

2015 NSDUH, Supporting Statement  
Attachment R – Showcard Booklet

# **2015 National Survey on Drug Use and Health**

## **SHOWCARD BOOKLET**

**RTI INTERNATIONAL**

## RTI Telephone Numbers

Tech Support ..... (877) 419-1768

Headway ..... (800) 208-7043

To reach other RTI staff, call 1-800-848-4079 then ask the operator for the employee with whom you wish to speak.

## Website Addresses

NSDUH ..... <http://nsduhweb.rti.org>

RTI ..... <http://www.rti.org>

SAMHSA ..... <http://www.samhsa.gov>

## Interview Troubleshooting Guide

### **To suppress a Hard Error involving two questions:**

- **Read the message box carefully.**
  - If the first question listed is the one to be changed, press [Enter].
  - If the second question listed is the one to be changed, press the down arrow to highlight the second question, then press [Enter].
  - In the rare event that neither question needs to be changed and the data entered are correct, press [Tab] until the Suppress box is highlighted and press [Enter], then provide an explanation for why the error was suppressed.

### **To edit a lengthy response:**

- With the cursor in the answer field, press the Insert key [Ins]. Use the arrow keys to move to the precise place within the answer field to edit or add to existing text. If necessary, record additional text in a comment box, by pressing [F8].

### **To correct range errors:**

- For numerical questions, read the box carefully, making note of the expected range, if provided in the message. Press [ENTER] to clear the error, then type a new answer within range.
- For pre-coded questions, read the message box carefully, then press [ENTER] to clear the error. Type a new answer that corresponds with a pre-coded answer choice on the screen.
- For multiple choice questions (Code All That Apply), read the message box carefully, then press [ENTER] to clear the error. Type a new answer that corresponds with a pre-coded answer choice on the screen, pressing the [Space bar] between each response as needed.

### **To correct date errors:**

- Review the instructions on the screen to determine the date format for the question. For "MM-DD-YYYY" format, the date must be entered with a 2-digit month and day and 4-digit year. For "MM-YYYY" format, the date must be entered with a 2-digit month and 4-digit year. Do not enter dashes or spaces—just the number including any leading zeros for month or day.

If an R needs assistance with an ACASI question, provide the corresponding steps above for the problem they are having. Take care not to view the screen while assisting the R, to ensure the confidentiality of their answers. For additional details on entering CAI responses and troubleshooting error messages, refer to Chapter 5 in your FI Computer Manual.

**UNITED STATES DEPARTMENT OF HEALTH & HUMAN SERVICES**

ROCKVILLE, MD 20857



[NAME County/Parish/District] Resident at:  
1234 Main Street  
Anywhere, XX 12345

Dear [NAME County/Parish/District] Resident:

The U.S. Department of Health and Human Services is conducting a study called the National Survey on Drug Use and Health. This study asks questions about use or non-use of alcohol, tobacco and other substances. The study also asks about mental health and other health-related topics relevant for all people. Since 1971, this information has been used by local, state and national agencies for planning and providing treatment and prevention programs.

Your address was randomly chosen, through scientific methods, along with almost 200,000 others across the country. RTI International, a nonprofit organization, was selected to conduct this study. Soon, an RTI interviewer will be in your neighborhood to give you more information. The interviewer will carry an identification card like the example shown below.

First, the interviewer will ask a few general questions. Then the interviewer may ask one or two members of your household to complete the full interview. It is possible no one will be chosen to be interviewed. **If anyone is chosen and completes the full interview, he or she will receive \$30 in cash.**

By Federal law\*, the answers you give will be kept confidential and will be used only for statistical purposes.

Please share this information with any others in your household. Feel free to ask the interviewer any questions you have about this study. More information is also available on the study website at: <http://nsduhweb.rti.org> or you may contact us at 1-800-848-4079.

Your help is very important to this study's success. Thank you for your cooperation.

Sincerely,

Joel Kennet, Ph.D.  
National Study Director, DHHS

Ilona S. Johnson  
National Field Director, RTI



You will be contacted by: \_\_\_\_\_  
Interviewer Name

\*Confidentiality protected by the Confidential Information Protection and Statistical Efficiency Act of 2002 (PL 107-347)  
Authorized by the U.S. Congress as part of Section 505 of the Public Health Service Act (42 USC 290aa4)  
Approved by Office of Management and Budget (OMB Approval No. 0930-0110)



## Study Description

Your address is one of several in this area randomly chosen for the 2015 National Survey on Drug Use and Health. This study, sponsored by the U.S. Department of Health and Human Services, collects information for research and program planning by asking about:

- tobacco, alcohol, and drug use or non-use,
- knowledge and attitudes about drugs,
- mental health, and
- other health issues.

You cannot be identified through any information you give us. Your name and address will never be connected to your answers. Also, federal law requires us to keep all of your answers confidential. Any data that you provide will only be used by authorized personnel for statistical purposes according to the Confidential Information Protection and Statistical Efficiency Act of 2002.

The screening questions take just a few minutes. If anyone is chosen, the interview will take about an hour. You can refuse to answer any questions, and you can quit at any time. **Each person who is chosen and completes the interview will receive \$30 in cash.**

If you have questions about the study, call the Project Representative at 1-800-848-4079. If you have questions about your rights as a study participant, call RTI's Office of Research Protection at 1-866-214-2043 (a toll-free number). You can also visit our project website: <http://nsduhweb.rti.org/> for more information.

Thank you for your cooperation and time.

Peter Tice, Ph.D.

Project Officer

Center for Behavioral Health Statistics and Quality

Substance Abuse and Mental Health Services Administration (SAMHSA)

U.S. Department of Health and Human Services

Your confidentiality is protected by the Confidential Information Protection and Statistical Efficiency Act of 2002 (CIPSEA, PL 107-347). Any project staff or authorized data user who violates CIPSEA may be subject to a jail term of up to 5 years, a fine of up to \$250,000, or both.

## INTRODUCTION AND INFORMED CONSENT FOR INTERVIEW RESPONDENTS AGE 18`+

**INTRODUCE YOURSELF AND STUDY AS NECESSARY:** Hello, I'm \_\_\_\_\_,  
and I'm working on a nationwide study sponsored by the U.S. Public Health  
Service. You should have received a letter about this study. (SHOW LEAD  
LETTER, IF NECESSARY.)

### READ THE BOXED INFORMATION BELOW BEFORE STARTING EVERY INTERVIEW

This year, we are interviewing about 70,000 people across the nation. You have been randomly chosen to take part. You will represent over 4,500 other people who are similar to you. You may choose not to take part in this study, but no one else can take your place. We will give you \$30 when you finish the interview.

### **GIVE STUDY DESCRIPTION TO R IF YOU HAVE NOT ALREADY DONE SO.**

This study asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health issues. It takes about an hour. You will answer most of the questions on the computer, so I will not see your answers. We are only interested in the combined responses from all 70,000 people, not just one person's answers. This is why we do not ask for your name and we keep your answers separate from your address. RTI may contact you by phone or mail to ask a few questions about the quality of my work. This is why we ask for your phone number and current address at the end of the interview.

While the interview has some personal questions, federal law keeps your answers private. We hope that protecting your privacy will help you to give accurate answers. You can quit the interview at any time and you can refuse to answer any questions.

If it is all right with you, let's get started.

(Can we find a private place to complete the interview?)

# **INTRODUCTION AND INFORMED CONSENT FOR INTERVIEW RESPONDENTS AGE 12-17**

**FIRST, READ THE SCRIPT BELOW AND  
OBTAIN PERMISSION FROM THE PARENT/GUARDIAN**

Your (AGE) year-old child has been selected to be in this study. Your child's participation is voluntary. This interview asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health related issues. All of your child's answers will be confidential and used only for statistical purposes. Since your child will answer most of the questions on the computer, I will never see the answers, and you are not allowed to see them either. If it is all right with you, we'll get started.

(Can we find a private place to complete the interview?)

**ONCE PARENTAL PERMISSION HAS BEEN GIVEN, CONFIRM THE PARENT/GUARDIAN OR  
ANOTHER ADULT WILL BE PRESENT FOR THE DURATION OF THE INTERVIEW**

**THEN, READ THE BOXED INFORMATION BELOW BEFORE STARTING EVERY INTERVIEW  
WITH A 12-17 YEAR OLD**

This year, we are interviewing about 70,000 people across the nation. You have been randomly chosen to take part. You will represent over 1,000 young people in this country who are similar to you. You may choose not to take part in this study, but no one else can take your place. We will give you \$30 when you finish the interview.

**GIVE STUDY DESCRIPTION TO R IF YOU HAVE NOT ALREADY DONE SO.**

This study asks about tobacco, alcohol, and drug use or non-use, knowledge and attitudes about drugs, mental health, and other health issues. It takes about an hour. You will answer most of the questions on the computer, so I will not see your answers. Your answers will never be seen by either your parents or your school. We are only interested in the combined responses from all 70,000 people, not just one person's answers. This is why we do not ask for your name and we keep your answers separate from your address. RTI may contact you by phone or mail to ask a few questions about the quality of my work. This is why we ask for your phone number and current address at the end of the interview.

While the interview has some personal questions, federal law keeps your answers private. We hope that protecting your privacy will help you to give accurate answers. You can quit the interview at any time and you can refuse to answer any questions.

If it is all right with you, let's get started.

## SHOWCARD 1

- 1 MEXICAN, MEXICAN AMERICAN, MEXICANO  
OR CHICANO
- 2 PUERTO RICAN
- 3 CENTRAL OR SOUTH AMERICAN
- 4 CUBAN OR CUBAN AMERICAN
- 5 DOMINICAN (FROM DOMINICAN REPUBLIC)
- 6 SPANISH (FROM SPAIN)



## SHOWCARD 2

- 1 WHITE
- 2 BLACK OR AFRICAN AMERICAN
- 3 AMERICAN INDIAN OR ALASKA NATIVE  
(AMERICAN INDIAN INCLUDES NORTH AMERICAN,  
CENTRAL AMERICAN, AND SOUTH AMERICAN INDIANS)
- 4 NATIVE HAWAIIAN
- 5 GUAMANIAN OR CHAMORRO
- 6 SAMOAN
- 7 OTHER PACIFIC ISLANDER
- 8 ASIAN (INCLUDING: ASIAN INDIAN, CHINESE, FILIPINO,  
JAPANESE, KOREAN, AND VIETNAMESE)

## SHOWCARD 3

- 1 ASIAN INDIAN
- 2 CHINESE
- 3 FILIPINO
- 4 JAPANESE
- 5 KOREAN
- 6 VIETNAMESE

## SHOWCARD 4

- 1 SEPTEMBER 2001 OR LATER
- 2 AUGUST 1990 TO AUGUST 2001 (INCLUDING PERSIAN GULF WAR)
- 3 MAY 1975 TO JULY 1990
- 4 VIETNAM ERA (MARCH 1961 TO APRIL 1975)
- 5 FEBRUARY 1955 TO FEBRUARY 1961
- 6 KOREAN WAR (JULY 1950 TO JANUARY 1955)
- 7 JANUARY 1947 TO JUNE 1950
- 8 WORLD WAR II (DECEMBER 1941 TO DECEMBER 1946)
- 9 NOVEMBER 1941 OR EARLIER

## SHOWCARD 5

- 0 NO SCHOOLING COMPLETED
- 1 1<sup>ST</sup> GRADE COMPLETED
- 2 2<sup>ND</sup> GRADE COMPLETED
- 3 3<sup>RD</sup> GRADE COMPLETED
- 4 4<sup>TH</sup> GRADE COMPLETED
- 5 5<sup>TH</sup> GRADE COMPLETED
- 6 6<sup>TH</sup> GRADE COMPLETED
- 7 7<sup>TH</sup> GRADE COMPLETED
- 8 8<sup>TH</sup> GRADE COMPLETED
- 9 9<sup>TH</sup> GRADE COMPLETED
- 10 10<sup>TH</sup> GRADE COMPLETED
- 11 11<sup>TH</sup> GRADE COMPLETED
  
- 12 REGULAR HIGH SCHOOL DIPLOMA
- 13 12<sup>TH</sup> GRADE, NO DIPLOMA
- 14 GED CERTIFICATE OF HIGH SCHOOL COMPLETION
  
- 15 SOME COLLEGE CREDIT, BUT NO DEGREE
- 16 ASSOCIATE'S DEGREE (FOR EXAMPLE, AA, AS)
- 17 BACHELOR'S DEGREE (FOR EXAMPLE, BA, BS)
  
- 18 MASTER'S DEGREE (FOR EXAMPLE, MA, MS, MENG, M. ED, MSW, MBA)
- 19 DOCTORATE DEGREE (FOR EXAMPLE, PHD, EDD)
- 20 PROFESSIONAL DEGREE BEYOND A BACHELOR'S DEGREE (FOR EXAMPLE, MD, DDS, DVM, LLB, JD)

## SHOWCARD 6

- 1 SELF
- 2 FATHER (INCLUDES STEP, FOSTER, ADOPTIVE)
- 3 SON (INCLUDES STEP, FOSTER, ADOPTIVE)
- 4 BROTHER (INCLUDES HALF, STEP, FOSTER, ADOPTIVE)
- 5 HUSBAND
- 6 UNMARRIED PARTNER
- 7 HOUSEMATE OR ROOMMATE
- 8 SON-IN-LAW
- 9 GRANDSON
- 10 FATHER-IN-LAW
- 11 GRANDFATHER
- 12 BOARDER OR ROOMER
- 13 OTHER RELATIVE
- 14 OTHER NON-RELATIVE

## SHOWCARD 7

- 1 SELF
- 2 MOTHER (INCLUDES STEP, FOSTER, ADOPTIVE)
- 3 DAUGHTER (INCLUDES STEP, FOSTER, ADOPTIVE)
- 4 SISTER (INCLUDES HALF, STEP, FOSTER, ADOPTIVE)
- 5 WIFE
- 6 UNMARRIED PARTNER
- 7 HOUSEMATE OR ROOMMATE
- 8 DAUGHTER-IN-LAW
- 9 GRANDDAUGHTER
- 10 MOTHER-IN-LAW
- 11 GRANDMOTHER
- 12 BOARDER OR ROOMER
- 13 OTHER RELATIVE
- 14 OTHER NON-RELATIVE

## SHOWCARD 8

- 1 PERSON IN FAMILY WITH HEALTH INSURANCE LOST JOB OR CHANGED EMPLOYERS
- 2 LOST MEDICAID OR MEDICAL ASSISTANCE COVERAGE BECAUSE OF NEW JOB OR INCREASE IN INCOME
- 3 LOST MEDICAID OR MEDICAL ASSISTANCE COVERAGE FOR SOME OTHER REASON
- 4 COST IS TOO HIGH / CAN'T AFFORD PREMIUMS
- 5 BECAME INELIGIBLE BECAUSE OF AGE OR LEAVING SCHOOL
- 6 EMPLOYER DOES NOT OFFER COVERAGE, OR NOT ELIGIBLE FOR COVERAGE
- 7 GOT DIVORCED OR SEPARATED FROM PERSON WITH INSURANCE
- 8 DEATH OF SPOUSE OR PARENT
- 9 INSURANCE COMPANY REFUSED COVERAGE
- 10 DON'T NEED IT
- 11 RECEIVED MEDICAID OR MEDICAL INSURANCE ONLY WHILE PREGNANT

## SHOWCARD 9

- 1 COST IS TOO HIGH / CAN'T AFFORD PREMIUMS
- 2 EMPLOYER DOES NOT OFFER COVERAGE, OR  
NOT ELIGIBLE FOR COVERAGE
- 3 INSURANCE COMPANY REFUSED COVERAGE
- 4 DON'T NEED IT



## SHOWCARD 10

INCOME EARNED AT A JOB OR BUSINESS  
RETIREMENT, DISABILITY, OR SURVIVOR PENSION

UNEMPLOYMENT OR WORKER'S COMPENSATION

VETERAN'S ADMINISTRATION PAYMENTS

CHILD SUPPORT

ALIMONY

INTEREST INCOME

DIVIDENDS FROM STOCKS OR MUTUAL FUNDS

INCOME FROM RENTAL PROPERTIES, ROYALTIES,  
ESTATES OR TRUSTS

## SHOWCARD 11

- 1 LESS THAN \$1,000 (INCLUDING LOSS)
- 2 \$1,000 - \$1,999
- 3 \$2,000 - \$2,999
- 4 \$3,000 - \$3,999
- 5 \$4,000 - \$4,999
- 6 \$5,000 - \$5,999
- 7 \$6,000 - \$6,999
- 8 \$7,000 - \$7,999
- 9 \$8,000 - \$8,999
- 10 \$9,000 - \$9,999
- 11 \$10,000 - \$10,999
- 12 \$11,000 - \$11,999
- 13 \$12,000 - \$12,999
- 14 \$13,000 - \$13,999
- 15 \$14,000 - \$14,999
- 16 \$15,000 - \$15,999
- 17 \$16,000 - \$16,999
- 18 \$17,000 - \$17,999
- 19 \$18,000 - \$18,999
- 20 \$19,000 - \$19,999

## SHOWCARD 12

- 21 \$20,000 - \$24,999
- 22 \$25,000 - \$29,999
- 23 \$30,000 - \$34,999
- 24 \$35,000 - \$39,999
- 25 \$40,000 - \$44,999
- 26 \$45,000 - \$49,999
- 27 \$50,000 - \$74,999
- 28 \$75,000 - \$99,999
- 29 \$100,000 - \$149,999
- 30 \$150,000 OR MORE

# *2015 National Survey on Drug Use and Health*

## **Summary of the Questionnaire**

To know more about the *National Survey on Drug Use and Health* and the types of questions the interviewer will ask, included below is a summary of each section of the questionnaire. Keep in mind that not all participants will see every question—the questions depend each person’s experiences. Furthermore, participants can always refuse to answer any questions during the interview.

### **Demographics**

This section, administered by the interviewer, consists of questions about the participant such as his/her date of birth, race, educational background, and health status.

#### *Sample Questions:*

- ▶ What is the highest grade or year of school you have **completed**?
- ▶ Would you say your health in general is excellent, very good, good, fair, or poor?

### **Computer Practice Session**

In this section, the interviewer shows the participant how to use the laptop computer and lets him/her practice using a short practice session.

### **Cigarettes, Alcohol and Illicit Drugs**

For most of the rest of the interview, the participant answers questions by listening to the questions over headphones and/or reading the questions on the computer screen, and then entering responses using the computer’s keyboard. The participant answers these questions in private, although the interviewer is available to help with any problems using the computer. During this part of the interview, only the participant can hear and see the questions and see his/her responses.

#### Tobacco Products and Alcohol

These sections include questions about whether and how often participants have used cigarettes, smokeless tobacco, cigars, pipe tobacco, and alcoholic beverages such as beer, wine, or liquor.

#### *Sample Questions:*

- ▶ Have you **ever** smoked part or all of a cigarette?
- ▶ How old were you the **first time** you used “smokeless” tobacco?
- ▶ What is your **best estimate** of the number of days you drank alcohol during the past 30 days?

#### Illicit Drugs

The next sections ask about the participant’s use or non-use of marijuana, heroin, cocaine, hallucinogens, inhalants, methamphetamine, and prescription pain relievers, tranquilizers, stimulants, and sedatives. Questions about drug dependence and drug treatment are also included in these sections.

#### *Sample Questions:*

- ▶ Have you **ever**, even once, used marijuana or hashish?
- ▶ How much do people risk harming themselves physically and in other ways when they use **cocaine once a month**?

### **Adult Social Environment and Mental Health**

Participants aged 18 and older receive questions about their social experiences, including their opinions about drug use, and in some cases, their experiences as a parent. Mental health questions cover such topics as depression and treatment for mental health problems.

#### *Sample Questions:*

- ▶ How do you feel about **adults** trying marijuana or hashish once or twice?
- ▶ During the past 12 months, was there any time when you **needed** mental health treatment or counseling for yourself but **didn't get it**?
- ▶ Have you ever in your life had a period of time lasting several days or longer when **most of the day** you felt **sad, empty, or depressed**?

### **Youth Experiences and Mental Health**

Youth aged 12-17 participating in the survey are also asked questions about their social experiences such as: perceptions about the risks of using certain drugs; whether getting drugs is difficult or easy; feelings about school and peers; and involvement in clubs, sports, and other extracurricular activities. The mental health questions cover such topics as depression and treatment for mental health problems.

#### *Sample Questions:*

- ▶ **During the past 12 months**, in how many different kinds of school-based activities, such as team sports, cheerleading, choir, band, student government, or clubs, have you participated?
- ▶ Have you ever in your life had a period of time lasting several days or longer when **most of the day** you felt **sad, empty, or depressed**?
- ▶ During the past 12 months, did you receive treatment or counseling from a **private therapist, psychologist, psychiatrist, social worker, or counselor** for emotional or behavioral problems that were **not** caused by alcohol or drugs?

### **Health Insurance and Demographic Information**

In this section, the participant answers questions about school and work. Then the laptop is handed back to the interviewer, who asks questions about health insurance and family income information to help in analyzing the data. If necessary, a knowledgeable adult in the household may be asked to help participants answer some of these questions.

The answers to these questions increase the government's knowledge about health care, especially as it may relate to drug use or treatment. This information helps in planning health care services and finding ways to lower the costs of care.

#### *Sample Questions:*

- ▶ How many hours did you work **last week** at all jobs or businesses?
- ▶ **Before taxes and other deductions**, was the total **combined family** income during 2014 more or less than 20,000 dollars?
- ▶ Are you currently covered by private health insurance?

The interviewer is available to answer any additional questions about the National Survey on Drug Use and Health questionnaire.

*Thank you for your cooperation and help!*

# Enumeration Rules

## PERSONS WHO ARE NOT TO BE INCLUDED ON ROSTER:

- Persons under the age of 12 at the time of screening (do count them in the total SDU Members number)
- Persons who are institutionalized at the time of screening
- Persons who will not live at the SDU for most of the time during the quarter

## PERSONS WHO ARE TO BE INCLUDED ON ROSTER:

- Persons who will live at the SDU for most of the time during the quarter (provided they are 12 or older and not institutionalized at the time of screening)

## PERSONS ON ACTIVE DUTY IN THE UNITED STATES' MILITARY/ARMED FORCES:

- Active duty personnel who live at the SDU for half or more of the quarter will be rostered, but then will be made ineligible by the Tablet prior to selection

## KNOWN CITIZENS OF FOREIGN COUNTRIES:

- **DO NOT INCLUDE:** — citizens of foreign countries living on the premises of an embassy, ministry, legation, chancellery, or consulate  
— citizens of foreign countries who consider themselves to be just visiting or traveling in the United States (regardless of the length of time they will be staying at the SDU)
- **DO INCLUDE** citizens of foreign countries who are not living on the premises of an embassy, ministry, etc., but who are living/studying/working in the United States and who will be living at the SDU for most of the time during the quarter.

## Steps to Maximize Data Quality

This summary is not a replacement for information contained in your FI Manual, but is a listing of some of the most crucial protocols that must be followed.

Note the FI Manual pages referenced with each key point. Keep in mind these protocols are not the only steps necessary to follow. Use your FI Manual, Field Supervisor, and project e-mails for information on additional steps to maximize data quality.

**BE SURE YOU FOLLOW EACH OF THESE PROTOCOLS AT ALL TIMES.**

### SCREENING

- **Use your segment maps**, and not just the address, to locate your selected DUs. [FI Manual p. 3-21]
- **Display your ID badge** when knocking on every door in your segment. [FI Manual pgs. 4-14 and 5-1]
- **Complete screenings in-person** with a resident who is 18 or older. The only exception is in the case of a youth who is 17 years old and living independently without a parent or guardian residing in the home. [FI Manual p. 4-15]
- **Give a Study Description to each SR.** [FI Manual p. 4-16 and 4-17]
- Obtain complete and accurate screening information, **reading the screening questions verbatim to the SR** and immediately entering responses into the Tablet. The only missing screening data should be a result of the respondent's refusal or inability to provide the information. [FI Manual p. 6-15]

### INTERVIEW

- **Read the CAI Introduction and Informed Consent from the Showcard Booklet** to the R (choosing the appropriate version based on the respondent's age) before beginning the interview. Before speaking with a selected minor, you must obtain verbal parental permission. **If the R was not the SR, give him/her a Study Description.** [FI Manual pgs. 7-22, 7-23 and 7-24]
- Make it apparent you are **completing the interview in a completely confidential and unbiased manner.** [FI Manual pgs. 2-6, 2-7 and 8-1]
- **Choose an interview location that gives the respondent privacy.** [FI Manual pgs. 7-27 and 7-28]

## **INTERVIEW, CONT.**

- **Do not rush the respondent.** Do not tell the respondent how to make the interview go faster. [FI Manual pgs. 8-2 and 8-3]
- Familiarize the R with the laptop and function keys by reading the provided script in the CAI Interview and **allow the R to successfully complete the Computer Practice on his or her own.** You must always explain, offer, AND plug in the headphones with each R. [FI Manual pgs. 8-17 through 8-20]
- **Read the interview questions exactly as they appear on the screen.** It is never acceptable to use your own words or ‘wing it’. Do not assume you know answers from a previous conversation, question, or interview. [FI Manual pgs. 8-2 and 8-3]
- **Hand the appropriate Showcard to the respondent** when instructed on the CAI screen. [FI Manual p. 8-13]
- Allow your respondents to complete the ACASI portion of the interview on their own. **Never read the questions in the ACASI portion out loud to the respondent.** In cases of extreme physical impairment, it may be necessary to enter the answers into the computer for the ACASI questions, but always allow the ACASI recording to ‘read’ the questions and answer categories via the headphones. [FI Manual p. 8-24]
- **Have the respondent fill out the top portion of the Quality Control Form** and allow him or her to insert the form into the envelope and seal it. Mail the form within 24 hours of the interview. [FI Manual pgs. 8-26 through 8-27]
- Always protect the confidentiality of your respondents. **Never reveal a respondent’s answers to anyone,** including the respondent’s family members. Resist the temptation to reveal even positive information gleaned from an interview to parents or other household members. [FI Manual pgs. 2-6 through 2-8]



# Sampling Process Explanation

**Sample:** A representative part of a population that is studied to gain information about the whole population.

**NSDUH target population:** Civilian, non-institutional population aged 12 years or older residing within the 50 United States and the District of Columbia.

## **THE PROCESS:**

RTI statisticians draw a smaller sample of the target population designed to represent the population as a whole using probability sampling.

### **Step 1:**

Break each state into geographic areas, called **State Sampling Regions (SSRs)** using population estimates and housing unit counts from the Census Bureau.

- Number of SSRs is dependent on the population of the state, as shown in the table below.
- Each SSR within a state is expected to yield the same number of interviews. This means the more densely populated the area, the smaller the region.

State	SSRs	Approx. Int. per Segment	Total Segments
California	36	16	288
Texas, New York, and Florida	30	14	240
Illinois, Pennsylvania, Ohio, and Michigan	24	13	192
Georgia, North Carolina, New Jersey, and Virginia	15	13	120
Remaining 38 States and the District of Columbia	12	10	96

### **Step 2:**

Break each SSR up into **segments**.

- Scientifically selected to ensure the sample accurately represents the United States' population.
- Each area is assigned a "probability," or "chance," of being selected based on the Census population count. 8 segments selected within each SSR (2 per quarter of data collection).

### **Step 3:**

**Dwelling units (DUs)** within the segments are counted and listed, and recorded on the List of DUs or Group Quarters Listing Form.

### **Step 4:**

From the listed DUs, specific housing units (HUs) and group quarters units (GQUs) are randomly selected.

- Selected units are called sample dwelling units (**SDUs**) which you contact for screening and possible interviewing. Approximately 165,000 SDUs are randomly selected each **year**

### **Step 5:**

Either 0, 1, or 2 persons (**respondents**) are selected for the interview using the roster information entered into the Tablet during screening. Approximately 70,000 respondents are selected and complete the interview each year.

- Eligibility for interview is based only on the AGE of the SDU members
- All screening data are used by RTI statisticians

## **Analysis:**

"Sample Weighting" is used to determine how many people in the population each respondent represents.

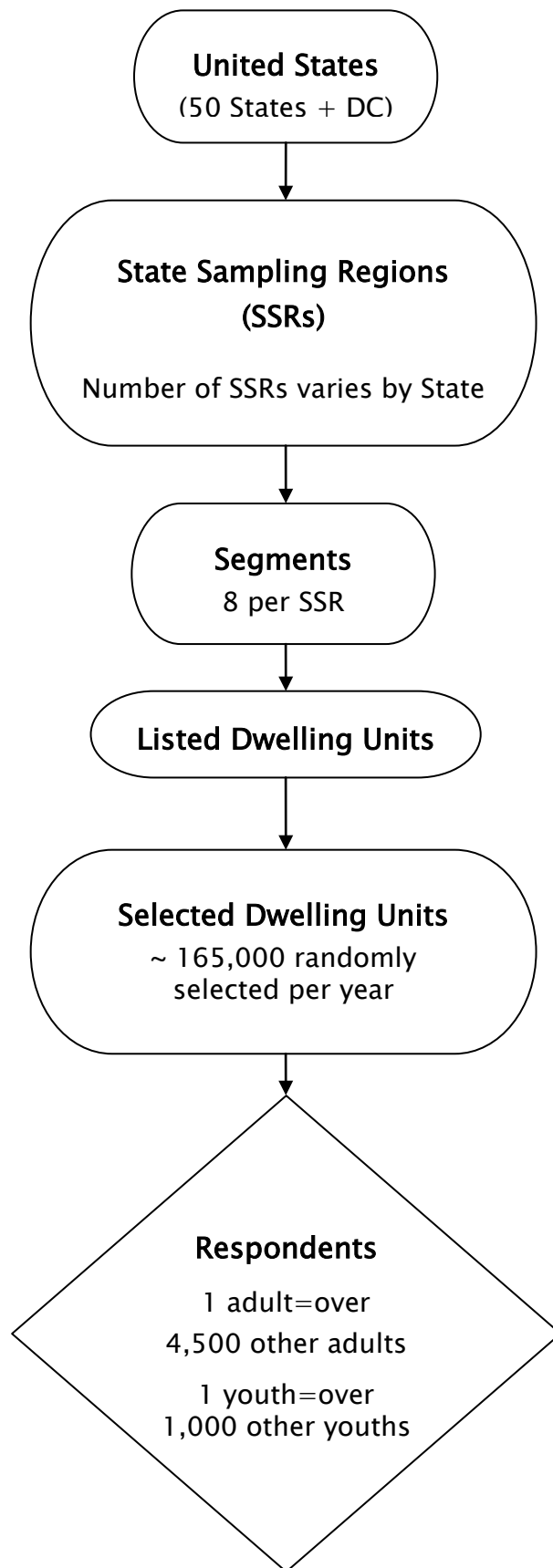
- 1 adult - represents over 4,500 other adults
- 1 youth - represents over 1,000 other youths

## **FIELD INTERVIEWER'S ROLE**

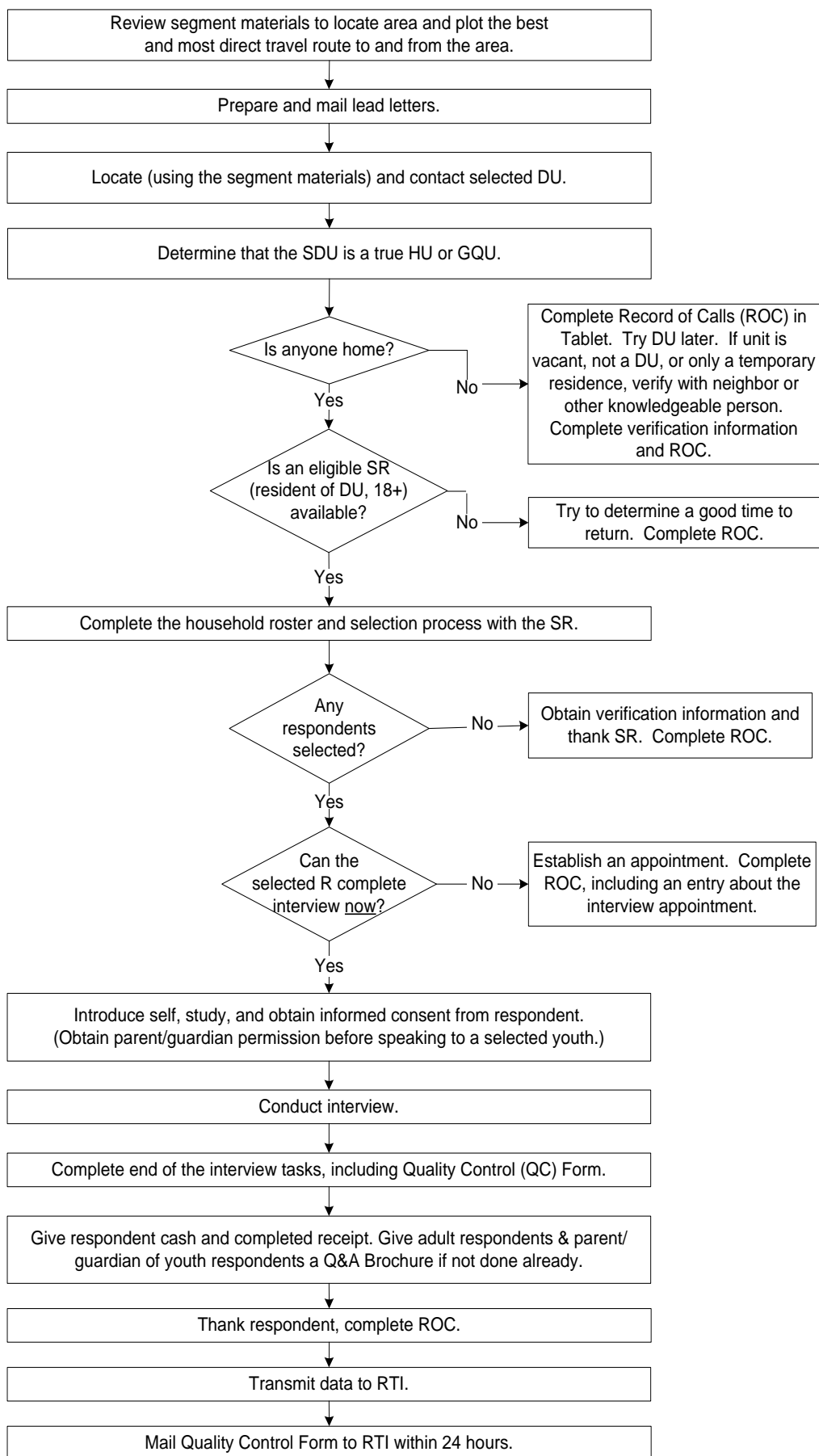
Maintain the integrity of the sample by:

- Using segment materials properly
- Following project procedures, including editing address and missed DU protocols
- Investigating discrepancies between the materials and what you actually see in the field
- Paying close attention to details

## Sampling Process Explanation *(continued)*



# Overview of the Screening and Interview Process



# **Screening and Interview Tasks**

When you work in the field, you will encounter a variety of situations:

## **Can't screen (i.e. no one home, vacant units, SR not available, etc.)**

- choose case from Select Case, tap Actions, Screen DU
- approach unit and discover you can't screen
- obtain verification information for codes 10, 13 and 18
- complete ROC to document situation

## **Screen only (codes 22, 25, 26, 30)**

- choose case from Select Case, tap Actions, Screen DU
- approach unit and obtain participation of eligible SR
- complete screening
- obtain verification information
- complete ROC

## **Screen, then interview (31, 32 and then 70)**

- choose case from Select Case, tap Actions, Screen DU
- approach unit and obtain participation of eligible SR
- complete screening
- obtain participation/informed consent of selected respondent(s) (and permission of parent/guardian if minor)
- prepare laptop and enter QuestID from Tablet
- conduct interview(s) with available selected respondent(s)
- perform end of interview steps by carefully following the instructions on the screen for the Quality Control Form and incentive procedures, providing a Q&A Brochure to each adult respondent and the parent/guardian of each youth respondent, if not done earlier
- complete ROC(s) in Tablet for screening and completed interview(s)
- mail completed Quality Control Form(s) to RTI within 24 hours

## **Screen, make appointment for interview (codes 31, 32 and then 50)**

- choose case from Select Case, tap Actions, Screen DU
- approach unit and obtain participation of eligible SR
- complete screening
- complete ROC for screening
- complete ROC to document appointment for each selected respondent
- prepare appointment card and give to each respondent

## **Interview only at appointment time or other follow-up contact**

- choose case from Select Case, review selections and roster
- obtain participation/informed consent of selected respondent(s) (and permission of parent/guardian if minor)
- prepare laptop and enter QuestID from Tablet
- conduct interview(s) with selected respondent(s)
- perform end of interview steps by carefully following the instructions on the screen for the Quality Control Form and incentive procedures, providing a Q&A Brochure to each adult respondent and the parent/guardian of each youth respondent, if not done earlier
- complete ROC(s) in Tablet
- mail completed Quality Control Form(s) to RTI within 24 hours

## **Guidelines for Speaking with Neighbors**

When speaking with neighbors, it's important only to ask for and obtain certain information. Always be very general and concise, and do not offer more information than is necessary.

If the neighbor is suspicious and won't provide any information unless you tell them why you are interested in a particular address, simply state the household has been selected to participate in a national study. Do not name or describe the survey.

### **You CAN speak to a neighbor to:**

1. Verify whether someone actually lives at the selected DU(s)
2. Find out a good time to find the residents at home
3. Obtain verification data if the SDU is vacant

### **When speaking with neighbors, you CANNOT:**

1. Explain that the household has been selected to participate in the NSDUH
2. Obtain screening information for the selected DU(s)

### **Suggested wording to use when speaking with neighbors:**

"Hello, my name is [INSERT NAME] with RTI International. I am working on a nationwide study sponsored by the U.S. Department of Health and Human Services and need to speak with your neighbor. Do you know when would be a good time to find them at home?"

OR

"Hello, my name is [INSERT NAME] with RTI International. Your neighbor has been selected to participate in a national study and I'm having trouble catching them at home. Do you know when a good time would be for me to find them at home?"

### **Suggested wording for vacancy verification:**

"Hello, my name is [INSERT NAME] with RTI International. Your neighbor has been selected to participate in a national study, but it looks like the house may be vacant. Can you tell me if someone lives there?"

## **Informed Consent Reference Guide**

This reference guide is not a replacement for information contained in your FI Manual, but is a listing of crucial protocols that must be followed when obtaining informed consent. Refer to pages 7-22 through 7-26 in your FI Manual for more information on informed consent procedures.

### **YOUTH INFORMED CONSENT PROCEDURES:**

#### **Parental Permission:**

- First, obtain parental permission to interview the youth
  - Introduce yourself to parent/guardian if not done earlier
  - Read the top box of the Intro to CAI 12-17 to parent/guardian and obtain their permission
  - Permission MUST be given IN PERSON
- Once parental permission has been given, confirm the parent/guardian or another adult will be present for the duration of the interview (not in interview room)
- If you obtain permission from one parent/guardian who is not home when you return to do the interview, you may only proceed if the other parent/guardian is available, grants permission for the interview, and confirms he/she or another adult will be present for the duration of the interview
- If the parent/guardian cannot communicate well enough in English to understand the Intro to CAI script:
  - If parent speaks Spanish, have the parent read the Spanish translation of the Intro to CAI themselves (if you are not a RTI-Certified bilingual FI who could read it to them)
    - If parent cannot read, the youth or another translator may read script to the parent, along with reading the Spanish Study Description
  - If language is other than Spanish, the youth or another translator may use the script and Study Description and translate the information for the parent
  - Use the youth or translator to confirm the parent/guardian or another adult will be present for the duration of the interview and answer any questions the parent may have
- Exception: If the youth is 17 years old and living independently without a parent or guardian residing in the home (such as a college student), proceed with youth Informed Consent procedures without parental permission, using the Intro to CAI 12-17 script

#### **After Obtaining Parental Permission:**

- Introduce yourself to the youth (if not done earlier)
- Read the main box of the Intro to CAI 12-17 to the youth
- When instructed, give the youth a Study Description to read and keep

### **ADULT INFORMED CONSENT PROCEDURES:**

- Read the Intro to CAI 18+ to R
- When instructed, give the R a Study Description to read and keep (if not done earlier)
  - If R cannot read the Study Description themselves, you must read it to them

# The Interview Process

## Informed Consent Procedures

- READ THE INFORMED CONSENT FOUND AT THE FRONT OF THIS BOOKLET TO RESPONDENT
- If the respondent is 12 - 17 years old, obtain parental permission first

## Choose the Best Interview Location

- Consider the following issues:
  - Privacy and ethics
  - Comfort and safety
  - Battery power and/or the availability of an electrical outlet
- Be flexible in choosing a location, but never compromise NSDUH protocols

## Setting up the Computer

- Unpack the computer and plug it in using the extension cord if needed
- Press the ON button and WAIT for the computer to boot up
- While waiting, make sure you have the QuestID displayed on the Tablet, your Showcard Booklet, a Quality Control Form and envelope, a Q&A Brochure (if not given earlier), \$30 and an Interview Incentive Receipt
- Place clean headphone covers on the ear pieces of the headphones and plug the headphones into the computer
- Enter the passwords, then enter the QuestID from the Tablet to begin the interview

## Conducting the Interview

- Obtain informed consent (if not done earlier)
- If respondent is under the age of 12 or is active in the military, the computer will automatically complete this case (If this occurs, remember to enter a Code 79 in the Tablet and explain the situation)
- Use the Showcards as instructed
- During the ACASI, be available to assist the respondent without being intrusive
  - Prepare the Quality Control Form:
    - Record the **date** and approximate interview completion **time**
    - Print your **name** and **FI ID #** legibly
    - Record the **Case ID**, including the **A** or **B**
    - Indicate which **parent** (or guardian) gave permission if respondent is a minor
  - Prepare the Interview Incentive Receipt:
    - Record the **Case ID**, including the **A** or **B**
    - Do not sign, date or check the box for cash acceptance until prompted by the computer
  - Other possible tasks include: review your ROCs and plan work for the day, re-read portions of the FI Computer Manual or FI Manual (remove a chapter or two at a time from the binder) complete your Data Quality Knowledge Notebook entries, re-read the Job Aids section in the Showcard Booklet, and review materials for information to use when obtaining cooperation

## **The Interview Process (continued)**

- Enter the QC ID and the Case ID when prompted and follow Quality Control Form procedures
  - For a youth, the Quality Control Form should be completed by a parent or guardian (If no parent is available, it is acceptable for the youth to complete the form)
  - The R/parent should place the Quality Control Form into the envelope and seal it (If R/parent refuses to complete the Quality Control Form, ask him/her to write “REFUSED” across the top)
- Give R the \$30 cash, sign, date and mark the appropriate cash acceptance box on the Interview Incentive Receipt and give the respondent the top copy
- Give adult interview respondents and parent/guardian of youth respondents a Q&A Brochure (if not done earlier)
- Answer the observation questions

### **When Finished with the Interview**

- Turn off your laptop.
- Pack up your equipment:
  - Unplug the power cord from the computer first, unplug from the wall, then wrap them up and place in carrying case
  - Close the screen display until you hear a click, place the laptop in the case and zip closed
  - Remember your Tablet, Showcard Booklet, and other papers
- **THANK YOUR RESPONDENT!**
- Enter a Code 70 in your Tablet.
- Mail Quality Control Form to RTI within 24 hours of completion of the interview
- Mail Interview Incentive Receipt (FS copy) to your FS each week

### **Possible Respondent Difficulties**

- Is the respondent physically or emotionally capable of participating?
  - Slow the pace of the questions to see if comprehension improves
  - Allow adequate time to answer
  - If respondent does not seem to understand, politely discontinue the interview and speak with your FS
- Is the respondent intoxicated or under the influence of other drugs?
  - Attempt to schedule another time to return
- Is the respondent blind or paralyzed?
  - Take the time to figure out if respondent can complete interview—each interview is precious!
  - Only in these situations are you allowed to enter the responses during the ACASI portion for the respondent (Make note of this in the FI Observation questions)
- Does the respondent exhibit behaviors that suggest he or she may have difficulty reading?
  - Remember that the respondent can listen to all the questions through the headphones and answer most questions with a number



# Instructions for Using the Certificate of Participation

At the end of the interview, you can give a Certificate of Participation that authenticates the respondent's participation in NSDUH. Youth and other interested respondents may use the completed certificate to verify with teachers or group leaders that they participated in NSDUH, and may then receive credit for participating in the study. Possibilities include:

- extra credit for school
- incorporating the NSDUH experience into a school project
- credit towards community service hours.

It is the respondents' responsibility to arrange to receive any possible credit. Respondents and parents must understand that:

- they are responsible for making arrangements for any credit
- their school or group may or may not give credit; credit is not guaranteed
- no advance arrangements have been made with any schools or community groups.

The certificate is worded to allow for use with respondents other than middle or high school students, such as a young adult required to perform community service or for classes beyond high school. However, the certificate should be used primarily with youth respondents. Adult respondents should not receive a certificate unless they ask for acknowledgement that he/she completed the survey or seem very interested in receiving one.

Upon completion of the interview, prepare the certificate by:

- filling in the date the interview was completed
- and your FI name and ID number.

To preserve confidentiality, the respondent adds his or her name at a later time.

Also provide a Question and Answer Brochure along with the certificate, as it contains additional details and includes contact information and Website addresses where interested persons can obtain additional information.

# ROC Comments

## ROC comments should be appropriate, non-judgmental, and:

- **Informative** – Record appointment times, best times to return, who you talked to, or if no adult was home, record which cars were in the driveway.
- **Helpful** – Note relevant information for you to use in preparing to return or when discussing the case with your supervisor. If a case gets transferred to another FI, the notes are very important to the new FI to understand what has happened.
- **Concise** – Explain your comments directly, leaving out unnecessary words or information. Your comments must be easily understood by you, your FS, other FIs, and project managers.

## Examples of good ROCs:

- CB after 7:00 pm
- 2:30 Sat appt
- W M 15ish said parents home after 8:00
- HISP F 60s send SPAN letter

## PROJECT ABBREVIATIONS

R	respondent (for the interview)
SR	screening respondent
FI	field interviewer
Q&A	Q&A Brochure
DU	dwelling unit

## STANDARD ABBREVIATIONS

<b>days of the week</b>	(with 3 letters)
F	female
M	male
B	black
W	white
HISP	Hispanic
SPAN	Spanish
INFO	information
REF	refused

## SUGGESTED HELPFUL ABBREVIATIONS

CB	call back (or come back)
APPT	appointment
AM	morning
AFTRN	afternoon
PM	evening
NGHBR	neighbor
GTKPR	gatekeeper
WKND	weekend

## Refusal Reasons

Use these descriptions to help you classify refusals.

**1. Too busy/no time/did too many surveys already**

The number one reason for refusals is lack of time.

**2. Surveys/Govt. invasive/teen exposure**

These people feel that the government invades their privacy too much with surveys. There may be philosophical, political, or religious reasons for not participating in surveys. Parents may be concerned about exposing their teen to the sensitive subject matter in the survey.

**3. Clarify confidentiality, legitimacy, or selection**

Be sure to listen carefully to what respondents are telling you—questions about the legitimacy of the survey or how the survey guarantees confidentiality can often be explained by you on the doorstep, if you understand their concern.

**4. “Nothing in it for me”/uncooperative**

Although rare, sometimes people will either not give a reason for their refusal or they’ll tell you that there’s no reason for them to participate.

**5. Gatekeeper/Parent/HH member disallow**

Sometimes you encounter a refusal situation controlled by another person besides the person selected for the interview. A spouse, parent, guardian, or another influential person in the household may refuse for the selected individual, or deny you the ability to talk directly to the selected person. Even if you are able to talk with the selected person, he or she may refuse because of the other person’s opinions.

**6. Welfare or INS concern**

Persons involved with various government programs may fear that you are a welfare worker or an immigration officer checking on their status.

**7. Too ill/house messy/not dressed**

These refusals are situational and will not generate a refusal letter. They refused because you caught them at an awkward time.

**8. Need to discuss with FS**

In some cases, a respondent’s refusal won’t fit any of the above categories, but you are able to gather a sense of what is preventing them from participating. With this option write a very specific note in the refusal comment section to alert your FS. Then you can talk with him/her about how best to handle the refusal.

## Result Codes

Pending Screening Codes		Requires FS Approval	Verification Info Required	Tablet Auto Codes
01	No One at DU			
02	Screening Respondent Unavailable			
03	Neighbor Indicates Occupancy			
04	Incapable			
05	Language Barrier (Spanish)			
06	Language Barrier (Other)			
07	Refusal to Screening Questions			
08	Unable to Locate SDU			
09	Other			






Final Screening Codes		Requires FS Approval	Verification Info Required	Tablet Auto Codes
<b>Ineligible SDUs</b>				
10	Vacant		✓	
13	Not a Primary Residence		✓	
18	Not a Dwelling Unit		✓	
19	GQU Listed as HU			
20	HU Listed as GQU			
22	DU Contains Only Military Personnel		✓	✓
25	No Eligible SDU Members		✓	✓
26	In DU less than ½ of the Quarter		✓	✓
29	Listing Error	✓		
<b>Screening Not Obtained</b>				
11	No One at DU after Repeated Visits	✓		
12	SR Unavailable after Repeated Visits	✓		
14	Incapable	✓		
15	Language Barrier (Spanish)	✓		
16	Language Barrier (Other)	✓		
17	Refusal	✓		
21	Denied Access to Building/Complex	✓		
23	Other	✓		
<b>Screening Completed</b>				
30	No One Selected for Interview		✓	✓
31	One Selected for Interview			✓
32	Two Selected for Interview			✓

## Result Codes *(continued)*

Pending Interview Codes		Requires FS Approval	Verification Info Required	Tablet Auto Codes
50	Appointment for Interview			
51	No One at DU			
52	Respondent Unavailable			
53	Breakoff (Partial Interview)			
54	Incapable			
55	Language Barrier (Spanish)			
56	Language Barrier (Other)			
57	Refusal (By Respondent)			
58	Parental Refusal for 12-17 Year Old			
59	Other			

Final Interview Codes		Requires FS Approval	Verification Info Required	Tablet Auto Codes
70	Interview Complete		✓	
71	No One at Home after Repeated Visits	✓		
72	Respondent Unavailable	✓		
73	Breakoff (Partial Interview)	✓		
74	Incapable	✓		
75	Language Barrier (Spanish)	✓		
76	Language Barrier (Other)	✓		
77	Final Refusal by Respondent	✓		
78	Parental Refusal for 12-17 Year Old	✓		
79	Other	✓		

# Counting and Listing Abbreviations

<u>COLORS</u>	<u>ADDRESSES</u>	<u>OTHER/GENERAL</u>
BG Beige BK Black BL Blue BR Brown DK Dark GR Grey GN Green LT Light MED Medium OR Orange PK Pink RD Red TN Tan WH White YL Yellow	ADD Address ALY Alley APT Apartment AVE Avenue BLK Block BLVD Boulevard BLDG Building CIR Circle CT Court DRWR Drawer DR Drive HWY Highway JCT Junction LN Lane PKWY Parkway PL Place PT Point PO Post Office (Box) RD Road RTE Route ST Street TER Terrace	ATT Attached BSMT Basement BUS Business CPT Carport CG Cattleguard CHNLNK Chainlink CHMY Chimney CHUR Church COL Column COR Corner CO County DB Doorbell DRMR Dormer DBL Double DRWY Driveway ELCMTR Electric Motor ENT Entrance EXT Exit EXTR Exterior FEN Fence FLR Floor FDN Foundation FRM Frame FR From GAR Garage GRD Guard GRV Gravel GRND Ground HSE House LG Large MBX Mailbox MID Middle MI Mile PKT Picket PCH Porch PVT Private RR Railroad RSTR Restaurant RM Room SCRN Screen/Screened SHK Shake SHUT Shutters SD Side Door STR Store STY Story TR Trim UC Under Construction VAC Vacant VER Veranda VEST Vestibule WIN Window WD Wood
<u>DIRECTION/ORIENTATION</u>	<u>STRUCTURE/MATERIALS</u>	
ABV Above ACR Across ADJ Adjacent BCK Back BEH Behind BTWN Between BTM Bottom E East FRT Front L Left N North NE Northeast NW Northwest RE Rear R Right S South SE Southeast SW Southwest W West	ALUM Aluminum BRK Brick BRNSTN Brownstone CDR Cedar CBLK Cement Block CEM Cement LOG Log RCK Rock SDG Siding STN Stone STU Stucco VNY Vinyl	
<u>ARCHITECTURE/BUILDING STYLE</u>	<u>TYPES OF ROOFS</u>	
APT Apartment CPCD Cape Cod CLNL Colonial CONDO Condominium CNTP Contemporary DBLWID Doublewide DPX Duplex RCH Ranch RF Roof SPL Split Level TRAD Traditional TRLR Trailer TRANS Transitional	FLT Flat  GBL Gable  GMBR Gambrel  HIP Hip  MNSD Mansard  SHGL Shingle SPNTL Spanish Tile TIN Tin	

# Editing Address Protocol

## When to Edit an Address

Editing SDU addresses should not be a common task. An address should only be edited if the physical address is missing or incorrect, such as when only a description of the SDU is provided.

Before editing an address, first confirm you are at the correct selected dwelling unit. To do this, use a combination of project resources, including the handwritten List of DUs, block listing maps, and the address or description in your Tablet. If you are confident you are at the correct DU but the address is incorrect, you should consult the *Editing Address Protocol* chart. It will guide you on the steps to follow.

When you edit an address, there are two additional steps you must take to complete the process. First, you must enter a note in the Record of Calls explaining the reason for the edit. Second, you should notify your FS of the edit. Your FS must update their copy of the segment materials with the edit, and in many cases notify RTI's Sampling Department to update the project sampling frame.

**Never make edits to an address which creates a duplicate of an address already listed on the original List of DUs. Enter a note in the Record of Calls describing the situation and address discrepancy, and then obtain permission from your FS and Sampling before making the edit.** Carefully checking the original List of DUs before making an edit will ensure no duplication occurs.

After reviewing the *Editing Address Protocol* chart, if you are unsure whether an address should be edited or the appropriate procedures to follow, enter detailed notes about the situation in the ROCs and contact your FS promptly for assistance.

## When NOT to Edit an Address

In order to maintain the integrity of the sample, there are specific situations when you should not edit an address. These situations are listed as "Improper" in the third column of the *Editing Address Protocol* chart.

For example, addresses must never be edited due to screening on the incorrect line or at the wrong dwelling unit. Always double-check the address at the top of the Tablet screen and consult your segment materials to prevent this type of error.

Also, do not change an address or description to a Post Office Box, but instead enter any PO Box information in the Record of Calls.

Lastly, do not edit addresses to change abbreviations to full spellings, such as "Dr." to "Drive," or from full spellings to abbreviations, such as "Boulevard" to "Blvd."

## Reminder:

Always refer to the chart:

- when deciding whether or not to edit an address, and
- to be certain all appropriate procedures have been completed when editing an address.

## EDITING ADDRESS PROTOCOL

**REMINDER:** Always review your segment maps, original list of dwelling units, and Tablet information before editing SDU addresses.

Scenario	Description of Situation	Proper or Improper to Edit	Appropriate FI Action
<b>A</b>	Description edited to a street address	Proper	Check handwritten list of DUs, if address is not on list, delete description; enter street address in Tablet; proceed with screening; enter notes in ROCs; notify FS
<b>B</b>	Street name spelling corrected or drive/avenue/street/etc. corrected	Proper	Edit address in Tablet; proceed with screening; enter notes in ROCs; notify FS
<b>C</b>	Correction of one SDU address due to 911/U.S. Postal Service/ local government address revisions	Proper	Edit address in Tablet; proceed with screening; enter notes in ROCs; notify FS
<b>D</b>	Correction of listing error for one SDU (includes edits to street/apt. number)	Proper	Check handwritten list of DUs, if address is not on list, edit address in Tablet; proceed with screening; enter notes in ROCs; notify FS
<b>E</b>	Adding apt. numbers to differentiate between added units in a SDU or on SDU property	Proper	Check handwritten list of DUs, if address is not on list, edit address in Tablet; proceed with screening; enter notes in ROCs; notify FS
<b>F</b>	City, state, or zip code corrected	Proper	Edit address in Tablet; proceed with screening; enter notes in ROCs; notify FS
<b>G</b>	Within controlled access buildings/complexes, edits to addresses for multiple units originally gained through "blind" listing or listing by buzzer/mailbox	Proper (with prior approval from FS)	Notify FS; if approved by FS, edit address in Tablet; proceed with screening; enter notes in ROCs
<b>H</b>	Complete street name change	Proper (with prior approval from FS and Sampling)	Notify FS; if approved by FS and Sampling, edit address in Tablet; proceed with screening; enter notes in ROCs
<b>I</b>	Removing the apt. number from SDU address	Proper (with prior approval from FS and Sampling)	Notify FS; if approved by FS and Sampling, edit address in Tablet; proceed with screening; enter notes in ROCs
<b>J</b>	Correction of address for multiple units due to 911/U.S. Postal Service/local government address revisions	Proper (with prior approval from FS and Sampling)	Notify FS; if approved by FS and Sampling, edit address in Tablet; proceed with screening; enter notes in ROCs
<b>K</b>	Correction of listing error for multiple units (includes edits to street and/or apt. number) *See Scenario G for additional information	Proper (with prior approval from FS and Sampling)	Notify FS; if approved by FS and Sampling, edit address in Tablet; proceed with screening; enter notes in ROCs
<b>L</b>	Adding apt. numbers to single dwelling units *See Scenario E for additional information	Proper (with prior approval from FS and Sampling)	Notify FS; if approved by FS and Sampling, edit address in Tablet; proceed with screening; enter notes in ROCs
<b>M</b>	Description or street address edited to a Post Office Box address	Improper	Place Post Office Box address in ROCs
<b>N</b>	Edit due to screening on the wrong line or at the wrong dwelling unit	Improper	Request status code change or reopen code from FS; complete screening on correct line
<b>O</b>	Edit due to merged or condemned unit, or unit does not exist	Improper	Notify FS; code case as instructed by FS and Sampling



## Missed DUs

**You are not required to check the entire segment for missed DUs. Instead, you will ask the screening respondent (SR) about possible missed DUs as part of the screening process at every SDU. (However do not ignore significant changes, such as a new development or new apartment building—call your FS.) For more information on missed DUs, refer to Chapter 3 in your FI Manual.**

### At a selected housing unit:

- For regular housing units (houses, townhouses, trailers, cottages, duplexes), during the screening you ask the SR if there are any other units within the structure or on the property, such as a separate apartment with a separate entrance. If so, enter the address of the other unit(s) and proceed with screening.
- For housing units in apartment and condo buildings, do not ask the Missed DU question. However, if the SR reports a missed DU (such as the rare 'unit within a unit) confirm with the SR and add the unit from the Select Case Screen by tapping "Actions/Add Missed DU."

### For group quarters structures listed by persons or beds:

- Compare the original list with the current situation. If there are more units now, call your FS who will contact RTI's Sampling Department about which missed GQUs to add.

## Reconciling Missed DUs

**Recording the addresses of missed DUs in the Tablet does not automatically add them to your assignment. When ready to reconcile these missed DUs to see if they should be added, be sure you have the handwritten List of DUs and block listing maps available. If you have questions, contact your FS before reconciling the missed DUs.**

### **You can Reconcile at three different spots:**

- At the end of screening if you have entered a missed DU address(es). If you don't have time or your segment materials, simply tap "No" and reconcile later.
- If you entered a missed DU address using "Actions/Add Missed DUs," you will be asked if you want to reconcile.
- From the option "Admin/Reconcile Missed DUs."

### **To Reconcile Missed DUs:**

1. Follow the instructions on the Tablet carefully, referring to the segment materials as you reconcile the unit.
2. Determine if the missed unit is already on the handwritten List of DUs. If the missed unit is not on the list, it will be added to your assignment.
3. Complete the List of Added Dwelling Units to document the unit and mark the location of the missed DU on the correct Block Listing Map.

### **For the following situations, contact your FS who will check with RTI's Sampling Department:**

- more than 5 missed DUs are found at a specific SDU
- more than 10 missed DUs are found in a segment
- a missed HU (other than a 'unit within a unit') is discovered in an apartment or condo building
- a missed GQU is discovered within a group quarters structure
- a missed group quarters structure is discovered
- a significant listing problem is discovered.

Note: The Tablet stores space for 5 added DUs per segment. If more are required, contact your FS to have 5 more lines transferred to your Tablet.

# **Procedures After an Automobile Accident**

## **Immediately After an Accident...**

- Check for injuries. Life and health are more important than damage to vehicles.
- Secure your computer equipment.
- Make note of specific damages to all vehicles involved.
- Write down the names, addresses and license numbers of persons involved in the accident. Also, write a description of the other vehicles.
- Call the police, even if the accident is minor.
- Jot down names and addresses of anyone who may have witnessed the accident. This can prevent disagreement concerning how the accident actually happened.

## **DOs and DON'Ts**

- **DO** jot down details about the accident and circumstances such as weather conditions and visibility.
- **DO** notify your FS, Headway, and your insurance agent about the accident immediately. If you are working as a traveling interviewer in a rental car, notify the car rental agency as well.
- **DO NOT** sign any document unless it is for the police or your insurance agent.

Refer to your Headway materials for additional information on Headway Accident and Injury Reporting procedures.

**Headway can be reached at (800) 948-9379.**

**If you are reporting an accident after normal business hours (Eastern Time) or during the weekend and need immediate assistance, please call (919) 376-1392.**

# EQUIPMENT MAINTENANCE CHECKLIST

## **Before Leaving Home to Screen/Interview:**

- \_\_\_ Ensure Tablet is in the canvas case and fully charged
- \_\_\_ Ensure you have all accessories needed [car charger and mini-USB cable]
- \_\_\_ Check Tablet date & time, and transmit to correct if necessary

## **While Screening/Interviewing:**

- \_\_\_ Turn off Tablet between screenings
- \_\_\_ Be careful not to drop Tablet
- \_\_\_ Be extremely careful to select the correct case when screening
- \_\_\_ Keep an eye on the battery level and charge as needed
- \_\_\_ Before leaving the field, exit the screening program to the Today Screen \*

## **Upon Returning Home from Screening/Interviewing:**

- \_\_\_ Exit to the Today Screen if not done earlier \*
- \_\_\_ Transmit
- \_\_\_ Plug in Tablet to charge when not in use, noticing an orange light to ensure you have a good connection

## **When Transmitting/Charging:**

- \_\_\_ Follow steps in the FI Computer Manual for transmission
- \_\_\_ If problems occur, refer to FI Computer Manual

**Never** remove the battery from the Tablet unless instructed to do so while on the phone with Technical Support. Data loss can occur!

\* Exiting the screening program saves all data—if the battery runs down before you have exited the screening program, you will lose data

Lead Letter

**Lead Letter**  
English  
Spanish

**Study Description**  
English  
Spanish

**Introduction and Informed Consent for  
Interview Respondents age 18 +**  
English  
Spanish

**Introduction and Informed Consent for  
Interview Respondents ages 12-17**  
English  
Spanish





**Summary of the NSDUH Questionnaire**  
English  
Spanish

## **Interviewer Job Aids**

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**Interviewer  
Job Aids**

## Quick Reference Guide

**In the CAI Manager, if you want to:**

CLICK ON

<u>S</u> tart an interview .....	<u>S</u> tart CAI
<u>C</u> ancel the start of an interview .....	<u>C</u> ancel
<u>R</u> esume (re- <u>s</u> tart) an interview .....	<u>S</u> tart CAI
<u>T</u> ransmit data to RTI .....	<u>T</u> ransmit to RTI, <u>Y</u> es
<u>V</u> iew e-mail messages .....	<u>V</u> iew Email Messages
<u>S</u> tart the e <u>P</u> TE Program .....	<u>P</u> TE Entry
List the cases by <u>D</u> escending Order (based on date) .....	<u>D</u> escending
List the cases in <u>A</u> scending Order (based on date) .....	<u>A</u> scending
<u>H</u> ide previous quarters' interviews .....	<u>H</u> ide
<u>E</u> xit CAI Manager .....	<u>E</u> xit

**To begin a CAI Interview:**

Enter QuestID from Tablet for selected sample member. Double check!

**In the Interview, if you need to:**

<u>B</u> reak off an interview .....	[Alt] [f], [x]
<u>E</u> nter Don't Know .....	[F3]
<u>E</u> nter Refused .....	[F4]
<u>R</u> eturn to the first screen .....	[F5]
<u>R</u> eturn to the first unanswered question .....	[F6]
<u>E</u> nter a comment .....	[F8]
<u>S</u> ave a comment .....	[Alt] [s]
<u>B</u> ack up one screen .....	[F9]
<u>R</u> eplay audio .....	[F10]
<u>E</u> dit a lengthy text field .....	[Ins]
<u>R</u> eturn the focus to the CAI window .....	[Alt] [Tab]

**To adjust the main laptop volume\*:**

<u>I</u> ncrease volume .....	[Fn], [Page Up]
<u>D</u> ecrease volume .....	[Fn], [Page Down]
<u>M</u> ute volume .....	[Fn], [Home]

\*Keep the main laptop volume turned all the way UP at all times. Respondents will only adjust the volume on the headphone cord.

**To suppress a Hard Error in the interview, involving two questions:**

- **Read the message box carefully.**
  - If the first question listed is the one to be changed, press [Enter].
  - If the second question listed is the one to be changed, press the down arrow key to highlight the second question, then press [Enter].
  - In the rare but possible event that neither question needs to be changed and the data entered are correct, press [Tab] until the Suppress box is highlighted and then press [Enter].

**To edit a lengthy response:**

- With the cursor blinking in the answer field, press the Insert key [Ins]. You can then use the arrow keys to move to the precise place within the answer field and add additional text or edit existing text.

2015 NSDUH, Supporting Statement  
Attachment I – 2015 NSDUH Questionnaire and  
Materials Changes

## 2015 National Survey on Drug Use and Health (NSDUH) Questionnaire and Materials Changes

*All items listed below represent changes between the 2014 NSDUH and 2015 NSDUH.*

### Changes to NSDUH CAI Questionnaire for 2015

Module	2015 CAI Questionnaire Changes
Core Demographics	<ul style="list-style-type: none"> <li>• Moved introductory text from QD01 to QD03 to improve interview flow.</li> <li>• Edited MILTERM1 for consistency.</li> <li>• Moved the marital status questions out of this module to the back-end ACASI.</li> <li>• Revised response categories for educational attainment in QD11, adding additional degree level detail (from 17 to 20 categories).</li> </ul>
Beginning ACASI Section	<ul style="list-style-type: none"> <li>• Removed the F7 function which muted the sound during ACASI.</li> </ul>
ACASI Tutorial	<ul style="list-style-type: none"> <li>• Edited questions throughout the tutorial for clarity.</li> <li>• Added PLAYINFO, to describe F2 functionality.</li> <li>• Added “Practice Question #” on each screen to clarify that the questions are unrelated to the survey content.</li> </ul>
Calendar	<ul style="list-style-type: none"> <li>• New electronic reference date calendar was introduced in the tutorial, so calendar instructions were altered to reflect the on-screen calendar.</li> <li>• This module was moved to follow the ACASI tutorial, and was administered via ACASI.</li> </ul>
Tobacco	<ul style="list-style-type: none"> <li>• Changed the name of ‘Macanudos’ to ‘Macanudo’ for accuracy.</li> <li>• Combined smokeless sections into one section.</li> <li>• Dropped smokeless brands.</li> </ul>
Alcohol	<ul style="list-style-type: none"> <li>• Changed binge definition to 4 or more drinks for females.</li> </ul>
Marijuana	<b>No changes</b>
Cocaine	<b>No changes</b>
Crack	<b>No changes</b>
Heroin	<b>No changes</b>
Hallucinogens	<ul style="list-style-type: none"> <li>• Moved questions about Ketamine/Special K, DMT/AMT/Foxy, and Salvia Divinorum from the Special Drugs module to Hallucinogens.</li> <li>• Added “Molly” to questions about Ecstasy and MDMA throughout Hallucinogens module.</li> </ul>
Inhalants	<ul style="list-style-type: none"> <li>• Added questions about markers and air duster.</li> </ul>
<b>*Methamphetamine</b>	<ul style="list-style-type: none"> <li>• Created a new Methamphetamine module modeled after cocaine module.</li> </ul>
All Prescription Drugs  **Screener and Main Module	<ul style="list-style-type: none"> <li>• Adapted each of the former prescription drug modules to 2 new modules: a Screener and a Main Module. <ul style="list-style-type: none"> <li>○ Added the word “prescription” to the introduction for each section.</li> <li>○ Electronic pill cards replaced the showcards.</li> </ul> </li> <li>• Adopted “ensemble format”: All screener modules determining any use in</li> </ul>

Module	2015 CAI Questionnaire Changes
	<p>past 12 months are asked before misuse (main) modules.</p> <ul style="list-style-type: none"> <li>• The Main Modules measured misuse among those drugs that were used in the past 12 months, as well as lifetime misuse.</li> <li>• Discontinued prescription drugs were deleted and newly available drugs were added.</li> <li>• Drugs currently asked about in non-core modules were moved to the appropriate prescription drug module.</li> <li>• Edited the definition of misuse to generally refer to use “in any way a doctor did not direct you to use them.”</li> </ul>
Pain Relievers <b>**Screener and Main Module</b>	<ul style="list-style-type: none"> <li>• See changes described under “All Prescription Drugs.”</li> </ul>
Tranquilizers <b>**Screener and Main Module</b>	<ul style="list-style-type: none"> <li>• See changes described under “All Prescription Drugs.”</li> </ul>
Stimulants <b>**Screener and Main Module</b>	<ul style="list-style-type: none"> <li>• See changes described under “All Prescription Drugs.”</li> <li>• Moved questions about 12 month and 30 day needle use from Special Drugs Module to Stimulants.</li> </ul>
Sedatives <b>**Screener and Main Module</b>	<ul style="list-style-type: none"> <li>• See changes described under “All Prescription Drugs.”</li> </ul>
Special Drugs	<ul style="list-style-type: none"> <li>• Removed all Methamphetamine questions except lifetime and recency of methamphetamine needle use.</li> <li>• Removed “Desoxyn, or Methedrine” since they are no longer on the market.</li> <li>• Removed Ketamine/Special K, DMT/AMT/Foxy, and Salvia Divinorum, Ambien, Adderall, moving them to other modules as appropriate.</li> <li>• Moved stimulant needle use lifetime and recency questions to Stimulants Module.</li> <li>• Added an introduction to SD17 (2014 variable SD12), the question about reusing needles, to remind respondents about needle use reported in the Stimulant module.</li> <li>• Replaced all instances of “not prescribed for you or that you took only for the experience or feeling it caused” with “not prescribed for you.”</li> </ul>
Risk/Availability	<b>No changes</b>
Blunts	<ul style="list-style-type: none"> <li>• Revised the logic for the first medical marijuana use question (MJMM01).</li> </ul>
Substance Dependence and Abuse	<ul style="list-style-type: none"> <li>• Added “Molly” to questions about Ecstasy and MDMA throughout the module.</li> <li>• Updated the stimulant questions to reflect the separate Methamphetamine and Prescription Stimulants Modules .</li> <li>• Edited the number of symptoms needed in DRSV11 and DRSV12.</li> </ul>

<b>Module</b>	<b>2015 CAI Questionnaire Changes</b>
Special Topics	<ul style="list-style-type: none"> <li>• Edited the wording in SP03r for consistency.</li> </ul>
Market Information for Marijuana	<ul style="list-style-type: none"> <li>• Dropped entire module.</li> </ul>
Prior Substance Use	<ul style="list-style-type: none"> <li>• Dropped all Prescription Drug and Methamphetamine questions.</li> <li>• Dropped “which (substance use) came first” questions.</li> <li>• Added “Molly” to questions about Ecstasy and MDMA throughout the module.</li> </ul>
Drug Treatment	<b>No changes</b>
Health Care	<ul style="list-style-type: none"> <li>• Extended the module to ask questions about a number of additional topics, including revising the list of health conditions, adding questions about cancer diagnosis, and asking about the age at first diagnosis of other conditions.</li> </ul>
Adult Mental Health Service Utilization	<b>No changes</b>
Social Environment	<ul style="list-style-type: none"> <li>• Dropped SEN04 - # of times moved in past 5 years.</li> </ul>
Parenting Experiences	<b>No changes</b>
Youth Experiences	<ul style="list-style-type: none"> <li>• Dropped YE04 - # of times moved in past 5 years.</li> </ul>
Mental Health	<b>No changes</b>
Adult Depression	<b>No changes</b>
Youth Mental Health Service Utilization	<b>No changes</b>
Adolescent Depression	<b>No changes</b>
Consumption of Alcohol	<ul style="list-style-type: none"> <li>• Dropped all prescription drugs (except for Methamphetamine) from “used with alcohol” question (CA09).</li> <li>• Dropped 4+ binge questions for females.</li> </ul>
<b>End of ACASI &amp; Back-End Demographics</b>	<ul style="list-style-type: none"> <li>• Moved to ACASI.</li> <li>• QD13 (number of moves in the past 12 months) was edited to add the Interviewer Note to the question text.</li> <li>• Updated logic in QD16a (lived in the United States for at least a year).</li> <li>• Added two questions about sexual orientation, to be asked of adults.</li> <li>• Added six questions about disability.</li> <li>• Added a question about English-speaking ability.</li> <li>• Edited response options for QP02.</li> </ul>
Education	<ul style="list-style-type: none"> <li>• Moved to ACASI.</li> <li>• Revised consistency check questions to be consistent with the revised categories in QD11 (Educational Attainment).</li> <li>• Moved questions about marital status to this module.</li> <li>• Added questions about military families to this module.</li> </ul>
Employment	<ul style="list-style-type: none"> <li>• Moved to ACASI.</li> <li>• Dropped I&amp;O questions (job titles, industries).</li> <li>• Deleted question about size of workplace.</li> </ul>
Household Roster	<ul style="list-style-type: none"> <li>• Dropped step, foster, adoptive descriptions of children and parents.</li> </ul>
Proxy information	<b>No changes</b>

Module	2015 CAI Questionnaire Changes
Health Insurance	<ul style="list-style-type: none"> <li>• Edited wording of QHI02 (Medicaid) to include information formerly in an Interviewer Note.</li> <li>• Edited wording of QHI02a (CHIP) to include information formerly in an Interviewer Note.</li> <li>• Edited wording of QHI03 (CHAMPUS) to include information formerly in parentheses and an Interviewer Note.</li> <li>• Edited wording of QHI06 (Private Health Insurance) to include information formerly in an Interviewer Note.</li> <li>• Edited wording of QHI07 (Source of Private Health Insurance) to include information formerly in an Interviewer Note.</li> <li>• Edited wording of QHI14 (Time without Health Insurance) to include a reference date.</li> <li>• Will update Medicaid, CHIP and TANF state program names.</li> </ul>
Income	<ul style="list-style-type: none"> <li>• Edited wording of QI01N (Social Security or Railroad Retirement Payments) to include information formerly in an Interviewer Note.</li> <li>• Deleted QI05N, which asks about income from a job.</li> <li>• Edited wording of QI03N (SSI) to include information formerly in an Interviewer Note.</li> <li>• Edited wording of QI07N (Food Stamps) to include information formerly in an Interviewer Note, and to refer to SNAP as opposed to food stamps.</li> <li>• Edited wording of QI08N to refer to parish or borough depending on state of residence.</li> <li>• Edited wording of QI10N (non-monetary welfare) to include information formerly in an Interviewer Note.</li> <li>• Edited wording of QI12AN to elaborate on type of welfare to be included.</li> <li>• Edited wording QI12BN to elaborate on type of welfare to be included and to refer to SNAP.</li> <li>• Edited the sources of income listed in INTRTINN for ACASI administration, and edited wording for clarity.</li> <li>• Deleted HAND18a, 18b, 19a, and 19b and moved content to subsequent items.</li> <li>• Top response category for income was revised to \$150,000 or more.</li> <li>• Replaced telephone landline question with two questions about cell phones.</li> </ul>
Verification	<ul style="list-style-type: none"> <li>• Edited the wording of TOALLR3I for clarity.</li> </ul>
FI Observation Questions	<ul style="list-style-type: none"> <li>• Moved to Tablet and revised.</li> </ul>

\*\*New modules listed in bold



### Changes to NSDUH Screening Questions for 2015

Screener Item	2015 Screening Question Changes
Study Introduction Screen	<ul style="list-style-type: none"> <li>On Study Introduction screen, 'RTI International' replaced previous mentions of 'RTI' or 'Research Triangle Institute' and 'US Public Health Service' was replaced with 'US Department of Health and Human Services.'</li> </ul>
FI Debriefing Items	<ul style="list-style-type: none"> <li>New FI debriefing questions were added and administered on the tablet following a completed interview. Debriefing items are no longer included on the laptop.</li> </ul>

### Changes to NSDUH Materials for 2015

Material	2015 Materials Changes
Screening Tablet Video	<ul style="list-style-type: none"> <li>Utilizing the multimedia capability of the touch screen tablet, FIs will be able to play a short video for respondents (approx. 50 seconds run time) which provides a brief explanation of the study and why participation is important.</li> </ul>
Lead Letter	<ul style="list-style-type: none"> <li>Redesigned content with additional color.</li> <li>'RTI International' replaced previous mentions of 'RTI' or 'Research Triangle Institute' and 'US Public Health Service' was replaced with 'US Department of Health and Human Services.'</li> </ul>
Question & Answer Brochure	<ul style="list-style-type: none"> <li>Redesigned content with additional color.</li> <li>'RTI International' replaced previous mentions of 'RTI' or 'Research Triangle Institute' and 'US Public Health Service' was replaced with 'US Department of Health and Human Services.'</li> </ul>
Contact Cards, Study Description, Interview Incentive Receipt, Certificate of Participation	<ul style="list-style-type: none"> <li>'RTI International' replaced previous mentions of 'RTI' or 'Research Triangle Institute' and 'US Public Health Service' was replaced with 'US Department of Health and Human Services.'</li> </ul>
Parental Introductory Script	<ul style="list-style-type: none"> <li>Designed to be read by an FI to a parent guardian once a youth respondent is selected to complete an interview but before the FI speaks with that youth respondent. This script will standardize the introductory conversations between FIs and parent/guardians.</li> </ul>
Introduction and Informed Consent	<ul style="list-style-type: none"> <li>Minor wording changes in FI instructions for clarity.</li> </ul>

Material	2015 Materials Changes
Showcard Booklet	<ul style="list-style-type: none"> <li>• Updated Showcards to reflect 2015 CAI specifications.</li> <li>• Changed iPAQ references to Tablet.</li> <li>• Minor wording changes FI instructions and reference materials for clarity.</li> <li>• Added an Interview Troubleshooting Guide.</li> <li>• ‘RTI International’ replaced previous mentions of ‘RTI’ or ‘Research Triangle Institute’ and ‘US Public Health Service’ was replaced with ‘US Department of Health and Human Services.’</li> </ul>

**Changes to NSDUH Computer Equipment for 2015**

Item	2015 Computer Equipment Changes
Screening Tablet	<ul style="list-style-type: none"> <li>• A 7-inch touch screen Android tablet computer will be used for screening, interview respondent selection, answering FI observation questions, and case management.</li> </ul>
Laptop Computer	<ul style="list-style-type: none"> <li>• A new light-weight, ultra-book laptop will be used to conduct interviews in English and Spanish.</li> </ul>
Text-to-Speech Software	<ul style="list-style-type: none"> <li>• Text to speech (TTS) software is being programmed and tested for implementation within the ACASI modules in 2015. TTS uses a computer-generated voice to read text displayed on-screen, rather than relying on pre-recorded audio files from a human voice.</li> </ul>