nightmares. Then ask question 92 "Are there any experiences about which you were having the bad dreams or nightmares that are not on this list?" If the respondent says "Yes," ask question 93 "Which experiences about which you were having the bad dreams or nightmares do we not have on this list?" and enter them in the booklet and on the list.

EVENT #01

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY [ ][ ]

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) [M][ ][ ]

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

[ ][ ] MONTH [ ][ ] YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

[ ][ ] MONTH [ ][ ] YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #02

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE

EVENT #03

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #04

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET.

EVENT #05

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

__ _____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET.

EVENT #06

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE

EVENT #07

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #08

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET

EVENT #09

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #10

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE

EVENT #11

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #12

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET

EVENT #13

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01
YES	02 → RECORD ON NEXT PAGE IN BOOKLET.

EVENT #14

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET

EVENT #15

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET.

EVENT #16

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET

EVENT #17

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #18

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE

EVENT #19

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #20

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01
YES	02 → RECORD ON NEXT PAGE

EVENT #21

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #22

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET.

EVENT #23

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #24

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY [ ]

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) [M][ ][ ]

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

[ ][ ] MONTH [ ][ ] YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

[ ][ ] MONTH [ ][ ] YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET.

EVENT #25

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET.

EVENT #26

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #27

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET.

EVENT #28

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE

EVENT #29

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO	01
YES	02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO	01
YES	02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO	01	→ (11)
YES	02	
DON'T KNOW	94	→ (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS: Have you experienced any other specific events of this type?

NO	01	
YES	02	→ RECORD ON NEXT PAGE IN BOOKLET.

EVENT #30

RECORD IN DIS IF APPLICABLE.

OFFICE USE ONLY ☐☐

RECORD QUESTION NUMBER FROM SECTION M (#s M13-M22 ONLY) M☐☐

1. Please give me a couple of words we can use as a title to refer to this event.

_____

2. In what month and year did that happen?

☐☐ MONTH ☐☐ YEAR

3. IF MULTIPLE OCCURRENCE EVENT, DATE OF MOST RECENT OCCURRENCE.

☐☐ MONTH ☐☐ YEAR

4. Were you present while the event was happening, did you personally see the result after the event happened, or did you hear about the event?

	NO	YES	
Present while event happened	01	02	→ (5)
Saw aftermath	01	02	→ (5)
Heard about (saw on TV)	01	02	→ (6)

5. Was what you saw very bloody or grotesque?

NO 01
YES 02

6. Were you...

	NO	YES	
Directly involved as a victim	01	02	→ (7)
Directly involved as a perpetrator or agent	01	02	
Directly involved as a helper	01	02	
Not directly involved	01	02	→ (8)

6a. Was your involvement job-related?

NO 01
YES 02

7. (Were/Did) you...

	NO	YES	
a. Severely or permanently ill, injured, or mutilated	01	02	→ (8)
b. In real danger of being killed or severely injured	01	02	
c. Seriously (emotionally) upset or frightened	01	02	
d. Lose substantial property	01	02	
e. Lose an important relationship	01	02	

8. Was anyone (else) a victim of the event?

NO . . . . . 01 → (11)
YES 02
DON'T KNOW . . . . . 94 → (11)

9. (Was/Did) any victim (other than you)...

	NO	YES
a. Severely or permanently ill, injured, or mutilated	01	02
b. Die a traumatic death	01	02
c. Die a natural death	01	02
d. Lose substantial property	01	02

10. (Was this victim/Were these victims)...

	NO	YES
a. Close Friends/Family	01	02
b. Friends/Acquaintances	01	02
c. Strangers	01	02

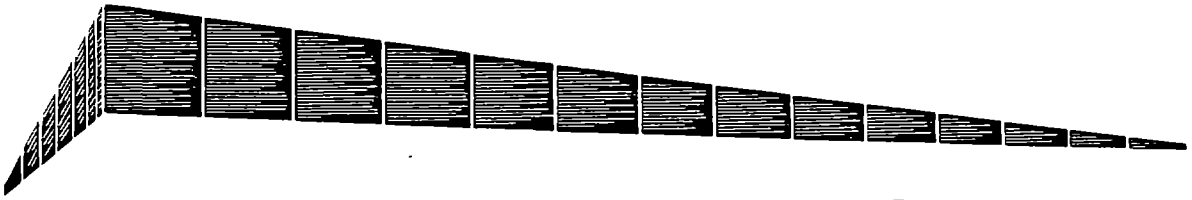
11. DO NOT ASK IF THE EVENT IS REPORTED IN THE DIS. Have you experienced any other specific events of this type?

NO 01
YES . . . . . 02 → RECORD ON NEXT PAGE IN BOOKLET.

TRAUMATIC EVENTS LIST

		MONTH	YEAR
1.	_____		
2.	_____	MONTH	YEAR
3.	_____	MONTH	YEAR
4.	_____	MONTH	YEAR
5.	_____	MONTH	YEAR
6.	_____	MONTH	YEAR
7.	_____	MONTH	YEAR
8.	_____	MONTH	YEAR
9.	_____	MONTH	YEAR
10.	_____	MONTH	YEAR
11.	_____	MONTH	YEAR
12.	_____	MONTH	YEAR
13.	_____	MONTH	YEAR
14.	_____	MONTH	YEAR
15.	_____	MONTH	YEAR

		MONTH	YEAR
16.	_____		
17.	_____	MONTH	YEAR
18.	_____		
19.	_____	MONTH	YEAR
20.	_____		
21.	_____	MONTH	YEAR
22.	_____		
23.	_____	MONTH	YEAR
24.	_____		
25.	_____	MONTH	YEAR
26.	_____		
27.	_____	MONTH	YEAR
28.	_____		
29.	_____	MONTH	YEAR
30.	_____		



NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
EXPIRES: 12/31/88

FAMILY INTERVIEW

CONDUCTED BY:

Research Triangle Institute
Post Office Box 12194
Research Triangle Park, North Carolina 27709
(919) 541-6000

Louis Harris and Associates
630 Fifth Avenue
New York, New York 10111
(212) 698-9600

NATIONAL SURVEY OF THE VIETNAM GENERATION

The United States' military involvement in the Vietnam war ended over ten years ago. However, the effects of our involvement continue and many questions remain unanswered. The years during and after the war were significant ones not only for those who served in Vietnam but also for their families.

At the urging of many citizens, the U.S. Congress has directed that a nationwide study be conducted of Vietnam veterans and other affected people to find out how people feel about their lives both during and after the Vietnam war and, especially, how they're doing these days. As you may know, your (husband/wife/partner) was selected at random to participate in this very important study and has already been interviewed. We are now interviewing members of veterans' families to obtain additional information about how Vietnam veterans are getting along today and how you and other family members are affected by (his/her) experiences both during and after the war.

Your participation is completely voluntary and you may refuse to answer any questions or stop participating at any time without penalty. While there may be no direct benefits to you except for the token of appreciation, I think you'll find the questions interesting and will want to give them careful thought.

RECORD BEGINNING DATE AND TIME: ☐☐ / ☐☐ ☐☐ : ☐☐ A.M. P.M.
MONTH DAY HOUR MINUTE

1. RECORD SEX AS OBSERVED:

MALE 01
FEMALE 02

Throughout this interview I will be asking you questions about yourself, your (husband/wife/partner) and the children in your household, if any.

2. First, what is your date of birth?

RECORD DATE: ☐☐ ☐☐ ☐☐
MONTH DAY YEAR

3. And what is the highest grade of school or year of college you have completed?

NONE, NO FORMAL SCHOOLING 00

ELEMENTARY:	01	02	03	04	05	06	07	08
HIGH SCHOOL:	09	10	11	12				
COLLEGE:	13	14	15	16	} → (3b)			
GRADUATE/PROFESSIONAL:	17	18	19	20+	} → (3b)			

3a. Did you get a high school graduation diploma or pass a high school equivalency test?

NO . . . . . 01 } → (4)
YES . . . . . 02 } → (4)

3b. Do you have a college degree?

NO 01
YES 02

4. Are you doing any work for pay at the present time?

NO 01
YES . . . . . 02 → (5)

4a. Are you currently unemployed, retired, (a housewife), (a student), or what?

UNEMPLOYED OR LAID OFF 01
RETIRED 02
KEEPING HOUSE 03
GOING TO SCHOOL OR TRAINING PROGRAM. . 04
PERMANENTLY DISABLED: SICK LEAVE
FOR MORE THAN 6 MONTHS 05
SICK LEAVE (6 MOS. OR LESS);
MATERNITY LEAVE 06
ON STRIKE 07

4b. Have you ever worked for pay since you've been (married to/living with) (VETERAN)?

NO 01
YES 02

5. HAND R CARD A.

Please look at this card and tell me the letter of the group that best describes your racial background.

HISPANIC IS NOT A VALID "OTHER." IF HISPANIC, PROBE FOR RACIAL GROUP R IDENTIFIES WITH.

a. AMERICAN INDIAN 01
b. ALASKAN NATIVE 02
c. ASIAN 03
d. PACIFIC ISLANDER 04
e. BLACK 05
f. WHITE 06
g. OTHER (SPECIFY) 07

---

6. HAND R CARD B.

Are you of Hispanic (Spanish) origin or descent? That is, do any of these groups best describe your national origin or ancestry?

NO . . . . . 01 → (7)
YES 02

6a. HAND R CARD B.

Which of these groups best describes your national origin or ancestry?

PROBE: Which of these countries did your ancestors come from?

IF R GIVES MORE THAN ONE GROUP, ASK WHICH GROUP S/HE MOST CLOSELY IDENTIFIES WITH.

ENTRIES IN BRACKETS ARE COUNTRIES CORRESPONDING TO HISPANIC ETHNIC GROUPS.

a. PUERTO RICAN [PUERTO RICO] . . . 01
b. CUBAN [CUBA] 02
c. CUBAN-AMERICAN [CUBA] 03
d. MEXICAN [MEXICO] 04
e. MEXICANO [MEXICO] 05
f. MEXICAN-AMERICAN [MEXICO] 06
g. CHICANO [MEXICO] 07
h. CENTRAL OR SOUTH AMERICAN--
SPANISH COUNTRY (SPECIFY) . . . 08

_____

i. OTHER SPANISH OR HISPANIC
(SPECIFY) 09

_____

7. Have you ever served on active duty in the U.S. Armed Forces?

NO . . . . . 01 → (8)
YES 02

7a. Did you serve on active duty in the Armed Forces at any time between August 5, 1964 and May 7, 1975? (If your service was only in a National Guard or Military Reserve Unit, include only the time you were called up for active duty.)

NO . . . . . 01 → (8)
YES 02

7b. While you were in the military, were you ever stationed in Vietnam, Laos or Cambodia; in the waters in or around these countries, or fly in missions over these areas?

NO 01
YES 02

8. Now a few questions about how you're getting along these days. First, taking things all together, how would you say things are these days--would you say you're very happy, pretty happy, or not too happy these days?

VERY HAPPY	01
PRETTY HAPPY	02
NOT TOO HAPPY	03

9. Would you say your health in general is excellent, very good, good, fair, or poor?

EXCELLENT	01
VERY GOOD	02
GOOD	03
FAIR	04
POOR	05

10. Compared to other people your age, would you say that your health is much better than others, better, about the same, worse, or much worse than others?

MUCH BETTER	01
BETTER	02
ABOUT THE SAME	03
WORSE	04
MUCH WORSE	05

11. Some people have so many problems in their everyday life that they worry that they might have a nervous breakdown. When problems have come up, have you ever felt that you were going to have or were close to having a nervous breakdown?

NO	01
YES	02

12. HAND R CARD C.

Here are some more questions mostly about how you have felt during the past year.

During the past year, how often have you been bothered by feelings of sadness or depression--feeling blue? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN	01
FAIRLY OFTEN	02
SOMETIMES	03
ALMOST NEVER	04
NEVER	05

13. POINT TO CARD C.

During the past year, how often have you felt that nothing turns out for you the way you want it to? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

14. HAND R CARD D.

I'm going to read a series of statements. Please tell me if you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree. First, you are the kind of person...

	Do you:				
	STRONGLY AGREE	SOMEWHAT AGREE	NEITHER AGREE NOR DISAGREE	SOMEWHAT DISAGREE	STRONGLY DISAGREE
A. ...who feels (he/she) has much to be be proud of	01	02	03	04	05
B. ...who is the worrying type--you know, a worrier	01	02	03	04	05
C. ...who feels that (he/she) is a failure generally, in life	01	02	03	04	05

15. HAND R CARD C TO USE THROUGH 30. READ ANSWER CHOICES ONLY AS NECESSARY.

During the past year, how often have you felt confused and had trouble thinking? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

16. (During the past year,) how often have you felt useless? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

17. (During the past year,) how often have you had times when you couldn't help wondering if anything was worthwhile anymore? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

18. (During the past year,) how often have you had attacks of sudden fear or panic? (Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

19. (During the past year,) how often have you felt you were bothered by all different kinds of ailments in different parts of your body? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

20. During the past year, how often have you been bothered by nervousness, being fidgety or tense? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

21. (During the past year,) how often has your appetite been poor? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

22. (During the past year,) how often have you felt lonely--very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

23. (During the past year,) how often have you feared being left all alone or abandoned? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

24. (During the past year,) how often have you been bothered by feelings of restlessness? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

25. During the past year, how often have you had trouble with headaches or pains in the head? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

26. (During the past year,) how often have you had trouble concentrating or keeping your mind on what you were doing? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

27. (During the past year,) how often have you been bothered by cold sweats? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

28. (During the past year,) how often have you felt completely helpless? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

29. (During the past year,) how often have you feared something terrible would happen to you? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

30. During the past year, how often have you felt anxious? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

31. In general, how satisfied have you been with yourself in the last year? Would you say very satisfied, somewhat satisfied, somewhat dissatisfied, or very dissatisfied?

VERY SATISFIED 01
SOMEWHAT SATISFIED 02
SOMEWHAT DISSATISFIED 03
VERY DISSATISFIED 04

32. HAND R CARD E.

In general, if you had to compare yourself with the average (man/woman) your age, what grade would you give yourself for the past year? Would you say excellent, good, average, below average, or a lot below average?

EXCELLENT 01
GOOD 02
AVERAGE 03
BELOW AVERAGE 04
A LOT BELOW AVERAGE 05

33. HAND R CARD C TO USE THROUGH 36. READ ANSWER CHOICES ONLY AS NECESSARY.

During the past year, how often have you felt completely hopeless about everything? Would you say very often, fairly often, sometimes, almost never, or never?

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

34. (During the past year,) how often have you felt confident? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

35. (During the past year,) how often have you feared going crazy or losing your mind? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

36. When you have gotten angry in the past year, how often have you felt uncomfortable, like getting headaches, stomach pains, cold sweats and things like that? (Would you say very often, fairly often, sometimes, almost never, or never?)

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

QUESTION 37 WILL BE THE FIRST TIME R USES THE SELF-REPORT BOOKLET SO IT MAY BE NECESSARY TO EXPLAIN HOW TO USE IT. READ THE LEAD IN AND INSTRUCT R TO COMPLETE ALL QUESTIONS A-S. TO GIVE R AN EXTRA DEGREE OF CONFIDENTIALITY, EXPLAIN THAT YOU WILL NOT WATCH WHILE S/HE IS FILLING OUT THE QUESTIONNAIRE AND THAT YOU DO NOT LOOK AT HIS/HER ANSWERS WHEN THROUGH. BE AVAILABLE FOR QUESTIONS S/HE MAY HAVE.

COLLECT THE BOOKLET WHEN S/HE FINISHES; DO NOT ALLOW R TO LEAF THROUGH THE PAGES TO OTHER SECTIONS OF THE BOOKLET.

37. HAND R SELF-REPORT BOOKLET TURNED TO QUESTION 37.

Now I'd like you to look at this page of your booklet which lists some other attitudes and opinions with which you might agree or disagree. As you will see, a lot of the items are very strongly worded. This is to help you decide <u>how</u> <u>much</u> you agree or disagree with each one. Please indicate how strongly you agree or disagree with each of these statements as they apply to you.

WHEN R RETURNS BOOKLET, GO TO QUESTION 38.

Circle the number which best describes how strongly you agree with the following statements.

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
A.	When I make plans I am certain I can make them work	01	02	03	04
B.	I don't like conversations when others are confused about what they mean to say	01	02	03	04
C.	I feel very much loved and supported by people in my life	01	02	03	04
D.	When you marry you have lost your freedom of choice	01	02	03	04
E.	I often wake up eager to take up my life where it left off the day before	01	02	03	04
F.	Planning ahead can help avoid most future problems	01	02	03	04

		STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
G.	These days I really don't know who I can count on for help	01	02	03	04
H.	I really look forward to my work	01	02	03	04
I.	I won't answer a person's question until I am very clear as to what he is asking	01	02	03	04
J.	Sometimes I feel all alone in the world	01	02	03	04
K.	I find it difficult to imagine enthusiasm concerning work	01	02	03	04
L.	It doesn't bother me to step aside for a while from something I'm involved in	01	02	03	04
M.	The most exciting thing for me is my own fantasies	01	02	03	04
N.	When I am at work doing a difficult task I know when I need to ask for help	01	02	03	04
O.	No one cares much what happens to me	01	02	03	04
P.	I feel uncomfortable if I need to make any changes in my everyday schedule	01	02	03	04
Q.	No matter how hard I try, my efforts will accomplish nothing	01	02	03	04
R.	A person who seldom changes his mind can usually be depended upon to have reliable judgment	01	02	03	04
S.	It's exciting for me to learn something about myself	01	02	03	04

38. Now I'm going to ask you some questions about using alcohol (including beer and wine). First, have you had <u>any</u> alcoholic beverages--that is, any beer, any wine, or any hard liquor (such as whiskey, or mixed drinks)--during the past 12 months, that is since (DATE)?

NO 01
YES . . . . . 02 → (39)

38a. Was there <u>ever</u> a time when you had any alcoholic beverages including beer, wine, hard liquor, or mixed drinks?

IF RESPONDENT SAYS ONLY CHILDHOOD SIPS FROM AN OLDER PERSON'S DRINK, CODE "NO."

NO . . . . . 01 → (40)
YES 02

39. Now a few questions about your use of alcohol.

		NO	YES
A.	First, do you feel that you are a normal drinker? . . .	01	02
B.	Do your friends or relatives think you are a normal drinker? . . .	01	02
C.	Have you ever attended a meeting of Alcoholics Anonymous (AA)? . . .	01	02
D.	Have you ever lost friends or (girlfriends/boyfriends) because of drinking? . . .	01	02
E.	Have you ever gotten into trouble at work (or school) because of drinking? . . .	01	02
F.	Have you ever neglected your obligations, your family, or your work for two or more days in a row because you were drinking? . . .	01	02
G.	Have you ever had delirium tremens (D.T.'s), severe shaking, heard voices or seen things that weren't there after heavy drinking? . . .	01	02
H.	Have you ever gone to anyone for help about your drinking? . . .	01	02
I.	Have you ever been in a hospital because of your drinking? . . .	01	02
J.	Have you ever been arrested for drunk driving or driving after drinking? . . .	01	02

40. HAND R CARD F.

Now I'd like to ask about your experience with drugs. Have you ever used marijuana or any other drug on this list to get high or without a prescription, or more than was prescribed--that is, on your <u>own</u>?

NO	01	
YES	05	→ (41)
DK	94	→ (42)
RE	97	→ (42)

"TAKING AS PRESCRIBED" REFERS TO TAKING MEDICATION AS PRESCRIBED BY A DOCTOR, <u>OR</u> AS PRESCRIBED BY PACKAGE DIRECTIONS FOR OVER-THE-COUNTER MEDICATIONS. "TAKING WITHOUT A PRESCRIPTION" REFERS TO TAKING <u>PRESCRIPTION</u> DRUGS OR MEDICINES WITHOUT A PRESCRIPTION OR TAKING <u>ANY</u> MEDICATION MORE THAN IS PRESCRIBED BY DIRECTIONS.

40a. Have you taken any <u>other</u> drugs <u>on your own</u> either to <u>get high</u> or <u>for other mental effects</u>?

NO	01	→ (42)
YES	05	
DK	94	→ (42)
RE	97	→ (42)

41. Now a few questions about your use of marijuana or other drugs.

		NO	YES
A.	First, do you feel that your use of marijuana or other drugs is a problem?	01	02
B.	Do your friends or relatives think your use of marijuana or other drugs is a problem?	01	02
C.	Have you ever had treatment or counseling for your use of marijuana or other drugs?	01	02
D.	Have you ever lost friends or (girlfriends/boyfriends) because of your use of marijuana or other drugs?	01	02
E.	Have you ever gotten into trouble at work (or school) because of using marijuana or other drugs?	01	02
F.	Have you ever neglected your obligations, your family, or your work for two or more days in a row because of your use of marijuana or other drugs?	01	02
G.	Have you ever had a "bad trip" after using marijuana or other drugs?	01	02
H.	Have you ever gone to anyone for help about your use of marijuana or other drugs?	01	02
I.	Have you ever been in a hospital or residential treatment program because of your use of marijuana or other drugs?	01	02
J.	Have you ever been arrested in connection with your use of marijuana or other drugs (e.g., possession or driving under the influence)?	01	02

42. Now I'd like to ask a few questions about your family and friends.

First, in general, how well are you getting along with other people these days--would you say better than usual, about the same, or not as well as usual?

BETTER THAN USUAL 01
ABOUT THE SAME 02
NOT AS WELL AS USUAL 03

43. About how many close friends do you have--people you feel at ease with and can talk with about what is on your mind? You may include relatives.

RECORD NUMBER: ☐☐
CLOSE FRIENDS

NONE 00

44. How many relatives do you have that you feel close to--that is, people that you feel at ease with, can talk to about private matters, and can call on for help?

RECORD NUMBER: ☐☐
CLOSE RELATIVES

45. Among your friends and relatives, (excluding your [husband/wife/partner]), is there someone you feel you can tell just about anything to, someone you can count on for understanding and advice?

NO 01
YES 02

46. Do you have any problems that you feel you can't discuss with any friend or relative?

NO 01
YES 02

47. In general, how satisfying do you find the way you're spending your life these days? Would you call it completely satisfying, pretty satisfying, or not very satisfying?

PROBE: Overall or in general.

COMPLETELY SATISFYING 01
PRETTY SATISFYING 02
NOT VERY SATISFYING 03

Now I'd like to talk about your relationship with your (husband/wife/partner).

48. First, about how long have you known your (husband/wife/partner)?

RECORD NUMBER: ☐☐ → MONTHS . . . 01
YEARS 02

49. In what month and year did you (get married/begin living with [VETERAN] as though were you were married)?

RECORD DATE: ☐☐ MONTH AND ☐☐ YEAR

DON'T KNOW 9494

50. (Including your current marriage) how many times (if ever) have you been married?

ENTER NUMBER OF TIMES.

RECORD NUMBER: ☐☐ MARRIAGES IF NONE OR ONLY ONE MARRIAGE → (53)

51. How many times (if ever) have you been divorced?

RECORD NUMBER: ☐☐ DIVORCES

52. INTERVIEWER CHECKPOINT:

ARE MORE DIVORCES (51) RECORDED THAN MARRIAGES (50)?

NO 01
YES . . . . . 02 → (RECONCILE 50 AND 51. 51 CANNOT BE GREATER THAN 50)

53. Now think about your current (marriage/relationship). Taking things altogether, how would you describe your (marriage/relationship)--would you say your (marriage/relationship) was very happy, a little happier than average, just about average, or not too happy?

VERY HAPPY 01
LITTLE HAPPIER THAN AVERAGE 02
JUST ABOUT AVERAGE 03
NOT TOO HAPPY . . . . . 04 → (54)

53a. Even in cases where (married people/couples/partners) are happy there have often been times in the past when they weren't too happy--when they had problems getting along with each other. Has this ever been true for you?

NO . . . . . 01 → (54)
YES 02

53b. What was that usually about? _____

_____

_____

54. Many (men/women--USE SEX OF RESPONDENT) feel that they're not as good (husbands/wives/partners) as they would like to be. Do you sometimes feel this way?

NO . . . . . 01 → (55)
YES 02

54a. What kinds of things make you feel this way? _____

_____

_____

54b. Do you feel this way a lot of times, or only once in a while?

A LOT OF TIMES 01
ONLY ONCE IN A WHILE 02

55. HAND R CARD G.

When it comes to making important decisions, do you and your (husband/wife/partner) almost always agree, occasionally disagree, frequently disagree, almost always disagree, or does one of you make the important decisions without discussing them with the other?

ALMOST ALWAYS AGREE 01
OCCASIONALLY DISAGREE 02
FREQUENTLY DISAGREE 03
ALMOST ALWAYS DISAGREE 04
ONE DECIDES WITHOUT DISCUSSION . 05

56. How well do you think your (husband/wife/partner) understands you--your feelings, your likes and dislikes, and any problems you may have; do you think that (s/he) understands you very well, fairly well, not very well, or not well at all?

PROBE: Overall or in general.

VERY WELL 01
FAIRLY WELL 02
NOT VERY WELL 03
NOT WELL AT ALL 04

57. HAND R CARD H.

How much do you agree or disagree with the following statement: My (husband/wife/partner) is someone I can really talk with about things that are important to me. (Would you say you strongly agree, somewhat agree, neither agree nor disagree, somewhat disagree, or strongly disagree?)

STRONGLY AGREE	01
SOMEWHAT AGREE	02
NEITHER AGREE NOR DISAGREE	03
SOMEWHAT DISAGREE	04
STRONGLY DISAGREE	05

58. How much companionship do you and your (husband/wife/partner) have--how often do you do things together--all the time, very often, often, sometimes, or hardly ever?

PROBE: Overall or in general.

ALL THE TIME	01
VERY OFTEN	02
OFTEN	03
SOMETIMES	04
HARDLY EVER	05

59. HAND R SELF-REPORT BOOKLET TURNED TO QUESTION 59.

Now I'd like you to complete both sets of questions on this page. The first question describes some ways in which different people describe their marriages or relationships. Please read each statement carefully and after each one circle the number which best describes your current (marriage/relationship).

WHEN R RETURNS BOOKLET, GO TO QUESTION 61.

Please indicate how often you do each of the following things by circling one of the numbers.

		ALL THE TIME	MOST OF THE TIME	MORE OFTEN THAN NOT	OCCA-SIONALLY	RARELY	NEVER
A.	How often do you discuss or have you considered divorce, separation, or terminating your relationship?	01	02	03	04	05	06
B.	In general, how often do you think that things between you and your partner are going well?	01	02	03	04	05	06
C.	How often do you and your partner quarrel?	01	02	03	04	05	06
D.	How often do you and your partner "get on each other's nerves?"	01	02	03	04	05	06

60. How often have you been upset about how you and your spouse or partner were getting along in the sexual part of your life?

OFTEN 01
SOMETIMES 02
RARELY 03
NEVER 04

61. Here are some more questions like those you've filled out, but these are mostly about how you have felt during the past year.

HAND R CARD I TO USE THROUGH 64.

During the past year, how often have you felt uncomfortable with your (husband/wife/partner)? Would you say very often, fairly often, sometimes, almost never, or never?

PROBE: Overall or in general.

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

62. Sometimes (husbands and wives/people in a relationship) have differences of opinion about showing love. During the past year, how often has this been a problem for you in your (marriage/relationship)? Would you say very often, fairly often, sometimes, almost never, or never?

PROBE: Overall or in general.

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

63. During the past year, how often have you felt affectionate towards your (husband/wife/partner)? (Very often, fairly often, sometimes, almost never, or never?)

PROBE: Overall or in general.

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

64. During the past year, how often has the thought come to your mind that your (husband/wife/partner) doesn't really love you? (Would you say very often, fairly often, sometimes, almost never, or never?)

PROBE: Overall or in general.

VERY OFTEN 01
FAIRLY OFTEN 02
SOMETIMES 03
ALMOST NEVER 04
NEVER 05

65. HAND R CARD J.

During the past year, how satisfied have you been with your (marriage/ relationship)? Would you say (you were) very satisfied, somewhat satisfied, neither satisfied nor dissatisfied, somewhat dissatisfied, or very dissatisfied?

VERY SATISFIED	01
SOMEWHAT SATISFIED	02
NEITHER SATISFIED NOR DISSATISFIED	03
SOMEWHAT DISSATISFIED	04
VERY DISSATISFIED	05

66. HAND R CARD K.

No matter how well a couple gets along, there are times when they disagree on major decisions, get annoyed about something the other person does, or just have spats or fights because they're in a bad mood or tired or for some other reason. They also use many different ways of trying to settle their differences. I'm going to read a list of some things that you and your (husband/wife/partner) might have done when you had a dispute, and would first like you to tell me for each one how often you did it in the past year.

		Q.66 RESPONDENT IN PAST YEAR								Q.67 HUSBAND/WIFE/PARTNER IN PAST YEAR								Q.68 EVER HAPPENED		
		ONCE	TWICE	3-5 TIMES	6-10 TIMES	11-20 TIMES	MORE THAN 20 TIMES	NEVER	DON'T KNOW	ONCE	TWICE	3-5 TIMES	6-10 TIMES	11-20 TIMES	MORE THAN 20 TIMES	NEVER	DON'T KNOW	NO	YES	DON'T KNOW
A.	Discussed the issue calmly	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	94
B.	Got information to back up (your/his/her) side of things	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	94
C.	Brought in or tried to bring in someone to help settle things	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	94
D.	Insulted or swore at the other one	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	94
E.	Sulked and/or refused to talk about it	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	94
F.	Stomped out of the room or house (or yard)	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	94
G.	Cried	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	94
H.	Did or said something to spite the other one	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
I.	Threatened to hit or throw something at the other one	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
J.	Threw or smashed or hit or kicked something	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
K.	Threw something at the other one	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
L.	Pushed, grabbed, or shoved the other one	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
M.	Slapped the other one	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
N.	Kicked, bit, or hit with a fist	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
O.	Hit or tried to hit with something	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
P.	Beat up the other one	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
Q.	Threatened with a knife or gun	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
R.	Used a knife or gun	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9
S.	Other (PROBE): _____	01	02	03	04	05	06	00	94	01	02	03	04	05	06	00	94	01	02	9

67. And what about your (husband/wife/partner)? Tell me how often (he/she) (ITEM) in the past year.

FOR EACH ITEM CIRCLED EITHER "NEVER" OR "DON'T KNOW" FOR BOTH RESPONDENT AND PARTNER, ASK:

68. Did you or your (husband/wife/partner) ever (ITEM)?

69. Now I would like to know about the children, if any, who live in your home.

Are there any children under 18 years old living (in your household) with you and your (husband/wife/partner)?

NO . . . . . 01 → (72)
YES 02

69a. How many children aged 6-16 years old are currently living with you?

RECORD NUMBER: ☐☐ IF NONE → (72)

69b. How many of these children aged 6-16 years have you (given birth to/fathered)?

RECORD NUMBER: ☐☐ IF NUMBER ENTERED EQUALS NUMBER IN 69a → (70)

69c. Other than your natural children, how many of the children aged 6-16 years old living in your home are you raising or acting as a parent for?

DO NOT INCLUDE BABYSITTING, TEACHING, TEMPORARY CARETAKING, ETC.

RECORD NUMBER: ☐☐

70. HAND R SELF-REPORT BOOKLET TURNED TO 70.

We would now like some information about each of the children we have just talked about; that is, each of the children living in your home who are aged 6-16 years old. For each child, please complete Questions 70A-E in this booklet. There are eight pages for each child. The booklet pages are already numbered to correspond to each child.

CHILD NO. 01 -- PAGE 1

A. What is the first name of this child?

NAME: _____

PLEASE ANSWER PARTS B-E FOR THE CHILD NAMED ABOVE.

B. How old was this child on his/her last birthday?

AGE

☐☐ → IF NOT 6-16 YEARS OLD, GO TO NEXT CHILD.

C. Is this child a boy or a girl?

BOY 01
GIRL 02

D. Did you (give birth to/father) this child?

NO 01
YES 02

E. Below is a list of items that describe children. For each item that describes this child now or within the past 6 months, please circle the 02 if the item is very true or often true of this child. Circle the 01 if the item is somewhat or sometimes true of this child. If the item is not true of this child, circle the 00. Please answer all items as well as you can, even if some do not seem to apply to this child.

		NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
1.	Acts too young for his/her age	00	01	02
2.	Allergy (DESCRIBE): _____ _____	00	01	02
3.	Argues a lot	00	01	02
4.	Asthma	00	01	02
5.	Behaves like opposite sex	00	01	02
6.	Bowel movements outside toilet	00	01	02
7.	Bragging, boasting	00	01	02
8.	Can't concentrate, can't pay attention for long	00	01	02

		NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
9.	Can't get his/her mind off certain thoughts; obsessions (DESCRIBE): _____	00	01	02
10.	Can't sit still, restless, or hyperactive	00	01	02
11.	Clings to adults or too dependent	00	01	02
12.	Complains of loneliness	00	01	02
13.	Confused or seems to be in a fog	00	01	02
14.	Cries a lot	00	01	02
15.	Cruel to animals	00	01	02
16.	Cruelty, bullying, or meanness to others	00	01	02
17.	Day-dreams or gets lost in his/her thoughts	00	01	02
18.	Deliberately harms self or attempts suicide	00	01	02
19.	Demands a lot of attention	00	01	02
20.	Destroys his/her own things	00	01	02
21.	Destroys things belonging to his/her family or other children	00	01	02
22.	Disobedient at home	00	01	02
23.	Disobedient at school	00	01	02
24.	Doesn't eat well	00	01	02
25.	Doesn't get along with other children	00	01	02
26.	Doesn't seem to feel guilty after misbehaving	00	01	02
27.	Easily jealous	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
28. Eats or drinks things that are not food (DESCRIBE) _____ _____	00	01	02
29. Fears certain animals, situations, or places, other than school (DESCRIBE): _____	00	01	02
30. Fears going to school	00	01	02
31. Fears he/she might think or do something bad	00	01	02
32. Feels he/she has to be perfect	00	01	02
33. Feels or complains that no one loves him/her	00	01	02
34. Feels others are out to get him/her	00	01	02
35. Feels worthless or inferior	00	01	02
36. Gets hurt a lot, accident-prone	00	01	02
37. Gets in many fights	00	01	02
38. Gets teased a lot	00	01	02
39. Hangs around with children who get in trouble	00	01	02
40. Hears things that aren't there (DESCRIBE): _____ _____	00	01	02
41. Impulsive or acts without thinking	00	01	02
42. Likes to be alone	00	01	02
43. Lying or cheating	00	01	02
44. Bites fingernails	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
45. Nervous, highstrung, or tense	00	01	02
46. Nervous movements or twitching (DESCRIBE): _____	00	01	02
47. Nightmares	00	01	02
48. Not liked by other children	00	01	02
49. Constipated, doesn't move bowels	00	01	02
50. Too fearful or anxious	00	01	02
51. Feels dizzy	00	01	02
52. Feels too guilty	00	01	02
53. Overeating	00	01	02
54. Overtired	00	01	02
55. Overweight	00	01	02
56. Physical problems without known medical cause:			
a. Aches or pains	00	01	02
b. Headaches	00	01	02
c. Nausea, feels sick	00	01	02
d. Problems with eyes (DESCRIBE): _____	00	01	02
e. Rashes or other skin problems	00	01	02
f. Stomachaches or cramps	00	01	02
g. Vomiting, throwing up	00	01	02
h. Other (DESCRIBE) _____	00	01	02
57. Physically attacks people	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
58. Picks nose, skin, or other parts of body (DESCRIBE): _____ _____	00	01	02
59. Plays with own sex parts in public	00	01	02
60. Plays with own sex parts too much	00	01	02
61. Poor school work	00	01	02
62. Poorly coordinated or clumsy	00	01	02
63. Prefers playing with older children	00	01	02
64. Prefers playing with younger children	00	01	02
65. Refuses to talk	00	01	02
66. Repeats certain acts over and over; compulsions (DESCRIBE) _____ _____	00	01	02
67. Runs away from home	00	01	02
68. Screams a lot	00	01	02
69. Secretive, keeps things to self	00	01	02
70. Sees things that aren't there (DESCRIBE) _____ _____	00	01	02
71. Self-conscious or easily embarrassed	00	01	02
72. Sets fires	00	01	02
73. Sexual problems (DESCRIBE) _____ _____	00	01	02

		NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
74.	Showing off or clowning	00	01	02
75.	Shy or timid	00	01	02
76.	Sleeps less than most children	00	01	02
77.	Sleeps more than most children during day and/or night (DESCRIBE) _____ _____	00	01	02
78.	Smears or plays with bowel movements	00	01	02
79.	Speech problem (DESCRIBE) _____ _____	00	01	02
80.	Stares blankly	00	01	02
81.	Steals at home	00	01	02
82.	Steals outside the home	00	01	02
83.	Stores up things he/she doesn't need (DESCRIBE) _____ _____	00	01	02
84.	Strange behavior (DESCRIBE) _____ _____	00	01	02
85.	Strange ideas (DESCRIBE) _____ _____	00	01	02
86.	Stubborn, sullen, or irritable	00	01	02
87.	Sudden changes in mood or feelings	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
88. Sulks a lot	00	01	02
89. Suspicious	00	01	02
90. Swearing or obscene language	00	01	02
91. Talks about killing self	00	01	02
92. Talks or walks in sleep (DESCRIBE) _____ _____	00	01	02
93. Talks too much	00	01	02
94. Teases a lot	00	01	02
95. Temper tantrums or hot temper	00	01	02
96. Thinks about sex too much	00	01	02
97. Threatens people	00	01	02
98. Thumb-sucking	00	01	02
99. Too concerned with neatness or cleanliness	00	01	02
100. Trouble sleeping (DESCRIBE) _____ _____	00	01	02
101. Truancy, skips school	00	01	02
102. Underactive, slow moving, or lacks energy	00	01	02
103. Unhappy, sad, or depressed	00	01	02
104. Unusually loud	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
105. Uses alcohol or drugs (DESCRIBE) _____ _____	00	01	02
106. Vandalism	00	01	02
107. Wets self during the day	00	01	02
108. Wets the bed	00	01	02
109. Whining	00	01	02
110. Wishes to be of opposite sex	00	01	02
111. Withdrawn, doesn't get involved with others	00	01	02
112. Worrying	00	01	02

113. Please write in any problems your child has that were not listed above:

_____

_____

_____

PLEASE BE SURE YOU HAVE ANSWERED ALL QUESTIONS FOR THIS CHILD, THEN CONTINUE FOR NEXT CHILD. WHEN YOU HAVE COMPLETED PAGES FOR ALL CHILDREN 6-16 YEARS OLD, RETURN THE BOOKLET TO THE INTERVIEWER.

71. FOR RESPONDENTS WITH CHILDREN LIVING WITH THEM.

HAND R SELF-REPORT BOOKLET TURNED TO QUESTION 71.

Now we have a few questions about your family--all family members living in the home, including you, your (husband/wife/partner) and/or any children you have living with you. Here is a list of statements people sometimes use to describe their families. Please indicate how often each of these describes your family at the present time.

Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
A. Family members are supportive of each other during difficult times	01	02	03	04	05
B. Family members sometimes get so angry they throw things	01	02	03	04	05
C. In our family, it is easy for everyone to express his/her opinion	01	02	03	04	05
D. It is easier to discuss problems with people outside the family than with other family members	01	02	03	04	05
E. Each family member has input in major family decisions	01	02	03	04	05
F. Our family gathers together in the same room	01	02	03	04	05
G. Family members sometimes hit each other.	01	02	03	04	05
H. Children have a say in their discipline	01	02	03	04	05
I. Our family does things together	01	02	03	04	05
J. Family members discuss problems and feel good about the solutions	01	02	03	04	05
K. In our family, everyone goes his/her own way	01	02	03	04	05
L. We shift household responsibilities from person to person	01	02	03	04	05
M. Family members know each other's close friends	01	02	03	04	05
N. It is hard to know what the rules are in our family	01	02	03	04	05

Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
O. Family members consult other family members on their decisions	01	02	03	04	05
P. We fight a lot in our family	01	02	03	04	05
Q. Family members say what they want	01	02	03	04	05
R. We have difficulty thinking of things to do as a family	01	02	03	04	05
S. In solving problems, the children's suggestions are followed	01	02	03	04	05
T. Family members feel very close to each other	01	02	03	04	05
U. Family members rarely criticize each other	01	02	03	04	05
V. Discipline is fair in our family	01	02	03	04	05
W. Family members feel closer to people outside the family than to other family members	01	02	03	04	05
X. Our family tries new ways of dealing with problems	01	02	03	04	05
Y. Family members go along with what the family decides to do	01	02	03	04	05
Z. In our family, everyone shares responsibilities	01	02	03	04	05
AA. Family members like to spend their free time with each other	01	02	03	04	05
BB. It is difficult to get a rule changed in our family	01	02	03	04	05
CC. Family members avoid each other at home	01	02	03	04	05
DD. When problems arise, we compromise	01	02	03	04	05
EE. We approve of each other's friends	01	02	03	04	05
FF. Family members are afraid to say what is on their minds	01	02	03	04	05
GG. Family members pair up rather than do things as a total family	01	02	03	04	05

Describe your family now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
HH. Family members share interests and hobbies with each other	01	02	03	04	05
II. Family members hardly ever lose their tempers	01	02	03	04	05

WHEN R RETURNS BOOKLET, GO TO INTRODUCTION TO 73-84.

72. FOR COUPLES WITHOUT CHILDREN.

HAND R SELF-REPORT BOOKLET TURNED TO QUESTION 72.

Now we have a few questions about your family, that is, your husband/wife/partner and all family members living in the home. Here is a list of statements people sometimes use to describe their families. Please indicate how often each of these describe your family at the present time.

AFTER R FILLS OUT AND RETURNS BOOKLET, CONTINUE WITH 73.

Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
A. We are supportive of each other during difficult times	01	02	03	04	05
B. We sometimes get so angry we throw things	01	02	03	04	05
C. In our relationship, it is easy for both of us to express our opinion	01	02	03	04	05
D. It is easier to discuss problems with people outside the marriage/relationship than with my partner	01	02	03	04	05
E. We each have input regarding major family decisions	01	02	03	04	05
F. We spend time together when we are home	01	02	03	04	05
G. We sometimes hit each other	01	02	03	04	05
H. We are flexible in how we handle differences	01	02	03	04	05

Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
I. We do things together	01	02	03	04	05
J. We discuss problems and feel good about the solutions	01	02	03	04	05
K. In our marriage/relationship, we each go our own way	01	02	03	04	05
L. We shift household responsibilities between us	01	02	03	04	05
M. We know each other's close friends	01	02	03	04	05
N. It is hard to know what the rules are in our relationship	01	02	03	04	05
O. We consult each other on personal decisions	01	02	03	04	05
P. We fight a lot	01	02	03	04	05
Q. We freely say what we want	01	02	03	04	05
R. We have difficulty thinking of things to do together	01	02	03	04	05
S. We have a good balance of leadership in our family	01	02	03	04	05
T. We feel very close to each other	01	02	03	04	05
U. We rarely criticize each other	01	02	03	04	05
V. We operate on the principle of fairness in our marriage/relationship	01	02	03	04	05
W. I feel closer to people outside the marriage/relationship than to my partner	01	02	03	04	05
X. We try new ways of dealing with problems	01	02	03	04	05
Y. I go along with what my partner decides to do	01	02	03	04	05
Z. In our marriage/relationship, we share responsibilities	01	02	03	04	05
AA. We like to spend our free time with each other	01	02	03	04	05

Describe your relationship now:	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
BB. It is difficult to get a rule change in our relationship	01	02	03	04	05
CC. We avoid each other at home	01	02	03	04	05
DD. When problems arise, we compromise	01	02	03	04	05
EE. We approve of each other's friends	01	02	03	04	05
FF. We are afraid to say what is on our minds.	01	02	03	04	05
GG. We tend to do more things separately	01	02	03	04	05
HH. We share interests and hobbies with each other	01	02	03	04	05
II. We hardly ever lose our tempers	01	02	03	04	05

Now I have some questions about your (husband/wife/partner)--about some of (his/her) experiences since leaving (active duty) military service and how s/he's doing these days.

First, I'm going to mention some problems that some veterans have had since returning to civilian life. For each one, please tell me if to your knowledge your (husband/wife/partner) has had such problems since leaving military service.

	A. Since (his/her) last release from active duty military service, has (he/she) had any... IF YES, ASK B.				B. Did you consider this to be a minor problem or a serious one? IF SERIOUS, ASK C.				C. Is it a serious problem for (him/her) now?		
		DK	NO	YES		DK	MINOR	SERIOUS		NO	YES	DK
73.	Problems or difficulties finding jobs?	94	01	02	→	94	01	02	→	01	02	94
74.	Problems with not having enough money to live on?	94	01	02	→	94	01	02	→	01	02	94
75.	Problems holding a job?	94	01	02	→	94	01	02	→	01	02	94
76.	Problems with drugs?	94	01	02	→	94	01	02	→	01	02	94
77.	Problems with drinking too much?	94	01	02	→	94	01	02	→	01	02	94
78.	Mental or emotional problems?	94	01	02	→	94	01	02	→	01	02	94
79.	Problems with his/her physical health?	94	01	02	→	94	01	02	→	01	02	94
80.	Not knowing what he/she wants out of life?	94	01	02	→	94	01	02	→	01	02	94
81.	Being in and out of trouble with the law?	94	01	02	→	94	01	02	→	01	02	94
82.	Problems with finishing his/her schooling?	94	01	02	→	94	01	02	→	01	02	94
83.	Being discriminated against because he/she was in the Armed Forces?	94	01	02	→	94	01	02	→	01	02	94
84.	Family problems with his/her spouse or children?	94	01	02	→	94	01	02	→	01	02	94

85. HAND R SELF-REPORT BOOKLET TURNED TO QUESTION 85.

Now here is another list of questions which ask for your opinions about various aspects of your (husband's/wife's/partner's) life since s/he was last released from active duty military service. Please circle the number that best describes how you feel about each statement.

WHEN RESPONDENT RETURNS BOOKLET, GO TO 86.

A. Before s/he entered the military s/he had more close friends than s/he has now.

01	02	03	04	05	94
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

B. S/he does not feel guilt over things that s/he did in the military.

01	02	03	04	05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALWAYS TRUE	DON'T KNOW

C. If someone pushes (him/her) too far, s/he is likely to become violent.

01	02	03	04	05	94
VERY UNLIKELY	UNLIKELY	SOMEWHAT UNLIKELY	VERY LIKELY	EXTREMELY LIKELY	DON'T KNOW

D. If something happens that reminds (him/her) of the military, s/he becomes very distressed and upset.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

E. The people who know him/her best are afraid of him/her.

01	02	03	04	05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

F. S/he is able to get emotionally close to others.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

G. S/he has nightmares of experiences in the military that really happened.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

H. When s/he thinks of some of the things that s/he did in the military, s/he wishes s/he were dead.

01	02	03	04	05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

I. It seems as if s/he has no feelings.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

J. Lately, s/he has felt like killing him/herself.

01	02	03	04	05	94
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

K. S/he falls asleep, stays asleep and awakens only when the alarm goes off.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

L. S/he wonders why s/he is still alive when others died in the military.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

M. Being in certain situations makes him/her feel as though s/he is back in the military.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

N. His/her dreams at night are so real that s/he wakens in a cold sweat and forces him/herself to stay awake.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

O. S/he feels like s/he cannot go on.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

P. S/he does not laugh or cry at the same things other people do.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

Q. S/he still enjoys doing many things that s/he used to enjoy.

01	02	03	04	05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALWAYS TRUE	DON'T KNOW

R. His/her daydreams are very real and frightening.

01	02	03	04	05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

S. S/he has found it easy to keep a job since his/her separation from the military.

01	02	03	04	05	94
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

T. S/he has trouble concentrating on tasks.

01	02	03	04	05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

U. S/he has cried for no good reason.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

V. S/he enjoys the company of others.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

W. S/he is frightened by his/her urges.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON't KNOW

X. S/he falls asleep easily at night.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

Y. Unexpected noises make him/her jump.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

Z. No one understands how s/he feels, not even his/her family.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

AA. S/he is an easy-going, even-tempered person.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	USUALLY	VERY MUCH SO	DON'T KNOW

BB. S/he feels there are certain things that s/he did in the military that s/he can never tell anyone, because no one would ever understand.

01	02	03	04	05	94
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	TRUE	VERY TRUE	DON'T KNOW

CC. There have been times when s/he has used alcohol (or other drugs) to help him/her sleep or to make him/her forget about things that happened while s/he was in the service.

01	02	03	04	05	94
NEVER	INFREQUENTLY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

DD. S/he feels comfortable when s/he is in a crowd.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	USUALLY	ALWAYS	DON'T KNOW

EE. S/he loses his/her cool and explodes over minor everyday things.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOE

FF. S/he is afraid to go to sleep at night.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS	DON'T KNOW

GG. S/he tries to stay away from anything that will remind him/her of things which happened while s/he was in the military.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS	DON'T KNOW

HH. His/her memory is as good as it ever was.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

II. S/he has a hard time expressing his/her feelings, even to the people s/he cares about.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

JJ. At times s/he suddenly acts or feels as though something that happened while s/he was in the military were happening all over again.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

KK. S/he is not able to remember some important things that happened while s/he was in the military.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

LL. S/he feels "superalert" or "on guard" much of the time.

01	02	03	04	05	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

MM. If something happens that reminds him/her of the military, s/he gets so anxious or panicky that his/her heart pounds hard; s/he has trouble getting his/her breath; s/he sweats, trembles or shakes; or feels dizzy, tingly, or faint.

01	02	03	04	05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

86. There's been a lot of talk lately about stress and the effect of traumatic events on people's lives. Have you ever heard of post-traumatic stress disorder?

NO . . . . . 01 → (92)
YES 02
DK . . . . . 94 } → (92)
RE . . . . . 97 }

87. Have you ever thought your (husband/wife/partner) <u>had</u> post-traumatic stress disorder?

NO . . . . . 01 → (92)
YES 02
DK . . . . . 94 } → (92)
RE . . . . . 97 }

88. How old was (he/she) the first time (he/she) experienced problems related to post-traumatic stress disorder?

AGE

[ ][ ]

DK 94
RE 97

89. Do you think that (he/she) has post-traumatic stress disorder <u>now</u>?

NO 01
YES . . . . . 02 → (92)
DK 94
RE 97

90. When did you last think that (he/she) had post-traumatic stress disorder?

WITHIN LAST 2 WEEKS	01	→ (92)
WITHIN LAST MONTH	02	
WITHIN LAST 6 MONTHS	03	
WITHIN LAST YEAR	04	
WITHIN LAST 3 YEARS	05	
MORE THAN 3 YEARS AGO	06	
DK ±3 YEARS	94	
RE	97	

91. How old was he/she then?

AGE

DK	94
RE	97

92. HAND R CARD L.

We are also interested in knowing how your (husband/wife/partner) is getting along in (his/her) personal life--(his/her) relationships with people (he/she) feels close to.

Please tell me how well you think (he/she) did each of the following things in (his/her) personal life in the last two weeks:

During the past two weeks, how well has (he/she)...	EXCEPTIONALLY WELL	VERY WELL	ALL RIGHT	NOT VERY WELL	VERY POORLY
A. ...gotten along with others in (his/her) personal life?	01	02	03	04	05
B. ...handled responsibilities and daily demands?	01	02	03	04	05
C. ...made the right decisions?	01	02	03	04	05
D. ...avoided arguing with others?	01	02	03	04	05
E. ...handled disagreements by compromising and meeting other people half-way?	01	02	03	04	05
F. ...done in being calm in (his/her) personal life?	01	02	03	04	05
G. ...accepted responsibilities for (his/her) own actions and behaviors?	01	02	03	04	05

	During the past two weeks, how well has (he/she)...	EXCEPTIONALLY WELL	VERY WELL	ALL RIGHT	NOT VERY WELL	VERY POORLY
H.	...stayed level headed?	01	02	03	04	05
I.	...given people the time and attention they needed?	01	02	03	04	05
J.	...done in being pleasant?	01	02	03	04	05
K.	...done in acting in a relaxed manner?	01	02	03	04	05
L.	...done in handling all of the things required of (him/her) in (his/her) personal life?	01	02	03	04	05
M.	...shown affection?	01	02	03	04	05
N.	...done in working around the house or apartment?	01	02	03	04	05

93. How well has (he/she) gotten along with children in the last two weeks?

DOESN'T APPLY. HE/SHE HAS HAD NO CONTACT WITH CHILDREN 00
VERY POORLY 01
NOT VERY WELL 02
ALL RIGHT 03
VERY WELL 04
EXCEPTIONALLY WELL 05

94. HAND R CARD M TO USE THROUGH 95b.

And how about your relationship with your (husband/wife/partner)?

How much...

		NOT AT ALL	JUST A LITTLE	SOME	PRETTY MUCH	A GREAT DEAL
A.	...do you provide (him/her) with encouragement and reassurance when (he/she) needs it?	01	02	03	04	05
B.	...do you act in an unpleasant or angry manner toward (him/her)?	01	02	03	04	05
C.	...do you show you care about (him/her) as a person?	01	02	03	04	05
D.	...do you make (his/her) life difficult?	01	02	03	04	05
E.	...do you give (him/her) useful information or advice when (he/she) needs it?	01	02	03	04	05
F.	...do you act in ways that show you dislike (him/her)?	01	02	03	04	05
G.	...do you listen to him/her when (he/she) needs to talk about things that are important to (him/her)?	01	02	03	04	05
H.	...do you say or do things that raise (his/her) self-confidence?	01	02	03	04	05
I.	...does (he/she) talk to you when (he/she) is upset, nervous or depressed about something?	01	02	03	04	05
J.	...do you understand the way (he/she) thinks and feels about things?	01	02	03	04	05

95. POINT TO CARD M.

How much (if any) does (he/she) talk to you about (his/her) experiences in (or around) Vietnam?

NOT AT ALL	01	→ (96)
JUST A LITTLE	02	
SOME	03	
PRETTY MUCH	04	
A GREAT DEAL	05	

95a. POINT TO CARD M.

How much do you listen to (him/her) when (he/she) talks about Vietnam?

NOT AT ALL 01
JUST A LITTLE 02
SOME 03
PRETTY MUCH 04
A GREAT DEAL 05

95b. POINT TO CARD M.

How much do you understand the way (he/she) thinks and feels about (his/her) experiences in (or around) Vietnam?

NOT AT ALL 01
JUST A LITTLE 02
SOME 03
PRETTY MUCH 04
A GREAT DEAL 05

96. Did you talk with (him/her) about the war in Vietnam or (his/her) experiences in it at any time during the last few months or so?

NO 01
YES 02

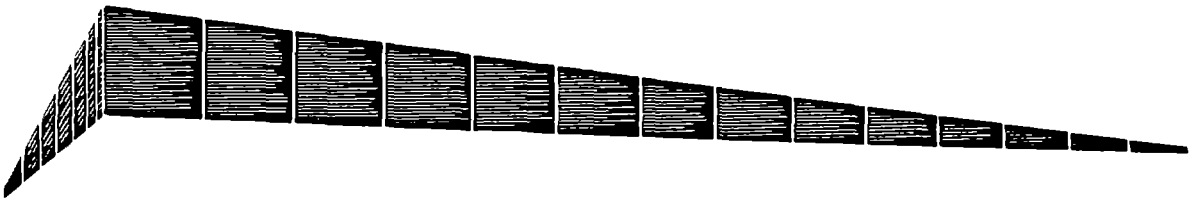
97. And what is your current attitude toward the Vietnam war? Do you feel, in general, that we did the right thing in getting into the fighting in Vietnam, or should we have stayed out?

CODE PRESENT FEELING.

RIGHT IN GETTING IN 01
SHOULD HAVE STAYED OUT 02
HAVE NO STRONG FEELINGS ABOUT THE WAR ONE WAY OR THE OTHER (VOLUNTEERED) . 03
DK 94
RE 97

98. TIME CHECKPOINT:

RECORD ENDING DATE AND TIME: ☐☐ / ☐☐ ☐☐ : ☐☐ A.M. P.M.
MONTH DAY HOUR MINUTE



NATIONAL SURVEY OF THE VIETNAM GENERATION

OMB No.: 2900-0449
EXPIRES: 12/31/88

FAMILY INTERVIEW
SELF-REPORT BOOKLET

CONDUCTED BY:

Research Triangle Institute
Post Office Box 12194
Research Triangle Park, North Carolina 27709
(919) 541-6000

Louis Harris and Associates
630 Fifth Avenue
New York, New York 10111
(212) 698-9600

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Circle the number which best describes how strongly you agree with the following statements.

	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
A. When I make plans I am certain I can make them work	01	02	03	04
B. I don't like conversations when others are confused about what they mean to say	01	02	03	04
C. I feel very much loved and supported by people in my life.	01	02	03	04
D. When you marry you have lost your freedom of choice	01	02	03	04
E. I often wake up eager to take up my life where it left off the day before	01	02	03	04
F. Planning ahead can help avoid most future problems	01	02	03	04
G. These days I really don't know who I can count on for help.	01	02	03	04
H. I really look forward to my work	01	02	03	04
I. I won't answer a person's question until I am very clear as to what he is asking	01	02	03	04
J. Sometimes I feel all alone in the world.	01	02	03	04
K. I find it difficult to imagine enthusiasm concerning work	01	02	03	04
L. It doesn't bother me to step aside for a while from something I'm involved in.	01	02	03	04
M. The most exciting thing for me is my own fantasies.	01	02	03	04
N. When I am at work doing a difficult task I know when I need to ask for help.	01	02	03	04

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	STRONGLY AGREE	AGREE	DISAGREE	STRONGLY DISAGREE
O. No one cares much what happens to me.	01	02	03	04
P. I feel uncomfortable if I need to make any changes in my everyday schedule	01	02	03	04
Q. No matter how hard I try, my efforts will accomplish nothing. . .	01	02	03	04
R. A person who seldom changes his mind can usually be depended upon to have reliable judgment . . .	01	02	03	04
S. It's exciting for me to learn something about myself	01	02	03	04

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Please indicate how often you do each of the following things by circling one of the numbers.

	ALL THE TIME	MOST OF THE TIME	MORE OFTEN THAN NOT	OCCA-SIONALLY	RARELY	NEVER
A. How often do you discuss or have you considered divorce, separation, or terminating your relationship?	01	02	03	04	05	06
B. In general, how often do you think that things between you and your partner are going well?	01	02	03	04	05	06
C. How often do you and your partner quarrel?	01	02	03	04	05	06
D. How often do you and your partner "get on each other's nerves?"	01	02	03	04	05	06

60. How often have you been upset about how you and your partner were getting along in the sexual part of your life?

Often 01
Sometimes . . 02
Rarely. . . . 03
Never 04

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CHILD NO. 01 -- PAGE 1

A. What is the first name of this child?

Name: _____

PLEASE ANSWER PARTS B-E FOR THE CHILD NAMED ABOVE.

B. How old was this child on his/her last birthday?

☐☐ → IF NOT 6-16 YEARS OLD, GO TO NEXT CHILD

AGE

C. Is this child a boy or a girl?

Boy 01
Girl. 02

D. Did you (give birth to/father) this child?

No. 01
Yes 02

E. Below is a list of items that describe children. For each item that describes this child now or within the past 6 months, please circle the 02 if the item is very true or often true of this child. Circle the 01 if the item is somewhat or sometimes true of this child. If the item is not true of this child, circle the 00. Please answer all items as well as you can, even if some do not seem to apply to this child.

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
1. Acts too young for his/her age	00	01	02
2. Allergy (DESCRIBE): _____ _____ . .	00	01	02
3. Argues a lot	00	01	02
4. Asthma	00	01	02
5. Behaves like opposite sex.	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
6. Bowel movements outside toilet	00	01	02
7. Bragging, boasting	00	01	02
8. Can't concentrate, can't pay attention for long	00	01	02
9. Can't get his/her mind off certain thoughts; obsessions (DESCRIBE): _____ _____	00	01	02
10. Can't sit still, restless, or hyperactive.	00	01	02
11. Clings to adults or too dependent.	00	01	02
12. Complains of loneliness.	00	01	02
13. Confused or seems to be in a fog	00	01	02
14. Cries a lot.	00	01	02
15. Cruel to animals	00	01	02
16. Cruelty, bullying, or meanness to others	00	01	02
17. Day-dreams or gets lost in his/her thoughts.	00	01	02
18. Deliberately harms self or attempts suicide.	00	01	02
19. Demands a lot of attention	00	01	02
20. Destroys his/her own things.	00	01	02
21. Destroys things belonging to his/her family or other children	00	01	02
22. Disobedient at home.	00	01	02
23. Disobedient at school.	00	01	02
24. Doesn't eat well	00	01	02
25. Doesn't get along with other children.	00	01	02
26. Doesn't seem to feel guilty after misbehaving.	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
27. Easily jealous	00	01	02
28. Eats or drinks things that are not food. (DESCRIBE) _____ _____	00	01	02
29. Fears certain animals, situations, or places other than school (DESCRIBE) _____	00	01	02
30. Fears going to school.	00	01	02
31. Fears he/she might think or do something bad.	00	01	02
32. Feels he/she has to be perfect	00	01	02
33. Feels or complains that no one loves him/her.	00	01	02
34. Feels others are out to get him/her.	00	01	02
35. Feels worthless or inferior.	00	01	02
36. Gets hurt a lot, accident-prone.	00	01	02
37. Gets in many fights.	00	01	02
38. Gets teased a lot.	00	01	02
39. Hangs around with children who get in trouble.	00	01	02
40. Hears things that aren't there (DESCRIBE). _____ _____	00	01	02
41. Impulsive or acts without thinking	00	01	02
42. Likes to be alone.	00	01	02
43. Lying or cheating.	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
44. Bites fingernails	00	01	02
45. Nervous, highstrung, or tense	00	01	02
46. Nervous movements or twitching (DESCRIBE) _____	00	01	02
47. Nightmares	00	01	02
48. Not liked by other children	00	01	02
49. Constipated, doesn't move bowels	00	01	02
50. Too fearful or anxious	00	01	02
51. Feels dizzy	00	01	02
52. Feels too guilty	00	01	02
53. Overeating	00	01	02
54. Overtired	00	01	02
55. Overweight	00	01	02
56. Physical problems without known medical cause:			
a. Aches or pains	00	01	02
b. Headaches	00	01	02
c. Nausea, feels sick	00	01	02
d. Problems with eyes (DESCRIBE): _____	00	01	02
e. Rashes or other skin problems	00	01	02
f. Stomachaches or cramps	00	01	02
g. Vomiting, throwing up	00	01	02
h. Other (DESCRIBE): _____	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
57. Physically attacks people.	00	01	02
58. Picks nose, skin, or other parts of body (DESCRIBE):_____ _____ . .	00	01	02
59. Plays with own sex parts in public	00	01	02
60. Plays with own sex parts too much.	00	01	02
61. Poor school work	00	01	02
62. Poorly coordinated or clumsy	00	01	02
63. Prefers playing with older children.	00	01	02
64. Prefers playing with younger children. . . .	00	01	02
65. Refuses to talk.	00	01	02
66. Repeats certain acts over and over; compulsions (DESCRIBE): _____ _____ . .	00	01	02
67. Runs away from home.	00	01	02
68. Screams a lot.	00	01	02
69. Secretive, keeps things to self.	00	01	02
70. Sees things that aren't there (DESCRIBE): _____ _____ . .	00	01	02
71. Self-conscious or easily embarrassed	00	01	02
72. Sets fires	00	01	02
73. Sexual problems (DESCRIBE): _____ _____ . .	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
74. Showing off or clowning.	00	01	02
75. Shy or timid	00	01	02
76. Sleeps less than most children	00	01	02
77. Sleeps more than most children during day and/or night (DESCRIBE): _____ _____ . .	00	01	02
78. Smears or plays with bowel movements	00	01	02
79. Speech problem (DESCRIBE): _____ _____ . .	00	01	02
80. Stares blankly	00	01	02
81. Steals at home	00	01	02
82. Steals outside the home.	00	01	02
83. Stores up things he/she doesn't need (DESCRIBE): _____ _____ . .	00	01	02
84. Strange behavior (DESCRIBE): _____ _____ . .	00	01	02
85. Strange ideas (DESCRIBE): _____ _____ . .	00	01	02
86. Stubborn, sullen, or irritable	00	01	02
87. Sudden changes in mood or feelings	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
88. Sulks a lot.	00	01	02
89. Suspicious	00	01	02
90. Swearing or obscene language	00	01	02
91. Talks about killing self	00	01	02
92. Talks or walks in sleep (DESCRIBE): _____ _____	00	01	02
93. Talks too much	00	01	02
94. Teases a lot	00	01	02
95. Temper tantrums or hot temper.	00	01	02
96. Thinks about sex too much.	00	01	02
97. Threatens people	00	01	02
98. Thumb-sucking.	00	01	02
99. Too concerned with neatness or cleanliness	00	01	02
100. Trouble sleeping (DESCRIBE): _____ _____	00	01	02
101. Truancy, skips school	00	01	02
102. Underactive, slow moving, or lacks energy	00	01	02
103. Unhappy, sad, or depressed.	00	01	02
104. Unusually loud.	00	01	02
105. Uses alcohol or drugs (DESCRIBE): _____ _____	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
106. Vandalism	00	01	02
107. Wets self during the day	00	01	02
108. Wets the bed	00	01	02
109. Whining	00	01	02
110. Wishes to be of opposite sex	00	01	02
111. Withdrawn, doesn't get involved with others	00	01	02
112. Worrying	00	01	02

113. Please write in any problems your child has that were not listed above:

_____

_____

_____

PLEASE BE SURE YOU HAVE ANSWERED ALL QUESTIONS FOR THIS CHILD, THEN CONTINUE FOR NEXT CHILD. WHEN YOU HAVE COMPLETED PAGES FOR ALL CHILDREN 6-16 YEARS OLD, RETURN THE BOOKLET TO THE INTERVIEWER.

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CHILD NO. 02 -- PAGE 1

A. What is the first name of this child?

Name: _____

PLEASE ANSWER PARTS B-E FOR THE CHILD NAMED ABOVE.

B. How old was this child on his/her last birthday?

☐☐ → IF NOT 6-16 YEARS OLD, GO TO NEXT CHILD

AGE

C. Is this child a boy or a girl?

Boy 01
Girl. 02

D. Did you (give birth to/father) this child?

No. 01
Yes 02

E. Below is a list of items that describe children. For each item that describes this child now or within the past 6 months, please circle the 02 if the item is very true or often true of this child. Circle the 01 if the item is somewhat or sometimes true of this child. If the item is not true of this child, circle the 00. Please answer all items as well as you can, even if some do not seem to apply to this child.

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
1. Acts too young for his/her age	00	01	02
2. Allergy (DESCRIBE): _____			
_____ . .	00	01	02
3. Argues a lot	00	01	02
4. Asthma	00	01	02
5. Behaves like opposite sex.	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
6. Bowel movements outside toilet	00	01	02
7. Bragging, boasting	00	01	02
8. Can't concentrate, can't pay attention for long	00	01	02
9. Can't get his/her mind off certain thoughts; obsessions (DESCRIBE): _____ _____	00	01	02
10. Can't sit still, restless, or hyperactive.	00	01	02
11. Clings to adults or too dependent.	00	01	02
12. Complains of loneliness.	00	01	02
13. Confused or seems to be in a fog	00	01	02
14. Cries a lot.	00	01	02
15. Cruel to animals	00	01	02
16. Cruelty, bullying, or meanness to others	00	01	02
17. Day-dreams or gets lost in his/her thoughts.	00	01	02
18. Deliberately harms self or attempts suicide.	00	01	02
19. Demands a lot of attention	00	01	02
20. Destroys his/her own things.	00	01	02
21. Destroys things belonging to his/her family or other children	00	01	02
22. Disobedient at home.	00	01	02
23. Disobedient at school.	00	01	02
24. Doesn't eat well	00	01	02
25. Doesn't get along with other children.	00	01	02
26. Doesn't seem to feel guilty after misbehaving.	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
27. Easily jealous	00	01	02
28. Eats or drinks things that are not food. (DESCRIBE) _____ _____	00	01	02
29. Fears certain animals, situations, or places other than school (DESCRIBE) _____	00	01	02
30. Fears going to school	00	01	02
31. Fears he/she might think or do something bad	00	01	02
32. Feels he/she has to be perfect	00	01	02
33. Feels or complains that no one loves him/her	00	01	02
34. Feels others are out to get him/her	00	01	02
35. Feels worthless or inferior	00	01	02
36. Gets hurt a lot, accident-prone	00	01	02
37. Gets in many fights	00	01	02
38. Gets teased a lot	00	01	02
39. Hangs around with children who get in trouble	00	01	02
40. Hears things that aren't there (DESCRIBE) _____ _____	00	01	02
41. Impulsive or acts without thinking	00	01	02
42. Likes to be alone	00	01	02
43. Lying or cheating	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
44. Bites fingernails.	00	01	02
45. Nervous, highstrung, or tense.	00	01	02
46. Nervous movements or twitching (DESCRIBE). .	00	01	02
_____			
47. Nightmares	00	01	02
48. Not liked by other children.	00	01	02
49. Constipated, doesn't move bowels	00	01	02
50. Too fearful or anxious	00	01	02
51. Feels dizzy.	00	01	02
52. Feels too guilty	00	01	02
53. Overeating	00	01	02
54. Overtired.	00	01	02
55. Overweight	00	01	02
56. Physical problems without known medical cause:			
a. Aches or pains.	00	01	02
b. Headaches	00	01	02
c. Nausea, feels sick.	00	01	02
d. Problems with eyes (DESCRIBE):.	00	01	02
_____			
e. Rashes or other skin problems	00	01	02
f. Stomachaches or cramps.	00	01	02
g. Vomiting, throwing up	00	01	02
h. Other (DESCRIBE):	00	01	02
_____			

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
57. Physically attacks people.	00	01	02
58. Picks nose, skin, or other parts of body (DESCRIBE):_____ _____ . .	00	01	02
59. Plays with own sex parts in public	00	01	02
60. Plays with own sex parts too much.	00	01	02
61. Poor school work	00	01	02
62. Poorly coordinated or clumsy	00	01	02
63. Prefers playing with older children.	00	01	02
64. Prefers playing with younger children. . . .	00	01	02
65. Refuses to talk.	00	01	02
66. Repeats certain acts over and over; compulsions (DESCRIBE): _____ _____ . .	00	01	02
67. Runs away from home.	00	01	02
68. Screams a lot.	00	01	02
69. Secretive, keeps things to self.	00	01	02
70. Sees things that aren't there (DESCRIBE): _____ _____ . .	00	01	02
71. Self-conscious or easily embarrassed	00	01	02
72. Sets fires	00	01	02
73. Sexual problems (DESCRIBE): _____ _____ . .	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
74. Showing off or clowning.	00	01	02
75. Shy or timid	00	01	02
76. Sleeps less than most children	00	01	02
77. Sleeps more than most children during day and/or night (DESCRIBE): _____ _____ . .	00	01	02
78. Smears or plays with bowel movements	00	01	02
79. Speech problem (DESCRIBE): _____ _____ . .	00	01	02
80. Stares blankly	00	01	02
81. Steals at home	00	01	02
82. Steals outside the home.	00	01	02
83. Stores up things he/she doesn't need (DESCRIBE): _____ _____ . .	00	01	02
84. Strange behavior (DESCRIBE): _____ _____ . .	00	01	02
85. Strange ideas (DESCRIBE): _____ _____ . .	00	01	02
86. Stubborn, sullen, or irritable	00	01	02
87. Sudden changes in mood or feelings	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
88. Sulks a lot.	00	01	02
89. Suspicious	00	01	02
90. Swearing or obscene language	00	01	02
91. Talks about killing self	00	01	02
92. Talks or walks in sleep (DESCRIBE): _____ _____	00	01	02
93. Talks too much	00	01	02
94. Teases a lot	00	01	02
95. Temper tantrums or hot temper.	00	01	02
96. Thinks about sex too much.	00	01	02
97. Threatens people	00	01	02
98. Thumb-sucking.	00	01	02
99. Too concerned with neatness or cleanliness	00	01	02
100. Trouble sleeping (DESCRIBE): _____ _____	00	01	02
101. Truancy, skips school	00	01	02
102. Underactive, slow moving, or lacks energy	00	01	02
103. Unhappy, sad, or depressed.	00	01	02
104. Unusually loud.	00	01	02
105. Uses alcohol or drugs (DESCRIBE): _____ _____	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
106. Vandalism	00	01	02
107. Wets self during the day	00	01	02
108. Wets the bed	00	01	02
109. Whining	00	01	02
110. Wishes to be of opposite sex	00	01	02
111. Withdrawn, doesn't get involved with others	00	01	02
112. Worrying	00	01	02

113. Please write in any problems your child has that were not listed above:

_____

_____

_____

PLEASE BE SURE YOU HAVE ANSWERED ALL QUESTIONS FOR THIS CHILD, THEN CONTINUE FOR NEXT CHILD. WHEN YOU HAVE COMPLETED PAGES FOR ALL CHILDREN 6-16 YEARS OLD, RETURN THE BOOKLET TO THE INTERVIEWER.

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CHILD NO. 03 -- PAGE 1

A. What is the first name of this child?

Name: _____

PLEASE ANSWER PARTS B-E FOR THE CHILD NAMED ABOVE.

B. How old was this child on his/her last birthday?

[ ][ ] → IF NOT 6-16 YEARS OLD, GO TO NEXT CHILD

AGE

C. Is this child a boy or a girl?

Boy 01
Girl. 02

D. Did you (give birth to/father) this child?

No. 01
Yes 02

E. Below is a list of items that describe children. For each item that describes this child now or within the past 6 months, please circle the 02 if the item is very true or often true of this child. Circle the 01 if the item is somewhat or sometimes true of this child. If the item is not true of this child, circle the 00. Please answer all items as well as you can, even if some do not seem to apply to this child.

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
1. Acts too young for his/her age	00	01	02
2. Allergy (DESCRIBE): _____			
_____ . .	00	01	02
3. Argues a lot	00	01	02
4. Asthma	00	01	02
5. Behaves like opposite sex.	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
6. Bowel movements outside toilet	00	01	02
7. Bragging, boasting	00	01	02
8. Can't concentrate, can't pay attention for long	00	01	02
9. Can't get his/her mind off certain thoughts; obsessions (DESCRIBE): _____ _____	00	01	02
10. Can't sit still, restless, or hyperactive.	00	01	02
11. Clings to adults or too dependent.	00	01	02
12. Complains of loneliness.	00	01	02
13. Confused or seems to be in a fog	00	01	02
14. Cries a lot.	00	01	02
15. Cruel to animals	00	01	02
16. Cruelty, bullying, or meanness to others	00	01	02
17. Day-dreams or gets lost in his/her thoughts.	00	01	02
18. Deliberately harms self or attempts suicide.	00	01	02
19. Demands a lot of attention	00	01	02
20. Destroys his/her own things.	00	01	02
21. Destroys things belonging to his/her family or other children	00	01	02
22. Disobedient at home.	00	01	02
23. Disobedient at school.	00	01	02
24. Doesn't eat well	00	01	02
25. Doesn't get along with other children.	00	01	02
26. Doesn't seem to feel guilty after misbehaving.	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
27. Easily jealous	00	01	02
28. Eats or drinks things that are not food. (DESCRIBE) _____ _____	00	01	02
29. Fears certain animals, situations, or places other than school (DESCRIBE) _____	00	01	02
30. Fears going to school	00	01	02
31. Fears he/she might think or do something bad	00	01	02
32. Feels he/she has to be perfect	00	01	02
33. Feels or complains that no one loves him/her	00	01	02
34. Feels others are out to get him/her	00	01	02
35. Feels worthless or inferior	00	01	02
36. Gets hurt a lot, accident-prone	00	01	02
37. Gets in many fights	00	01	02
38. Gets teased a lot	00	01	02
39. Hangs around with children who get in trouble	00	01	02
40. Hears things that aren't there (DESCRIBE) _____ _____	00	01	02
41. Impulsive or acts without thinking	00	01	02
42. Likes to be alone	00	01	02
43. Lying or cheating	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
44. Bites fingernails	00	01	02
45. Nervous, highstrung, or tense	00	01	02
46. Nervous movements or twitching (DESCRIBE) _____	00	01	02
47. Nightmares	00	01	02
48. Not liked by other children	00	01	02
49. Constipated, doesn't move bowels	00	01	02
50. Too fearful or anxious	00	01	02
51. Feels dizzy	00	01	02
52. Feels too guilty	00	01	02
53. Overeating	00	01	02
54. Overtired	00	01	02
55. Overweight	00	01	02
56. Physical problems without known medical cause:			
a. Aches or pains	00	01	02
b. Headaches	00	01	02
c. Nausea, feels sick	00	01	02
d. Problems with eyes (DESCRIBE): _____	00	01	02
e. Rashes or other skin problems	00	01	02
f. Stomachaches or cramps	00	01	02
g. Vomiting, throwing up	00	01	02
h. Other (DESCRIBE): _____	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
57. Physically attacks people.	00	01	02
58. Picks nose, skin, or other parts of body (DESCRIBE):_____ _____ . .	00	01	02
59. Plays with own sex parts in public	00	01	02
60. Plays with own sex parts too much.	00	01	02
61. Poor school work	00	01	02
62. Poorly coordinated or clumsy	00	01	02
63. Prefers playing with older children.	00	01	02
64. Prefers playing with younger children. . . .	00	01	02
65. Refuses to talk.	00	01	02
66. Repeats certain acts over and over; compulsions (DESCRIBE): _____ _____ . .	00	01	02
67. Runs away from home.	00	01	02
68. Screams a lot.	00	01	02
69. Secretive, keeps things to self.	00	01	02
70. Sees things that aren't there (DESCRIBE): _____ _____ . .	00	01	02
71. Self-conscious or easily embarrassed	00	01	02
72. Sets fires	00	01	02
73. Sexual problems (DESCRIBE): _____ _____ . .	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
74. Showing off or clowning.	00	01	02
75. Shy or timid	00	01	02
76. Sleeps less than most children	00	01	02
77. Sleeps more than most children during day and/or night (DESCRIBE): _____ _____ . .	00	01	02
78. Smears or plays with bowel movements	00	01	02
79. Speech problem (DESCRIBE): _____ _____ . .	00	01	02
80. Stares blankly	00	01	02
81. Steals at home	00	01	02
82. Steals outside the home.	00	01	02
83. Stores up things he/she doesn't need (DESCRIBE): _____ _____ . .	00	01	02
84. Strange behavior (DESCRIBE): _____ _____ . .	00	01	02
85. Strange ideas (DESCRIBE): _____ _____ . .	00	01	02
86. Stubborn, sullen, or irritable	00	01	02
87. Sudden changes in mood or feelings	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
88. Sulks a lot	00	01	02
89. Suspicious	00	01	02
90. Swearing or obscene language	00	01	02
91. Talks about killing self	00	01	02
92. Talks or walks in sleep (DESCRIBE): _____ _____	00	01	02
93. Talks too much	00	01	02
94. Teases a lot	00	01	02
95. Temper tantrums or hot temper	00	01	02
96. Thinks about sex too much	00	01	02
97. Threatens people	00	01	02
98. Thumb-sucking	00	01	02
99. Too concerned with neatness or cleanliness	00	01	02
100. Trouble sleeping (DESCRIBE): _____ _____	00	01	02
101. Truancy, skips school	00	01	02
102. Underactive, slow moving, or lacks energy	00	01	02
103. Unhappy, sad, or depressed	00	01	02
104. Unusually loud	00	01	02
105. Uses alcohol or drugs (DESCRIBE): _____ _____	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
106. Vandalism	00	01	02
107. Wets self during the day	00	01	02
108. Wets the bed	00	01	02
109. Whining	00	01	02
110. Wishes to be of opposite sex	00	01	02
111. Withdrawn, doesn't get involved with others	00	01	02
112. Worrying	00	01	02

113. Please write in any problems your child has that were not listed above:

_____

_____

_____

PLEASE BE SURE YOU HAVE ANSWERED ALL QUESTIONS FOR THIS CHILD, THEN CONTINUE FOR NEXT CHILD. WHEN YOU HAVE COMPLETED PAGES FOR ALL CHILDREN 6-16 YEARS OLD, RETURN THE BOOKLET TO THE INTERVIEWER.

70

CHILD NO. 04 -- PAGE 1

A. What is the first name of this child?

Name: _____

PLEASE ANSWER PARTS B-E FOR THE CHILD NAMED ABOVE.

B. How old was this child on his/her last birthday?

☐☐ → IF NOT 6-16 YEARS OLD, GO TO NEXT CHILD

AGE

C. Is this child a boy or a girl?

Boy 01
Girl. 02

D. Did you (give birth to/father) this child?

No. 01
Yes 02

E. Below is a list of items that describe children. For each item that describes this child now or within the past 6 months, please circle the 02 if the item is very true or often true of this child. Circle the 01 if the item is somewhat or sometimes true of this child. If the item is not true of this child, circle the 00. Please answer all items as well as you can, even if some do not seem to apply to this child.

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
1. Acts too young for his/her age	00	01	02
2. Allergy (DESCRIBE): _____			
_____ . .	00	01	02
3. Argues a lot	00	01	02
4. Asthma	00	01	02
5. Behaves like opposite sex.	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
6. Bowel movements outside toilet	00	01	02
7. Bragging, boasting	00	01	02
8. Can't concentrate, can't pay attention for long	00	01	02
9. Can't get his/her mind off certain thoughts; obsessions (DESCRIBE): _____ _____	00	01	02
10. Can't sit still, restless, or hyperactive.	00	01	02
11. Clings to adults or too dependent.	00	01	02
12. Complains of loneliness.	00	01	02
13. Confused or seems to be in a fog	00	01	02
14. Cries a lot.	00	01	02
15. Cruel to animals	00	01	02
16. Cruelty, bullying, or meanness to others	00	01	02
17. Day-dreams or gets lost in his/her thoughts.	00	01	02
18. Deliberately harms self or attempts suicide.	00	01	02
19. Demands a lot of attention	00	01	02
20. Destroys his/her own things.	00	01	02
21. Destroys things belonging to his/her family or other children	00	01	02
22. Disobedient at home.	00	01	02
23. Disobedient at school.	00	01	02
24. Doesn't eat well	00	01	02
25. Doesn't get along with other children.	00	01	02
26. Doesn't seem to feel guilty after misbehaving.	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
27. Easily jealous	00	01	02
28. Eats or drinks things that are not food. (DESCRIBE) _____ _____	00	01	02
29. Fears certain animals, situations, or places other than school (DESCRIBE) _____	00	01	02
30. Fears going to school.	00	01	02
31. Fears he/she might think or do something bad.	00	01	02
32. Feels he/she has to be perfect	00	01	02
33. Feels or complains that no one loves him/her.	00	01	02
34. Feels others are out to get him/her.	00	01	02
35. Feels worthless or inferior.	00	01	02
36. Gets hurt a lot, accident-prone.	00	01	02
37. Gets in many fights.	00	01	02
38. Gets teased a lot.	00	01	02
39. Hangs around with children who get in trouble.	00	01	02
40. Hears things that aren't there (DESCRIBE). _____ _____	00	01	02
41. Impulsive or acts without thinking	00	01	02
42. Likes to be alone.	00	01	02
43. Lying or cheating.	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
44. Bites fingernails.	00	01	02
45. Nervous, highstrung, or tense.	00	01	02
46. Nervous movements or twitching (DESCRIBE). _____	00	01	02
47. Nightmares	00	01	02
48. Not liked by other children.	00	01	02
49. Constipated, doesn't move bowels	00	01	02
50. Too fearful or anxious	00	01	02
51. Feels dizzy.	00	01	02
52. Feels too guilty	00	01	02
53. Overeating	00	01	02
54. Overtired.	00	01	02
55. Overweight	00	01	02
56. Physical problems without known medical cause:			
a. Aches or pains.	00	01	02
b. Headaches	00	01	02
c. Nausea, feels sick.	00	01	02
d. Problems with eyes (DESCRIBE):. _____	00	01	02
e. Rashes or other skin problems	00	01	02
f. Stomachaches or cramps.	00	01	02
g. Vomiting, throwing up	00	01	02
h. Other (DESCRIBE): _____	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
57. Physically attacks people.	00	01	02
58. Picks nose, skin, or other parts of body (DESCRIBE):_____ _____ . .	00	01	02
59. Plays with own sex parts in public	00	01	02
60. Plays with own sex parts too much.	00	01	02
61. Poor school work	00	01	02
62. Poorly coordinated or clumsy	00	01	02
63. Prefers playing with older children.	00	01	02
64. Prefers playing with younger children. . . .	00	01	02
65. Refuses to talk.	00	01	02
66. Repeats certain acts over and over; compulsions (DESCRIBE): _____ _____ . .	00	01	02
67. Runs away from home.	00	01	02
68. Screams a lot.	00	01	02
69. Secretive, keeps things to self.	00	01	02
70. Sees things that aren't there (DESCRIBE): _____ _____ . .	00	01	02
71. Self-conscious or easily embarrassed	00	01	02
72. Sets fires	00	01	02
73. Sexual problems (DESCRIBE): _____ _____ . .	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
74. Showing off or clowning.	00	01	02
75. Shy or timid	00	01	02
76. Sleeps less than most children	00	01	02
77. Sleeps more than most children during day and/or night (DESCRIBE): _____ _____ . .	00	01	02
78. Smears or plays with bowel movements	00	01	02
79. Speech problem (DESCRIBE): _____ _____ . .	00	01	02
80. Stares blankly	00	01	02
81. Steals at home	00	01	02
82. Steals outside the home.	00	01	02
83. Stores up things he/she doesn't need (DESCRIBE): _____ _____ . .	00	01	02
84. Strange behavior (DESCRIBE): _____ _____ . .	00	01	02
85. Strange ideas (DESCRIBE): _____ _____ . .	00	01	02
86. Stubborn, sullen, or irritable	00	01	02
87. Sudden changes in mood or feelings	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
88. Sulks a lot.	00	01	02
89. Suspicious	00	01	02
90. Swearing or obscene language	00	01	02
91. Talks about killing self	00	01	02
92. Talks or walks in sleep (DESCRIBE): _____ _____	00	01	02
93. Talks too much	00	01	02
94. Teases a lot	00	01	02
95. Temper tantrums or hot temper.	00	01	02
96. Thinks about sex too much.	00	01	02
97. Threatens people	00	01	02
98. Thumb-sucking.	00	01	02
99. Too concerned with neatness or cleanliness	00	01	02
100. Trouble sleeping (DESCRIBE): _____ _____	00	01	02
101. Truancy, skips school	00	01	02
102. Underactive, slow moving, or lacks energy	00	01	02
103. Unhappy, sad, or depressed.	00	01	02
104. Unusually loud.	00	01	02
105. Uses alcohol or drugs (DESCRIBE): _____ _____	00	01	02

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	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
106. Vandalism	00	01	02
107. Wets self during the day	00	01	02
108. Wets the bed	00	01	02
109. Whining	00	01	02
110. Wishes to be of opposite sex	00	01	02
111. Withdrawn, doesn't get involved with others	00	01	02
112. Worrying	00	01	02

113. Please write in any problems your child has that were not listed above:

_____

_____

_____

PLEASE BE SURE YOU HAVE ANSWERED ALL QUESTIONS FOR THIS CHILD, THEN CONTINUE FOR NEXT CHILD. WHEN YOU HAVE COMPLETED PAGES FOR ALL CHILDREN 6-16 YEARS OLD, RETURN THE BOOKLET TO THE INTERVIEWER.

70

CHILD NO. 05 -- PAGE 1

A. What is the first name of this child?

Name: _____

PLEASE ANSWER PARTS B-E FOR THE CHILD NAMED ABOVE.

B. How old was this child on his/her last birthday?

☐☐ → IF NOT 6-16 YEARS OLD, GO TO NEXT CHILD

AGE

C. Is this child a boy or a girl?

Boy 01
Girl. 02

D. Did you (give birth to/father) this child?

No. 01
Yes 02

E. Below is a list of items that describe children. For each item that describes this child now or within the past 6 months, please circle the 02 if the item is very true or often true of this child. Circle the 01 if the item is somewhat or sometimes true of this child. If the item is not true of this child, circle the 00. Please answer all items as well as you can, even if some do not seem to apply to this child.

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
1. Acts too young for his/her age	00	01	02
2. Allergy (DESCRIBE): _____			
_____ . .	00	01	02
3. Argues a lot	00	01	02
4. Asthma	00	01	02
5. Behaves like opposite sex.	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
6. Bowel movements outside toilet	00	01	02
7. Bragging, boasting	00	01	02
8. Can't concentrate, can't pay attention for long	00	01	02
9. Can't get his/her mind off certain thoughts; obsessions (DESCRIBE): _____ _____	00	01	02
10. Can't sit still, restless, or hyperactive.	00	01	02
11. Clings to adults or too dependent.	00	01	02
12. Complains of loneliness.	00	01	02
13. Confused or seems to be in a fog	00	01	02
14. Cries a lot.	00	01	02
15. Cruel to animals	00	01	02
16. Cruelty, bullying, or meanness to others	00	01	02
17. Day-dreams or gets lost in his/her thoughts.	00	01	02
18. Deliberately harms self or attempts suicide.	00	01	02
19. Demands a lot of attention	00	01	02
20. Destroys his/her own things.	00	01	02
21. Destroys things belonging to his/her family or other children	00	01	02
22. Disobedient at home.	00	01	02
23. Disobedient at school.	00	01	02
24. Doesn't eat well	00	01	02
25. Doesn't get along with other children.	00	01	02
26. Doesn't seem to feel guilty after misbehaving.	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
27. Easily jealous	00	01	02
28. Eats or drinks things that are not food.	00	01	02
(DESCRIBE) _____			
_____			
29. Fears certain animals, situations, or places other than school (DESCRIBE)	00	01	02
_____			
30. Fears going to school.	00	01	02
31. Fears he/she might think or do something bad.	00	01	02
32. Feels he/she has to be perfect	00	01	02
33. Feels or complains that no one loves him/her.	00	01	02
34. Feels others are out to get him/her.	00	01	02
35. Feels worthless or inferior.	00	01	02
36. Gets hurt a lot, accident-prone.	00	01	02
37. Gets in many fights.	00	01	02
38. Gets teased a lot.	00	01	02
39. Hangs around with children who get in trouble.	00	01	02
40. Hears things that aren't there (DESCRIBE).	00	01	02
_____			
_____			
41. Impulsive or acts without thinking	00	01	02
42. Likes to be alone.	00	01	02
43. Lying or cheating.	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
44. Bites fingernails.	00	01	02
45. Nervous, highstrung, or tense.	00	01	02
46. Nervous movements or twitching (DESCRIBE). _____	00	01	02
47. Nightmares	00	01	02
48. Not liked by other children.	00	01	02
49. Constipated, doesn't move bowels	00	01	02
50. Too fearful or anxious	00	01	02
51. Feels dizzy.	00	01	02
52. Feels too guilty	00	01	02
53. Overeating	00	01	02
54. Overtired.	00	01	02
55. Overweight	00	01	02
56. Physical problems without known medical cause:			
a. Aches or pains.	00	01	02
b. Headaches	00	01	02
c. Nausea, feels sick.	00	01	02
d. Problems with eyes (DESCRIBE):_____	00	01	02
e. Rashes or other skin problems	00	01	02
f. Stomachaches or cramps.	00	01	02
g. Vomiting, throwing up	00	01	02
h. Other (DESCRIBE):_____	00	01	02

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
57. Physically attacks people.	00	01	02
58. Picks nose, skin, or other parts of body (DESCRIBE):_____ _____ . .	00	01	02
59. Plays with own sex parts in public	00	01	02
60. Plays with own sex parts too much.	00	01	02
61. Poor school work	00	01	02
62. Poorly coordinated or clumsy	00	01	02
63. Prefers playing with older children.	00	01	02
64. Prefers playing with younger children. . . .	00	01	02
65. Refuses to talk.	00	01	02
66. Repeats certain acts over and over; compulsions (DESCRIBE): _____ _____ . .	00	01	02
67. Runs away from home.	00	01	02
68. Screams a lot.	00	01	02
69. Secretive, keeps things to self.	00	01	02
70. Sees things that aren't there (DESCRIBE): _____ _____ . .	00	01	02
71. Self-conscious or easily embarrassed	00	01	02
72. Sets fires	00	01	02
73. Sexual problems (DESCRIBE): _____ _____ . .	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
74. Showing off or clowning.	00	01	02
75. Shy or timid	00	01	02
76. Sleeps less than most children	00	01	02
77. Sleeps more than most children during day and/or night (DESCRIBE): _____ _____ . .	00	01	02
78. Smears or plays with bowel movements	00	01	02
79. Speech problem (DESCRIBE): _____ _____ . .	00	01	02
80. Stares blankly	00	01	02
81. Steals at home	00	01	02
82. Steals outside the home.	00	01	02
83. Stores up things he/she doesn't need (DESCRIBE): _____ _____ . .	00	01	02
84. Strange behavior (DESCRIBE): _____ _____ . .	00	01	02
85. Strange ideas (DESCRIBE): _____ _____ . .	00	01	02
86. Stubborn, sullen, or irritable	00	01	02
87. Sudden changes in mood or feelings	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
88. Sulks a lot.	00	01	02
89. Suspicious	00	01	02
90. Swearing or obscene language	00	01	02
91. Talks about killing self	00	01	02
92. Talks or walks in sleep (DESCRIBE): _____ _____	00	01	02
93. Talks too much	00	01	02
94. Teases a lot	00	01	02
95. Temper tantrums or hot temper.	00	01	02
96. Thinks about sex too much.	00	01	02
97. Threatens people	00	01	02
98. Thumb-sucking.	00	01	02
99. Too concerned with neatness or cleanliness	00	01	02
100. Trouble sleeping (DESCRIBE): _____ _____	00	01	02
101. Truancy, skips school	00	01	02
102. Underactive, slow moving, or lacks energy	00	01	02
103. Unhappy, sad, or depressed.	00	01	02
104. Unusually loud.	00	01	02
105. Uses alcohol or drugs (DESCRIBE): _____ _____	00	01	02

70

	NOT TRUE (AS FAR AS YOU KNOW)	SOMEWHAT OR SOMETIMES TRUE	VERY TRUE OR OFTEN TRUE
106. Vandalism	00	01	02
107. Wets self during the day	00	01	02
108. Wets the bed	00	01	02
109. Whining	00	01	02
110. Wishes to be of opposite sex	00	01	02
111. Withdrawn, doesn't get involved with others	00	01	02
112. Worrying	00	01	02

113. Please write in any problems your child has that were not listed above:

_____

_____

_____

PLEASE BE SURE YOU HAVE ANSWERED ALL QUESTIONS FOR THIS CHILD, THEN CONTINUE FOR NEXT CHILD. WHEN YOU HAVE COMPLETED PAGES FOR ALL CHILDREN 6-16 YEARS OLD, RETURN THE BOOKLET TO THE INTERVIEWER.

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FOR RESPONDENTS WITH CHILDREN LIVING WITH THEM

Here is a list of statements people sometimes use to describe their families. Please indicate how often each of these describes your family at the present time.

DESCRIBE YOUR FAMILY NOW:

	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
A. Family members are supportive of each other during difficult times.	01	02	03	04	05
B. Family members sometimes get so angry they throw things . .	01	02	03	04	05
C. In our family, it is easy for everyone to express his/her opinion.	01	02	03	04	05
D. It is easier to discuss problems with people outside the family than with other family members	01	02	03	04	05
E. Each family member has input in major family decisions. . .	01	02	03	04	05
F. Our family gathers together in the same room	01	02	03	04	05
G. Family members sometimes hit each other	01	02	03	04	05
H. Children have a say in their discipline	01	02	03	04	05
I. Our family does things together	01	02	03	04	05
J. Family members discuss problems and feel good about the solutions.	01	02	03	04	05
K. In our family, everyone goes his/her own way.	01	02	03	04	05
L. We shift household responsibilities from person to person	01	02	03	04	05
M. Family members know each other's close friends.	01	02	03	04	05

71

71

	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
N. It is hard to know what the rules are in our family.	01	02	03	04	05
O. Family members consult other family members on their decisions.	01	02	03	04	05
P. We fight a lot in our family	01	02	03	04	05
Q. Family members say what they want.	01	02	03	04	05
R. We have difficulty thinking of things to do as a family.	01	02	03	04	05
S. In solving problems, the children's suggestions are followed	01	02	03	04	05
T. Family members feel very close to each other.	01	02	03	04	05
U. Family members rarely criticize each other	01	02	03	04	05
V. Discipline is fair in our family	01	02	03	04	05
W. Family members feel closer to people outside the family than to other family members	01	02	03	04	05
X. Our family tries new ways of dealing with problems.	01	02	03	04	05
Y. Family members go along with what the family decides to do.	01	02	03	04	05
Z. In our family, everyone shares responsibilities.	01	02	03	04	05
AA. Family members like to spend their free time with each other.	01	02	03	04	05
BB. It is difficult to get a rule changed in our family	01	02	03	04	05

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71

	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
CC. Family members avoid each other at home.	01	02	03	04	05
DD. When problems arise, we compromise	01	02	03	04	05
EE. We approve of each other's friends.	01	02	03	04	05
FF. Family members are afraid to say what is on their minds . .	01	02	03	04	05
GG. Family members pair up rather than do things as a total family	01	02	03	04	05
HH. Family members share interests and hobbies with each other. .	01	02	03	04	05
II. Family members hardly ever lose their tempers	01	02	03	04	05

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FOR COUPLES WITHOUT CHILDREN

Here is a list of statements people sometimes use to describe their families. Please indicate how often each of these describe your family at the present time.

DESCRIBE YOUR RELATIONSHIP NOW:

	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
A. We are supportive of each other during difficult times.	01	02	03	04	05
B. We sometimes get so angry we throw things.	01	02	03	04	05
C. In our relationship, it is easy for both of us to express our opinion.	01	02	03	04	05
D. It is easier to discuss problems with people outside the marriage/relationship than with my partner	01	02	03	04	05
E. We each have input regarding major family decisions	01	02	03	04	05
F. We spend time together when we are home.	01	02	03	04	05
G. We sometimes hit each other.	01	02	03	04	05
H. We are flexible in how we handle differences	01	02	03	04	05
I. We do things together.	01	02	03	04	05
J. We discuss problems and feel good about the solutions	01	02	03	04	05
K. In our marriage/relationship, we each go our own way	01	02	03	04	05
L. We shift household responsibilities between us.	01	02	03	04	05
M. We know each other's close friends.	01	02	03	04	05
N. It is hard to know what the rules are in our relationship.	01	02	03	04	05

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	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
O. We consult each other on personal decisions	01	02	03	04	05
P. We fight a lot	01	02	03	04	05
Q. We freely say what we want	01	02	03	04	05
R. We have difficulty thinking of things to do together	01	02	03	04	05
S. We have a good balance of leadership in our family	01	02	03	04	05
T. We feel very close to each other.	01	02	03	04	05
U. We rarely criticize each other.	01	02	03	04	05
V. We operate on the principle of fairness in our marriage/ relationship	01	02	03	04	05
W. I feel closer to people outside the marriage/ relationship than to my partner.	01	02	03	04	05
X. We try new ways of dealing with problems.	01	02	03	04	05
Y. I go along with what my partner decides to do.	01	02	03	04	05
Z. In our marriage/relationship, we share responsibilities.	01	02	03	04	05
AA. We like to spend our free time with each other	01	02	03	04	05
BB. It is difficult to get a rule change in our relationship	01	02	03	04	05
CC. We avoid each other at home.	01	02	03	04	05
DD. When problems arise, we compromise	01	02	03	04	05

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	ALMOST NEVER	ONCE IN A WHILE	SOMETIMES	FREQUENTLY	ALMOST ALWAYS
EE. We approve of each other's friends.	01	02	03	04	05
FF. We are afraid to say what is on our minds.	01	02	03	04	05
GG. We tend to do more things separately	01	02	03	04	05
HH. We share interests and hobbies with each other. . . .	01	02	03	04	05
II. We hardly ever lose our tempers.	01	02	03	04	05

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Please circle the number that best describes how you feel about each statement.

A. Before he/she entered the military, he/she had more close friends than he/she has now.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

B. He/she does not feel guilt over things that he/she did in the military.

01	.02	.03	.04	.05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	USUALLY TRUE	ALWAYS TRUE	DON'T KNOW

C. If someone pushes (him/her) too far, he/she is likely to become violent.

01	.02	.03	.04	.05	94
VERY UNLIKELY	UNLIKELY	SOMEWHAT UNLIKELY	VERY LIKELY	EXTREMELY LIKELY	DON'T KNOW

D. If something happens that reminds (him/her) of the military, he/she becomes very distressed and upset.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

E. The people who know him/her best are afraid of him/her.

01	.02	.03	.04	.05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

F. He/she is able to get emotionally close to others.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

G. He/she has nightmares of experiences in the military that really happened.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

85

H. When he/she thinks of some of the things that he/she did in the military, he/she wishes he/she were dead.

01	.02.	.03.	.04.	.05.	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

I. It seems as if he/she has no feelings.

01	.02.	.03.	.04.	.05.	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

J. Lately, he/she has felt like killing him/herself.

01	.02.	.03.	.04.	.05.	94
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

K. He/she falls asleep, stays asleep and awakens only when the alarm goes off.

01	.02.	.03.	.04.	.05.	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

L. He/she wonders why he/she is still alive when others died in the military.

01	.02.	.03.	.04.	.05.	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

M. Being in certain situations makes him/her feel as though he/she is back in the military.

01	.02.	.03.	.04.	.05.	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

N. His/her dreams at night are so real that he/she wakens in a cold sweat and forces him/herself to stay awake.

01	.02.	.03.	.04.	.05.	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

85

O. He/she feels like he/she cannot go on.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

P. He/she does not laugh or cry at the same things other people do.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

Q. He/she still enjoys doing many things that he/she used to enjoy.

01	.02	.03	.04	.05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	VERY TRUE	ALWAYS TRUE	DON'T KNOW

R. His/her daydreams are very real and frightening.

01	.02	.03	.04	.05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

S. He/she has found it easy to keep a job since his/her separation from the military.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

T. He/she has trouble concentrating on tasks.

01	.02	.03	.04	.05	94
NEVER TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	VERY FREQUENTLY TRUE	DON'T KNOW

U. He/she has cried for no good reason.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

85

V. He/she enjoys the company of others.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

W. He/she is frightened by his/her urges.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

X. He/she falls asleep easily at night.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

Y. Unexpected noises make him/her jump.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

Z. No one understands how he/she feels, not even his/her family.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	VERY TRUE	EXTREMELY TRUE	DON'T KNOW

AA. He/she is an easy-going, even-tempered person.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	USUALLY	VERY MUCH SO	DON'T KNOW

BB. He/she feels there are certain things that he/she did in the military that he/she can never tell anyone, because no one would ever understand.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	SLIGHTLY TRUE	SOMEWHAT TRUE	TRUE	VERY TRUE	DON'T KNOW

85

CC. There have been times when he/she has used alcohol (or other drugs) to help him/her sleep or to make him/her forget about things that happened while he/she was in the service.

01	.02.	.03.	.04.	.05.	94
NEVER	INFREQUENTLY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

DD. He/she feels comfortable when he/she is in a crowd.

01	.02.	.03.	.04.	.05.	94
NEVER	RARELY	SOMETIMES	USUALLY	ALWAYS	DON'T KNOW

EE. He/she loses his/her cool and explodes over minor everyday things.

01	.02.	.03.	.04.	.05.	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW

FF. He/she is afraid to go to sleep at night.

01	.02.	.03.	.04.	.05.	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS	DON'T KNOW

GG. He/she tries to stay away from anything that will remind him/her of things which happened while he/she was in the military.

01	.02.	.03.	.04.	.05.	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	ALMOST ALWAYS	DON'T KNOW

HH. His/her memory is as good as it ever was.

01	.02.	.03.	.04.	.05.	94
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

II. He/she has a hard time expressing his/her feelings, even to the people he/she cares about.

01	.02.	.03.	.04.	.05.	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

85

JJ. At times, he/she suddenly acts or feels as though something that happened while he/she was in the military were happening all over again.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

KK. He/she is not able to remember some important things that happened while he/she was in the military.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	RARELY TRUE	SOMEWHAT TRUE	USUALLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

LL. He/she feels "superalert" or "on guard" much of the time.

01	.02	.03	.04	.05	94
NOT AT ALL TRUE	RARELY TRUE	SOMETIMES TRUE	FREQUENTLY TRUE	ALMOST ALWAYS TRUE	DON'T KNOW

MM. If something happens that reminds him/her of the military, he/she gets so anxious or panicky that his/her heart pounds hard; he/she has trouble getting his/her breath; he/she sweats, trembles or shakes; or feels dizzy, tingly, or faint.

01	.02	.03	.04	.05	94
NEVER	RARELY	SOMETIMES	FREQUENTLY	VERY FREQUENTLY	DON'T KNOW