Attachment 1: Teen alcohol and marijuana use questions to be cognitively tested

The Public Health Service Act provides us with the authority to do this research (42 United States Code 242k). All information which would permit identification of any individual, a practice, or an establishment will be held confidential, will be used for statistical purposes only by NCHS staff, contractors, and agents only when required and with necessary controls, and will not be disclosed or released to other persons without the consent of the individual or the establishment in accordance with section 308(d) of the Public Health Service Act (42 U.S.C. 242m(d)) and the Confidential Information Protection and Statistical Efficiency Act (PL-107-347).

Public reporting burden for this collection of information is estimated to average 60 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. 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. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to CDC/ATSDR Information Collection Review Office; 1600 Clifton Road NE, MS D-74, Atlanta, GA 30333, ATTN: PRA (0920-0222).

Form Approved OMB #0920-0222; Expiration Date: 07/31/2018

ALCOHOL Introduction: The next 4 questions ask about drinking alcohol. This includes drinking beer, wine, wine coolers, and liquor such as rum, gin, vodka, or whiskey. For these questions, drinking alcohol does not include drinking a few sips of wine for religious purposes.		
ALC1	During your life, on how many days have you had at least one drink of alcohol?	A. 0 days B. 1 or 2 days C. 3 to 9 days D. 10 to 19 days E. 20 to 39 days F. 40 to 99 days G. 100 or more days
ALC2	How old were you when you had your first drink of alcohol other than a few sips?	A. I have never had a drink of alcohol other than a few sips B. 8 years old or younger C. 9 or 10 years old D. 11 or 12 years old E. 13 or 14 years old F. 15 or 16 years old G. 17 years old or older
ALC3	During the past 30 days, on how many days did you have at least one drink of alcohol? Interviewer Instruction: If the response is 0 days, skip to the marijuana section.	A. 0 days B. 1 or 2 days C. 3 to 5 days D. 6 to 9 days E. 10 to 19 days F. 20 to 29 days

	During the past 30 days, how did you usually get the alcohol you drank? 2 questions ask about how many drinks of alcohol	=
	a couple of hours. For the first question, the num ut is different for female students and male stude	-
ALC5	During the past 30 days, on how many days did you have 4 or more drinks of alcohol in a row (if you are female) or 5 or more drinks of alcohol in a row (if you are male)?	
ALC6	During the past 30 days, what is the largest number of alcoholic drinks you had in a row?	A. I did not drink alcohol during the past 30 days B. 1 or 2 drinks C. 3 drinks D. 4 drinks E. 5 drinks F. 6 or 7 drinks G. 8 or 9 drinks H. 10 or more drinks
The next 3 questions ask about the type of alcohol you usually drink, the location where you drink, and the mixing of alcohol with energy drinks.		
ALC7a	During the past 30 days, what type of alcohol did you usually drink? (Select only one response.)	A. I did not drink alcohol during the past 30 days B. I do not have a usual type C. Beer

		D. Flavored malt beverages, such as Smirnoff Ice, Bacardi Silver, or Hard Lemonade E. Wine coolers, such as Bartles & Jaymes or Seagrams F. Wine G. Liquor, such as vodka, rum, scotch, bourbon, or whiskey H. Some other type
ALC7b	During the past 30 days, what type of alcohol did you drink most often? (Select only one response.)	A. I did not drink alcohol during the past 30 days B. I do not have a usual type C. Beer D. Flavored malt beverages, such as Smirnoff Ice, Bacardi Silver, or Hard Lemonade E. Wine coolers, such as Bartles & Jaymes or Seagrams F. Wine G. Liquor, such as vodka, rum, scotch, bourbon, or whiskey H. Some other type
ALC8	During the past 30 days, where did you usually drink alcohol? (Select only one response.)	A. I did not drink alcohol during the past 30 days B. At my home C. At another person's home D. While riding in or driving a car or other vehicle E. At a restaurant, bar, or club F. At a public place such as a park, beach, or parking lot G. At a public event such as a concert or sporting event H. On school property I. Some other place.
ALC9	During the past 30 days, on how many days did you mix and drink alcohol with an energy drink, such as Monster or Red Bull?	A. 0 daysB. 1 or 2 daysC. 3 to 5 daysD. 6 to 9 daysE. 10 to 19 days

	F. 20 to 29 days
	G. All 30 days

MARIJUANA		
The next questions are about marijuana or cannabis. Marijuana or cannabis is also called pot,		
grass, ganja		_
MJA1	During the past 30 days, on how many days did you use marijuana or cannabis? Interviewer Instruction: If the response is 0 days, end the interview here.	(0-30 days)
MJA2	During the past 30 days, how did you use marijuana or cannabis? Please select all that apply. Did you	1. I did not you use marijuana or cannabis during the past 30 days 2. Smoke it, for example, in a joint, bong, pipe, or blunt. 3. Eat it, for example, in brownies, cakes, cookies, or candy. 4. Drink it, for example, in tea, cola, or alcohol. 5. Vaporize it, for example, in an e-cigarette-like vaporizer or another vaporizing device. 6. Dab it, for example, using waxes or concentrates. 7. Use it some other way. 77. Do not know/Not sure 99.Refused
МЈАЗ	How much do you risk harming yourself physically and in other ways if you use marijuana or cannabis daily or almost daily?	1 No risk 2 Slight risk 3 Moderate risk 4 Great risk DK/REF
MJA4	How much do other people risk harming themselves physically and in other ways if they use marijuana or cannabis daily or almost daily ?	1 No risk 2 Slight risk 3 Moderate risk 4 Great risk DK/REF
MJA5	Does an adult in your house use marijuana or cannabis?	1. Yes 2. No
MJA6	On the days that you did use marijuana or cannabis, how many times per day did you use it on average?	Number of times [0-60]

MJA7	On the days you use marijuana or cannabis, how many hours a day do you usually spend high?	1=I usually don't get high 2=1-2 hours 3=3-4 hours 4=5-6 hours 5=7-8 hours 6=9 or more hours
MJA8	When you used marijuana or cannabis during the past 30 days, was it primarily:	1 For medical reasons (like to treat or decrease symptoms of a health condition); 2 For non-medical reasons (like to have fun or fit in); 3 For both medical and non-medical reasons; 7 Don't know/Not sure 9 Refused
MJA9	During the past 7 days, on how many days did you breathe the smoke from someone who was smoking marijuana or cannabis products in an indoor or outdoor public place?[read if necessary: Examples of indoor public places are school buildings, stores, restaurants, concert halls, and sports arenas. Examples of outdoor public places are school grounds, sidewalks, parking lots, stadiums, fairgrounds, and parks.]	[0-7 days]
MJA10	During the past 7 days, on how many days did you breathe the smoke from someone who was smoking marijuana products in your home or where you live?	[0-7 days]