INSTRUMENTATION PROTOCOL CHANGES

1. Introduction

The 2001 NHSDA instrumentation protocols underwent minor modifications from the instrumentation protocols employed for the 2000 NHSDA. A summary of the changes for the 2001 NHSDA can be divided into three topics: the Newton screening instrument, CAI Questionnaire, and interviewer materials.

1.1 Newton Screening Instrument

The Newton screening instrument for the 2001 NHSDA received minor wording updates and a couple of additional questions, yet the basic structure and questions remained identical to the 2000 Newton screening instrument. The updates are summarized below.

- On the opening screen, the introductory text used by FIs was modified to specify the *U.S. Public Health Service* as the study sponsor, replacing the *Department of Health and Human Services*.
- A new screen was added after the opening screen, asking the FI to indicate whether or not the Screening Respondent mentioned receiving the Lead Letter.
- On the screen where addresses are updated, the Newton now requires that something be entered in each field for address, city, state and zip code. The State field requires a two-character entry and the Zip Code field requires a five-digit entry.
- The reference to the Statement of Confidentiality was replaced with a reference to the Study Description.
- On the Record of Calls, an item was added to collect the Mode of Contact between the FI and the Screening Respondent. FIs are to indicate whether their contact with the respondent was through an open or closed door, face-to-face, via intercom, telephone or there was no contact at all.
- After adding a Missed DU, the Newton now displays a message box that tells the FI how
 many units they have added in that segment, and how many units are still available to
 add.

The 2001 Newton screening instrument can be found in Section 10, *Screening Questions*, in the 2001 Methodological Resource Book.

1.2 CAI Questionnaire

Using the 2000 CAI Questionnaire as a base, the 2001 CAI Questionnaire saw the addition of questions and modules in the following substantive areas: specialty cigarettes, marijuana cost, knowledge of state marijuana laws, length of drug treatment, needle use, drug use opinions, risky

behaviors, school and parental relationships for youths, mental health, and state-level assistance program participation.

The remaining modular components of the 2000 CAI Questionnaire remained essentially unchanged for the 2001 CAI Questionnaire except for minor modifications to wording and selective elimination of sufficient questions to allow for the additional burden of the questions and modules in the above substantive areas. Timing data from the 2000 survey results were used to ensure that the added components for the 2001 questionnaire did not increase the instrument length to be over the OMB-approved time burden of 60 minutes.

Listed below are the changes made to the 2001 CAI Questionnaire.

- In the core drug modules' inconsistency resolution questions, pre-codes for "yes" and "no" were changed from "1" and "2" to "4" and "6", to require more attention from the respondent;
- Added a question to verify respondent's date of birth if the respondent's age is over 90;
- Included a question where the FI enters the DU's state of residence in order to display state-specific program names within questions;
- Per OMB, the "main race" question was revised to include NONE OF THESE as a response category, and an FI Note was added directing the FI to enter a "comment" if any respondent objected to the "main race" question.
- Included a question in the respondent practice session on how to enter a numeric response;
- Question order in the Tobacco module was switched so that the snuff questions appear before the questions on chewing tobacco;
- Added questions on age at first use and recency of use of Ecstasy. These questions were
 patterned after the age at first use and recency questions already present in all core drug
 modules.
- Added followup questions in a number of core drug modules to be asked if the respondent refused to answer the lifetime use questions;
- Added age at first use and 12 month frequency questions for respondent reporting use of Methamphetamine as their only stimulant;
- Included additional questions about needle use for Methamphetamine users and for heroin users;
- Included "Specify" questions for respondents reporting using a needle to inject some drug other than those specifically asked about in the core drug modules;

- Item count questions were added to produce an indirect estimate of cocaine use;
- Included a new module with questions about specialty cigarettes such as bidis and clove cigarettes;
- Replaced DSM questions about cigarette dependency with a new series of questions on cigarette dependency from the Nicotine Dependence Syndrome Scale (NDSS);
- Added several questions designed to measure respondents' awareness of marijuana laws in their states;
- Included a new module with questions about market information for marijuana, such as cost and amount purchased;
- Revised several questions dealing with length of drug treatment;
- Added questions for adults about difficulties in daily life caused by physical or mental health situations:
- Reinstated questions from the 1999 survey for both adults and youth about neighborhood adult drug use, opinions of friends' drug use, and family arguments;
- Moved the questions about religious beliefs from an FI administered section to an ACASI section.
- Included randomized item count questions to obtain information on risky behaviors;
- Simplified the questions about youth activities;
- Reinstated questions from the 1999 survey for youth about school and parental relationships and about peer substance use behavior;
- Added a new module designed to produce estimates of past year prevalence of serious mental illness in adults;
- Deleted the module for adolescent mental health:
- Revised the wording of several school related questions;
- Included a question asking for year of last employment for respondents who did not have a job in the past year;
- Revised the industry and occupation questions in an attempt to gather more detailed information;
- Added a question asking about respondent's participation in their state's Child Health Insurance Program (CHIP); and
- Revised several health insurance questions.

The complete 2001 CAI Questionnaire with all updated or additional questions and modules highlighted can be found in Section 11, *Questionnaires*, in the 2001 Methodological Resource Book.

1.3 Interviewer Materials

The 2001 interviewer materials and the protocols for using those materials were based on the 2000 interviewer materials and protocols. In addition to minor wording revisions, and year updates [2000 to 2001], the following changes were made for the 2001 interviewer materials.

- The Statement of Confidentiality (printed on RTI letterhead and signed by the RTI National Field Director) was replaced with a Study Description, printed on DHHS letterhead and signed by Dr. Goldstone. The Study Description provided all information needed for informed consent.
- In prior years confidentiality was assured by a Federal Confidentiality Certificate issued to RTI. For 2001, a new law was passed that revised the Public Health Service Act (that authorizes NHSDA). That new law ensured that the Certificate was no longer needed.
- The text of the Lead Letter and both Introductions to CAI were also revised to reflect the new confidentiality status. Additionally, the Introductions to CAI did not specifically instruct the FI to give the respondent a Study Description, whereas the 2000 version did tell the FI to "Give R Statement of Confidentiality". FIs were instructed to give the Study Description to the respondent, but it wasn't included as a printed instruction on the introduction.
- In all introduction materials (introductory scripts on the Newton, Lead Letter, Introductions to CAI) the named sponsor of the study was shifted from DHHS to 'Public Health Service, part of the Department of Health and Human Services.'
- All Lead Letters were printed with English on one side and Spanish on the other, as opposed to some printed in English only.
- The Summary of the Questionnaire was updated and was made available as a handout in addition to being included in the Showcard Booklet.
- Certificate of Participation instructions were reworded to allow for use with respondents other than middle or high school students. (Adults at times need community service hours, so term 'student' was replaced with 'individual' and 'participant.')
- The handout Who Uses the Data?, which listed various users of NHSDA data, was reworked to be easier to read and more appealing to the eye.
- As part of the Informed Consent procedures, the phrase regarding "no known risks or benefits" was eliminated due to no reported incidents in the time frame that RTI has been conducting NHSDA.

Copies of the 2001 interviewer materials can be found in Section 9, *Written Communication*, in the 2001 Methodological Resource Book.