NetSCID BLAISE SPECS

CCONF You have been invited and agreed to take part in a follow-up study for the National Survey of Drug Use and Health.

Before I review information about the study, I need to confirm I'm talking to the right person. What is your first name and age?

INTERVIEWER: CONFIRM RESPONDENT NAME: [NAME FOR TARGET RESPONDENT] AGE: [AGE FOR TARGET RESPONDENT]

1 YES – CORRECT RESPONDENT, CONTINUE 2 NO

PROGRAMMER: IF CCONF = YES CONTINUE;

ELSE DISPLAY "INTERVIEWER, PLEASE IDENTIFY THE CORRECT RESPONDENT

(NAME: [NAME FOR TARGET RESPONDENT], AGE: [AGE FOR TARGET

RESPONDENT].

IF THAT IS NOT POSSIBLE END THE INTERVIEW AND ASSIGN THE CORRESPONDING STATUS CODE."

CFIID3 INTERVIEWER: PLEASE ENTER THE INTERVIEW ADMINISTRATION MODE

1 ZOOM – AUDIO ONLY 2 ZOOM – VIRTUAL

PROGRAMMER: INCLUDE FOR EVERY NEW SESSION THAT IS STARTED IN CASE OF INTERRUPTIONS

CPHON2 Should you get disconnected, please sign back into the call. Should I get disconnected from this call, please remain on the line and I will dial back in.

Just in case of a ZOOM outage, is there a good phone number to reach you?

1 YES 2 NO

DK/REF

CPHONNW [IF CPHONE2 = 1] Would you please give me a phone number so that I can contact you in case there is a ZOOM outage?

CSAFE To ensure you are in a safe and private location, can you please provide your physical address?

INTERVIEWER NOTE: IF RESPONDENT ASKS WHY, CITE STUDY PROTOCOLS
AROUND SAFETY.
ADDRESS 1
ADDRESS 2
CITY
STATE
ZIP
DK/REF

CSAFE2 INTERVIEWER: IS RESPONDENT IN A SAFE PLACE?

1 YES

2 NO – INTERVIEWER, PLEASE BREAKOFF THE INTERVIEW AND RESCHEDULE WITH THE R.

C3 [IF CSAFE = 1] First, I need to share some key information about the study. You have been selected for a follow-up study to the National Survey on Drug Use and Health. This study, sponsored by the U.S. Department of Health and Human Services, will ask questions about mental health, and consists of one interview.

The interview should take about 60 minutes to complete. Your participation is voluntary, and you can refuse to answer any questions. If you decide to participate, I will ask you questions using a laptop computer. I will ask for permission to record the interview to ensure I did it properly. You can still be interviewed even if you do not allow the interview to be recorded. Your interview recording may be used for quality or training purposes on this project only. You [IF PRECON = 1: have received/IF PRECON – 2: will receive] \$30 for agreeing to participate in this interview.

PRESS ENTER TO CONTINUE

C3_INT All information collected for this study will be kept confidential and used only for statistical purposes. You cannot be identified through any information you give us. Your name and address will never be connected to your answers. However, there are some exceptions to this privacy rule. If you tell me about the abuse of a child or that you plan to hurt yourself or others, we may need to notify a mental health professional or other authorities.

If you would like to know the full risks and benefits of the study, and how your information will be used, I can read the more detailed informed consent to you now, or you can read it at https://nsduhweb.rti.org/respweb/final extended informed consent.pdf.

Do you agree to participate in this study?

1 RESPONDENT CONSENTS TO PARTICIPATE

2 RESPONDNET DOES NOT CONSENT TO PARTICIPATE

C4a [IF C3_INT = 2] Thank you for your willingness to participate, but we cannot interview you without your consent.

PROGRAMMER: THIS CONCLUDES THE INTERVIEW

C3r_INT [IF C3_INT = 1] I would like to video record this interview so my supervisor can make sure I am following the correct procedures. The recording will be kept private and will be deleted after my work has been reviewed. If you don't want me to record the interview, you can still complete the interview.

May we record this interview?

- 1 RESPONDENT CONSENTS TO BE RECORDED 2 RESPONDENT DOES NOT CONSENT TO BE RECORDED
- **C4b** [IF C3r INT = 1] INTERVIEWER, PLEASE START RECORDING.
- C18 [IF C3_INT = 1] NTERVIEWER PLEASE INDICATE WHETHER YOU ARE ONLINE OR NOT

1 ONLINE

2 OFFLINE

C19 [IF C3_INT = 1] INTERVIEWER PLEASE SELECT EITHER NetSCID ONLINE OR PAPER SCID TO CONTINUE.

ADMINISTER THE ...

1 NetSCID ONLINE

2 PAPER SCID (ONLY IF NetSCID ISN'T ACCESSIBLE)

PROGRAMMER: IF C19 = 1 LAUNCH NETSCID; IF C19 = 2 CONTINUE **ERROR MESSAGE**: [IF C18 = 2 AND C19 = 1] IF YOU ARE OFFLINE NetSCID ONLINE CANNOT BE SELECTED. PLEASE CHECK YOUR ANSWERS.

[IF C19 = 2] INTERVIEWER: PLEASE ADMINISTER THE PAPER VERSION OF THE SCID. WHEN COMPLETED PLEASE RETURN TO THE BLAISE INSTRUMENT TO CONTINUE WITH BACK-END MODULES.

[IF C19 = 2] PROGRAMMER SKIP DIRECTLY TO BACK-END MODULES PROGRAMMER TIME STAMP SET: SCI

LEAVE BLAISE INSTRUMENT

BEGIN NetSCID INSTRUMENT

- LAUNCHED VIA WEB OR ADMINISTERED VIA PAPER, ONLY IF WEB IS UNAVAILABLE
- COMPLETE SCID OVERVIEW AND MODULES

RETURN TO BLAISE INSTRUMENT

C20 [IF C19 = 1] JUST TO CONFIRM, DID YOU COMPLETE THE NetSCID INSTRUMENT?

- 1. YES, COMPLETED THE ENTIRE NetSCID
- 2. YES, COMPLETED A PARTIAL NetSCID
- 3 NO, DID NOT COMPLETE THE NetSCID

IF C20 = 3, PROMPT: PLEASE CONDUCT THE SCID INTERVIEW AND RETURN HERE TO CONTINUE ONCE COMPLETED

C20SCID [IF C19 = 2] JUST TO CONFIRM, DID YOU COMPLETE THE PAPER SCID INSTRUMENT?

- 1. YES, COMPLETED THE ENTIRE PAPER SCID
- 2. YES, COMPLETED A PARTIAL PAPER SCID
- 3 NO, DID NOT COMPLETE THE PAPER SCID

IF C20SCID = 3, PROMPT: PLEASE CONDUCT THE SCID INTERVIEW AND RETURN HERE TO CONTINUE ONCE COMPLETED

INCENTTYPE

[IF PRECON = 2] Since you did not receive your \$30 when you agreed to participate, we would like to send it to you now, by either electronic prepaid or physical Visa or MasterCard gift card.

On the next screen, I will enter your contact information. This information will be kept separate from the answers to this survey, and will only be used for the purpose of sending your gift card.

How would you like to receive your \$30?

- 1. Electronic Visa Gift Card (Delivered by email within two business days, can only be used for online purchases, and can only be used for purchases of equal or lesser value)
- 2. Electronic MasterCard Gift Card (Delivered by email within two business days, can only be used for online purchases, and can only be used for purchases of equal or lesser value)
- 3. Physical Visa Gift Card (Delivered by mail within 4-6 weeks and can be used in stores and online)
- 4. Physical MasterCard Gift Card (Delivered by mail within 4-6 weeks and can be used in stores and online)
- 5. No, thanks. I decline the \$30

EADDRESS [IF INCENTTYPE = 1 OR 2]

The email message will be from **RTI-eIncentives@rti.org** and the subject line will say "How to Redeem Your \$30 [Visa OR MasterCard] Card."

EMAIL ADDRESS: [EMAILADD]

RE-ENTER EMAIL ADDRESS: [EMAILADD2]

ERROR MESSAGE: IF EMAILADD NE EMAILADD2: THE EMAIL ADDRESSES DO NOT MATCH. PLEASE RE-ENTER THEM.

MAILINCENT [IF INCENTTYPE = 3 OR 4] Please let me know the address you want us

to mail the gift card to.

Street address 1: [MADDRESS]
Street address 2: [MADDRESS2]

City: [MCITY]

State: [MSTATE]

Zip: [MZIP]

INCENTCON [IF INCENTTYPE = 3 OR 4] Your gift card will be delivered to you in a RTI standard business sized envelope. Since we do not have your name, the letter will be directed to you using your age and gender.

Is this information correct?

FILL:

ADDRESS/PO BOX: [MADDRESS]

[MADDRESS2] CITY: [MCITY] STATE: [MSTATE]

ZIP: [MZIP]

- 1. Yes
- 2. No

IF NO IS ENTERED: CLICK BACK TO GO BACK ONE SCREEN AND EDIT R'S INFORMATION.

CIDBO THESE QUESTIONS ARE FOR THE INTERVIEWER TO ANSWER. DO NOT READ TO THE R.

Did the respondent complete the entire interview or is this an incomplete interview or breakoff?

- 1. RESPONDENT COMPLETE INTERVIEW
- 2. INCOMPLETE INTERVIEW/BREAKOFF

[IF CIDB0 = 2 AND INTERVIEW STATUS = COMPLETE] INTERVIEW IS COMPLETED BY RESPONDENT. PLESE SELECT "Skip" TO CONFIRM YOUR ANSWER. PROGRAMMER: GO TO CIDBBR1 IF CIDB0 = INCOMPLETE INTERVIEW/BREAKOFF ELSE CONTINUE

GAF1 [IF CIDB0 = 1] **REQUIRED** Consider psychological, social, and occupational functioning on a hypothetical continuum of mental health-illness. Do not include impairment in functioning due to physical (or environmental) limitations.

[RANGE: 1-100]

NOTE: USE INTERMEDIATE CODES WHEN APPROPRIATE, E.G., 45, 68, 72.

Superior functioning in a wide range of activities, life's problems never seem to get out of hand, is sought out by others because of his or her many positive qualities. No
symptoms.
Absent of minimal symptoms (e.g., mild anxiety before an exam), good functioning
in all areas, interested and involved in a wide range of activities, socially effective,
generally satisfied with life, no more than everyday problems or concerns (e.g., an
occasional argument with family members).
If symptoms are present, they are transient and expectable reactions to psychosocial
stressors (e.g., difficulty concentrating after family argument); no more than slight
impairment in social, occupational, or school functioning (e.g., temporarily falling
behind in schoolwork).
Some mild symptoms (e.g., depressed mood and mild insomnia) or some difficulty in
social, occupational, or school functioning (e.g., occasional truancy, or theft within
the household), but generally functioning pretty well, has some meaningful
interpersonal relationships.
Moderate symptoms (e.g., flat and circumstantial speech, occasional panic attacks) or
moderate difficulty in social occupational, or social functioning (e.g., few friends,
conflicts with co-workers).
Serious symptoms (e.g., suicidal ideation, severe obsessional rituals, frequent
shoplifting) or any serious impairment in social, occupational, or school
functioning (e.g., no friends, unable to keep a job).

40-31	Some impairment in reality testing or communication (e.g., speech is at times
	illogical, obscure, or irrelevant) or major impairment in several areas, such as work
	or school, family relations, judgment, thinking, or mood (e.g., depressed man avoids
	friends, neglects family, and is unable to work, child frequently beats up younger
	children, is defiant at home, and is failing at school).
30-21	Behavior is considerably influenced by delusions or hallucinations or serious
	impairment in communication or judgment (e.g., sometimes incoherent, acts grossly
	inappropriately, suicidal preoccupation) or inability to function in almost all areas
	(e.g., stays in bed all day, no job, home, or friends).
20-11	Some danger of hurting self or others (e.g., suicide attempts without clear expectation
	of death, frequently violent, manic excitement) or occasionally fails to maintain
	minimal personal hygiene (e.g., smears feces) or gross impairment in communication
	(e.g., largely incoherent or mute).
10-1	Persistent danger of severely hurting self or others (e.g., recurrent violence) or
	persistent inability to maintain minimal personal hygiene or serious suicidal act with
	clear expectation of death.

SOFAS1 [IF CIDB0 = 1] **REQUIRED** Consider social and occupational functioning on a continuum from excellent functioning to grossly impaired functioning. Include impairments in functioning due to physical limitations, as well as those due to mental impairments. To be counted, impairment must be a direct consequence of mental and physical health problems; the effects of lack of opportunity and other environmental limitations are not to be considered.

_____[RANGE: 0-100]

NOTE: USE INTERMEDIATE CODES WHEN APPROPRIATE, E.G., 45, 68, 72.

100- 91	Superior functioning in a wide range of activities,
90-81	Good functioning in all areas, occupationally and socially effective.
80-71	No more than a slight impairment in social, occupational, or school functioning (e.g., infrequent interpersonal conflict, temporarily falling behind in schoolwork).
70-61	Some difficulty in social, occupational, or school functioning, but generally functioning well, has some meaningful interpersonal relationships.
60-51	Moderate difficulty in social, occupational, or school functioning (e.g., few friends, conflicts with peers or co-workers).
50-41	Serious impairment in social, occupational, or school functioning (e.g., no friends, unable to keep a job).
40-31	Major impairment in several areas, such as work or school, family relations (e.g., depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home, and is failing at school).
30-21	Inability to function in almost all areas (e.g., stays in bed all day; no job, home, or friends).
20-11	Occasionally fails to maintain minimal personal hygiene; unable to function independently.
10-1	Persistent inability to maintain minimal personal hygiene. Unable to function without harming self or others or without considerable external support (e.g., nursing care and supervision).
0	Inadequate information.

CIDB1[IF CIDB0 = 1] How did the respondent complete most of the clinical interview?

- 1. THE RESPONDENT COMPLETED THE INTERVIEW ON THE PHONE (ZOOM AUDIO)
- 2. THE RESPONDENT COMPLETED THE INTERVIEW VIRTUALLY (ZOOM AUDIO AND VIDEO)

CIDB1a [IF CIDB1 = 2] Did the respondent have any technical difficulties using ZOOM?

2. NO
CIDB1b [IF CIDB1 = 2] Did the respondent at any time get disconnected from the virtual interview?
1. YES 2. NO
CIDB2 [IF CIDB1 = 1 OR 2] Were you able to clearly hear what the respondent was saying?
1. YES 2. NO
CIDB2a [IF CIDB1 = 1 OR 2] Was the respondent able to hear you for most of the interview?
1. YES 2. NO
CIDB3 [IF CIDB1 = 2] Did the respondent have their camera on
1. FOR THE ENTIRE INTERVIEW 2. FOR PART OF THE INTERVIEW, OR 3. NOT AT ALL
CIDB4a [IF CIDB1 = 2 AND CIBD3 NE 3] On a scale of 1 to 5, where 1 is extremely poor visual quality and 5 is extremely good visual quality, how would you rate the overall visual quality of the interview?
[RANGE 1-5]
CIDB4b [IF CIDB1 = 2 AND CIDB3 NE 3] How well were you able to observe the respondent during the interview? Were you able to clearly observe the respondent's <i>Select all that apply.</i>
 ENTIRE UPPER BODY DURING THE ENTIRE INTERVIEW ENTIRE UPPER BODY DURING PARTS OF THE INTERVIEW FACE ONLY DURING THE ENTIRE INTERVIEW FACE ONLY DURING PARTS OF THE INTERVIEW, OR OTHER (SPECIFY:
CIDB4c [CIDB1 = 2] How helpful, if at all, was it to be able to see the respondent's behavior or facial expressions to make a diagnosis?
1. EXTREMELY HELPFUL

1. YES

- 2. VERY HELPFUL
- 3. SOMEWHAT HELPFUL
- 4. NOT SO HELPFUL
- 5. NOT AT ALL HELPFUL

PROGRAMMER: INCLUDE CHECKBOX "I DID NOT USE VISUAL OBSERVATIONS TO MAKE A DIAGNOSIS"

CIDB5 [IF CIDB1 = 2] Was the respondent in their home, either inside or outside during the interview?

- 1. YES
- 2. NO

CIDB6 [IF CIDB5 = 2] Where was the respondent during the interview?

- 1. AT THE RESPONDENT'S WORKPLACE
- 2. AT THE HOME OF THE RESPONDENT'S RELATIVE OR FRIEND
- 3. IN SOME TYPE OF CONFERENCE ROOM IN A RESIDENCE HALL, SCHOOL OR APARTMENT COMPLEX
- 4. AT A LIBRARY
- 5. IN SOME TYPE OF COMMON AREA, SUCH AS A LOBBY, HALLWAY, STAIRWELL, OR LAUNDRY ROOM
- 6. SOME OTHER PLACE (SPECIFY: _____)

CIDB7 [IF CIDB1 = 2] Please indicate how private the interview was. Do not count yourself as another person in the room.

- 1. COMPLETELY PRIVATE NO ONE WAS IN THE ROOM OR LISTENING
- 2. MOSTLY PRIVATE PERSON(S) IN THE ROOM OR LISTENING LESS THAN HALF OF THE TIME
- 3. SOMEWHAT PRIVATE PERSON(S) IN THE ROOM OR LISTENING ABOUT HALF OF THE TIME
- 4. NOT VERY PRIVATE PERSON(S) IN THE ROOM OR LISTENING MORE THAN HALF THE TIME
- 5. NOT AT ALL PRIVATE CONSTANT PRESENCE OF OTHER PERSON(S) IN THE ROOM OR LISTENING

CIDB7a [IF CIDB7 NE 1] Not including yourself or project observers, who were the people present or listening to the interview? *Select all that apply.*

- 1. PARENT(S)
- 2. SPOUSE
- 3. LIVE-IN PARTNER/BOYFRIEND/GIRLFRIEND
- 4. OTHER ADULT RELATIVE(S)

5. OTHER ADULT(S) NONRELATIVE
6. CHILD(REN) UNDER 18
8. OTHER (SPECIFY:)
CIDB8a [IF CIDB7 NE 1] In what ways did the other people's presence influence the interview <i>Select all that apply.</i>
1. PERSON(S) CAME INTO THE ROOM AND YOU PAUSED THE INTERVIEW UNTIL THEY LEFT
 PERSON(S) CAME INTO THE ROOM, YOU OR R ANSWERED THEIR QUESTION OR EXPLAINED THAT PRIVACY WAS NEEDED, AND THEY LEF PERSON(S) STAYED IN THE ROOM BUT DID NOT PARTICIPATE IN INTERVIEW
4. PERSON(S) STAYED IN THE ROOM AND HELPED R WITH ANSWERS RELEVANT TO THE DIAGNOSES
5. PERSONS(S) STAYED IN THE ROOM AND HELPED R WITH ANSWERS NOT RELEVANT TO THE DIAGNOSES
6. PERSON(S) STAYED BUT WAS TOO YOUNG TO UNDERSTAND THE INTERVIEW
7. OTHER (SPECIFY:)
CIDB9 [IF CIBD0 = 1] During the interview, was the atmosphere at the respondent's interview site:
 EXTREMELY CHAOTIC AND NOISY; DISRUPTIVE TO INTERVIEW SOME NOISE OR INTERRUPTIONS BUT INTERVIEW WENT REASONABLY SMOOTHLY, OR VERY QUIET AND CALM, IDEAL FOR INTERVIEW
CIDB10 [CIDB0 = 1] What types of distractions or interruptions were present during the
interview? Select all that apply.
☐ TELEVISION ON DURING INTERVIEW BUT R NOT WATCHING ☐ TELEVISION ON DURING INTERVIEW WITH R WATCHING AT LEAST SOMI OF THE TIME
□ R RECEIVED 1 OR 2 PHONE CALLS
☐ R RECEIVED 3 OR MORE PHONE CALLS
☐ CHILDREN PRESENT NEEDED ATTENTION
□ OTHER (SPECIFY:) □ NO DISTRACTIONS OR INTERRUPTIONS PRESENT
CIDB11 [IF CIBD0 = 1] How attentive was the respondent to the questions during the interview?
1. NOT AT ALL ATTENTIVE

2. SOMEWHAT ATTENTIVE

3. VERY ATTENTIVE

CIDB11a [IF CIBD0 = 1] Did the respondent reference any recall aids such as records, diaries, or medication lists during the interview?

- 1. YES
- 2. NO

CIDB12 [IF CIBD0 = 1] Was the respondent upset during the interview?

- 1. YES, UPSET BECAUSE OF INTERVIEW CONTENT
- 2. YES UPSET, BUT NOT RELATED TO INTERVIEW CONTENT
- 3. NO, NOT UPSET

CIDBDRP1 [IF COBD0 = 1 OR 2] Did you administer the Distressed Respondent Protocol during this interview?

- 1. YES
- 2. NO

CIDBDRP2 [IF CIDBDRP1 = 1] Were there any protocol deviations while administering the Distressed Respondent Protocol during this interview?

- 1. YES
- 2. NO

CIDBDRP3 [IF CIDBDRP1 = 1] Have you sent the Distressed Respondent Protocol Form to your Clinical Team Lead?

- 1. YES
- 2. NO
- 3. NOT REQUIRED BY THIS PROTOCOL

CIDB13 [IF CIBD0 = 1] While completing the interview, did the respondent experience any of the following difficulties?

	Yes	No
a. LANGUAGE/TRANSLATION PROBLEMS		
b. READING OR VISION PROBLEMS		
c. COMPREHENSION PROBLEMS		
d. SUBSTANCE OF THE INTERVIEW (I.E., TOPICS WE		
WERE ASKING ABOUT)		
e. OTHER (SPECIFY:)		

CIDB14 [IF CIBD0 = 1] Did the respondent make any comments about the interview being too long?

- 1. YES
- 2. NO

CIDB15a [IF CIBD0 = 1] Did you administer the Short-Blessed Test, also known as SBT, with this respondent?

- 1. YES
- 2. NO

CIDB15b [IF CIDB15a = YES] Did the respondent pass the Short-Blessed Test?

- 1. YES
- 2. NO

CIDB16 [IF CIBD0 = 1] Please note anything else you think would be helpful for the interpretation and understanding of this interview.

ALLOW 250 CHARACTERS

PROGRAMMER CHECKBOX: NO COMMENTS

C19n [IF C19 = 2] Interviewer, do you wish to enter the paper SCID data into the NetSCID now?

- 1 YES, ENTER THE PAPER SCID DATA NOW
- 2 NO, ENTER THE PAPER SCID DATA LATER. PLEASE RETURN HERE WHEN YOU ARE READY TO ENTER THE DATA

PROGRAMMER: IF C19n = 1 LAUNCH NETSCID; IF C19n = 2 CLOSE INTERVIEW AND SET STATUS CODE PENDING

C20n [IF C19n = 1] Just to confirm, did you finish entering the paper SCID data into the NetSCID instrument?

- 1 YES, FINISHED ENTERING THE PAPER SCID
- 2 NO, ONLY ENTERED A PARTIAL PAPER SCID AND WILL CONTINUE LATER

PROGRAMMER TIME STAMP SET: CBEGINDBBR

CIDBBR1 [IF CIDB0 = 2] Please indicate if any of the following contributed to the interview termination.

	YES	NO
a. DISTRESSED RESPONDENT PROTOCOL INITIATED		
b. RESPONDENT NOTED THE INTERVIEW WAS TOO		
LONG AND DID NOT WISH TO CONTINUE		

c. RESPONDENT DID NOT HAVE TIME TO COMPLETE	
THE INTERVIEW BUT IS WILLING TO COMPLETE AT	
A LATER TIME	
d. RESPONDENT DOES NOT WISH TO CONTINUE THE	
INTERVIEW ALONE	
e. RESPONDENT WAS STRESSED ABOUT THE	
CONTENT OF THE INTERVIEW	

PROGRAMMER CHECKBOX: NA (INTERVIEW WAS COMPLETED)
PROGRAMMER: IF CIDBBR1 = NA GO TO CIDB1

CIDBBR2a [IF CIDB0 = 2] Did you administer the Short-Blessed Test, also known as SBT, with this respondent?

- 1. YES
- 2. NO

CIDBBR2b [IF CIDBBR2a = 1] Did the respondent pass the Short Blessed Test?

- 1. YES
- 2. NO

PROGRAMMER PLEASE GENERATE SBT FAIL:

IF CIDBBR2b = 1, SBT FAIL = NO ELSE, SBT FAIL = YES

PROGRAMMER TIME STAMP SET: CENDDBBR