

Attachment B
Cognitive Interview Recruitment Screening Scripts
October 5, 2010

**Prescription Drug Redesign Study
Round 1 Screening Scripts to Identify Cognitive Interview Participants**

Date/Time of Call _____

[NOTE: DO NOT READ TEXT OR RESPONSE CATEGORIES IN ALL CAPS.]

[IF RESPONDING TO A MESSAGE:]

Hello, this is [Stephanie Stolzenberg/NAME] calling from RTI International. Thank you for contacting us about our study that will test questions about prescription drug use. I understand that you're interested in participating in an upcoming interview. Is that correct?

[IF ANSWERING AN INCOMING CALL]

Thank you for contacting us about our study that will test questions about prescription drug use. I understand that you're interested in participating in an upcoming interview. Is that correct?

IF NO ADDITIONAL INTERVIEWS NEED TO BE SCHEDULED, OFFER TO PUT THE CALLER ON A WAIT LIST. INFORM ROUND 1 OR 2 CALLERS THAT THIS COULD INCLUDE RECONTACT FOR A FUTURE ROUND SEVERAL WEEKS LATER. COLLECT FIRST NAME AND TELEPHONE NUMBER.

Let me ask you a few questions about you to see if you are eligible.

1. How did you hear about this study?

2. How old are you? [IF ANY CONCERNS, ASSURE THAT THIS IS ONLY FOR US TO KNOW ABOUT THE FINAL COMPOSITION OF THE PARTICIPANTS.]

_____ (AGE IN YEARS)

INTERVIEWER: PLEASE READ THE FOLLOWING IF THE PERSON IS UNDER 18:

Since you are [AGE], we cannot interview you for this study. Thank you for your time and interest. [CONCLUDE THE CALL.]

3. RESPONDENT'S SEX [CONFIRM IF NECESSARY]

- 1 MALE
- 2 FEMALE

4. In what city do you live? [TO DETERMINE GEOGRAPHIC DIVERSITY OF PARTICIPANTS]

5. What is the highest grade or year of school you have completed? (CIRCLE ONE)

- 1 LESS THAN HIGH SCHOOL
- 2 HIGH SCHOOL DIPLOMA OR GED
- 3 SOME COLLEGE
- 4 ASSOCIATE'S DEGREE/DEGREE FROM TECHNICAL OR COMMUNITY COLLEGE
- 5 4-YEAR COLLEGE DEGREE
- 6 GRADUATE DEGREE

6. Do you have any physical problems that would prevent you from reading or hearing questions during the interview?

- 1 YES
Please describe:

- 2 NO

PLEASE READ THE FOLLOWING IF THE PERSON REPORTS VISUAL OR HEARING LIMITATIONS THAT WOULD PREVENT HIM/HER FROM DOING THE INTERVIEW:

Since you are not able to [read/hear] the questions, we cannot interview you for this study. Thank you for your time and interest. [CONCLUDE THE CALL.]

7. Have you ever participated in a research study? That would include any studies you participated in for RTI or for other organizations.

- 1 YES (ASK 7A)
- 2 NO (GO TO 8)

7a. When was the last time?

- 1 IN THE PAST 12 MONTHS (ASK 7B)
- 2 MORE THAN 12 MONTHS AGO (GO TO 8)

7b. In the past 12 months, how many research studies have you participated in?

_____ (NUMBER > 0) (THANK CALLER FOR HIS/HER TIME IF > 1)

IF 1 STUDY, PROBE TO DETERMINE TYPE OF STUDY AND WHETHER THE CALLER HAS PARTICIPATED IN AN RTI STUDY IN THE PAST 12 MONTHS. THANK CALLER FOR HIS/HER TIME IF PARTICIPATED IN ANY RTI STUDY IN THE PAST 12 MONTHS OR ANY SURVEY OR OTHER SOCIAL SCIENCE RESEARCH IN THE PAST 12 MONTHS, SUCH AS PUBLIC OPINION RESEARCH, PSYCHOLOGY EXPERIMENTS, MARKET RESEARCH, ETC. (IF UNSURE ABOUT THE TYPE OF PRIOR STUDY PARTICIPATION, GO TO WAITING LIST

INSTRUCTIONS AND CONTACT THE RTI STUDY LEADER ABOUT ELIGIBILITY.)

These next questions ask about your use of prescription drugs. You do not have to answer these questions if you do not want to. Remember that all of your answers are confidential.

8. In the past 12 months, have you used any prescription pain relievers, such as Vicodin[®], OxyContin[®], Percodan[®], or Darvon[®] for any reason? Do not include "over-the-counter" pain relievers such as aspirin or Tylenol[®] that can be bought without a doctor's prescription.

- 1 YES (ASK 8A)
2 NO (GO TO 9)

- 8a. What prescription pain relievers have you used in the past 12 months? (CIRCLE ALL THAT APPLY)

- | | | | |
|----|---------------|----|-------------------------|
| 1 | BUPRENORPHINE | 15 | PERCOCET |
| 2 | DARVOCET | 16 | PERCODAN |
| 3 | DARVON | 17 | PROPOXYPHENE |
| 4 | DEMEROL | 18 | SUBOXONE |
| 5 | CODEINE | 19 | SUBUTEX |
| 6 | FENTANYL | 20 | TRAMADOL |
| 7 | FENTORA | 21 | TYLENOL WITH
CODEINE |
| 8 | HYDROCODONE | 22 | TYLOX |
| 9 | LORCET | 23 | ULTRAM |
| 10 | LORTAB | 24 | VICODIN |
| 11 | MORPHINE | 25 | OTHER (SPECIFY) |
| 12 | METHADONE | | |
| 13 | OXYCODONE | | |
| 14 | OXYCONTIN | | |
-

9. In the past 12 months, have you used any prescription stimulants, such as Adderall[®], Ritalin[®], or amphetamines? Do not include "over-the-counter" stimulants such as Dexatrim[®] or No-Doz[®] that can be bought without a doctor's prescription.

- 1 YES (ASK 11A)
2 NO (SEE BELOW)

THANK CALLER FOR HIS/HER TIME IF RESPONDING TO RECRUITMENT FROM SUBSTANCE ABUSE TREATMENT BUT DID NOT USE PAIN RELIEVERS OR STIMULANTS IN THE PAST 12 MONTHS.

9a. What prescription stimulants have you used in the past 12 months? (CIRCLE ALL THAT APPLY)

- | | | | |
|---|-------------------------|----|----------------------|
| 1 | ADDERALL | 10 | METHYL-
PHENIDATE |
| 2 | ADDERALL XR | 11 | MODAFINIL |
| 3 | CONCERTA | 12 | PHENTERMINE |
| 4 | DEXEDRINE | 13 | PROVIGIL |
| 5 | DEXMETHYL-
PHENIDATE | 14 | RITALIN |
| 6 | DEXTRO-
AMPHETAMINE | 15 | RITALIN LA |
| 7 | DIDREX | 16 | TENUATE |
| 8 | FOCALIN | 17 | OTHER (SPECIFY) |
| 9 | FOCALIN XR | | |
-

"WAITING LIST" PARTICIPANTS:

- Put on waiting list if persons responded to recruitment from outside of substance abuse treatment and 8 "general population" interviews have been scheduled or completed but < 8 interviews have been completed with substance abuse treatment clients.

[THANK THE PERSON FOR HIS/HER TIME. INDICATE THAT WE WILL PLACE THE PERSON ON A WAITING LIST IN CASE ANY APPOINTMENTS BECOME AVAILABLE.]

GROUP SAMPLE TARGETS TO BE ASSESSED FOLLOWING SCREENING INTERVIEW (relax as needed in the order indicated):

- Gender: aim for at least 4 males or 4 females.
- Education: aim for at least 3 persons with a high school education or less.
- Age group: aim for at least 3 persons aged 18 to 25 and at least 3 persons aged 50 or older.
- Prescription drug use (if not recruited from treatment): Aim for at least 2 persons who have used prescription pain relievers and at least 2 who have used prescription stimulants in the past 12 months. (NOTE: Persons who have used both in the past 12 months could count toward the criteria for each.)

[THANK THE PERSON FOR HIS/HER TIME IF THE PERSON MEETS THE GENERAL ELIGIBILITY CRITERIA BUT A TARGET FOR THE GROUP HAS BEEN MET. OTHERWISE, CONTINUE.]

[IF CALLER IS ELIGIBLE]:

You are eligible to participate in our interviews. Let me tell you a little about the study. The purpose of the study is to get feedback on how easy or difficult different questions about prescription drugs are to answer. These questions will be presented on a laptop computer. We are doing this research to improve the questions about use of prescription drugs in a large national survey, called the National Survey on Drug Use and Health, that is given to about 70,000 people every year. The survey is conducted by RTI International, and is funded by the Substance Abuse and Mental Health Services Administration, part of the US Department of Health and Human Services. We will interview about 16 adults, and the interviews will take about 90 minutes but no more than 2 hours. We are trying to schedule interviews to start in December 2010. If you decide to take part in the interviews, you will receive a \$75 Visa gift card for completing the interview, in appreciation for your time.

Taking part in the study is voluntary.

[IF CALLER IS RESPONDING TO RECRUITMENT FROM OUTSIDE OF A TREATMENT PROGRAM, READ:] It will be conducted at our office in (Research Triangle Park/Chicago/DC). [CONTINUE WITH CONFIDENTIALITY STATEMENT BELOW.]

[IF CALLER IS RESPONDING TO RECRUITMENT THROUGH A TREATMENT PROGRAM, READ:] It will be conducted at the program where you are receiving treatment. [RECORD PROGRAM INFO SEPARATELY FROM INTERVIEW AND ONLY AS LONG AS IS NEEDED TO RECORD APPOINTMENT INFO INTO SECURE ELECTRONIC DATABASE. SHRED OR DISCARD HARD COPY WRITTEN PROGRAM INFO FOR SHREDDING IMMEDIATELY AFTER INTERVIEW.]

What you say during the interview will remain private and confidential. As such, we will not share information you give us with anyone other than project staff.

Would you like to take part in this study?

- 1 YES [GET AVAILABILITY DATES/TIMES AND SCHEDULE A CALLBACK TO CONFIRM. THEN THANK THE R FOR HIS/HER TIME.]
- 2 NO

[IF NO] If you'd like to tell us, we'd be interested in knowing why you decided that you don't want to take part in this study. [USE AVAILABLE SPACE FOR RESPONSES. THEN THANK THE R FOR HIS/HER TIME.]

**Prescription Drug Redesign Study
Round 2 and 3 Screening Scripts to Identify Cognitive Interview Participants**

Date/Time of Call _____

[NOTE: DO NOT READ TEXT OR RESPONSE CATEGORIES IN ALL CAPS.]

[IF RESPONDING TO A MESSAGE:]

Hello, this is [Stephanie Stolzenberg/NAME] calling from RTI International. Thank you for contacting us about our study that will test questions about prescription drug use. I understand that you're interested in participating in an upcoming interview. Is that correct?

[IF ANSWERING AN INCOMING CALL]

Thank you for contacting us about our study that will test questions about prescription drug use. I understand that you're interested in participating in an upcoming interview. Is that correct?

IF NO ADDITIONAL INTERVIEWS NEED TO BE SCHEDULED, OFFER TO PUT THE CALLER ON A WAIT LIST. INFORM ROUND 1 OR 2 CALLERS THAT THIS COULD INCLUDE RECONTACT FOR A FUTURE ROUND SEVERAL WEEKS LATER. COLLECT FIRST NAME AND TELEPHONE NUMBER.

Let me ask you a few questions about you to see if you are eligible.

1. How did you hear about this study?

2. How old are you? [IF ANY CONCERNS, ASSURE THAT THIS IS ONLY FOR US TO KNOW ABOUT THE FINAL COMPOSITION OF THE PARTICIPANTS.]

_____ (AGE IN YEARS)

PLEASE READ THE FOLLOWING IF THE PERSON IS UNDER 12:

Since you are [AGE], we cannot interview you for this study. Thank you for your time and interest. [CONCLUDE THE CALL.]

IF CALLER IS **18 OR OLDER** AND:

- o WE DO NOT CURRENTLY NEED PARTICIPANTS FOR THIS AGE GROUP, CONTINUE WITH Q3 BUT PUT CALLER ON A WILL CALL LIST AFTER COMPLETING THE INTERVIEW. INFORM ROUND 1 OR 2 CALLERS THAT THIS COULD INCLUDE RECONTACT FOR A FUTURE ROUND SEVERAL WEEKS LATER.

- o WE STILL NEED PARTICIPANTS FOR THIS AGE GROUP, GO TO Q3.

IF CALLER IS 12-17 YEARS OLD AND:

- o WE DO NOT CURRENTLY NEED PARTICIPANTS FOR THIS AGE GROUP, PUT HIM/HER ON A WILL CALL LIST, THANK HIM/HER AND TERMINATE CALL.
 - o WE STILL NEED PARTICIPANTS FOR THIS AGE GROUP, CONTINUE WITH 2A.
- 2a. Since you are under 18, I will need to talk with a parent or guardian and ask them if it is okay for you to participate. I will describe the study to your parent or guardian, including the types of questions that we will ask and what you will need to do to participate. Your parent or guardian will need to tell us if it is okay for you to participate in the study.

May I speak with your parent or guardian now to ask if it is okay for you to participate?

- 1 YES – PARENT/GUARDIAN AVAILABLE [GO TO 2D]
- 2 NO – PARENT/GUARDIAN NOT AVAILABLE [GO TO 2B]

2b. When would be a good time for me to call back to talk with them? _____

2c. Thank you. If I can't get in touch with your (parent/guardian), I may need to leave a message for them to call me back. If that happens, I will only say that I'm calling about a health study, and will not tell anything more about the study until I have them on the phone. Likewise, when I call you back, if I can't get in touch with you, I may need to leave a message, but I'll only say that I'm calling about a health study. We won't ask you anything further for the study until I have a chance to talk with a (parent/guardian).

2cc. What phone number should I call to reach your parents? _____

2cd. Is this a cell phone number?

- 1 YES
- 2 NO

2ce. IF YES TO CELL PHONE : Is there a home phone number where I could reach your parents that's not a cell phone number?

- 1 YES [GO TO 2CF]
- 2 NO [GO TO 2CG]

2cf. What is that phone number? _____

2cg. What is the cell phone number? _____

2d. TO PARENT/GUARDIAN: My name is _____ from RTI International. Your child responded to an advertisement we placed for research participants between the ages of 12 and 17 for a study that will help us see how well young people [your child's age] understand these questions. We would like to talk with you further about [his/her] participation in this study, but we must first verify that we are speaking with an adult who is responsible for [him/her]. Could I [have/confirm] your home phone number and the name that number is listed in? I will be calling Directory Assistance to verify this information. Then, I will call you back at that number to tell you about the study.

PHONE: _____

NAME: _____

HANG UP THE PHONE. ONCE OFF THE PHONE, CONFIRM INFORMATION WITH DIRECTORY ASSISTANCE AND CALL PARENT OR GUARDIAN BACK AND GO TO QUESTION 2E.

IF PARENT/GUARDIAN HAS ONLY CELL PHONE COVERAGE, CONTINUE WITH 2E.

2e. As I said, I work with RTI International, which is conducting the National Survey on Drug Use and Health. RTI is doing this study for the Substance Abuse and Mental Health Services Administration, which is an agency of the U.S. government.

We're interested in testing some questions on prescription drug use that we might be using in the survey. We want to see how well people understand these questions. We plan to interview about 40 people at least 12 years old, including about 12 youth between the ages of 12 and 17.

Before I explain more about the study, does your child have any physical problems that would prevent [him/her] from reading or hearing questions during the interview?

1 YES
Please describe:

2 NO [CONTINUE WITH 2F]

PLEASE READ THE FOLLOWING IF THE PARENT/GUARDIAN REPORTS VISUAL OR HEARING LIMITATIONS THAT WOULD PREVENT THE ADOLESCENT FROM DOING THE INTERVIEW:

Since [he/she] is not able to [read/hear], the questions, we cannot interview [him/her] for this study. Thank you for your time and interest. [CONCLUDE THE CALL.]

- 2f. We're interested in interviewing your child at [RTI's office in Research Triangle Park/Chicago/Washington, DC]/[OR AT NAME OF PROGRAM IF RECRUITED THROUGH TREATMENT]. The interview will take about 90 minutes, but no more than 2 hours. Your child will use a laptop computer to answer questions about [his/her] prescription drug use. The interviewer also will ask how well [he/she] understood the questions. If your child wants to take part in the study, [he/she] will receive a \$50 Visa gift card in appreciation for the interview.

Your child can skip any question [he/she] doesn't want to answer. The interview will be conducted in private, and [his/her] answers will be kept private and confidential. So that your child can feel comfortable answering the questions in the interview, you will not be able to observe the interview.

[ASK IF PARENT HAS ANY QUESTIONS AND IF WE HAVE INITIAL PERMISSION FOR THE CHILD TO PARTICIPATE.]

THANK [IF PERMISSION GIVEN] Thank you very much.

I will need to ask your child a few questions to determine whether he/she will be selected for an interview. Before I do that, I want to talk to you about the parental permission process.

If your child is selected for an interview, we will send you two copies of a permission form by overnight express for you to review. It contains the information I told you about the study, and some more details about the study. However, you won't need to be at home to sign for the letter.

Once you receive the permission form, please read it thoroughly. It also contains names and phone numbers of people you can call if you have [other] questions. I will set up an appointment time to call you so that we can review the permission form over the phone. Please let me know a date and time that is convenient for you. [TRY FOR A DATE WITHIN 2 DAYS OF TODAY'S DATE.]

[RECORD DATE/TIME TO SCHEDULE THE CALLBACK TO READ THROUGH PERMISSION FORM.]

If you give permission for your child to be interviewed after we have read through the form, we will ask you to sign one of the copies and return it to us. We'll include a self-addressed envelope for you. We will not set up an appointment to interview your child until we have received your signed permission form.

So that we can mail you the permission forms right away if your child is selected, may I please have your name and full address?

Name: _____

Street: _____

City: _____

State: _____ Zip Code: _____

Now I have to ask your [son/daughter] a few additional questions to see if [he/she] is eligible to participate. [CONTINUE WITH Q3 FOR ADOLESCENT]

[IF AGE 12-17] You may not want anyone else to hear your answers to some of the questions I am going to ask you. I can wait for you to go someplace private and make sure no one else is listening on the phone. If you'd be more comfortable answering the questions another time that's more private, we can do that.

3. RESPONDENT'S SEX [CONFIRM IF NECESSARY]

- 1 MALE
- 2 FEMALE

4. In what city do you live? [TO DETERMINE GEOGRAPHIC DIVERSITY OF PARTICIPANTS]

5. [IF AGE = 18 OR OLDER] What is the highest grade or year of school you have completed? (CIRCLE ONE)

- 1 LESS THAN HIGH SCHOOL
- 2 HIGH SCHOOL DIPLOMA OR GED
- 3 SOME COLLEGE
- 4 ASSOCIATE'S DEGREE/DEGREE FROM TECHNICAL OR COMMUNITY COLLEGE
- 5 4-YEAR COLLEGE DEGREE
- 6 GRADUATE DEGREE

6. [IF AGE = 18 OR OLDER] Do you have any physical problems that would prevent you from reading or hearing questions during the interview?

- 1 YES
Please describe:

- 2 NO

PLEASE READ THE FOLLOWING IF THE PERSON REPORTS VISUAL OR HEARING LIMITATIONS THAT WOULD PREVENT HIM/HER FROM DOING THE INTERVIEW:

Since you are not able to [read/hear], the questions, we cannot interview you for this study. Thank you for your time and interest. [CONCLUDE THE CALL.]

7. Have you ever participated in a research study? That would include any studies you participated in for RTI or for other organizations.

1 YES (ASK 7A)

2 NO (GO TO 8)

7a. When was the last time?

1 IN THE PAST 12 MONTHS (ASK 7B)

2 MORE THAN 12 MONTHS AGO (GO TO 8)

7b. In the past 12 months, how many research studies have you participated in?

_____ (NUMBER > 0) (THANK CALLER FOR HIS/HER TIME IF > 1)

IF 1 STUDY, PROBE TO DETERMINE TYPE OF STUDY AND WHETHER THE CALLER HAS PARTICIPATED IN AN RTI STUDY IN THE PAST 12 MONTHS. THANK CALLER FOR HIS/HER TIME IF PARTICIPATED IN ANY RTI STUDY IN THE PAST 12 MONTHS OR SURVEY OR OTHER SOCIAL SCIENCE RESEARCH IN THE PAST 12 MONTHS, SUCH AS PUBLIC OPINION RESEARCH, PSYCHOLOGY EXPERIMENTS, MARKET RESEARCH, ETC. (IF UNSURE ABOUT THE TYPE OF PRIOR STUDY PARTICIPATION, GO TO WAITING LIST INSTRUCTIONS AND CONTACT THE RTI STUDY LEADER ABOUT ELIGIBILITY.)

These next questions ask about your use of prescription drugs. You do not have to answer these questions if you do not want to. Remember that all of your answers are confidential.

8. In the past 12 months, have you used any prescription pain relievers, such as Vicodin[®], OxyContin[®], Percodan[®], or Darvon[®] for any reason? Do not include "over-the-counter" pain relievers such as aspirin or Tylenol[®] that can be bought without a doctor's prescription.

1 YES (ASK 8A)

2 NO (GO TO 9)

8a. What prescription pain relievers have you used in the past 12 months? (CIRCLE ALL THAT APPLY)

- | | | | |
|----|---------------|----|-------------------------|
| 1 | BUPRENORPHINE | 15 | PERCOCET |
| 2 | DARVOCET | 16 | PERCODAN |
| 3 | DARVON | 17 | PROPOXYPHENE |
| 4 | DEMEROL | 18 | SUBOXONE |
| 5 | CODEINE | 19 | SUBUTEX |
| 6 | FENTANYL | 20 | TRAMADOL |
| 7 | FENTORA | 21 | TYLENOL WITH
CODEINE |
| 8 | HYDROCODONE | 22 | TYLOX |
| 9 | LORCET | 23 | ULTRAM |
| 10 | LORTAB | 24 | VICODIN |
| 11 | MORPHINE | 25 | OTHER (SPECIFY) |
| 12 | METHADONE | | |
| 13 | OXYCODONE | | |
| 14 | OXYCONTIN | | |
-

9. In the past 12 months, have you used any prescription stimulants, such as Adderall[®], Ritalin[®], or amphetamines? Do not include "over-the-counter" stimulants such as Dexatrim[®] or No-Doz[®] that can be bought without a doctor's prescription.

- 1 YES (ASK 9A)
2 NO (SEE BELOW)

THANK CALLER FOR HIS/HER TIME IF RESPONDING TO RECRUITMENT FROM SUBSTANCE ABUSE TREATMENT BUT DID NOT USE PAIN RELIEVERS OR STIMULANTS IN THE PAST 12 MONTHS.

9a. What prescription stimulants have you used in the past 12 months? (CIRCLE ALL THAT APPLY)

- | | | | |
|---|-------------------------|----|----------------------|
| 1 | ADDERALL | 10 | METHYL-
PHENIDATE |
| 2 | ADDERALL XR | 11 | MODAFINIL |
| 3 | CONCERTA | 12 | PHENETERMINE |
| 4 | DEXEDRINE | 13 | PROVIGIL |
| 5 | DEXMETHYL-
PHENIDATE | 14 | RITALIN |
| 6 | DEXTRO-
AMPHETAMINE | 15 | RITALIN LA |
| 7 | DIDREX | 16 | TENUATE |
| 8 | FOCALIN | 17 | OTHER (SPECIFY) |
| 9 | FOCALIN XR | | |
-

"Waiting List" Participants:

- Put on waiting list if Round 2 interview and responded to recruitment from outside of substance abuse treatment, if the following are true:
 - Aged 18 or older, 3 "general population" interviews have been scheduled or completed but < 2 interviews have been completed with substance abuse treatment clients in this age group.
 - Aged 12 to 17, 4 "general population" interviews have been scheduled or completed, but < 4 interviews have been completed with substance abuse treatment clients in this age group.

[THANK THE PERSON FOR HIS/HER TIME. INDICATE THAT WE WILL PLACE THE PERSON ON A WAITING LIST IN CASE ANY APPOINTMENTS BECOME AVAILABLE.]

GROUP SAMPLE TARGETS TO BE ASSESSED FOLLOWING SCREENING INTERVIEW (relax as needed in the order indicated):

- Gender: aim for at least 2 males or 2 females aged 18 or older and at least 2 males or 2 females aged 12 to 17 in a given round.
- Education (aged 18 or older): Aim for at least 1 adult per round with a high school education or less.
- Age group (aged 18 or older): Aim for at least 1 person aged 18 to 25 and at least 1 person aged 50 or older in a given round.
- Prescription drug use (if not recruited from treatment in Round 2): Aim for at least 1 person in each age group who has used prescription pain relievers and at least 1 in each age group who has used prescription stimulants in the past 12 months. (NOTE: Persons who have used both in the past 12 months could count toward the criteria for each.)
- Prescription drug use (in Round 3): Aim for at least 1 person in each age group who has used *either* prescription pain relievers or stimulants in the past 12 months.

[THANK THE PERSON FOR HIS/HER TIME IF THE PERSON MEETS THE GENERAL ELIGIBILITY CRITERIA BUT A TARGET FOR THE GROUP HAS BEEN MET. OTHERWISE, CONTINUE.]

IF CALLER IS ELIGIBLE:

[IF AGE =18+ YEARS OLD] You are eligible to participate in our interviews. Let me tell you a little about the study. The purpose of the study is to get feedback on how easy or difficult different questions about prescription drugs are to answer. These questions will be presented on a laptop computer. We are doing this research to improve the questions about use of prescription drugs in a large national survey, called the National Survey on Drug Use and Health, that is given to about 70,000 people every year. The survey is conducted by RTI International, and is funded by the Substance Abuse and Mental Health Services Administration or SAMHSA. We will interview about 5 adults, and the interviews will take about 90 minutes but no more than 2 hours. We are trying to schedule interviews to start in [IF ROUND 2, READ, "late March of 2011"; IF ROUND 3, READ, "August 2011."] If you decide to take part in the interviews, you will receive a \$75 Visa gift card for completing the interview, in appreciation for your time.

Taking part in the study is voluntary.

[IF CALLER IS RESPONDING TO RECRUITMENT FROM OUTSIDE OF A TREATMENT PROGRAM, READ:] It will be conducted at our office in (Research Triangle Park/Chicago/DC).

[IF CALLER IS RESPONDING TO RECRUITMENT THROUGH A TREATMENT PROGRAM, READ:] It will be conducted at the program where you are receiving treatment. [RECORD PROGRAM INFO SEPARATELY FROM INTERVIEW AND ONLY AS LONG AS IS NEEDED TO RECORD APPOINTMENT INFO INTO SECURE ELECTRONIC DATABASE. SHRED OR DISCARD HARD COPY WRITTEN PROGRAM INFO FOR SHREDDING IMMEDIATELY AFTER INTERVIEW.]

What you say during the interview will remain private and confidential. As such, we will not share information you give us with anyone other than project staff.

Would you like to take part in this study?

- 1 YES [GET AVAILABILITY DATES/TIMES AND SCHEDULE A CALLBACK TO CONFIRM. THEN THANK THE R FOR HIS/HER TIME.]
- 2 NO

[IF NO] If you'd like to tell us, we'd be interested in knowing why you decided that you don't want to take part in this study. [USE AVAILABLE SPACE FOR RESPONSES. THEN THANK THE R FOR HIS/HER TIME.]

[IF AGE =12-17 YEARS OLD]

Thank you. Let me tell you about the study. This is for the National Survey on Drug Use and Health. In this study, we talk to around 70,000 people all over the country. We get information about a variety of health issues. Right now we're interested in testing some questions about adolescent experiences with prescription drugs that we might be using in the study. Before we do this, we want to see how well people understand these questions and how they might go about answering them. RTI is doing this study for the Substance Abuse and Mental Health Services Administration, which is an agency of the U.S. government.

You will meet with an interviewer for about 90 minutes but no more than 2 hours. This meeting will be in private and your parents will not be able to observe the interview. We will interview about 7 people between the ages of 12 and 17. We are trying to schedule interviews to start in [IF ROUND 2, READ, "late March of 2011"; IF ROUND 3, READ, "August 2011."]

Taking part in the study is voluntary. If you decide to take part in the interview, you will receive a \$50 Visa gift card for completing the interview, in appreciation for your time.

[IF CALLER IS RESPONDING TO RECRUITMENT THROUGH A TREATMENT PROGRAM, READ:] It will be conducted at the program where you are receiving treatment. [RECORD PROGRAM INFO SEPARATELY FROM INTERVIEW AND ONLY AS LONG AS IS NEEDED TO RECORD APPOINTMENT INFO INTO SECURE ELECTRONIC DATABASE. SHRED OR DISCARD HARD COPY WRITTEN PROGRAM INFO FOR SHREDDING IMMEDIATELY AFTER INTERVIEW.]

[IF CALLER IS RESPONDING TO RECRUITMENT FROM OUTSIDE OF A TREATMENT PROGRAM, READ:] It will be conducted at our office in (Research Triangle Park/Chicago/DC).

Would you be willing to help us with this study?

- 1 YES TO INTERVIEW [CONTINUE BELOW]
- 2 NO TO INTERVIEW

[IF YES] I will be calling your parent back to explain more information about the study to [him/her]. When we know for certain that it's OK with your parent for us to interview you, I'll call back to set up an appointment for your interview.

[DURING PARENT CALL BACK, DETERMINE THE BEST DAY/TIME TO CALL BACK TO SET UP THE INTERVIEW APPOINTMENT, ALLOWING ENOUGH TIME FOR THE SIGNED FORM TO BE RECEIVED AT RTI. YOU NEED BOTH THE PARENT AND YOUTH WHEN SETTING UP THE INTERVIEW TO ENSURE THE APPOINTMENT TIME WILL BE ACCEPTABLE TO THE PARENT, REGARDLESS OF WHETHER THE PARENT IS ACCOMPANYING THE YOUTH. IF THE YOUTH IS NOT HOME AFTER WE HAVE RECEIVED THE SIGNED PERMISSION, LET THE PARENT KNOW THAT WE WILL CONTACT THE YOUTH TO SET UP THE INTERVIEW, BUT WILL RECONTACT THE PARENT TO LET HIM/HER KNOW THE INTERVIEW DATE AND TIME]

[IF NO] If you'd like to tell us, we'd be interested in knowing why you decided that you don't want to take part in this study. [USE SPACE BELOW FOR RESPONSES. THEN THANK THE R FOR HIS/HER TIME.]

[IF CALLER IS 12-17 YEARS OLD AND NOT ELIGIBLE] Please let your parent know that he/she will not be receiving the permission form. Thank you for your time.