CSAP GPRA Participant Outcome Measures for Discretionary Programs

ADULTS

Public reporting burden for this collection of information is estimated to average 20 minutes per response if all items are asked of a participant; to the extent that providers already obtain much of this information as part of their ongoing participant intake or follow-up, less time will be required. Send comments regarding this burden estimate or any other aspect of this collection of information to SAMHSA Reports Clearance Officer, Room 16-105, 5600 Fishers Lane, Rockville, MD 20857. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. The control number for this project is 0930-0208.

Participant ID	.			
Contract/Grant ID		_	_ _	l
Grant Year		_l		
Interview Date	/ /			
Interview Type 1. Pre-Test	2. Post-Test	3. 6-Month 1	Follow-up	
A. DEMOGRAP	HICS (QUESTIONS 1-4	ASKED ONL	Y AT BASE	ELINE)
1. Gender – – –	Male Female			
2. Are you Hisp _ Yes	oanic or Latino?			
3. What is your	race? (Select one or more) Black or African American	n Alas	ka Native	
- - -	Asian American Indian Native Hawaiian or Other	_ Whit		nder

B. DRUG AND ALCOHOL USE

1.	Wha days	at is your best estimate of the number of days you used chewing tobacco during the past 30 s?				
	0	0 days				
	1	1 or 2 days				
	2	3 to 5 days				
	3	6 to 9 days				
	4	10 to 19 days				
	5	20 to 29 days				
	6	all 30 days				
2.		at is your best estimate of the number of days you smoked all or part of a cigarette during past 30 days?				
	0	0 days				
	1	1 or 2 days				
	2	3 to 5 days				
	3	6 to 9 days				
	4	10 to 19 days				
	5	20 to 29 days				
	6	all 30 days				
3.	Wha	at is your best estimate of the number of days you drank alcohol during the past 30 days?				
	0	0 days				
	1	1 or 2 days				
	2	3 to 5 days				
	3	6 to 9 days				
	4	10 to 19 days				
	5	20 to 29 days				
	6	all 30 days				
4.		What is your best estimate of the number of days you used marijuana or hashish during the past 30 days?				
	0	0 days				
	1	1 or 2 days				
	2	3 to 5 days				
	3	6 to 9 days				
	4	10 to 19 days				
	5	20 to 29 days				
	6	all 30 days				

- 5. What is your best estimate of the number of days you used cocaine during the past 30 days?
 - 0 0 days
 - 1 1 or 2 days
 - 2 3 to 5 days

	3 6 to 9 days 4 10 to 19 days 5 20 to 29 days 6 all 30 days
6.	What is your best estimate of the number of days you used "crack" during the past 30 days? 0 0 days 1 1 or 2 days 2 3 to 5 days 3 6 to 9 days 4 10 to 19 days 5 20 to 29 days 6 all 30 days
7.	What is your best estimate of the number of days you used any inhalant for kicks or to get high during the past 30 days? 0 0 days 1 1 or 2 days 2 3 to 5 days 3 6 to 9 days 4 10 to 19 days 5 20 to 29 days 6 all 30 days
8.	What is your best estimate of the number of days you used heroin during the past 30 days? 0 0 days 1 1 or 2 days 2 3 to 5 days 3 6 to 9 days 4 10 to 19 days 5 20 to 29 days 6 all 30 days
9.	What is your best estimate of the number of days you used hallucinogens during the past 30 days? O days 1 or 2 days 2 3 to 5 days 3 6 to 9 days 4 10 to 19 days 5 20 to 29 days 6 all 30 days

10.	How old were you the <u>first time</u> you smoked part or all of a cigarette? years old If never smoked part or all of a cigarette please mark the box. □
11.	Think about the <u>first time</u> you had a drink of an alcoholic beverage. How old were you the first time you had a drink of an alcoholic beverage? Please do not include any time when you only had a sip or two from a drink. years old If never had a drink of an alcoholic beverage please mark the box.
12.	How old were you the <u>first time</u> you used marijuana or hashish? years old If never used marijuana or hashish please mark the box. □
13.	How old were you the <u>first time</u> you used any other illegal drugs? years old If never used any illegal drugs please mark the box. □
D. I	EDUCATION, EMPLOYMENT, AND INCOME
1.	What is the highest level of education you have finished, whether or not you received a degree? [01=1st grade, 12=12th grade, 13=college freshman, 16=college completion]
	level in years
	1a. If less than 12 years of education, do you have a GED (General Equivalency Diploma)? _ YesNo
G. A	ATTITUDES AND BELIEFS
1.	How much do people risk harming themselves physically and in other ways when they smoke one of more packs of cigarettes per day? No risk Slight risk Moderate risk Great risk
2.	How much do people risk harming themselves physically and in other ways when they smoke marijuana once a month? No risk Slight risk Moderate risk Great risk

3.	How much do people risk harming themselves physically and in other ways when they: a. Have four or five drinks of an alcoholic beverage nearly every day?
	No risk
	Slight risk
	Moderate risk
	_ Great risk
	b. Have five or more drinks of an alcoholic beverage once or twice a week?
	_ No risk
	_ Slight risk
	_ Moderate risk
	_ Great risk
4.	How do you feel about adults smoking one or more packs of cigarettes per day?
	_ Neither approve nor disapprove
	_ Somewhat disapprove
	_ Strongly disapprove
5.	How do you feel about adults trying marijuana or hashish once or twice?
	_ Neither approve nor disapprove
	Somewhat disapprove
	Strongly disapprove
6.	How do you feel about adults having one or two drinks of an alcoholic beverage nearly every day?
	_ Neither approve nor disapprove
	Somewhat disapprove
	_ Strongly disapprove
7.	How do you feel about adults driving a car after having one or two drinks of an alcoholic
	beverage?
	_ Neither approve nor disapprove
	Somewhat disapprove
	_ Strongly disapprove

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YOUTH - Age 12 to 17 Years

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Participant ID	
Contract/Grant ID	
Grant Year	 Year
Interview Date	/ /
Interview Type 1. Pre-Test	2. Post-Test 3. 6-Month Follow-up
A. DEMOGRAP	HICS (OUESTIONS 1-4 ASKED ONLY AT BASELINE)
	HICS (QUESTIONS 1-4 ASKED ONLY AT BASELINE)
	HICS (QUESTIONS 1-4 ASKED ONLY AT BASELINE) Male Female
1. Gender - -	Male Female panic or Latino?
1. Gender 2. Are you Hisp _ Yes	Male Female panic or Latino?

R	DRIIC	ΔND	ΔΤ	COHOL	LISE

4	TT 6 41			44 1 1 41	4 30 1 0
I.	How frequently	' have vou s	smoked cigare	ettes during the	past 30 days?

- 1 Not at all
- 2 Less than one cigarette per day
- 3 One to five cigarettes per day
- 4 About one-half pack per day
- 5 About one pack per day
- 6 About one and one-half packs per day
- 7 Two packs or more per day

2. How often have you taken smokeless tobacco during the past 30 days?

- 1 Not at all
- 2 Once or twice
- 3 Once to twice per week
- 4 Three to five times per week
- 5 About once a day
- 6 More than once a day

3. To be more precise, during the past 30 days about how many cigarettes have you smoked per day?

- 1 None
- 2 Less than 1 per day
- 3 1 to 2
- 4 3 to 7
- 5 8 to 12
- 6 13 to 17
- 7 18 to 22
- 8 23 to 27
- 9 28 to 32
- 10 33 to 37 11 38 or more

Alcoholic beverages include beer, wine, wine coolers, and liquor.

4. On how many occasions during the last 30 days have you had alcoholic beverages to drink (more than just a few sips)?

1	0 occasions
2	1 to 2 occasions
3	3 to 5 occasions
4	6 to 9 occasions
5	10 to 19 occasions
6	20 to 39 occasions
7	40 or more occasions

5.		now many occasions during the last 30 days (if any) have you been drunk or very high from king alcoholic beverages?
		0 occasions
	1 2	1 to 2 occasions
	3	3 to 5 occasions
	4	6 to 9 occasions
	5	10 to 19 occasions
	6	20 to 39 occasions
	7	40 or more occasions
	,	40 of more occasions
6.		now many occasions during the last 30 days (if any) have you used marijuana (grass, pot) or hashish n, hash oil)?
	1	0 occasions
	2	1 to 2 occasions
	3	3 to 5 occasions
	4	6 to 9 occasions
	5	10 to 19 occasions
	6	20 to 39 occasions
	7	40 or more occasions
7.	equi	ing the LAST MONTH, about how many marijuana cigarettes (joints, reefers), or the valent, did you smoke a day, on the average? (If you shared them with other people, count the amount YOU smoked).
	2	None
	_	None Less than 1 a day
	3	
		Less than 1 a day
	3	Less than 1 a day 1 a day
	3 4	Less than 1 a day 1 a day 2 to 3 a day
	3 4 5	Less than 1 a day 1 a day 2 to 3 a day 4 to 6 a day
8.	3 4 5 6 7 On l	Less than 1 a day 1 a day 2 to 3 a day 4 to 6 a day 7 to 10 a day
8.	3 4 5 6 7 On l	Less than 1 a day 1 a day 2 to 3 a day 4 to 6 a day 7 to 10 a day 11 or more a day anow many occasions during the last 30 days (if any) have you sniffed glue, or breathed the
8.	3 4 5 6 7 On l	Less than 1 a day 1 a day 2 to 3 a day 4 to 6 a day 7 to 10 a day 11 or more a day now many occasions during the last 30 days (if any) have you sniffed glue, or breathed the ents of aerosol spray cans, or inhaled any other gases or sprays in order to get high?
8.	3 4 5 6 7 On l	Less than 1 a day 1 a day 2 to 3 a day 4 to 6 a day 7 to 10 a day 11 or more a day now many occasions during the last 30 days (if any) have you sniffed glue, or breathed the ents of aerosol spray cans, or inhaled any other gases or sprays in order to get high? 0 occasions
8.	3 4 5 6 7 On 1 cont	Less than 1 a day 1 a day 2 to 3 a day 4 to 6 a day 7 to 10 a day 11 or more a day now many occasions during the last 30 days (if any) have you sniffed glue, or breathed the ents of aerosol spray cans, or inhaled any other gases or sprays in order to get high? 0 occasions 1 to 2 occasions
8.	3 4 5 6 7 On I cont	Less than 1 a day 1 a day 2 to 3 a day 4 to 6 a day 7 to 10 a day 11 or more a day now many occasions during the last 30 days (if any) have you sniffed glue, or breathed the ents of aerosol spray cans, or inhaled any other gases or sprays in order to get high? 0 occasions 1 to 2 occasions 3 to 5 occasions
8.	3 4 5 6 7 On l cont 1 2 3 4	Less than 1 a day 1 a day 2 to 3 a day 4 to 6 a day 7 to 10 a day 11 or more a day now many occasions during the last 30 days (if any) have you sniffed glue, or breathed the ents of aerosol spray cans, or inhaled any other gases or sprays in order to get high? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions

9.	On how many occasions (if any) during the last 30 days have you taken LSD ('acid')?			
	1	0 occasions		
	2	1 to 2 occasions		
	3	3 to 5 occasions		
	4	6 to 9 occasions		
	5	10 to 19 occasions		
	6	20 to 39 occasions		
	7	40 or more occasions		
_		nes are sometimes called: uppers, ups, speed, bennies, dexies, pep pills, diet pills, meth or crystal include the following drugs: Benzedrine, Dexedrine, Methedrine, Ritalin, Preludin, Dexamyl,		
and N	Iethan	nphetamine.		
10.	On I	how many occasions (if any) during the last 30 days have you taken amphetamines on your		
	own	that is, without a doctor telling you to take them?		
	1	0 occasions		
	2	1 to 2 occasions		
	3	3 to 5 occasions		
	4	6 to 9 occasions		
	5	10 to 19 occasions		
	6	20 to 39 occasions		
	7	40 or more occasions		
11	O :- 1			
11.		how many occasions (if any) during the last 30 days have you taken 'crack' (cocaine in chunk ock form)?		
	1	0 occasions		
	2	1 to 2 occasions		
	3	3 to 5 occasions		
	4	6 to 9 occasions		
	5	10 to 19 occasions		
	6	20 to 39 occasions		
	7	40 or more occasions		
		40 of more occusions		
12.	On 1	how many occasions (if any) during the last 30 days have you taken cocaine in any other form		
	(like	e cocaine powder)?		
	1	0 occasions		
	2	1 to 2 occasions		
	3	3 to 5 occasions		
	4	6 to 9 occasions		
	5	10 to 19 occasions		
	6	20 to 39 occasions		
	7	40 or more occasions		

13.	Tranquilizers are sometimes prescribed by doctors to calm people down, quiet their nerves, or
	relax their muscles. Librium, Valium, and Miltown are all tranquilizers. On how many
	occasions (if any) have you taken tranquilizers on your own that is, without a doctor telling you
	to take themduring the last 30 days?

```
1 0 occasions
2 1 to 2 occasions
3 3 to 5 occasions
4 6 to 9 occasions
5 10 to 19 occasions
6 20 to 39 occasions
7 40 or more occasions
```

14. Barbiturates are sometimes prescribed by doctors to help people relax or get to sleep. They are sometimes called downs, downers, goofballs, yellows, reds, blues, rainbows. On how many occasions (if any) have you taken barbiturates on your own that is, without a doctor telling you to take them...during the last 30 days?

1	0 occasions
2	1 to 2 occasions
3	3 to 5 occasions
4	6 to 9 occasions
5	10 to 19 occasions
6	20 to 39 occasions
7	40 or more occasions

15. On how many occasions (if any) have you smoked (or inhaled the fumes of) crystal meth ('ice')...during the last 30 days?

1	0 occasions
2	1 to 2 occasions
3	3 to 5 occasions
4	6 to 9 occasions
5	10 to 19 occasions
6	20 to 39 occasions
7	40 or more occasions

16. Amphetamines have been prescribed by doctors to help people lose weight or to give people more energy. They are sometimes called uppers, ups, speed, bennies, dexies, pep pills, and diet pills. Drugstores are not supposed to sell them without a prescription from a doctor. Amphetamines do NOT include any non-prescription drugs, such as over-the-counter diet pills (like Dexatrim) or stay-awake pills (like No-Doz), or any mail-order drugs. On how many occasions (if any) have you taken amphetamines on your own that is, without a doctor telling you to take them...during the last 30 days?

1	0 occasions
2	1 to 2 occasions
3	3 to 5 occasions
4	6 to 9 occasions
5	10 to 19 occasions
6	20 to 39 occasions
7	40 or more occasions

17.	On how many occasions (if any) have you used heroinduring the last 30 days?		
	1	0 occasions	
	2	1 to 2 occasions	
	3	3 to 5 occasions	
	4	6 to 9 occasions	
	5	10 to 19 occasions	
	6	20 to 39 occasions	
18.	There are a number of narcotics other than heroin, such as methadone, opium, morphine, codeine, demerol, paregoric, talwin, and laudanum. They are sometimes prescribed by doctors. On how many occasions (if any) have you taken narcotics other than heroin on your own that is, without a		
	doct	or telling you to take themduring the last 30 days?	
	1	0 occasions	
	2	1 to 2 occasions	
	3	3 to 5 occasions	
	4	6 to 9 occasions	
	5	10 to 19 occasions	
	_		
	6	20 to 39 occasions	
		20 to 39 occasions 40 or more occasions	
19.	6 7		
19.	6 7	40 or more occasions	
19.	6 7 On h	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days?	
19.	6 7 On h	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions	
19.	6 7 On h	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions	
19.	6 7 On h	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions	
19.	6 7 On h	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions	
19.	6 7 On h 1 2 3 4 5	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 10 to 19 occasions	
19. 20.	On h 1 2 3 4 5 6 7	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 10 to 19 occasions 20 to 39 occasions 40 or more occasions now many occasions (if any) have you used Rohypnol ('rophies,' 'roofies') during the last 30 days?	
	On h 1 2 3 4 5 6 7	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 10 to 19 occasions 20 to 39 occasions 40 or more occasions now many occasions (if any) have you used Rohypnol ('rophies,' 'roofies') during the last 30 days?	
	On h 1 2 3 4 5 6 7 On h days	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 10 to 19 occasions 20 to 39 occasions 40 or more occasions now many occasions (if any) have you used Rohypnol ('rophies,' 'roofies') during the last 30 days?	
	On h 1 2 3 4 5 6 7 On h days	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 10 to 19 occasions 20 to 39 occasions 40 or more occasions now many occasions (if any) have you used Rohypnol ('rophies,' 'roofies') during the last 30 occasions 0 occasions	
	On h 1 2 3 4 5 6 7 On h days	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 10 to 19 occasions 20 to 39 occasions 40 or more occasions now many occasions (if any) have you used Rohypnol ('rophies,' 'roofies') during the last 30 occasions 1 to 2 occasions 1 to 2 occasions	
	On h 1 2 3 4 5 6 7 On h days 1 2 3	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 10 to 19 occasions 20 to 39 occasions 40 or more occasions now many occasions (if any) have you used Rohypnol ('rophies,' 'roofies') during the last 30 occasions 1 to 2 occasions 1 to 2 occasions 3 to 5 occasions	
	On h 1 2 3 4 5 6 7 On h days 1 2 3 4	40 or more occasions now many occasions (if any) have you used MDMA ('ecstasy') during the last 30 days? 0 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 10 to 19 occasions 20 to 39 occasions 40 or more occasions now many occasions (if any) have you used Rohypnol ('rophies,' 'roofies') during the last 30 occasions 1 to 2 occasions 1 to 2 occasions 3 to 5 occasions 6 to 9 occasions 6 to 9 occasions	

'grievous bodily harm')? 1 0 occasions 2 1 to 2 occasions 3 3 to 5 occasions 4 6 to 9 occasions 5 10 to 19 occasions	al K,'
2 1 to 2 occasions 3 3 to 5 occasions 4 6 to 9 occasions	al K,'
3 3 to 5 occasions 4 6 to 9 occasions	al K,'
4 6 to 9 occasions	al K,'
	al K,'
5 III to 19 occasions	al K,'
	al K,'
6 20 to 39 occasions 7 40 or more occasions	al K,'
, to or more designations	al K,
22. During the last 30 days, on how many occasions (if any) have you used Ketamine ('spec	
'super K')?	
1 0 occasions	
2 1 to 2 occasions	
3 3 to 5 occasions	
4 6 to 9 occasions	
5 10 to 19 occasions	
6 20 to 39 occasions	
7 40 or more occasions	
a few sips? - Never - 1 to 2 - 3 to 5 - 6 to 9 - 10 to 19 - 20 to 39 - 40 or more 24. How old were you the <u>first time</u> you smoked part or all of a cigarette?	
years old If you never smoked part or all of a cigarette please mark the box.	
years out in you hever smoked part of an of a eigenetic please mark the box.	
Think about the <u>first time</u> you had a drink of an alcoholic beverage. How old were you the time you had a drink of an alcoholic beverage? Please do not include any time when you on sip or two from a drink. years old If never had a drink of an alcoholic beverage please mark the box. □	
26. How old were you the <u>first time</u> you used marijuana or hashish?	
years old If never used marijuana or hashish please mark the box.	
27. How old were you the <u>first time</u> you used any other illegal drugs?	
years old If never used any illegal drugs please mark the box. □	

D. EDUCATION, EMPLOYMENT, AND INCOME

1.	What is the highest level of education you have finished, whether or not you received a degree? [01=1st grade, 12=12th grade, 13=college freshman, 16=college completion] level in years
G.	ATTITUDES AND BELIEFS
1.	It is clear to my friends that I am committed to living a drug-free life. _ False _ Maybe _ True
2.	I have made a final decision to stay away from marijuana. _ False _ Maybe _ True
3.	I have decided that I will smoke cigarettes. _ False _ Maybe _ True
4.	I plan to get drunk sometime in the next year. _ False _ Maybe _ True
5.	How much do you think people risk harming themselves (physically or in other ways) if they smok one or more packs of cigarettes per day? No risk Slight risk Moderate risk Great risk Can't say/Drug unfamiliar
6.	How much do you think people risk harming themselves (physically or in other ways) if they try marijuana once or twice? No risk Slight risk Moderate risk Great risk Can't say/Drug unfamiliar

7.	How much do you think people risk harming themselves (physically or in other ways) if they smoke marijuana regularly?		
	_ No risk		
	_ Slight risk		
	_ Moderate risk		
	Great risk		
	Can't say/Drug unfamiliar		
8.	How much do you think people risk harming themselves (physically or in other ways) if they take one or two drinks nearly every day?		
	_ No risk		
	_ Slight risk		
	_ Moderate risk		
	_ Great risk		
	_ Can't say/Drug unfamiliar		
9.	How much do you think people risk harming themselves (physically or in other ways) if they have five or more drinks once or twice each weekend?		
	_ No risk		
	_ Slight risk		
	Moderate risk		
	Great risk		
	_ Can't say/Drug unfamiliar		
10.	How wrong do you think it is for someone your age to drink beer, wine or hard liquor (for example, vodka, whiskey or gin) regularly?		
	_ Very wrong		
	_ Wrong		
	_ A little bit wrong		
	_ Not wrong at all		
11.	How wrong do you think it is for someone your age to smoke cigarettes?		
	_ Very wrong		
	_ Wrong		
	_ A little bit wrong		
	_ Not wrong at all		
12.	How wrong do you think it is for someone your age to smoke marijuana?		
	_ Very wrong		
	_ Wrong		
	_ A little bit wrong		
	_ Not wrong at all		
13.	How wrong do you think it is for someone your age to use LSD, cocaine, amphetamines or another illegal drug?		
	_ Very wrong		
	Wrong		
	_ A little bit wrong		
	_ Not wrong at all		