

## **CHILD REPORT**

### **Variable Name Definitions**

Where variable names are not included, please see documentation pertaining to that scale. The variable name will have a prefix describing the scale, item number, cohort and year after. For example, for peer drug use item 1 year 8 (grade 8):

Prefix: PDU

Item: 1

Cohort: 3

Year: 8

So, the variable name is PDU138.

Scale name take on the same definition minus the item number. So, if we use the above scale, the year 8 scale name would be PDU38. This is the computed peer drug use, cohort 3, year 8 (grade 8).

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### **YOUTH INTERVIEW 6<sup>TH</sup> through 12<sup>TH</sup> GRADE (1999-2005)**

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**Baltimore How I Feel-Child Report Grade 1 Fall**

HIF31101	I LIKED THE WAY I LOOK Grade 1 Fall
HIF31102	I FELT THAT I WAS GOOD Grade 1 Fall
HIF31103	I FELT LIKE CRYING Grade 1 Fall
HIF31104	I WORRIED ABOUT BAD THINGS HAPPENING TO ME Grade 1 Fall
HIF31105	I DID NOT LIKE MYSELF Grade 1 Fall
HIF31106	I FELT NOTHING MADE ME HAPPY ANYMORE Grade 1 Fall
HIF31107	I FELT AFRAID TO GO OUTSIDE Grade 1 Fall
HIF31108	I DREAMED THAT I'D NEVER SEE MY PARENTS AGAIN
HIF31109	I WORRIED A LOT Grade 1 Fall
HIF31110	I FELT VERY UNHAPPY Grade 1 Fall
HIF31111	I FELT SAD Grade 1 Fall
HIF31112	I HAD A LOT OF FUN Grade 1 Fall
HIF31113	I FELT LIKE THERE WAS NO USE IN REALLY TRYING Grade 1 Fall
HIF31114	I FELT THAT I WAS A BAD PERSON Grade 1 Fall
HIF31115	I WORRIED BAD THINGS MIGHT HAPPEN TO MY PARENTS Grade 1 Fall
HIF31116	I FELT THAT I MIGHT AS WELL GIVE UP Grade 1 Fall
HIF31117	I FELT AFRAID TO GO TO SCHOOL Grade 1 Fall
HIF31118	I FELT THAT IT WAS MY FAULT WHEN BAD THINGS happened Grade 1
HIF31119	I HAD TROUBLE SLEEPING Grade 1 Fall
HIF31120	I WORRIED SO MUCH I GOT SICK Grade 1 Fall
HIF31121	I FELT AFRAID Grade 1 Fall
HIF31122	I FELT NOTHING WOULD EVER WORK OUT FOR ME Grade 1 Fall
HIF31123	I FELT LIKE HURTING MYSELF Grade 1 Fall

HIF31124	I WORRIED THAT MY PARENTS MIGHT NEVER COME BACK Grade 1 Fall
HIF31125	I FELT THAT I COULD NOT MAKE UP MIND ABOUT THINGS Grade 1 Fall
HIF31126	I FELT REALLY TIRED Grade 1 Fall
HIF31127	I DIDN'T FEEL LIKE EATING Grade 1 Fall
HIF31128	I WILL HAVE MORE GOOD TIMES THAN BAD TIMES Grade 1 Fall
HIF31129	I FELT GROUCHY Grade 1 Fall
HIF31130	I AM JUST AS GOOD AS OTHER KIDS Grade 1 Fall

**To see how to compute the mean scores for each year, go to the Child Construct section for the specifics.**

**ITEM CODING:**

0 NEVER OR ALMOST NEVER

1 SOMETIMES

2 MOST TIMES

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**Baltimore How I Feel-Child Report Grade 1 Spring**

HIF31201	I LIKED THE WAY I LOOK Grade 1 Spring
HIF31202	I FELT THAT I WAS GOOD Grade 1 Spring
HIF31203	I FELT LIKE CRYING Grade 1 Spring
HIF31204	I WORRIED ABOUT BAD THINGS HAPPENING TO ME Grade 1 Spring
HIF31205	I DID NOT LIKE MYSELF Grade 1 Spring
HIF31206	I FELT NOTHING MADE ME HAPPY ANYMORE Grade 1 Spring
HIF31207	I FELT AFRAID TO GO OUTSIDE Grade 1 Spring
HIF31208	I DREAMED THAT I'D NEVER SEE MY PARENTS AGAIN
HIF31209	I WORRIED A LOT Grade 1 Spring

HIF31210	I FELT VERY UNHAPPY Grade 1 Spring
HIF31211	I FELT SAD Grade 1 Spring
HIF31212	I HAD A LOT OF FUN Grade 1 Spring
HIF31213	I FELT LIKE THERE WAS NO USE IN REALLY TRYING Grade 1 Spring
HIF31214	I FELT THAT I WAS A BAD PERSON Grade 1 Spring
HIF31215	I WORRIED BAD THINGS MIGHT HAPPEN TO MY PARENTS Grade 1 Spring
HIF31216	I FELT THAT I MIGHT AS WELL GIVE UP Grade 1 Spring
HIF31217	I FELT AFRAID TO GO TO SCHOOL Grade 1 Spring
HIF31218	I FELT THAT IT WAS MY FAULT WHEN BAD THINGS happened Grade 1
HIF31219	I HAD TROUBLE SLEEPING Grade 1 Spring
HIF31220	I WORRIED SO MUCH I GOT SICK Grade 1 Spring
HIF31221	I FELT AFRAID Grade 1 Spring
HIF31222	I FELT NOTHING WOULD EVER WORK OUT FOR ME Grade 1 Spring
HIF31223	I FELT LIKE HURTING MYSELF Grade 1 Spring
HIF31224	I WORRIED THAT MY PARENTS MIGHT NEVER COME BACK Grade 1 Spring
HIF31225	I FELT THAT I COULD NOT MAKE UP MIND ABOUT THINGS Grade 1 Spring
HIF31226	I FELT REALLY TIRED Grade 1 Spring
HIF31227	I DIDN'T FEEL LIKE EATING Grade 1 Spring
HIF31228	I WILL HAVE MORE GOOD TIMES THAN BAD TIMES Grade 1 Spring
HIF31229	I FELT GROUCHY Grade 1 Spring
HIF31230	I AM JUST AS GOOD AS OTHER KIDS Grade 1 Spring

**To see how to compute the mean scores for each year, go to the Child Construct section for the specifics.**

**ITEM CODING:**

0 NEVER OR ALMOST NEVER

1 SOMETIMES

2 MOST TIMES

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**Baltimore How I Feel-Child Report Grade 2 Spring**

HIF32101	I LIKED THE WAY I LOOK Grade 2 Spring
HIF32102	I FELT THAT I WAS GOOD Grade 2 Spring
HIF32103	I FELT LIKE CRYING Grade 2 Spring
HIF32104	I WORRIED ABOUT BAD THINGS HAPPENING TO ME Grade 2 Spring
HIF32105	I DID NOT LIKE MYSELF Grade 2 Spring
HIF32106	I FELT NOTHING MADE ME HAPPY ANYMORE Grade 2 Spring
HIF32107	I FELT AFRAID TO GO OUTSIDE Grade 2 Spring
HIF32108	I DREAMED THAT I'D NEVER SEE MY PARENTS AGAIN
HIF32109	I WORRIED A LOT Grade 2 Spring
HIF32110	I FELT VERY UNHAPPY Grade 2 Spring
HIF32111	I FELT SAD Grade 2 Spring
HIF32112	I HAD A LOT OF FUN Grade 2 Spring
HIF32113	I FELT LIKE THERE WAS NO USE IN REALLY TRYING Grade 2 Spring
HIF32114	I FELT THAT I WAS A BAD PERSON Grade 2 Spring
HIF32115	I WORRIED BAD THINGS MIGHT HAPPEN TO MY PARENTS Grade 2 Spring
HIF32116	I FELT THAT I MIGHT AS WELL GIVE UP Grade 2 Spring
HIF32117	I FELT AFRAID TO GO TO SCHOOL Grade 2 Spring
HIF32118	I FELT THAT IT WAS MY FAULT WHEN BAD THINGS happened Grade 2
HIF32119	I HAD TROUBLE SLEEPING Grade 2 Spring
HIF32120	I WORRIED SO MUCH I GOT SICK Grade 2 Spring
HIF32121	I FELT AFRAID Grade 2 Spring
HIF32122	I FELT NOTHING WOULD EVER WORK OUT FOR ME Grade 2 Spring
HIF32123	I FELT LIKE HURTING MYSELF Grade 2 Spring
HIF32124	I WORRIED THAT MY PARENTS MIGHT NEVER COME BACK Grade 2 Spring
HIF32125	I FELT THAT I COULD NOT MAKE UP MIND ABOUT THINGS Grade 2 Spring
HIF32126	I FELT REALLY TIRED Grade 2 Spring
HIF32127	I DIDN'T FEEL LIKE EATING Grade 2 Spring
HIF32128	I WILL HAVE MORE GOOD TIMES THAN BAD TIMES Grade 2 Spring
HIF32129	I FELT GROUCHY Grade 2 Spring

HIF32130	I AM JUST AS GOOD AS OTHER KIDS Grade 2 Spring
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**To see how to compute the mean scores for each year, go to the Child Construct section for the specifics.**

**ITEM CODING:**

0 NEVER OR ALMOST NEVER

1 SOMETIMES

2 MOST TIMES

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**Baltimore How I Feel-Child Report Grade 3 Spring**

HIF33101	I LIKED THE WAY I LOOK Grade 3 Spring
HIF33102	I FELT THAT I WAS GOOD Grade 3 Spring
HIF33103	I FELT LIKE CRYING Grade 3 Spring
HIF33104	I WORRIED ABOUT BAD THINGS HAPPENING TO ME Grade 3 Spring
HIF33105	I DID NOT LIKE MYSELF Grade 3 Spring
HIF33106	I FELT NOTHING MADE ME HAPPY ANYMORE Grade 3 Spring
HIF33107	I FELT AFRAID TO GO OUTSIDE Grade 3 Spring
HIF33108	I DREAMED THAT I'D NEVER SEE MY PARENTS AGAIN
HIF33109	I WORRIED A LOT Grade 3 Spring
HIF33110	I FELT VERY UNHAPPY Grade 3 Spring
HIF33111	I FELT SAD Grade 3 Spring
HIF33112	I HAD A LOT OF FUN Grade 3 Spring
HIF33113	I FELT LIKE THERE WAS NO USE IN REALLY TRYING Grade 3 Spring
HIF33114	I FELT THAT I WAS A BAD PERSON Grade 3 Spring
HIF33115	I WORRIED BAD THINGS MIGHT HAPPEN TO MY PARENTS Grade 3 Spring
HIF33116	I FELT THAT I MIGHT AS WELL GIVE UP Grade 3 Spring
HIF33117	I FELT AFRAID TO GO TO SCHOOL Grade 3 Spring
HIF33118	I FELT THAT IT WAS MY FAULT WHEN BAD THINGS happened Grade 3

HIF33119	I HAD TROUBLE SLEEPING Grade 3 Spring
HIF33120	I WORRIED SO MUCH I GOT SICK Grade 3 Spring
HIF33121	I FELT AFRAID Grade 3 Spring
HIF33122	I FELT NOTHING WOULD EVER WORK OUT FOR ME Grade 3 Spring
HIF33123	I FELT LIKE HURTING MYSELF Grade 3 Spring
HIF33124	I WORRIED THAT MY PARENTS MIGHT NEVER COME BACK Grade 3 Spring
HIF33125	I FELT THAT I COULD NOT MAKE UP MIND ABOUT THINGS Grade 3 Spring
HIF33126	I FELT REALLY TIRED Grade 3 Spring
HIF33127	I DIDN'T FEEL LIKE EATING Grade 3 Spring
HIF33128	I WILL HAVE MORE GOOD TIMES THAN BAD TIMES Grade 3 Spring
HIF33129	I FELT GROUCHY Grade 3 Spring
HIF33130	I AM JUST AS GOOD AS OTHER KIDS Grade 3 Spring

**To see how to compute the mean scores for each year, go to the Child Construct section for the specifics.**

**ITEM CODING:**

0 NEVER OR ALMOST NEVER

1 SOMETIMES

2 MOST TIMES

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**Cohort 3 Youth Interview: Scale documentation 1999-2005**

**SCALE: How I Feel**

**ITEMS USED: A=Anxiety D=Depression; Items labeled as HIFYR##**

1. During the past two weeks, I like the way I look
2. During the past two weeks, I felt that I was good
3. During the past two weeks, I felt really scared when I had to take a test
4. During the past two weeks, I felt like crying



5. During the past two weeks, I worried about bad things happening to me
6. During the past two weeks, I felt very afraid that I would make a fool of myself in front of people
7. During the past two weeks, I did not like myself
8. During the past two weeks, I felt nothing made me happy anymore
9. During the past two weeks, I worried a lot that I would do badly at my school work
10. During the past two weeks, I felt afraid to go outside
11. During the past two weeks, I dreamed that I would never see my parents again
12. During the past two weeks, I worried a lot about what other people thought of me
13. During the past two weeks, I worried a lot
14. During the past two weeks, I felt very unhappy
15. During the past two weeks, I felt afraid to talk in front of my class
16. During the past two weeks, I felt sad
17. During the past two weeks, I had a lot of fun
18. During the past two weeks, I suddenly felt as if I could not breathe when there was no reason for this
19. During the past two weeks, I felt like there was no use in really trying
20. During the past two weeks, I felt that I was a bad person
21. During the past two weeks, I felt really scared if I had to travel in a car, bus or train
22. During the past two weeks, I worried that bad things might happen to my parents
23. During the past two weeks, I felt that I might as well give up
24. During the past two weeks, I was very afraid of being in crowded places like shopping centers, movies, buses
25. During the past two weeks, I felt afraid to go to school
26. During the past two weeks, I will have good times in the future
27. During the past two weeks, all of a sudden I felt really scared fro no reason
28. During the past two weeks, I had trouble sleeping
29. During the past two weeks, I worried so much I felt sick
30. During the past two weeks, I felt afraid

31. During the past two weeks, I felt nothing would ever work out for me
32. During the past two weeks, I felt like killing myself
33. During the past two weeks, when my parents leave the house, I worry that they will never come back
34. During the past two weeks, I suddenly became dizzy or faint for no reason
35. During the past two weeks, I felt that I could not make up my mind about things
36. During the past two weeks, I felt really tired
37. During the past two weeks, my heart suddenly started to beat too quickly for no reason
38. During the past two weeks, I did not feel like eating
39. During the past two weeks, I felt that I would have more good times than bad times
40. During the past two weeks, I worried a lot that I would suddenly get a scared feeling when there was nothing to be afraid of
41. During the past two weeks, I felt grouchy
42. During the past two weeks, I felt that I was as good as other kids
43. During the past two weeks, I was very afraid of being in small closed spaces like tunnels or small rooms
44. During the past two weeks, all I can see in the future are bad things not good things
45. During the past two weeks, I felt that it was my fault when bad things happened

**There are two computations for anxiety and depression in years 6-12. To see how to compute the mean scores for each year, go to the codebooks for the specifics.**

**ITEM CODING:**

Items: 1-6; 9-34 ; 36-37; 39-45: 1=Never, 2=Once in a while, 3=Sometimes, 4=Most Times

Items: 7-8; 35, 38: 1=Most Times, 2=Sometimes, 3=Once in a while, 4=Never

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Physical Appearance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as SPC##YR

1. Not happy with looks OR Happy with the way they look
2. Wish body was different OR Like your body the way it is
3. Wish appearance was different OR Like appearance
4. Think you are good looking OR Do not think good looking
5. Like looks OR Wish looked different

QUESTION CODING: 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Physical Appearance Importance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as IMP##YR

1. Physical appearance is not important OR Physical appearance is important

2. Important how you look OR Not important how you look

QUESTION CODING- 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Scholastic Competence Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as SPC##YR

1. *Just as smart as others OR Wonder if they are as smart*
2. *Slow finishing schoolwork OR Do schoolwork easily*
3. *Do well at class work OR Do not do well at class work*
4. *Trouble figuring answers OR Always can figure answers*
5. *Pretty intelligent OR Question intelligence*

QUESTION CODING: 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Scholastic Competence Importance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as IMP##YR

1. Important to be intelligent OR Not important to be intelligent
2. Not important to do well in school OR Important to do well in school

QUESTION CODING: 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Social Acceptance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as SPC##YR

1. Hard to make friends OR Easy to make friends
2. Have a lot of friends OR Does not have many friends

3. Are you hard to like OR Easy to like
4. Are popular OR Not very popular
5. Socially accepted OR Wish more people accepted

QUESTION CODING: 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement;  
part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Social Acceptance Importance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as IMP##YR

1. Not important to have friends OR Important to have friends
2. Important to be popular OR Not important to be popular

QUESTION CODING: 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement;  
part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Close Friendship Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as SPC##YR

1. Able to make close friends OR Hard to make close friends
2. Close friend to share secrets OR Do not have a close friend
3. Wish had a really close friend OR Do have a close friend
4. Hard to make friends OR Easy to make friends
5. Do not have a close friend OR Do have a close friend

QUESTION CODING: 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement;  
part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Close Friendship Importance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as IMP##YR

1. Important to make close friends OR Not important to make close friends

2. Not important to have a close friend OR Important to have a close friend

QUESTION CODING: 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Self Worth Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as SPC##YR

1. Disappointed with self OR Pleased with self

2. *Do not like the way leading life OR Do like the way leading life*

3. Happy with self OR Not happy with self

4. Like the person you are OR Wish you were someone else

5. Happy the way you are OR Wish you were different

QUESTION CODING: 1999-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.



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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Athletic Competence Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as SPC##YR

1. Do very well at all kinds of sports OR don't feel very good at sports.
2. Better than others their age at sports OR don't feel can play as well.
3. Don't do well at new outdoor games OR are good at new games right away.
4. Do not feel that they are very athletic OR feel that they are very athletic.

QUESTION CODING: 2001-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Romantic Appeal Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as SPC##YR

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1. Feel that if romantically interested in someone, that person will like them back OR worry when they like someone romantically, that person won't like them back.
2. Feel that people their age will be romantically attracted to them OR worry about whether people their age will be attracted to them.
3. Feel that they are fun and interesting on a date OR wonder about how fun and interesting they are on a date.
4. Usually don't go out with people they would really like to date OR do go out with the people they really want to date.

QUESTION CODING: 2001-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Behavioral Conduct Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as SPC##YR

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1. Usually do the right thing OR often don't do what they know is right.
2. Often get in trouble for the things they do OR usually don't do things that get them in trouble.
3. Feel really good about the way they act OR don't feel that good about the way they often act.

4. Usually act the way they know they are supposed to OR often don't act the way they are supposed to.

QUESTION CODING: 2001-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Athletic Competence Importance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as IMP##YR

1. Think it's important to be good at sports OR don't care much about being good at sports.
2. Think that being athletic is important OR Don't think that being athletic is that important.

QUESTION CODING: 2001-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Romantic Appeal Importance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

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Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as IMP##YR

1. Don't really care that much whether someone they are interested in likes them that much OR think it's important that the people they are romantically interested in like them back.
2. Don't care that much whether they are dating someone they are romantically interested in OR think it's important to be dating someone they are interested in.

QUESTION CODING: 2001-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Harter Behavioral Conduct Importance Subscale

CITATION/REFERENCES: 'What I am Like' Self-Perception Profile for Children

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Susan Harter, Ph.D., University of Denver 1985

QUESTIONS USED: Items labeled as IMP##YR

1. Don't think it's that important to do the right thing OR think that doing the right thing is important.
2. Think it's important to act the way they are supposed to OR don't care that much whether they are acting the way they are supposed to.

QUESTION CODING: 2001-2005

2003: Made some edits to shorten questions.

Responses for each question coded in two parts; part A indicates which part of statement; part B indicates if sort of true=1 or really true=2.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Perceived Contingency

ITEMS USED: A = Academic, B = Behavioral, S = Social, SP = Sports, R = Romantic, P = Physical Appearance; Items labeled as CGY##YR

1. *Kids won't get yelled at if they behave.*
2. Lots of kids who are not friendly are well liked.
3. ***Teachers are not very fair in the grades they give.***
4. *Kids will like you if you are fair with them.*
5. *Adults are very fair in how they treat kids.*
6. Grades do not depend on how hard kids try.
7. Making friends is just a matter of luck. It doesn't matter what you do.
8. Kids who try to behave don't get punished.
9. *Kids who share their things are well-liked.*
10. Teachers do not give kids the grades they deserve.
11. ***Kids get yelled at even if they behave.***
12. Lots of kids can not make a friend no matter how hard they try.
13. *Grades depend on exactly what a kids has learned.*
14. Kids can get into trouble even if they do the right thing.

15. Kids will like you if they trust you.
16. Kids can work hard in school and still get bad grades.
17. ***Some kids are well-liked and some are not. It doesn't matter if they act nice.***
18. *Good things happen to kids if they act the way they're supposed to.*
19. Grades depend on how hard kids try.
20. Kids who try to behave get punished anyway.
21. Kids will like you even if they do not trust you.
22. If a kid is not well-liked, there's usually a good reason.
23. ***Grades don't really depend on what a kid has learned.***
24. Kids misbehave without getting into trouble.
25. ***Some kids are well-liked and some aren't. It doesn't matter how hard they try.***
26. *Teachers are very fair in the grades they give.*
27. Acting right doesn't help keep kids out of trouble.
28. Kids who work hard in school get good grades.
29. Kids can stay out of trouble if they do the right thing.
30. Teachers give kids grades they deserve.
31. *Young people can do very well at sports if they really try hard.*
32. *Doing well at sports is just a matter of luck. It doesn't matter what you do.*
33. *Young people can do really well at sports if they really practice a lot.*
34. *Getting someone to be romantically interested in you is just a matter of luck. It doesn't matter what you do.*
35. *Young people can do well at dating if they try really hard.*
36. *Young people can go out with the people they really want to date if they try really hard*
37. *Young people cannot do anything about their looks or physical appearance.*
38. *Young people can improve their physical appearance if they want.*
39. *Young people can make themselves attractive-looking if they want.*
40. ***Young people can improve their physical appearance if they really put their minds to it.***

- 41. *Young people can do really well at sports if they really put their minds to it.*
- 42. *Young people can succeed at dating if they really put their minds to it.*

ITEM CODING:

Items: 1,3,6-8,10,12,22: 1=Very True, 2=Sort of True, 3=A little true, 4=Not at all true

Items: 2,4,5,9,11,13-21,23-42: 1=Not at all true, 2=A little true, 3=Sort of true, 4=Very true

\*For reduced scales, drop the bold items.

\*\*Italicized items dropped in 2000.

\*\*\*Bolded italicized items added back in 2001 including new items 31-39.

\*\*\*\*Bolded italicized underlined items added in 2002 including new items 40-42.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Perceived Control

ITEMS USED: A = Academic, B = Behavioral, S = Social, SP = Sports, R = Romantic, P = Physical Appearance; Items labeled as CNT##YR

- 1. I can get really good grades if I try. A
- 2. I can make friends with other kids if I really try. S
- 3. I can not stay out of trouble no matter how hard I try. B
- 4. I can do well on tests at school if I study hard. A
- 5. I can not get other kids to like me no matter how hard I try. S
- 6. Even if I try to follow the rules I will get in trouble for my behavior. B
- 7. I can get good marks for my homework if I really work at it. A

8. If other kids are mean to me, I can not make them stop. S
9. If I try to behave, adults will like the way I act. B
10. ***I can not succeed at school no matter how hard I try.*** A
11. ***I can be popular with kids my age if I really try.*** S
12. ***Even if I try to act right, I will still get yelled at for the things I do.*** B
13. I can not get good grades no matter how hard I try. A
14. I can get other kids to like me if I try. S
15. ***If I try hard to behave the right way, I will not get yelled at.*** B
16. I can not do well on tests at school even if I study hard. A
17. I can not make friends with other kids no matter how hard I try. S
18. I can stay out of trouble if I really try. B
19. I can not get good marks for my homework, even if I work hard at it. A
20. If other kids are mean, I can get them to be nice. S
21. Even if I try to behave, adults won't like the way I act. B
22. ***I can succeed in school if I try.*** A
23. ***Even if I try, I can not be popular with kids my age.*** S
24. If I try to behave, I can keep myself out of trouble. B
25. *I can do well at sports if I try.* SP
26. *I CANNOT do well at sports no matter how hard I try.* SP
27. *I can do well at sports if I really work at it.* SP
28. *I can get someone to be romantically interested in me if I try* R
29. *I CANNOT do well at dating no matter hard I try.* R
30. *I can go out with the people I want to date if I try.* R
31. *I cannot do anything about my physical appearance or looks.* P
32. *I can make myself physically attractive if I want.* P
33. *I CANNOT do anything about how physically attractive I am.* P



- 34. *I can improve my physical appearance if I really put my mind to it.* P
- 35. *I can really do well at sports if I put my mind to it.* SP
- 36. *I can really succeed at dating if I put my mind to it.* RA

ITEM CODING:

Items: 3, 5, 8, 10, 13, 15-17, 19, 21, 23: 1=Very True, 2=Sort of True, 3=A little true, 4=Not at all true

Items: 1, 2, 4, 6, 7, 9, 11, 12, 14, 18, 20, 22, 24, 25-36: 1=Not at all true, 2=A little true, 3=Sort of true, 4=Very true

\*For reduced scale, drop the bolded items.

\*\*Italicized items dropped in 2000.

\*\*\*Bolded italicized items added in 2001

\*\*\*\*Bolded italicized underlined items added in 2002.

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Cohort 3 Youth Interview: Scale documentation

SCALE: The Child and Adolescent Perfectionism Scale (CAPS)

ITEMS USED: S = Self, O = Other; Items labeled as CAP##YR

- 1. *I try to be perfect, do everything right, 100%, in everything I do.* S
- 2. *I want to be the best at everything I do.* S
- 3. My parents don't always expect me to be perfect in everything I do. O
- 4. *I feel that I have to do my best all the time.* S
- 5. *There are people in my life who expect me to be perfect.* O
- 6. *I always try for the top score on a test.* S
- 7. It really bothers me if I don't do my best all the time. S

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| 8. My family expects me to be perfect.   | O |
| 9. I didn't always try to be the best.   | S |
| 10. <i>People expect more from me than I am able to give.</i>  | O |
| 11. I get mad at myself when I make a mistake.   | S |
| 12. Other people think I have failed if I do not do my very best all the time.                         | O |
| 13. Other people expect me to be perfect.  | O |
| 14. I get upset if there is even one mistake in my work.   | S |
| 15. People around me expect me to be great at every thing.   | O |
| 16. When I do something, it has to be perfect.   | S |
| 17. My teachers expect my work to be perfect.  | O |
| 18. I do not have to be the best at everything I do.   | S |
| 19. <i>I am always expected to do better than others.</i>  | O |
| 20. Even when I pass, I feel that I have failed if I didn't get one of the highest marks in the class. | S |
| 21. I feel that people ask too much of me.   | O |
| 22. I can not stand to be less than perfect.   | S |

ITEM CODING:

Items: 3, 7, 9, 12, 18, 20, 22: 1=Very True, 2=Sort of True, 3=A little true, 4=Not at all true

Items: 1, 2, 4-6, 8, 10, 11, 13-17, 19, 21: 1=Not at all true, 2=A little true, 3=Sort of true, 4=Very true

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Cohort 3 Youth Interview: Scale documentation

SCALE: Life Events (1999-2003, 2005)

ITEMS USED: Items labeled as Choice 1: LES##YR, Choice 2 LEF##YR, Choice 3 LEN##YR

**Life Events You and Your Family Introduction .**

- 1 Choice 1: Did you or a family member have a brother or sister become seriously ill or injured during this past year .
- 2 Choice 2: Did you or a family member have a brother or sister become seriously ill or injured during this past year .
- 3 Choice 3: Did you or a family member have a brother or sister become seriously ill or injured during this past year .
- 4 Choice 1: Did you or a family member have at least one parent become seriously ill or injured during this past year .
- 5 Choice 2: Did you or a family member have at least one parent become seriously ill or injured during this past year .
- 6 Choice 3: Did you or a family member have at least one parent become seriously ill or injured during this past year .
- 7 Choice 1: Did you or a family member become involved in a serious accident during this past year .
- 8 Choice 2: Did you or a family member become involved in a serious accident during this past year .
- 9 Choice 3: Did you or a family member become involved in a serious accident during this past year .
- 10 Choice 1: Did you or a family member become physically handicapped due to an accident, injury, or illness during this past year .
- 11 Choice 2: Did you or a family member become physically handicapped due to an accident, injury, or illness during this past year .
- 12 Choice 3: Did you or a family member become physically handicapped due to an accident, injury, or illness during this past year .
- 13 Choice 1: Did you or a family member have a parent die this past year .
- 14 Choice 2: Did you or a family member have a parent die this past year .
- 15 Choice 3: Did you or a family member have a parent die this past year .
- 16 Choice 1: Did you or a family member see someone robbed or mugged during this past year .
- 17 Choice 2: Did you or a family member see someone robbed or mugged during this past year .
- 18 Choice 3: Did you or a family member see someone robbed or mugged during this past year .
- 19 Choice 1: Did you or a family member have a brother or sister die this past year .
- 20 Choice 2: Did you or a family member have a brother or sister die this past year .

- 21 Choice 3: Did you or a family member have a brother or sister die this past year .
- 22 Choice 1: Did you or a family member have a grandparent die this past year .
- 23 Choice 2: Did you or a family member have a grandparent die this past year .
- 24 Choice 3: Did you or a family member have a grandparent die this past year .
- 25 Choice 1: Did you or a family member have a close friend die during this past year .
- 26 Choice 2: Did you or a family member have a close friend die during this past year .
- 27 Choice 3: Did you or a family member have a close friend die during this past year .
- 28 Choice 1: Did you or a family member run away from home during this past year .
- 29 Choice 2: Did you or a family member run away from home during this past year .
- 30 Choice 3: Did you or a family member run away from home during this past year .
- 31 Choice 1: Did you or a family member see someone beaten up during this past year .
- 32 Choice 2: Did you or a family member see someone beaten up during this past year .
- 33 Choice 3: Did you or a family member see someone beaten up during this past year .
- 34 Choice 1: Did you or a family member have their house damaged by fire during this past year .
- 35 Choice 2: Did you or a family member have their house damaged by fire during this past year .
- 36 Choice 3: Did you or a family member have their house damaged by fire during this past year .
- 37 Choice 1: Did you or a family member see someone killed during this past year.
- 38 Choice 2: Did you or a family member see someone killed during this past year.
- 39 Choice 3: Did you or a family member see someone killed during this past year.
- 40 Choice 1: Did you or a family member get in trouble with the law during this past year.
- 41 Choice 2: Did you or a family member get in trouble with the law during this past year.
- 42 Choice 3: Did you or a family member get in trouble with the law during this past year.
- 43 Choice 1: Did you or a family member have a close friend move away during this past year.
- 44 Choice 2: Did you or a family member have a close friend move away during this past year.
- 45 Choice 3: Did you or a family member have a close friend move away during this past year.
- 46 Choice 1: Did you or a family member have their house broken into during this past year.

- 47 Choice 2: Did you or a family member have their house broken into during this past year.
- 48 Choice 3: Did you or a family member have their house broken into during this past year.
- 49 Choice 1: Were you or a family member robbed or mugged during this past year.
- 50 Choice 2: Were you or a family member robbed or mugged during this past year.
- 51 Choice 3: Were you or a family member robbed or mugged during this past year.
- 52 Choice 1: Were you or a family member beaten up during this past year.
- 53 Choice 2: Were you or a family member beaten up during this past year.
- 54 Choice 3: Were you or a family member beaten up during this past year.
- 55 Choice 1: Did you and you family move away from close friends and relatives during this past year.
- 56 Choice 2: Did you and you family move away from close friends and relatives during this past year.
- 57 Choice 3: Did you and you family move away from close friends and relatives during this past year.
- 58 Choice 1: Were you or a family member shot or stabbed during this past year.
- 59 Choice 2: Were you or a family member shot or stabbed during this past year.
- 60 Choice 3: Were you or a family member shot or stabbed during this past year.
- 61 Choice 1: Did you or a family member see someone stabbed or shot during this past year.
- 62 Choice 2: Did you or a family member see someone stabbed or shot during this past year.
- 63 Choice 3: Did you or a family member see someone stabbed or shot during this past year

**Life Events You and Your Family Interviewer Instruction. Items labeled as LES##YR**

- 64 Did you have a change in physical appearance that was upsetting.
- 65 Did one of your parents lose his or her job during this past year.
- 66 Did you have little contact with one of your parents during this past year.
- 67 Was your family evicted during this past year.
- 68 Did your parents get divorced or stopped living together during this past year.
- 69 Did a person who takes care of you other than family become seriously ill during this past year.
- 70 Did you have a grandparent become seriously ill during this past year.
- 71 Did one of your parents try to get a job but could not get one.

**Life Events Friends. Items labeled as LEP##YR**

- 72 Did a close friend have a brother or sister become seriously ill or injured during this past year.
- 73 Did a close friend have at least one parent become seriously ill or injured during this past year.
- 74 Did a close friend become involved in a serious accident during this past year.
- 75 Did a close friend become physically handicapped due to an accident, injury, or illness.
- 76 Did a close friend have a change in physical appearance that was upsetting.
- 77 Did a close friend have a parent die this past year.
- 78 Did a close friend have a brother or sister die this past year.
- 79 Did a close friend have a grandparent die this past year.
- 80 Did a close friend have a close friend of theirs die this past year.
- 81 Did a close friend run away from home during this past year .
- 82 Did a close friend have one of their parents lose his or her job during this past year.
- 83 Did a close friend have little contact with one of your parents during this past year.
- 84 Did a close friend have their house damaged by fire during this past year.
- 85 Was a close friends family evicted during this past year.
- 86 Did a close friend get in trouble with the law during this past year.
- 87 Did a close friend have a close friend move away this past year.
- 88 Did a close friend have their house broken into during this past year.
- 89 Was a close friend robbed or mugged during this past year.
- 90 Was a close friend beaten up during this past year.
- 91 Did a close friend shot or stabbed during this past year.
- 92 Did a close friends parents get divorced or stopped living together during this past year.
- 93 Did a close friend have a grandparent become seriously ill during this past year.

**ITEMS:**

Items dropped in 2003: 14-18; 20-21; 23-24; 26-27; 31-33; 37-39; 46-54; 58-63; 88-91.  
These items are now located in the new Violent Events Section (below).

ITEM CODING (1999-2003, 2005):

Items: 1-64: Ascendant Ranking from fist choice, 0= N/A 1=You 2=Family Member 3=No

Items: 66-73,75-93: 1= Yes 2 =No

Item: 1,65,74: Section Identifier.

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Cohort 3 Youth Interview: Scale documentation

SCALE: My Family and Friends/Social Support (1999-2001)

ITEMS USED: Items labeled as MFF##YR.

1. **My Family and Friends Introduction.**
2. Choice 1: Network of Child.
3. Choice 2: Network of Child.
4. Choice 3: Network of Child.
5. Choice 4: Network of Child.
6. Choice 5: Network of Child.
7. Choice 6: Network of Child.
8. Choice 7: Network of Child.
9. Choice 8: Network of Child.
10. Choice 9: Network of Child.
11. Choice 1: Who do you go to when you are feeling happy sad or mad.
12. Choice 2: Who do you go to when you are feeling happy sad or mad.
13. Choice 3: Who do you go to when you are feeling happy sad or mad.
14. Choice 4: Who do you go to when you are feeling happy sad or mad.

15. Choice 5: Who do you go to when you are feeling happy sad or mad.
16. Choice 6: Who do you go to when you are feeling happy sad or mad.
17. Choice 7: Who do you go to when you are feeling happy sad or mad.
18. Choice 8: Who do you go to when you are feeling happy sad or mad.
19. Choice 9: Who do you go to when you are feeling happy sad or mad.
20. Choice 1: How much better do they make you feel when you are happy sad or mad.
21. Choice 2: How much better do they make you feel when you are happy sad or mad.
22. Choice 3: How much better do they make you feel when you are happy sad or mad.
23. Choice 4: How much better do they make you feel when you are happy sad or mad.
24. Choice 5: How much better do they make you feel when you are happy sad or mad.
25. Choice 6: How much better do they make you feel when you are happy sad or mad.
26. Choice 7: How much better do they make you feel when you are happy sad or mad.
27. Choice 8: How much better do they make you feel when you are happy sad or mad.
28. Choice 9: How much better do they make you feel when you are happy sad or mad.
29. Choice 1: Who do you go to most often when you need help with your schoolwork.
30. Choice 2: Who do you go to most often when you need help with your schoolwork.
31. Choice 3: Who do you go to most often when you need help with your schoolwork.
32. Choice 4: Who do you go to most often when you need help with your schoolwork.
33. Choice 5: Who do you go to most often when you need help with your schoolwork.
34. Choice 6: Who do you go to most often when you need help with your schoolwork.
35. Choice 7: Who do you go to most often when you need help with your schoolwork.
36. Choice 8: Who do you go to most often when you need help with your schoolwork.
37. Choice 9: Who do you go to most often when you need help with your schoolwork.
38. Choice 1: How helpful are they with your schoolwork.
39. Choice 2: How helpful are they with your schoolwork.
40. Choice 3: How helpful are they with your schoolwork.



41. Choice 4: How helpful are they with your schoolwork.
42. Choice 5: How helpful are they with your schoolwork.
43. Choice 6: How helpful are they with your schoolwork.
44. Choice 7: How helpful are they with your schoolwork.
45. Choice 8: How helpful are they with your schoolwork.
46. Choice 9: How helpful are they with your schoolwork.
47. *Choice 1: Who do you go to most often when you have done something you feel bad about.*
48. *Choice 2: Who do you go to most often when you have done something you feel bad about.*
49. *Choice 3: Who do you go to most often when you have done something you feel bad about.*
50. *Choice 4: Who do you go to most often when you have done something you feel bad about.*
51. *Choice 5: Who do you go to most often when you have done something you feel bad about.*
52. *Choice 6: Who do you go to most often when you have done something you feel bad about.*
53. *Choice 7: Who do you go to most often when you have done something you feel bad about.*
54. *Choice 8: Who do you go to most often when you have done something you feel bad about.*
55. *Choice 9: Who do you go to most often when you have done something you feel bad about.*
56. *Choice 1: How much better do they make you feel when you have done something you feel bad about.*
57. *Choice 2: How much better do they make you feel when you have done something you feel bad about.*
58. *Choice 3: How much better do they make you feel when you have done something you feel bad about.*
59. *Choice 4: How much better do they make you feel when you have done something you feel bad about.*
60. *Choice 5: How much better do they make you feel when you have done something you feel bad about.*
61. *Choice 6: How much better do they make you feel when you have done something you feel bad about.*
62. *Choice 7: How much better do they make you feel when you have done something you feel bad about.*

63. *Choice 8: How much better do they make you feel when you have done something you feel bad about.*
64. *Choice 9: How much better do they make you feel when you have done something you feel bad about.*
65. Choice 1: Who makes you feel good about yourself.
66. Choice 2: Who makes you feel good about yourself.
67. Choice 3: Who makes you feel good about yourself.
38. Choice 4: Who makes you feel good about yourself.
69. Choice 5: Who makes you feel good about yourself.
70. Choice 6: Who makes you feel good about yourself.
71. Choice 7: Who makes you feel good about yourself.
72. Choice 8: Who makes you feel good about yourself.
73. Choice 9: Who makes you feel good about yourself.
74. Choice 1: How good do they make you feel about yourself.
75. Choice 2: How good do they make you feel about yourself.
76. Choice 3: How good do they make you feel about yourself.
77. Choice 4: How good do they make you feel about yourself.
78. Choice 5: How good do they make you feel about yourself.
79. Choice 6: How good do they make you feel about yourself.
80. Choice 7: How good do they make you feel about yourself.
81. Choice 8: How good do they make you feel about yourself.
82. Choice 9: How good do they make you feel about yourself.
83. Choice 1: Who do you get upset or angry at most often.
84. Choice 2: Who do you get upset or angry at most often.
85. Choice 3: Who do you get upset or angry at most often.
86. Choice 4: Who do you get upset or angry at most often.
87. Choice 5: Who do you get upset or angry at most often.

- 88. Choice 6: Who do you get upset or angry at most often.
- 89. Choice 7: Who do you get upset or angry at most often.
- 90. Choice 8: Who do you get upset or angry at most often.
- 91. Choice 9: Who do you get upset or angry at most often.
- 92. Choice 1: How angry or upset do you get.
- 93. Choice 2: How angry or upset do you get.
- 94. Choice 3: How angry or upset do you get.
- 95. Choice 4: How angry or upset do you get.
- 96. Choice 5: How angry or upset do you get.
- 97. Choice 6: How angry or upset do you get.
- 98. Choice 7: How angry or upset do you get.
- 99. Choice 8: How angry or upset do you get.
- 100. Choice 9: How angry or upset do you get.

ITEM CODING:

Items: 1-100: Ascendant Ranking from fist choice, 0= None 1=Mother 2=Father 3=Sister 4=Brother 5=Friend 1 6= Friend2 7=Relative 8=Teacher 9=Other, for each Item.

Item: 1: Section Identifier.

Year 1999: Items 1-100

Year 2000-01: Items 1-46, 65-100 (Italicized items dropped)

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Cohort 3 Youth Interview: Scale documentation

SCALE: Drug use

ITEMS USED: Sub-scale & Source; Items: TOB##YR, ALC##YR, MRJ##YR, CRK##YR, COKE##YR, CRCK##YR, INH##YR, HER##YR, ECT##YR

1. Ever used tobacco
2. Ever used tobacco - double check
3. Offered tobacco
4. Age first offered tobacco
5. Would use tobacco if offered
6. Definitely yes OR maybe yes to taking tobacco
7. Definitely not OR maybe not to taking tobacco
8. Ever used alcohol
9. Ever used alcohol - double check
10. Offered alcohol
11. Age first offered alcohol
12. Would use alcohol if offered
13. Definitely yes OR maybe yes to taking alcohol
14. Definitely not OR maybe not to taking alcohol.
15. Ever used marijuana
16. Ever used marijuana - double check
17. Offered marijuana
18. Age first offered marijuana
19. Would use marijuana if offered
20. Definitely yes OR maybe yes to taking marijuana
21. Definitely not OR maybe not to taking marijuana
22. Ever used crack
23. Ever used crack – double check
24. Ever used cocaine

25. Ever used cocaine - double check
26. Offered crack or cocaine
27. Age first offered crack or cocaine
28. Would use crack or cocaine if offered
29. Definitely yes OR maybe yes to taking crack or cocaine
30. Definitely not OR maybe not to taking crack or cocaine
31. Ever used inhalants
32. Ever used inhalants - double check
33. Offered inhalants
34. Age first offered inhalants
35. Would use inhalants if offered
36. Definitely yes OR maybe yes to taking inhalants
37. Definitely not OR maybe not to taking inhalants

**TOBACCO; Items labeled as TOB##YR**

38. Puff or more on tobacco
39. How many times have you used tobacco - one to more than four times
40. Since you said you used more than 4 times, how many times have you used tobacco
41. Age first used tobacco
- 41a. *Age first used – double check*
42. Any friend told you, you should not use tobacco
43. Any family member told you, you should not use tobacco
44. Any friend scolded you because you used tobacco
45. Any family member scolded you because you used tobacco
46. Any teacher scolded you because you used tobacco
47. Have you gotten into trouble at school because you used tobacco
48. Have you gotten into trouble at home because you used tobacco

49. Have you gotten into trouble with the police because you used tobacco
50. Feel panicky or frightened because you were using tobacco
51. Feel sad, upset or depressed because you were using tobacco
52. Lasting cough due to using tobacco
53. Getting sick to your stomach or an overdose caused by using tobacco
54. Ever used tobacco every day or almost every day for two or more weeks
55. Wake up and feel something like a hunger for tobacco
56. Did you use tobacco in the last week
57. Did you use tobacco in the last month
58. Have you used tobacco since this time last year

**ALCOHOL; Items labeled as ALC##YR**

59. Few sips of alcohol or more
60. Drinks or sips of alcohol with or without parents permission
61. Age first used alcohol
- 61a. *Age first used – double check*
62. Not counting sips with parents permission, how many times have you used alcohol - 1 to more than 4 times
63. Since you said you used more than 4 times, how many times have you used alcohol
64. Not counting sips with parents permission, age first used alcohol
- 64a. *Age first used – double check*
65. Age first drunk from alcohol
- 65a. *Age first used – double check*
66. Any friend told you, you should not use alcohol
67. Any family member told you ,you should not use alcohol
68. Any friend scolded you because you used alcohol
69. Any family member scolded you because you used alcohol
70. Any teacher scolded you because you used alcohol

71. Have you gotten into trouble at school because you used alcohol
72. Have you gotten into trouble at home because you used alcohol
73. Have you gotten into trouble with the police because you used alcohol
74. Feel panicky or frightened because you were using alcohol
75. Feel sad, upset or depressed because you were using alcohol
76. Lasting cough due to using alcohol
77. Getting sick to your stomach or an overdose caused by using alcohol
78. Ever used alcohol every day or almost every day for two or more weeks
79. Wake up and feel something like a hunger for alcohol
80. Did you use alcohol in the last week
81. Did you use alcohol in the last month
82. Have you used alcohol since this time last year

**MARIJUANA; Items labeled as MRJ##YR**

83. How many times have you used marijuana - one to more than four times
84. Since you said you used more than 4 times, how many times have you used marijuana
85. Age first used from marijuana
- 85a. *Age first used – double check*
86. Age first got high on marijuana
- 86a. *Age first used – double check*
87. Any friend told you, you should not use marijuana
88. Any family member told you, you should not use marijuana
89. Any friend scolded you because you used marijuana
90. Any family member scolded you because you used marijuana
91. Any teacher scolded you because you used marijuana
92. Have you gotten into trouble at school because you used marijuana
93. Have you gotten into trouble at home because you used marijuana

- 94. Have you gotten into trouble with the police because you used marijuana
- 95. Feel panicky or frightened because you were using marijuana
- 96. Feel sad, upset or depressed because you were using marijuana
- 97. Lasting cough due to using marijuana
- 98. Getting sick to your stomach or an overdose caused by using marijuana
- 99. Ever used marijuana every day or almost every day for two or more weeks
- 100. Wake up and feel something like a hunger for marijuana
- 101. Did you use marijuana in the last week
- 102. Did you use marijuana in the last month
- 103. Have you used marijuana since this time last year

**CRACK/COCAINE; Items labeled as CRK##YR, COKE##YR & CRCK##YR**

- 104. How many times have you used crack - one to more than four times
- 105. Since you said you used more than 4 times, how many times have you used crack
- 106. Age first used from crack
- 106a. *Age first used – double check*
- 107. Age first got high on crack
- 107a. *Age first used – double check*
- 108. Did you use crack in the last week
- 109. Did you use crack in the last month
- 110. Have you used crack since this time last year
- 111. Not counting crack, how many times have you used cocaine - one to more than four times
- 112. Since you said you used more than 4 times, how many times have you used cocaine
- 113. Age first used from cocaine
- 113a. *Age first used – double check*
- 114. Age first got high on cocaine
- 114a. *Age first used – double check*



115. Did you use cocaine in the last week
116. Did you use cocaine in the last month
117. Have you used cocaine since this time last year
118. Any friend told you, you should not use crack or cocaine
119. Any family member told you, you should not use crack or cocaine
120. Any friend scolded you because you used crack or cocaine
121. Any family member scolded you because you used crack or cocaine
122. Any teacher scolded you because you used crack or cocaine
123. Have you gotten into trouble at school because you used crack or cocaine
124. Have you gotten into trouble at home because you used crack or cocaine
125. Have you gotten into trouble with the police because you used crack or cocaine
126. Feel panicky or frightened because you were using crack or cocaine
127. Feel sad, upset or depressed because you were using crack or cocaine
128. Lasting cough due to using crack or cocaine
129. Getting sick to your stomach or an overdose caused by using crack or cocaine
130. Ever used crack or cocaine every day or almost every day for two or more weeks
131. Wake up and feel something like a hunger for crack or cocaine

**INHALANTS; Items labeled as INH##YR**

132. How many times have you used inhalants - one to more than four times
133. Since you said you used more than 4 times, how many times have you used inhalants
134. Age first used from inhalants
- 134a. *Age first used – double check*
135. Age first got high on inhalants
- 135a. *Age first used – double check*
136. Any friend told you, you should not use inhalants
137. Any family member told you, you should not use inhalants

138. Any friend scolded you because you used inhalants
139. Any family member scolded you because you used inhalants
140. Any teacher scolded you because you used inhalants
141. Have you gotten into trouble at school because you used inhalants
142. Have you gotten into trouble at home because you used inhalants
143. Have you gotten into trouble with the police because you used inhalants
144. Feel panicky or frightened because you were using inhalants
145. Feel sad, upset or depressed because you were using inhalants
146. Lasting cough due to using inhalants
147. Getting sick to your stomach or an overdose caused by using inhalants
148. Ever used inhalants every day or almost every day for two or more weeks
149. Wake up and feel something like a hunger for inhalants
150. Did you use inhalants in the last week
151. Did you use inhalants in the last month
152. Have you used inhalants since this time last year
153. Interviewer instruction screen

**Attitudes on drugs - self; Items labeled as ATS##YR**

155. How do you feel about kids your own age trying marijuana once or twice
156. How do you feel about kids your own age using marijuana occasionally
157. How do you feel about kids your own age using marijuana regularly
158. How do you feel about kids your own age trying cocaine once or twice
- 159a. How do you feel about kids your own age using cocaine occasionally
160. How do you feel about kids your own age using cocaine regularly
161. How do you feel about kids your own age trying alcohol once or twice
162. How do you feel about kids your own age using alcohol occasionally
163. How do you feel about kids your own age using alcohol regularly

- 164. How do you feel about kids your own age trying cigarettes once or twice
- 165. How do you feel about kids your own age using cigarettes occasionally
- 166. How do you feel about kids your own age using cigarettes regularly

**Attitudes on drugs - peer; Items labeled as ATP#YR**

- 168. How do you think your close friends would feel about you trying marijuana once or twice
- 169. How do you think your close friends would feel about you using marijuana occasionally
- 170. How do you think your close friends would feel about you using marijuana regularly
- 171. How do you think your close friends would feel about you trying cocaine once or twice
- 172. How do you think your close friends would feel about you using cocaine occasionally
- 173. How do you think your close friends would feel about you using cocaine regularly
- 174. How do you think your close friends would feel about you trying alcohol once or twice
- 175. How do you think your close friends would feel about you using alcohol occasionally
- 176. How do you think your close friends would feel about you using alcohol regularly
- 177. How do you think your close friends would feel about you trying cigarettes once or twice
- 178. How do you think your close friends would feel about you using cigarettes occasionally
- 179. How do you think your close friends would feel about you using cigarettes regularly

**Attitudes on drugs - family; Items labeled as ATF#YR**

- 181. How do you think your parents would feel about you trying marijuana once or twice
- 182. How do you think your parents would feel about you using marijuana occasionally
- 183. How do you think your parents would feel about you using marijuana regularly
- 184. How do you think your parents would feel about you trying cocaine once or twice
- 185. How do you think your parents would feel about you using cocaine occasionally
- 186. How do you think your parents would feel about you using cocaine regularly
- 187. How do you think your parents would feel about you trying alcohol once or twice
- 188. How do you think your parents would feel about you using alcohol occasionally
- 189. How do you think your parents would feel about you using alcohol regularly

190. How do you think your parents would feel about you trying cigarettes once or twice
191. How do you think your parents would feel about you using cigarettes occasionally
192. How do you think your parents would feel about you using cigarettes regularly

**Drug risk introduction; Items labeled as RSK#YR**

194. How much do people harm themselves and in other ways when they try marijuana once or twice
195. How much do people harm themselves physically and in other ways when they use marijuana occasionally
196. How much do people harm themselves physically and in other ways when they use marijuana regularly
197. How much do people harm themselves physically and in other ways when they try cocaine once or twice
198. How much do people harm themselves physically and in other ways when they use cocaine occasionally
199. How much do people harm themselves physically and in other ways when they use cocaine regularly
200. How much do people harm themselves physically and in other ways when they try crack once or twice
201. How much do people harm themselves physically and in other ways when they use crack occasionally
202. How much do people harm themselves physically and in other ways when they use crack regularly
203. How much do people harm themselves physically and in other ways when they try alcohol once or twice
204. How much do people harm themselves physically and in other ways when they use alcohol occasionally
205. How much do people harm themselves physically and in other ways when they use alcohol regularly
206. How much do people harm themselves physically and in other ways when they try cigarettes once or twice
207. How much do people harm themselves physically and in other ways when they use cigarettes occasionally

208. How much do people harm themselves physically and in other ways when they use cigarettes regularly

209 **Interviewer instruction**

210. How difficult do you think it would be to get tobacco cigarettes, if you wanted some

211. How difficult do you think it would be to get tobacco alcohol, if you wanted some

212. How difficult do you think it would be to get tobacco marijuana, if you wanted some

213. How difficult do you think it would be to get tobacco cocaine, if you wanted some

214. How difficult do you think it would be to get tobacco crack, if you wanted some

**Added in 2001 HEROIN; Items labeled as HER##YR**

216. Ever used heroin

217. Ever used heroin - double check

218. Offered heroin

219a. Age first offered heroin

220. Would use heroin if offered

220a. Definitely yes OR maybe yes to taking heroin

221. Definitely not OR maybe not to taking heroin

223. How many times have you used heroin - one to more than four times

224. Since you said you used more than 4 times, how many times have you used heroin

225. Age first used from heroin

226. Age first used – double check

227. Age first got high on heroin

228. Age first used – double check

229. Any friend told you, you should not use heroin

230. Any family member told you, you should not use heroin

231. Any friend scolded you because you used heroin

232. Any family member scolded you because you used heroin

233. Any teacher scolded you because you used heroin

234. Have you gotten into trouble at school because you used heroin
235. Have you gotten into trouble at home because you used heroin
236. Have you gotten into trouble with the police because you used heroin
237. Feel panicky or frightened because you were using heroin
238. Feel sad, upset or depressed because you were using heroin
239. Lasting cough due to using heroin
240. Getting sick to your stomach or an overdose caused by using heroin
241. Ever used heroin every day or almost every day for two or more weeks
242. Wake up and feel something like a hunger for heroin
243. Did you use heroin in the last week
244. Did you use heroin in the last month
245. Have you used heroin since this time last year
246. Interviewer instruction screen
247. *Age first used – triple check categorical for all drugs*
248. Tobacco in the last week times you used - one to more than four times
249. Tobacco in the last week times used more than 4 times
250. Tobacco in the last month times you used - one to more than four times
251. Tobacco in the last month times used more than 4 times
252. Tobacco in the last year times you used - one to more than four times
253. Tobacco in the last year times used more than 4 times
254. Age first drunk on alcohol
255. Age first used – double check
256. How many times have you been drunk - 1 to more than 4 times
257. Since you said you were drunk more than 4 times, how many times have you been drunk
258. Alcohol in the last week times you used - one to more than four times
259. Alcohol in the last week times used more than 4 times

260. Alcohol in the last month times you used - one to more than four times
261. Alcohol in the last month times used more than 4 times
262. Alcohol in the last year times you used - one to more than four times
263. Alcohol in the last year times used more than 4 times
264. Drunk in the last week times you used - one to more than four times
265. Drunk in the last week times used more than 4 times
266. Drunk in the last month times you used - one to more than four times
267. Drunk in the last month times used more than 4 times
268. Drunk in the last year times you used - one to more than four times
269. Drunk in the last year times used more than 4 times
270. Marijuana in the last week times you used - one to more than four times
271. Marijuana in the last week times used more than 4 times
272. Marijuana in the last month times you used - one to more than four times
273. Marijuana in the last month times used more than 4 times
274. Marijuana in the last year times you used - one to more than four times
275. Marijuana in the last year times used more than 4 times
276. Inhalants in the last week times you used - one to more than four times
277. Inhalants in the last week times used more than 4 times
278. Inhalants in the last month times you used - one to more than four times
279. Inhalants in the last month times used more than 4 times
280. Inhalants in the last year times you used - one to more than four times
281. Inhalants in the last year times used more than 4 times
282. Crack in the last week times you used - one to more than four times
283. Crack in the last week times used more than 4 times
284. Crack in the last month times you used - one to more than four times
285. Crack in the last month times used more than 4 times

286. Crack in the last year times you used - one to more than four times
287. Crack in the last year times used more than 4 times
288. Cocaine in the last week times you used - one to more than four times
289. Cocaine in the last week times used more than 4 times
290. Cocaine in the last month times you used - one to more than four times
291. Cocaine in the last month times used more than 4 times
292. Cocaine in the last year times you used - one to more than four times
293. Cocaine in the last year times used more than 4 times
294. Heroin in the last week times you used - one to more than four times
295. Heroin in the last week times used more than 4 times
296. Heroin in the last month times you used - one to more than four times
297. Heroin in the last month times used more than 4 times
298. Heroin in the last year times you used - one to more than four times
299. Heroin in the last year times used more than 4 times
300. How many of your friends use heroin
301. How do you feel about kids your own age trying heroin once or twice
302. How do you feel about kids your own age using heroin occasionally (more than once or twice but less than every day or almost every day)
303. How do you feel about kids your own age using heroin regularly (every day or almost every day)
304. How do you think your close friends would feel about you trying heroin once or twice
305. How do you think your close friends would feel about you using heroin occasionally
306. How do you think your close friends would feel about you using heroin regularly
307. How do you think your parents would feel about you using heroin once or twice
308. How do you think your parents would feel about you using heroin occasionally
309. How do you think your parents would feel about you using heroin regularly
310. How much do people harm themselves and in other ways when they try heroin once or twice



- 311. How much do people harm themselves physically and in other ways when they use heroin occasionally
- 312. How much do people harm themselves physically and in other ways when they use heroin regularly
- 313. How difficult do you think it would be to get heroin, if you wanted some

**Peer drug use introduction; Items labeled as PDU#YR**

- 314. How many of your friends use marijuana
- 315. How many of your friends use inhalants
- 316. How many of your friends use cocaine
- 317. How many of your friends use crack
- 318. How many of your friends use alcohol
- 319. How many of your friends get drunk at least once a week
- 320. How many of your friends use cigarettes

**Added in 2002 Ecstasy; Items labeled as ECT##YR**

- 321. Ever used ecstasy
- 322. Ever used ecstasy - double check
- 323. Offered ecstasy
- 324. Age first offered ecstasy
- 325. Would use ecstasy if offered
- 326. Definitely yes OR maybe yes to taking ecstasy
- 327. Definitely not OR maybe not to taking ecstasy
- 328. How many times have you used ecstasy - one to more than four times
- 329. Since you said you used more than 4 times, how many times have you used ecstasy
- 330. Age first used from ecstasy
- 331. Age first used – double check
- 332. Age first got high on ecstasy
- 333. Age first used – double check

- 334. Any friend told you, you should not use ecstasy
- 335. Any family member told you, you should not use ecstasy
- 336. Any friend scolded you because you used ecstasy
- 337. Any family member scolded you because you used ecstasy
- 338. Any teacher scolded you because you used ecstasy
- 339. Have you gotten into trouble at school because you used ecstasy
- 340. Have you gotten into trouble at home because you used ecstasy
- 341. Have you gotten into trouble with the police because you used ecstasy
- 342. Feel panicky or frightened because you were using ecstasy
- 343. Feel sad, upset or depressed because you were using ecstasy
- 344. Lasting cough due to using ecstasy
- 345. Getting sick to your stomach or an overdose caused by using ecstasy
- 346. Ever used ecstasy every day or almost every day for two or more weeks
- 347. Wake up and feel something like a hunger for ecstasy
- 348. Did you use ecstasy in the last week
- 349. Did you use ecstasy in the last month
- 350. Have you used ecstasy since this time last year

**Alcohol Dependence - ALCDP#YR**

- 351. During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of alcohol?
- 352. During the past 12 months, have you used alcohol much more often or in larger amounts than you intended to?
- 353. During the past 12 months, have you built up a tolerance for alcohol so that the same amount had less effect than before?
- 354. During the past 12 months, has your use of alcohol often kept you from going to school, or from working, or taking part in recreational activities?
- 355. During the past 12 months, has your use of alcohol caused you to have emotional or psychological problems such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas?

356. During the past 12 months, has your use of alcohol caused you to have any health problems? 1
357. During the past 12 months, did you want to or try to stop or cut down on your use of alcohol but found that you couldn't? 1
358. During the past 12 months, when the effect of the alcohol you drank was wearing off, did you sweat a lot or feel that your heart was beating fast? 1
359. During the past 12 months, when the effect of the alcohol you drank was wearing off, did your hands tremble? 1
360. During the past 12 months, when the effect of the alcohol you drank was wearing off, did you vomit or feel nauseous? 1
361. During the past 12 months, when the effect of the alcohol you drank was wearing off, did you have trouble sleeping? 1
362. During the past 12 months, when the effect of the alcohol you drank was wearing off, did you have trouble seeing, hearing, or feeling things that weren't really there? 1
363. During the past 12 months, when the effect of the alcohol you drank was wearing off, did you feel like you couldn't sit still? 1
364. During the past 12 months, when the effect of the alcohol you drank was wearing off, did you feel anxious or nervous? 1
365. During the past 12 months, when the effect of the alcohol you drank was wearing off, did you have seizures or fits? 1
366. During the past 12 months, did you drink more alcohol to get over or avoid any of the bad after effects of your drinking? 1

**Marijuana Dependence - MRJDP#YR**

367. During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of marijuana? 1
368. During the past 12 months, have you used marijuana much more often or in larger amounts than you intended to? 1
369. During the past 12 months, have you built up a tolerance for marijuana so that the same amount had less effect than before? 1
370. During the past 12 months, has your use of marijuana often kept you from going to school, working, or taking part in recreational activities? 1
371. During the past 12 months, has your use of marijuana caused you to have emotional or psychological problems such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas? 1

372. During the past 12 months, has your use of marijuana caused you to have any health problems? 1
373. During the past 12 months, did you want to or try to stop or cut down on your use of marijuana but found that you couldn't? 1

**Crack/Cocaine Dependence - CRCKD#YR**

374. During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of crack or cocaine? 1
375. During the past 12 months, have you used cocaine or crack much more often or in larger amounts than you intended to? 1
376. During the past 12 months, have you built up a tolerance for cocaine or crack so that the same amount had less effect than before? 1
377. During the past 12 months, has your use of cocaine or crack often kept you from going to school, working, or taking part in recreational activities? 1
378. During the past 12 months, has your use of cocaine or crack caused you to have emotional or psychological problems such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas? 1
379. During the past 12 months, has your use of cocaine or crack caused you to have any health problems? 1
380. During the past 12 months, did you want to or try to stop or cut down on your use of cocaine or crack but found that you couldn't? 1
381. During the past 12 months, have you felt kind of blue or down when the effect of the cocaine or crack you used was wearing off? 1
382. During the past 12 months, when the effect of the cocaine or crack you used was wearing off, did you feel tired or exhausted? 1
383. During the past 12 months, when the effect of the cocaine or crack you used was wearing off, did you have bad dreams? 1
384. During the past 12 months, when the effect of the cocaine or crack you used was wearing off, did you have trouble sleeping or sleeping more than you normally do? 1
385. During the past 12 months, when the effect of the cocaine or crack you used was wearing off, did you feel hungry more than you normally do? 1
386. During the past 12 months, when the effect of the cocaine or crack you used was wearing off, did you feel very slowed down or like you couldn't sit still? 1
387. During the past 12 months, did you use more cocaine or crack to get over or avoid any of the bad after effects of your cocaine or crack use? 1

**Heroin Dependence - HERDP#YR**

- 388. During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of heroin? 1
- 389. During the past 12 months, have you used heroin much more often or in larger amounts than you intended to? 1
- 390. During the past 12 months, have you built up a tolerance for heroin so that the same amount had less effect than before? 1
- 391. During the past 12 months, has your use of heroin often kept you from going to school, working, or taking part in recreational activities? 1
- 392. During the past 12 months, has your use of heroin caused you to have emotional or psychological problems such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas? 1
- 393. During the past 12 months, has your use of heroin caused you to have any health problems? 1
- 394. During the past 12 months, did you want to or try to stop or cut down on your use of heroin but found that you couldn't? 1
- 395. During the past 12 months, when the effect of the heroin you used was wearing off, did you feel kind of blue or down? 1
- 396. During the past 12 months, did you use more heroin to get over or avoid any of the bad after effects of your heroin use? 1
- 397. During the past 12 months, when the effect of the heroin you used was wearing off, did you have trouble sleeping? 1
- 398. During the past 12 months, when the effect of the heroin you used was wearing off, did you get a fever? 1
- 399. During the past 12 months, when the effect of the heroin you used was wearing off, did you yawn a lot? 1
- 400. During the past 12 months, when the effect of the heroin you used was wearing off, did you have diarrhea? 1
- 401. During the past 12 months, when the effect of the heroin you used was wearing off, did you feel sweaty, or did your eye pupils get enlarged or did your body hair stand up on your skin? 1
- 402. During the past 12 months, when the effect of the heroin you used was wearing off, did you have teary eyes or a runny nose? 1
- 403. During the past 12 months, when the effect of the heroin you used was wearing off, did you have cramps or muscle aches? 1

404. During the past 12 months, when the effect of the heroin you used was wearing off, did you vomit or feel nauseous? 1

**Inhalant Dependence - INHDP#YR**

405. During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of inhalants? 1

406. During the past 12 months, have you used inhalants much more often or in larger amounts than you intended to? 1

407. During the past 12 months, have you built up a tolerance for inhalants so that the same amount had less effect than before? 1

408. During the past 12 months, has your use of inhalants often kept you from going to school, working, or taking part in recreational activities? 1

409. During the past 12 months, has your use of inhalants caused you to have emotional or psychological problems such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas? 1

410. During the past 12 months, has your use of inhalants caused you to have any health problems? 1

411. During the past 12 months, did you want to or try to stop or cut down on your use of inhalants but found that you couldn't? 1

**Ecstasy Dependence - ECTDP#YR**

412. During the past 12 months, did you have a period of a month or more when you spent a great deal of time getting, using, or getting over the effects of ecstasy? 1

413. During the past 12 months, have you used ecstasy much more often or in larger amounts than you intended to? 1

414. During the past 12 months, have you built up a tolerance for ecstasy so that the same amount had less effect than before? 1

415. During the past 12 months, has your use of ecstasy often kept you from going to school, working, or taking part in recreational activities? 1

416. During the past 12 months, has your use of ecstasy caused you to have emotional or psychological problems such as feeling uninterested in things, feeling depressed, feeling suspicious of people, feeling paranoid, or having strange ideas? 1

417. During the past 12 months, has your use of ecstasy caused you to have any health problems? 1

418. During the past 12 months, did you want to or try to stop or cut down on your use of ecstasy but found that you couldn't? 1

## ITEM CODING:

Items: 1,3,5,8,10,12,15,17,19,22,24,26,28,31,33,35,42-58,66-82,87-103,108-110,115-131,136-152, 216, 218, 220,  
229-245, 321, 323, 325, 334-418:1= Yes 2 =No

Items: 2,9,16,23,25,32, 217, 322: 1= Never, 2 =Have

Items: 6,13,20,29,36, 220a, 326: 1=Definitely yes, 2=Maybe yes

Items: 7,14,21,30,37, 221, 327: 1=Definitely not, 2=Maybe not

Item: 38: 1=Puff, 2=More

Items: 39,62,83,104,111,132, 223, 248, 250, 252, 254, 256, 258, 260, 262, 264, 266, 268, 270, 272, 274, 276, 278, 280, 282, 284, 286, 288, 290, 292, 294, 296, 298: 1=Once, 2=Twice, 3=3-4 Times, 4=More than 4 times

Items: 40,63,84,105,112,133, 224, 249, 251, 253, 255, 257, 259, 261, 263, 265, 267, 269, 271, 273, 275, 277, 279, 281, 283, 285, 287, 289, 291, 293, 295, 297, 299: 1=5-9 Times, 2= 10-19 Times, 3=20-39 Times, 4= 40 or more times

Item: 59: 1=Just a few sips, 2=More than few sips

Item: 60: 1=Only with parents permission, 2=without parents permission

Items: 155-166, 168-179,181-192: 1=Would not disapprove 2=Disapprove 3=Strongly disapprove

Items: 216-222: 1=None, 2= Very few, 3=Some, 4=Most of them, 5=All of them

Items: 153,154,167,180,193,209,215: Section Identification.

Items: 194-208, 310-312: 1=No risk, 2=slight risk, 3=some risk, 4=great risk

Items: 210-214, 313: Probably Impossible, Very difficult, fairly difficult, fairly easy, very easy

## SUB-SCALE AND SOURCE

1. Period of time of use (Time)- Lifetime, Last year, last month, Last week use of Tobacco, Alcohol, Cocaine, Crack, Marijuana, & Inhalants.
2. Frequency of use.
3. Age at first use.
4. Whether offered Tobacco, Alcohol, Cocaine, Crack, Marijuana, & Inhalants.
5. Impairment Indicators associated with Use.

6. Child's Attitude Towards Peer Drug Use (MTF Volume 2 pg. 113)
7. Child's Perceptions of their friends' reactions If they Knew Child Used Drugs (Monitoring the Future Volume 2 pg. 117)
8. Child's Perception of Parents' Reactions If they Knew child Used Drugs (MTF Revised Friends' Attitudes)
9. Risk and Availability of Drugs – NHSDA Core Booklet 1993 pg. 70-71.
10. Friends' Drug Use (MTF pg. 122)
11. Alcohol/Drug Dependence - NHSDA 1999 version

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Cohort 3 Youth Interview: Scale documentation

SCALE: Peer Drug Use

**QUESTIONS USED:** ITEMS LABELED AS PDU##YR

1. How many of your friends smoke marijuana?
2. How many of your friends use inhalants (sniffing or huffing glue, gases, paint thinner, spray paint, or household cleaners)?
3. How many of your friends take cocaine?
4. How many of your friends take crack?
5. How many of your friends drink beer, wine or liquor?
6. How many of your friends get drunk at least once a week?
7. How many of your friends smoke cigarettes?
8. *How many of your friends take heroin?*
9. *How many of your friends use ecstasy?*

**QUESTION CODING:**

Items: 1-7: 1=None, 2=Very few, 3=Some, 4=Most of them, 5=All of them

Italicized item added in 2001



Bolded Italicized item added in 2002

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Cohort 3 Youth Interview: Scale documentation

SCALE: Deviant Peer Affiliation

QUESTIONS USED: ITEMS LABELED AS DP##YR

1. During the last year, how many of your friends have cheated on school tests?
2. During the last year, how many of your friends have ruined or damaged something on purpose that wasn't theirs?
3. During the last year, how many of your friends have stolen something worth less than five dollars?
4. During the last year, how many of your friends have stolen something worth more than five dollars?
5. During the last year, how many of your friends have hit or threatened someone without any real reason?
6. During the last year, how many of your friends have suggested that you do something against the law?

QUESTION CODING:

Items: 1-6: 1=None, 2=Very few, 3=Some, 4=Most of them, 5=All of them

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Cohort 3 Youth Interview: Scale documentation

SCALE: Parent Discipline

QUESTIONS USED: ITEMS LABELED AS PM##YR

1. If your parents say you will get punished if you don't stop doing something and you keep on doing it, how often will they punish you?
2. When you break rules and your parents know about it, how often will you get away with NO punishment?
3. How often do your parents get angry when they punish you?
4. How often do you know what kind of punishment to expect when you have done something wrong?
5. How often do you think that the punishment you get depends upon how your parents feel at the time?

QUESTION CODING:

Items: 1-5: 1=All of the time, 2=Most times, 3=Sometimes, 4=Hardly ever, 5=Never, 6=Never possible\*

\*This category captures whether the child is never in that particular situation. For example, for item 1 it is possible for the child to respond *I do not come home late.*

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Cohort 3 Youth Interview: Scale documentation

SCALE: Parent Involvement

QUESTIONS USED: ITEMS LABELED AS PM##YR

1. How often do you talk with your parents about your plans for the coming day, such as your plans about what will happen at school or what you are going to do with your friends?

QUESTION CODING:

Items: 1: 1=All of the time, 2=Most times, 3=Sometimes, 4=Hardly ever, 5=Never, 6=Never possible\*

\*This category captures whether the child is never in that particular situation. For example, for item 1 it is possible for the child to respond *I do not come home late*.

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SCALE: Parent Reinforcement

QUESTIONS USED: ITEMS LABELED AS PM##YR

1. On a day-to-day basis, how often do your parents notice you are doing a good job and let you know about it?
2. How often do your parents show you they like it when you help around the house without being told?

QUESTION CODING:

Items: 1-2: 1=All of the time, 2=Most times, 3=Sometimes, 4=Hardly ever, 5=Never, 6=Never possible\*

\*This category captures whether the child is never in that particular situation. For example, for item 1 it is possible for the child to respond *I do not come home late*.

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Cohort 3 Youth Interview: Scale documentation

SCALE: Parent Monitoring

QUESTIONS USED: ITEMS LABELED AS PM##YR

1. How often would your parents or a sitter know if you came home an hour late on weekends?
2. How often before you go out, do you tell your parents when you will be back?
3. If your parents or a sitter are not at home, how often do you leave a note for them about where you are going?

4. How often do you check in with your parents or a sitter after school before going to play?
5. When you get home from school, how often is someone there within one hour? By someone, we mean an adult like your parents or a baby sitter.
6. If you are at home when your parents are NOT there, how often do you know how to get in touch with them?

**QUESTION CODING:**

Items: 1-6: 1=All of the time, 2=Most times, 3=Sometimes, 4=Hardly ever, 5=Never, 6=Never possible\*

\*This category captures whether the child is never in that particular situation. For example, for item 1 it is possible for the child to respond *I do not come home late*.

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**Cohort 3 Youth Interview: Scale documentation**

**SCALE: Neighborhood**

**ITEMS USED: ITEMS LABELED AS NEI##YR**

1. There are plenty of safe places to walk or spend time outdoors in my neighborhood.
2. Every few weeks, some kid in my neighborhood gets beat-up or mugged.
3. Every few weeks, some adult gets beat-up or mugged in my neighborhood.
4. I have seen people using or selling drugs in my neighborhood.
5. In the morning or later in the day, I often see drunk people on the street in my neighborhood.
6. Most adults in my neighborhood respect the law.
7. I feel safe when I walk around my neighborhood by myself during the day.
8. The people who live in my neighborhood often damage or steal each other's property.

9. I feel safe when I walk around my neighborhood by myself at night.
10. In my neighborhood, the people with the most money are the drug dealers.

**ITEM CODING:**

Items: 1-10: 1=Not at all true, 2=A little true, 3=Sort of true, 4=Very true

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**Cohort 3 Youth Interview: Scale documentation**

**SCALE: Praise (P= Parent, T=Teacher); ITEMS LABELED AS PRS##YR**

**During the past three months,**

1. How often have parents fussed at you or complained about the grades you received at school? **P**
2. How often have your parents punished you--taken away privileges or grounded-- you because of the grades you received at school? **P**
3. How often have parents warned you that they would punish you—take away privileges or ground you-- if your grades did not improve? **P**
4. How often have your parents praised you for your grades at school? **P**
5. How often have your parents given you extra privileges—like getting to stay up late or go out to see a movie or other rewards because of your grades at school? **P**
- 5a *How often have your parents told others that you are doing well in your studies at school? By studies, we mean English, Math, and Science.* **P**
6. How often have your teachers fussed at you or complained about the grades you received at school? **T**
7. How often have your teachers take away privileges because of the grades you received at school? **T**
8. How often have your teachers warned you that they would punish you--take away privileges or ground you-- if your grades did not improve? **T**
9. How often have your teachers praised you for your grades at school? **T**

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|-------------|---|----------|
| 10.         | How often have your teachers given you extra privileges or other rewards because of your grades at school?  | <b>T</b> |
| <i>10a.</i> | <i>How often have your teachers told your parents, other teachers, or your classmates that you are doing well in your studies at school.</i>                      | <b>T</b> |
| 11.         | How often have parents fussed at you or complained about your behavior at home school?  | <b>P</b> |
| 12.         | How often have your parents punished you--taken away privileges or grounded-- you because of your behavior at home or at school?                                  | <b>P</b> |
| 13.         | How often have parents warned you that they would punish you—take away privileges or ground you-- if your behavior did not improve?                               | <b>P</b> |
| 14.         | How often have your parents praised you for your behavior at home or school?  | <b>P</b> |
| 15.         | How often have your parents given you extra privileges—like getting to stay up late or go out to see a movie or other rewards because of your behavior at school? | <b>P</b> |
| <i>15a.</i> | <i>How often have your parents told others that you are well-behaved at home or at school?</i>  | <b>P</b> |
| 16.         | How often have your teachers fussed at you or complained about your behavior at school?   | <b>T</b> |
| 17.         | How often have your teachers punished you sent you to the principals office gave you detention or got you suspended-- because of your behavior at school?         | <b>T</b> |
| 18.         | How often have your teachers warned you that they would punish you if your behavior did not improve?  | <b>T</b> |
| 19.         | How often have your teachers praised you for your behavior at school?   | <b>T</b> |
| 20.         | How often have your teachers given you extra privileges because of your behavior at school?   | <b>T</b> |
| <i>20a.</i> | <i>How often have your teachers told your parents, other teachers, or your classmates that you are well-behaved at school?</i>                                    | <b>T</b> |

**ITEM CODING:**

Items: 1=All of the time, 2=Most times, 3=Sometimes, 4=Hardly ever, 5=Never

\*Italicized items added in 2001

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**Cohort 3 Youth Interview: Scale documentation**

**SCALE: Peer Pressure (2000-2005)**

**QUESTIONS USED: ITEMS LABELED AS PPRESYR#**

1. Offered you a cigarette to smoke, but you said you did not want any, how likely is it that they would get down on you
2. Offered you a alcohol, but you said you did not want any, how likely is it that they would get down on you
3. Offered you drugs, but you said you did not want any, how likely is it that they would get down on you

**QUESTION CODING:**

Items: 1= Very likely, 2= Likely, 3= Some what likely, 4= Not at all likely

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**Cohort 3 Youth Interview: Scale documentation**

**SCALE: Activities and Hobbies (2000-2005)**

**ITEMS USED: ITEMS LABELED AS ACT##YR**

1. Do you belong to any clubs or organizations at school or in your neighborhood-like the student council, school band, or the Scouts or Boys and Girls clubs?
  - 1a. Compared to other young people your age, how much time do you spend in club activities?
2. Are you a member of a sports team at school or in your neighborhood?
  - 2a. Compared to other young people your age, how much time do you spend in sports activities?
3. Do you have any hobbies or special skills or talents?

- 3. *Do you have any special skills or talents?*
- 3a. Compared to other young people your age, how much time do you spend in (hobbies/these activities)?
- 4. *Do you have any hobbies----like listening to music, playing video games, collecting trading cards or stamps?*
- 4a. *Compared to other young people your age, how much time do you spend in (hobbies/these activities)?*

Italicized items added in 2001.

**ITEM CODING:**

Items 1, 2, 3, 4: 1= Yes, 2= No

Items 1a, 2a, 3a, 4a : 1= Less than average, 2= Average, 3 =More than average

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**Cohort 3 Youth Interview: Scale documentation**

**SCALE: Racism (2000-2003, 2005)**

**QUESTIONS USED: ITEMS LABELED AS RACE#YR**

- 1. How often have you or a family member been ignored, overlooked, or not given service in a restaurant or store because of your race?
- 2. How often have you or a family member been treated rudely or disrespectfully because of your race?
- 3. How often have others reacted to you as if they were afraid or scared because of your race?
- 4. How often have you or a family member been watched or followed while in public places, like stores or restaurants, because of your race?
- 5. How often have you or a family member been treated as if you were stupid or talked down to because of your race?



6. How often have you or a family member been insulted or called a name because of your race?
7. How often have you been excluded (left out) from a group activity (game, party, or social event) because of your race?

**QUESTION CODING:**

Items 1-7: 1= Less than once a year, 2= A few times a year, 3= About once a month, 4= A few times a month, 5= Once a week or more.

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**SCALE: Anxiety Sensitivity (2001-2002)**

**QUESTIONS USED: ITEMS LABELED AS ASI#YR**

**Now I am going to read you a sentence and then I want you tell me how well the sentence describes you:**

1	It is important to me not to appear nervous
2	When I cannot keep my mind on a task, I worry that I might be going crazy
3	It scares me when I feel “shaky” (trembling)
4	It scares me when I feel like I will faint
5	It is important to me to stay in control of my emotions
6	It scares me when my heart beats rapidly
7	It embarrasses me when I when my stomach growls
8	It scares me when I am nauseous
9	When I notice that my heart is beating rapidly, I worry that I might have a heart attack
10	It scares me when I am short of breath
11	When my stomach is upset, I worry that I might be seriously ill
12	It scares me when I am unable to keep my mind on a task
13	Other people notice when I feel shaky
14	Unusual body sensations scare me
15	When I am nervous, I worry that I might be mentally ill

16	It scares me when I am nervous
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**QUESTION CODING:**

Items 1-16: 1=Not at all, 2=Very little, 3= A little, 4=Some, 5= Pretty Much, 6= Very Much

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**SCALE: Reward and Inhibition**

**QUESTIONS USED: ITEMS LABELED AS RT#YR**

1	If I think something unpleasant is going to happen I usually get pretty worked up
2	I worry about making mistakes
3	Criticism or scolding hurts me quite a bit
4	I feel pretty worried or upset when I think or know somebody is angry at me
5	Even if something bad is about to happen to me, I rarely experience fear or nervousness
6	I feel worried when I think I have done poorly at something
7	I have very few fears compared to my friends
8	When I get something I want, I feel excited and energized
9	When I am doing well at something, I love to keep at it
10	When good things happen to me, it affects me strongly
11	It would excite me to win a contest
12	When I see an opportunity for something I like, I get excited right away
13	When I want something, I usually go all out to get it
14	I go out of my way to get things I want
15	If I see a chance to get something I want, I move on it right away
16	When I go after something I use a no holds barred approach
17	I will often do things for no other reason than that they might be fun
18	I crave excitement and new sensations
19	I am always willing to try something new if I think it will be fun
20	I often act on the spur of the moment

**QUESTION CODING:**

Items 1-20: 1=Not at all, 2=A little true, 3= Sort of true, 4=Very true

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**SCALE: Violent Events - Victim**

**QUESTIONS USED: ITEMS LABELED AS VC#YR**

VC4A10	During the past year, did someone shoot you with a gun?
VC4AA10	How many times did this happen in the past year?
VC5A10	During the past year, did someone stab or cut you with a knife or razor or some other sharp object?
VC5AB10	Was this besides the time you were shot?
VC5AA10	How many times did this happen in the past year?
VC7A10	During the past year, were you beaten up?
VC7AA10	How many times did this happen in the past year?
VC6A10	During the past year, were you robbed or mugged?
VC61A10	Was this besides the time you were shot?
VC61B10	How many times did this happen in the past year?
VC62A10	Was this besides the time you were stabbed or cut?
VC62B10	How many times did this happen in the past year?
VC63A10	Was this besides the time you were beaten up?
VC63B10	How many times did this happen in the past year?
VC10A10	During the past year, did someone pull a gun on you?
VC10B10	Was this besides the time you were shot?
VC10C10	How many times did this happen in the past year?
VC9A10	During the past year, did someone pull a knife on you or some other sharp weapon or object like a razor or broken bottle?
VC9AA10	Was this besides the time you were stabbed or cut?
VC9AB10	How many times did this happen in the past year?
VC1A10	During the past year, did someone threaten to kill you?
VC1A110	Was this besides the time you were shot?
VC1B110	How many times did this happen in the past year?
VC1A210	Was this besides the time you were stabbed or cut?
VC1B210	How many times did this happen in the past year?
VC1A310	Was this besides the time you were beaten up?
VC1B310	How many times did this happen in the past year?
VC1A410	Was this besides the time you were robbed or mugged?
VC1B410	How many times did this happen in the past year?

VC2A10	During the past year, did someone threaten to beat you up?
VC2AA10	Was this besides the time you were beaten up?
VC2AB10	How many times did this happen in the past year?
VC3A10	During the past year, did someone chase you to beat you up, rob or mug you, or shoot or stab you?
VC3A110	Was this besides the time you were shot?
VC3B110	How many times did this happen in the past year?
VC3A210	Was this besides the time you were stabbed or cut?
VC3B210	How many times did this happen in the past year?
VC3A310	Was this besides the time you were beaten up?
VC3B310	How many times did this happen in the past year?
VC3A410	Was this besides the time you were robbed or mugged?
VC3B410	How many times did this happen in the past year?
VC12A10	During the past year, did you hear gunshots in your neighborhood or at school?
VC12B10	Was this besides the time you were shot?
VC12C10	How many times did this happen in the past year?

**QUESTION CODING:**

Number of Times Variables: 0= NA, 1=Once, 2= Twice, 3= 3-5 times, 4= 6-9 times, 5 =10 or more times

Others: 1= Yes, 2= No

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**SCALE: Violent Events - Witness**

**QUESTIONS USED: ITEMS LABELED AS VS#YR**

VS11A10	During the past year, did you see someone get killed?
VS11B10	How many times did this happen in the past year?
VS11CA10	Was the person you saw get killed a family member
VS11CB10	Was the person you saw get killed a close friend
VS11CC10	Was the person you saw get killed someone you knew but not a family member or close friend
VS11CD10	Was the person you saw get killed a stranger
VS11CE10	Was the person you saw get killed none of the reasons listed
VS4A10	During the past year, did you see someone shoot someone else with a gun?
VS4B10	Was this besides the time you saw someone get killed?
VS4C10	How many times did this happen in the past year?
VS4DA10	Was the person you saw get shot a family member

VS4DB10	Was the person you saw get shot a close friend
VS4DC10	Was the person you saw get shot someone you knew but not a family member or close friend
VS4DD10	Was the person you saw get shot a stranger
VS4DE10	Was the person you saw get shot none of the reasons listed
VS5A10	During the past year, did you see someone get stabbed or cut with a knife or razor or some other sharp object?
VS5B10	Was this besides the time you saw someone get shot?
VS5C10	How many times did this happen in the past year?
VS5DA10	Was the person you saw get stabbed or cut a family member
VS5DB10	Was the person you saw get stabbed or cut a close friend
VS5DC10	Was the person you saw get stabbed or cut someone you knew but not a family member or close friend
VS5DD10	Was the person you saw get stabbed or cut a stranger
VS5DE10	Was the person you saw get stabbed or cut none of the reasons listed
VS5E10	Was this besides the time you saw someone get killed?
VS5F10	How many times did this happen in the past year?
VS5GA110	Was the person you saw get stabbed or cut a family member
VS5GB210	Was the person you saw get stabbed or cut a close friend
VS5GC310	Was the person you saw get stabbed or cut someone you knew but not a family member or close friend
VS5GD410	Was the person you saw get stabbed or cut a stranger
VS5GE510	Was the person you saw get stabbed or cut none of the reasons listed
VS7A10	During the past year, did you see someone get beaten up?
VS7B10	Was this besides the time you saw someone get killed?
VS7C10	How many times did this happen in the past year?
VS7DA10	Was the person you saw get beaten up a family member
VS7DB10	Was the person you saw get beaten up a close friend
VS7DC10	Was the person you saw get beaten up someone you knew but not a family member or close friend
VS7DD10	Was the person you saw get beaten up a stranger
VS7DE10	Was the person you saw get beaten up none of the reasons listed
VS6A10	During the past year, did you see someone get robbed or mugged?
VS6B10	Was this besides the time you saw someone get shot?
VS6C10	How many times did this happen in the past year?
VS6DA10	Was the person you saw get robbed or mugged a family member
VS6DB10	Was the person you saw get robbed or mugged a close friend
VS6DC10	Was the person you saw get robbed or mugged someone you knew but not a family member or close friend
VS6DD10	Was the person you saw get robbed or mugged a stranger
VS6DE10	Was the person you saw get robbed or mugged none of the reasons listed
VS6E10	Was this besides the time you saw someone get stabbed or cut?
VS6F10	How many times did this happen in the past year?
VS6GA10	Was the person you saw get robbed or mugged a family member
VS6GB10	Was the person you saw get robbed or mugged a close friend
VS6GC10	Was the person you saw get robbed or mugged someone you knew but not a family member

	or close friend
VS6GD10	Was the person you saw get robbed or mugged a stranger
VS6GE10	Was the person you saw get robbed or mugged none of the reasons listed
VS6H10	Was this besides the time you saw someone get beaten up?
VS6I10	How many times did this happen in the past year?
VS6JA10	Was the person you saw get robbed or mugged a family member
VS6JB10	Was the person you saw get robbed or mugged a close friend
VS6JC10	Was the person you saw get robbed or mugged someone you knew but not a family member or close friend
VS6JD10	Was the person you saw get robbed or mugged a stranger
VS6JE10	Was the person you saw get robbed or mugged none of the reasons listed
VS6K10	Was this besides the time you saw someone get killed?
VS6L10	How many times did this happen in the past year?
VS6MA10	Was the person you saw get robbed or mugged a family member
VS6MB10	Was the person you saw get robbed or mugged a close friend
VS6MC10	Was the person you saw get robbed or mugged someone you knew but not a family member or close friend
VS6MD10	Was the person you saw get robbed or mugged a stranger
VS6ME10	Was the person you saw get robbed or mugged none of the reasons listed
VS10A10	During the past year, did you see someone pull a gun on someone else?
VS10B10	Was this besides the time you saw someone get shot?
VS10C10	How many times did this happen in the past year?
VS10DA10	Was the person you saw get a gun pulled on them a family member
VS10DB10	Was the person you saw get a gun pulled on them a close friend
VS10DC10	Was the person you saw get a gun pulled on them someone you knew but not a family member or close friend
VS10DD10	Was the person you saw get a gun pulled on them a stranger
VS10DE10	Was the person you saw get a gun pulled on them none of the reasons listed
VS9A10	During the past year, did you see someone pull a knife or some other sharp object or weapon on someone else?
VS9B10	Was this besides the time you saw someone get stabbed or cut?
VS9CA10	How many times did this happen in the past year?
VS9DA10	Was the person you saw get a knife pulled on them a family member
VS9DB10	Was the person you saw get a knife pulled on them a close friend
VS9DC10	Was the person you saw get a knife pulled on them someone you knew but not a family member or close friend
VS9DD10	Was the person you saw get a knife pulled on them a stranger
VS9DE10	Was the person you saw get a knife pulled on them none of the reasons listed
VS1A10	During the past year, did you see or hear someone threaten to kill someone else?
VS1B10	Was this besides the time you saw someone get shot?
VS1C10	How many times did this happen in the past year?
VS1DA10	Was the person you saw or heard get threatened a family member
VS1DB10	Was the person you saw or heard get threatened a close friend
VS1DC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend

VS1DD10	Was the person you saw or heard get threatened a stranger
VS1DE10	Was the person you saw or heard get threatened none of the reasons listed
VS1E10	Was this besides the time you saw someone get stabbed or cut?
VS1F10	How many times did this happen in the past year?
VS1GA10	Was the person you saw or heard get threatened a family member
VS1GB10	Was the person you saw or heard get threatened a close friend
VS1GC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS1GD10	Was the person you saw or heard get threatened a stranger
VS1GE10	Was the person you saw or heard get threatened none of the reasons listed
VS1H10	Was this besides the time you saw someone get beaten up?
VS1I10	How many times did this happen in the past year?
VS1JA10	Was the person you saw or heard get threatened a family member
VS1JB10	Was the person you saw or heard get threatened a close friend
VS1JC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS1JD10	Was the person you saw or heard get threatened a stranger
VS1JE10	Was the person you saw or heard get threatened none of the reasons listed
VS1K10	Was this besides the time you saw someone get robbed or mugged?
VS1L10	How many times did this happen in the past year?
VS1MA10	Was the person you saw or heard get threatened a family member
VS1MB10	Was the person you saw or heard get threatened a close friend
VS1MC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS1MD10	Was the person you saw or heard get threatened a stranger
VS1ME10	Was the person you saw or heard get threatened none of the reasons listed
VS1N10	Was this besides the time you saw someone get killed?
VS1O10	How many times did this happen in the past year?
VS1PA10	Was the person you saw or heard get threatened a family member
VS1PB10	Was the person you saw or heard get threatened a close friend
VS1PC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS1PD10	Was the person you saw or heard get threatened a stranger
VS1PE10	Was the person you saw or heard get threatened none of the reasons listed
VS2A10	During the past year, did you see or hear someone threaten to beat up someone else?
VS2B10	Was this besides the time you saw someone get beaten up?
VS2C10	How many times did this happen in the past year?
VS2DA10	Was the person you saw or heard get threatened a family member
VS2DB10	Was the person you saw or heard get threatened a close friend
VS2DC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS2DD10	Was the person you saw or heard get threatened a stranger
VS2DE10	Was the person you saw or heard get threatened none of the reasons listed
VS2E10	Was this besides the time you saw someone get killed?
VS2F10	How many times did this happen in the past year?

VS2GA10	Was the person you saw or heard get threatened a family member
VS2GB10	Was the person you saw or heard get threatened a close friend
VS2GC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS2GD10	Was the person you saw or heard get threatened a stranger
VS2GE10	Was the person you saw or heard get threatened none of the reasons listed
VS3A10	During the past year, did you see someone chase someone else to beat them up, rob or mug them, or shoot or stab them?
VS3B10	Was this besides the time you saw someone get shot?
VS3C10	How many times did this happen in the past year?
VS3DA10	Was the person you saw or heard get threatened a family member
VS3DB10	Was the person you saw or heard get threatened a close friend
VS3DC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS3DD10	Was the person you saw or heard get threatened a stranger
VS3DE10	Was the person you saw or heard get threatened none of the reasons listed
VS3E10	Was this besides the time you saw someone get stabbed or cut?
VS3F10	How many times did this happen in the past year?
VS3GA10	Was the person you saw or heard get threatened a family member
VS3GB10	Was the person you saw or heard get threatened a close friend
VS3GC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS3GD10	Was the person you saw or heard get threatened a stranger
VS3GE10	Was the person you saw or heard get threatened none of the reasons listed
VS3H10	Was this besides the time you saw someone get beaten up?
VS3I10	How many times did this happen in the past year?
VS3JA10	Was the person you saw or heard get threatened a family member
VS3JB10	Was the person you saw or heard get threatened a close friend
VS3JC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS3JD10	Was the person you saw or heard get threatened a stranger
VS3JE10	Was the person you saw or heard get threatened none of the reasons listed
VS3K10	Was this besides the time you saw someone get robbed or mugged?
VS3L10	How many times did this happen in the past year?
VS3MA10	Was the person you saw or heard get threatened a family member
VS3MB10	Was the person you saw or heard get threatened a close friend
VS3MC10	Was the person you saw or heard get threatened someone you knew but not a family member or close friend
VS3MD10	Was the person you saw or heard get threatened a stranger
VS3ME10	Was the person you saw or heard get threatened none of the reasons listed
VS3N10	Was this besides the time you saw someone get killed?
VS3O10	How many times did this happen in the past year?
VS3PA10	Was the person you saw or heard get threatened a family member
VS3PB10	Was the person you saw or heard get threatened a close friend
VS3PC10	Was the person you saw or heard get threatened someone you knew but not a family member



	or close friend
VS3PD10	Was the person you saw or heard get threatened a stranger
VS3PE10	Was the person you saw or heard get threatened none of the reasons listed

**QUESTION CODING:**

Person Variables\*: 1= Family Member, 2= Close Friend, 3= Someone you knew, 4= Stranger, 5= None of the above.

Number of Times Variables: 0= NA, 1=Once, 2= Twice, 3= 3-5 times, 4= 6-9 times, 5 =10 or more times

Others: 1= Yes, 2= No

\*Note: Person variables were code all that apply. Variables need to be combined for complete response.