NATIONAL INSTITUTE ON DRUG ABUSE

National Survey on Drug Abuse: 1977

Volume I
Main Findings

U.S. DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE
Public Health Service
Alcohol, Drug Abuse, and Mental Health Administration

INDEX OF SELECTED TABLES

			TOTAL				AGE				SEX				RACE				EDUCATION				REGION				POP. DENSITY			
			Y	A	YA	OA	Y	A	YA	OA	Y	A	YA	OA	Y	A	YA	OA	Y	A	YA	OA	Y	A	YA	OA	Y	A	YA	OA
* MARIHUANA	EVER USED	STATUS	40	41	42	43	40	41	42	43	40	41	42	43	40	41	42	43		41	42	43	40	41	42	43	40	41	42	43
		TREND	48	49	45	45	48	49			48	49			48	49				49			48	49			48	49		
	1 MO. USE	STATUS	40	41	42	43	40	41	42	43	40	41	42	43	40	41	42	43		41	42	43	40	41	42	43	40	41	42	43
		TREND	52	53	45	45	52	53	53	53	52	53			52	53				53			52	53			52	53		
	1ST USE PAST YR	STATUS	32	32	32	32	56	56	56	56																				
		TREND	56	56			56	56	56	56																				
INHALANTS	EVER USED	STATUS	64	64	64	64																								
		TREND	65	65	66	66																								
	1 MO. USE	STATUS	64	64	64	64																								
		TREND	65	65	66	66																								
	1ST USE PAST YR	STATUS	32	32	32	32	33	33	33	33																				
		TREND	34	34																										
HALLUCIN.	EVER USED	STATUS	68	68	68	68																								
		TREND	69	69	70	70																								
	1 MO. USE	STATUS	68	68	68	68																								
		TREND	69	69	70	70																								
	1ST USE PAST YR	STATUS	32	32	32	32	33	33	33	33																				
		TREND	34	34																										
COCAINE	EVER USED	STATUS	76	76	76	76																								
		TREND	77	77	78	78																								
	1 MO. USE	STATUS	76	76	76	76																								
		TREND	77	77	78	78																								
	1ST USE PAST YR	STATUS	32	32	32	32	33	33	33	33																				
		TREND	34	34																										
HEROIN	EVER USED	STATUS	80	80	80	80																								
		TREND	81	81	82	82																								
	1 MO. USE	STATUS	80	80	80	80																								
		TREND	81	81	82	82																								
	1ST USE PAST YR	STATUS	32	32	32	32	33	33	33	33																				
		TREND	34	34																										
Δ OTH. OPIATES	EVER USED	STATUS	84	84	84	84																								
		TREND	85	85	86	86																								
	1 MO. USE	STATUS	84	84	84	84																								
		TREND	85	85	86	86																								
	1ST USE PAST YR	STATUS	32	32	32	32	33	33	33	33																				
		TREND	34	34																										
* STIMULANTS	EVER USED	STATUS	92	93	94	95	92	93	94	95	92	93	94	95	92	93	94	95		93	94	95	92	93	94	95	92	93	94	95
		TREND	96	96	96	96																								
	1 MO. USE	STATUS	19	21	23	25																								
		TREND	30	31																										
	1ST USE PAST YR	STATUS	32	32	32	32	33	33	33	33																				
		TREND	34	34																										
* SEDATIVES	EVER USED	STATUS	92	93	94	95	92	93	94	95	92	93	94	95	92	93	94	95		93	94	95	92	93	94	95	92	93	94	95
		TREND	96	96	96	96																								
	1 MO. USE	STATUS	19	21	23	25																								
		TREND	30	31																										
	1ST USE PAST YR	STATUS	32	32	32	32	33	33	33	33																				
		TREND	34	34																										
* TRANQUILIZ.	EVER USED	STATUS	92	93	94	95	92	93	94	95	92	93	94	95	92	93	94	95		93	94	95	92	93	94	95	92	93	94	95
		TREND	96	96	96	96																								
	1 MO. USE	STATUS	19	21	23	25																								
		TREND	30	31																										
	1ST USE PAST YR	STATUS	32	32	32	32	33	33	33	33																				
		TREND	34	34																										
ALCOHOL	EVER USED	STATUS	19	21	23	25																								
		TREND	26	27																										
	1 MO. USE	STATUS	109	109	109	109	109	109	109	109	109	109	109	109	109	109	109	109					109	109	109	109	109	109	109	109
		TREND	110	110			110	110	110	110	110	110			110	110							110	110			110	110		
	1ST USE PAST YR	STATUS																												
		TREND																												
CIGARETTES	EVER USED	STATUS	19	21	23	25																								
		TREND	26	27																										
	1 MO. USE	STATUS	19	21	23	25	113	113	113	113	113	113			113	113							113	113			113	113		
		TREND	113	113			113	113	113	113	113	113			113	113							113	113			113	113		
	1ST USE PAST YR	STATUS																												
		TREND																												

KEY: Y=All youth (age 12-17); A=All adults (age 18+); YA=Young adults (age 18-25); OA=Older adults (age 26+).

NOTE: Table entries are page numbers.

*Marihuana and/or hashish.

ΔSee table footnotes for inclusion or exclusion of methadone.

*Nonmedical use of prescription-type drug.

National Survey on Drug Abuse: 1977

A Nationwide Study- Youth, Young Adults, and Older People

Volume I
Main Findings

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FOREWORD

Publication of the 1977 National Survey on drug abuse marks the fifth in a series of comparable surveys conducted since 1971. During this past year, there has been significant increase in the use of PCP, marihuana, cocaine, stimulants, sedatives, and tranquilizers, especially among young adults. The percent of youth currently using marihuana is higher this year than in any comparable period during this series. Further analysis will tell us whether this increase is related to the decriminalization laws, or methodological or other factors.

Though use is increasing, it is important to emphasize that the majority of all Americans are not current drug users, hold negative views about drug use effects, and believe future marihuana laws should be as strict or stricter than present ones. However, when we look separately at young adults, the age group with highest use patterns, we see a marked polarization of viewpoints and a majority in favor of policy liberalization.

The increase in the use of many of these drugs shows that there is a continuing substance abuse problem in our society. With the empirically based understanding of prevalence provided for us by this and other surveys, we can turn with greater confidence to the shaping of programs and the formulation of policy.

Robert L. DuPont, M.D.
Director
National Institute on Drug Abuse

PREFACE

This volume is the fifth in a series of reports on the extent of drug abuse in the United States. Prior reports published by Response Analysis (Abelson and Fishburne, Nonmedical Use of Psychoactive Substances, 1976; Abelson and Atkinson, Public Experience with Psychoactive Substances, 1975; Abelson, Cohen, Schrayer, and Rappeport, Drug Experience, Attitudes and Related Behavior Among Adolescents and Adults, 1973; Abelson, Cohen, and Schrayer, Public Attitudes Toward Marihuana, 1972) and the current report are in two volumes. Volume I, Main Findings, provides the reader with statistical information on prevalence, incidence, and correlates. The reader is referred to the Highlights of Statistical Results (p. 15) for a summary of the findings in this volume; the introduction and appendices put the results in the needed perspective. Volume II, Methodology, provides added operational depth such that the reader motivated to extended critique or anticipated replication has all necessary materials available.

Many people have contributed to past and present volumes. The writers would like to take special note at this time of the administrative leadership exerted by the late Audrey Proctor and of the many uncompensated hours she spent in directing the field work for the 1974 and 1976 national surveys.

Dr. Joan Dunne Rittenhouse, Project Officer for the sponsoring National Institute on Drug Abuse, has contributed significantly to the shaping and execution of this study; beginning with the specifications for a high quality research design, she has participated in every step of the strategy planning and assumed responsibility for all final decisions.

CONTENTS

LIST OF FIGURES

PART I - OVERVIEW

Introduction

The importance of information on drug use* in the general population must be seen in the context of other available information. Obviously, laboratory experiments provide knowledge of the immediate effects of drugs. It is well known that treatment records provide lower-bound estimates of the prevalence of conditions that come to the attention of caregivers for one reason or another: either because they are sufficiently debilitating that a patient seeks treatment voluntarily; or because they are sufficiently flagrant that a patient is led into treatment through either law enforcement or emergency medical channels. Natural history studies among drug users yield valuable insight into the progress of drug-using careers with and without intervention; and treatment follow-up studies serve an evaluative function relative to the success of treatment. Studies of these groups, or identified populations, were for years our only source of information on drug abuse.

Surveys as an Information Source

The unique contribution of surveys of the general population lies in their ability to describe the phenomenon of illicit drug use as a social problem whose existence may be only crudely reflected in the relatively small -- and biased -- number of cases coming to the attention of authorities. Surveys of the general population seek to find the facts about drug use -- that is, the closest approximation of true extent of use, most of it measurable only from the anonymous or unidentified members of the population who admit use.

In addition to providing information on the extent of a problem, a survey of the general population can describe the various forms in which the phenomenon occurs, emphasizing more its typical nature than its most dramatic manifestation. The survey allows classification of the phenomenon along a continuum of involvement, permitting flexibility in the choice of cutting points for problem definition; in short, the survey can examine the problem at various levels of severity, substituting empirical for arbitrary definition of what is socially or medically pathologic.

Beyond examination of the facets of a problem in the total population, a population survey can help to define the locus of problems through its ability to specify population subgroups of particular interest. Surveys can be designed to answer questions such as: Among what kinds of persons is the problem likely to originate? In what groups does it flourish and spread? In what groups or under what conditions does it tend to disappear, or alternatively to become severe?

When surveys are conducted on a periodic or quasi-periodic basis, as is the case in the present series, the reporting of trends fulfills an especially important requirement for monitoring social problems over time. Trend studies based on official records may confound changes in the phenomenon under investigation with changes in official case-finding efforts or procedures. Thus, a change in a city's crime rate is almost necessarily confounded with a change in police activity or a change in the tendency to report crime such as the increase which typically follows installation of the special "911" crime-report telephone number. A series of surveys across time constitutes an important alternative or addition to other methods of monitoring trends, because surveys are free of the administrative changes associated with official identification of cases. By monitoring trends

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*Including both legal and illicit drugs. Abuse as used in this section refers to use of drugs -- whether legal or illicit -- under conditions not sanctioned by law.

in the general population, it may also be possible to foresee changes in the number of cases which will require official attention.

It is clear that information derived from population surveys, taken together with information from other sources and other populations, is intended to provide the scientist with increased insight and understanding of social problems; and to provide the decision maker with a powerful body of facts which can assist him or her to move steadily in the direction of more rational policy.

Survey results in a social problem area such as drug abuse can serve a vital function in the creation of an informed public. In the absence of objective facts, "common knowledge" about a social problem such as drug abuse may be more fantasy than fact, drawn more from a few sensational cases than from sober evidence. On the other hand, when the results of careful research can be made available to the public through mass media, a more balanced and mature state of public opinion is attained.

Everything that has been said concerning the importance of surveys assumes, of course, that the available surveys are competently designed and executed; that the population is rigorously defined; that the sampling is based strictly on random procedures; and that some reasonable validity can be attributed to the results.

Coverage of the Population

The results of any survey are limited to the population from which the sample was drawn. In the current series of studies, the term "general population" is used to refer to persons aged 12 and older living in households in the contiguous United States (excluding Hawaii and Alaska). Thus, persons living in military installations, dormitories, and some other group quarters, and institutions such as hospitals and jails were not covered in these surveys. In addition, homeless persons -- those with no fixed address -- were not included in the sampling frame. Drug use across the aggregate of the excluded groups may or may not be similar in extent and character to drug use in the household population. Some of the excluded population groups (e.g., residents of nursing homes and other caretaking institutions) may be characterized by much lower rates of illicit drug use than those observed for the household population; but other excluded groups, such as students living in college dormitories and persons with no fixed address, may be characterized by much higher rates -- particularly for use of some of the stronger substances, such as LSD and heroin. Therefore, although the excluded populations are relatively minor in size, generalization from the household population to the total population is inappropriate, and separate studies of special populations are clearly justified.

Validity of Survey Results

In interpreting the results of any survey, the reader must bear in mind certain caveats concerning (1) the truthfulness of the information provided by the respondents, and (2) the potential bias of nonresponse.

All the results of this survey are based on self-reports. Most respondents appear to be quite uninhibited in reporting their use of even the stronger more socially stigmatized drugs; however, it is not unreasonable to suspect that some unknown proportion of respondents may have a tendency toward denying use of such substances. Double-blind validity experiments and the experience of many researchers in the field of deviant behavior have indicated that reasonably accurate self-report data can be obtained by using carefully selected and trained interviewers who do everything possible to minimize the respondent's perception of risk in answering questions on drug use, through ingenious questioning devices and manipulation of the situation to create an atmosphere free of perceived threat.

It is safe to say that no survey (including the decennial census) has ever obtained data from all persons predesignated for inclusion in the sample. Very high response rates can be achieved in studies of special populations with large budget allocations for data collection, but in studies of the general household population, prudent allocation of resources dictates that a response rate considerably lower than 100 percent must be tolerated. The behavior of nonrespondents, of course, remains unknown, and, unless one is willing to assume that nonresponse is a random process, allowances must usually be made for possible biases due to nonresponse.

Available information on the potential effect of nonresponse is limited to response rates for various demographic subgroups and the drug use rates which characterize respondents in these subgroups. Using such information, analyses of nonresponse patterns were carried out for a previous study in this series. These analyses indicated that demographic differences in the tendency to participate in the survey were not sufficiently associated with drug use to produce appreciable differences in drug use estimates. Nevertheless, to generalize from sample statistics to the household population -- without allowing for the potential bias of nonresponse -- would require the somewhat arguable assumption that demographically similar respondents and nonrespondents are also similar in their drug use behavior.

Inference from Sample to Population

As in any sample survey, the results presented in this report are estimates of the values that would be obtained if the data were collected from all members of the population from which the sample was drawn. Statistically, since the sample was drawn according to strict random (probability-based) procedures, each sample result is the single best estimate of the corresponding population value; this does not mean, of course, that the sample value is necessarily very close to the population value.

On the assumption that the effect of nonresponse is essentially random (or has been compensated for by the demographic adjustments described in Appendix C), the theory of sampling provides the basis for development of a procedure for estimating "confidence limits" which describe the relationship between sample estimates and population values -- not with certainty, but probabilistically. Thus, it is possible to assert, with specified probability, that a percentage based on a sample of given design will fall within a calculable distance from the population value it is designed to estimate.

In all of the figures and many of the major tables of this report, confidence limits are presented at the 95 percent level -- indicating that, if the procedure for setting the confidence limits were followed in repeated sampling from the defined population, the statement that the population value lies between the confidence limits would be correct 95 times out of a hundred. These limits represent a zone of error or uncertainty around the estimate reported in the study and suggest the use of ranges whenever population values are desired. A description of the procedure used to estimate these limits and an explanation of why they are asymmetric around sample values is given in Appendix A of this volume. Briefly, obvious asymmetry occurs in the confidence limits only when the sample percentage is low; indeed, the asymmetric calculation is used here precisely because very low drug use rates characterize certain population groups.

Also in this report, most tables presenting data on recent trends in drug use include an indication of whether a statistically significant change occurred between 1976 and 1977. Statistically, the term "significant" refers to a low likelihood (e.g., 5%, 1%, or 0.1%) that the observed difference is the result of chance alone.

For those tables which do not include confidence limits or significance tests, the reader may obtain the relevant statistical information by referring to the nomographs and reference tables in Appendix A of this volume.

The Sample of Youth, Young Adults, and Older Adults

Actual sampling of youth, young adults, and older adults for this study was carried out via a national area probability sample. Sample locations, households, and specific individuals to be interviewed were designated by the sampling plan and through instructions to the interviewer. At no point was selection left to the discretion of the interviewer.

In order to draw a representative sample of locations, the contiguous United States was first divided into counties or groups of counties which contained a minimum population of 50,000 in 1970. Thirty-eight of these areas were sufficiently large to justify automatic inclusion in the random sample. All other areas were grouped into 65 strata such that the areas in each stratum were as much alike as possible,* and one area was randomly selected from each stratum, with probability proportionate to the eligible population of the area. From within this sample of areas, a sample of 400 smaller areas (each consisting of approximately 2,500 persons) was then randomly drawn, adjusting for each larger area's original chance of selection. One or more "segments" of ten to thirty housing units (defined in rough field counts made by interviewers) was then randomly selected. Within each segment, interviewers listed every dwelling unit and a sample of these housing units was then drawn. The probability procedures used for the selection of locations and housing units were such that each housing unit in the contiguous United States had, overall, an equal chance of selection.

Interviewers visited selected households in order to list residents for purposes of random selection. The individuals in each household were listed by age group, so that youth, young adults, and older adults could be sampled separately and with varying probabilities of selection. In general, the younger the individual, the higher was his or her assigned probability of selection; this procedure was implemented because of the generally negative relationship between drug use and adult age. In processing data, the "over-sampling" of young adults was compensated for by the use of appropriate weights, so that survey results reflect the actual age distribution of the population. At most, one youth and one adult were selected per household.

The sizes of the achieved samples and the population pools from which they were drawn are shown on the opposite page.

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*The strata were formed chiefly on the basis of geographic division, metropolitan versus nonmetropolitan areas, population density, and percent of population employed in manufacturing. Additional criteria were used in forming certain kinds of strata (see Appendix C for details).

TABLE 1

Sample Size and Population Size for Age Subgroups

Age group	Sample size	Population size*
Youth (12 to 17 years)	1,272	24,938,000
Young adults (18 to 25 years)	1,500	30,553,000
Older adults (26 years or older)	1,822	117,266,000

*Source: Population Characteristics: Current Population Reports. U. S. Bureau of the Census, 1976.

Detailed descriptions of the sampling and weighting procedures, as well as the achieved sample itself, are contained in Appendix C of this volume.

Response Rate

The specified response rate (RFP No. 271-76-3324) for the national survey was 80%. Achieved average response rates are 82.5% for the youth sample, 83.9% for young adults, and 79.4% for the older adult sample.

In reporting these response rates, it is important to note that they result from a conservative operational definition. Stringent eligibility requirements prohibit exclusion of households for any of the following reasons: senility, language difficulty, location in a protected access area, or a vacancy that cannot be clearly established. Interviewers are not permitted to substitute other persons or other households. A detailed exposition of procedures for determining response rate is presented in Volume II, Methodology.

The initial step in achieving the sample, prelisting of housing unit addresses in each sample, is described elsewhere in this introduction. Following the prelisting phase, central office personnel assigned interviewers and scheduled training sessions. Criteria for selecting interviewers were: previous national drug study experience, quality of performance in previous studies, and ability as demonstrated in the training session.

This study required the efforts of 360 interviewers and 48 supervisors to cover the 400 sample locations. Of these, 123 interviewers and 29 supervisors had experience with previous drug studies.

Interviewers and supervisors attended two-day personal training sessions. Nine interviewers, who could not attend the sessions, were trained by telephone. The sessions were held in 30 cities from March 25 to April 15 and were conducted by 10 staff members experienced in training interviewers for drug studies.

These all-day meetings focused on the substance of the research, the various instruments to be used and the procedures for sampling and selection. Interviewers were given instruction on how to contact respondents, various ways of establishing rapport, the need for privacy during the interview, and the correct way to record responses. The importance of following instructions was stressed and the need for complete data was emphasized.

Confidentiality

Concern for confidentiality and protection of respondents' rights played a central part in the design and execution of this study. Interviewers had been sensitized to the need to establish credibility with respondents with respect to study protections for anonymity and confidentiality.

The interview was designed to convey the extent to which the respondents' rights would be protected. As the interview form shows, the interviewer introduced himself/herself and the session with a consent statement. A statement of confidentiality assurance was printed at the top of the first page of the questionnaire, and a government authorization was printed at the bottom of the first page. In addition, the interviewer was asked to sign a statement on the last page of the questionnaire verifying that instructions for obtaining respondent consent had been carried out.

The interview questionnaire itself utilized a variety of techniques to afford greater privacy for the respondent during certain phases of the interview. During the "illicit drug use" phase, the respondent marked his own answers to questions read aloud by the interviewer (the self-administered stage). This procedure permitted the respondent to conceal those potentially sensitive answers, while allowing the interviewer to maintain control of the interview. The answer sheets were designed so that, whether or not the respondent had ever used illicit drugs, the same amount of time would be required to fill out the forms. Therefore, the interviewer could not tell how the respondent answered the questions by the amount of time that had elapsed. Experience with this approach indicates that it has the additional benefit of reducing interviewer and respondent misgivings about asking for and giving sensitive information.

For interviews using the nominative (Form N) version of the protocol, a similar technique was used. Respondents listed their close friends who had used heroin on scored cards without revealing this information to the interviewer. Respondents used the scored card to assign a number to each friend and to select at random the one to be discussed.

Materials generated during the course of the interview were marked for identification by the interviewers according to instructions that precluded name, address, or other easily traceable marks. As each answer sheet was completed, the respondent was instructed to place it directly in a return envelope. At the conclusion of the interview, the main questionnaire was also placed in the envelope and then, in the presence of the respondent, the envelope was sealed. The respondent, who had been told of these procedures in advance, was invited to accompany the interviewer to a mailbox. The interview materials, which did not contain the name or address of the respondent anywhere on the questionnaires or envelope, came directly back to central office. The interviewers were not permitted to review or to edit questionnaires.

All questionnaires were destroyed after keypunching. On the data tape, respondents are identified only by location number and housing unit number. To ensure that these numbers cannot be traced to specific addresses, the following steps were taken:

- Housing unit listing sheets were destroyed as soon as they had been checked for proper execution of sampling instructions.

- Housing unit record sheets were returned to central office in a separate envelope from the questionnaire. After they were keypunched to provide a record of the interview completion experience, the record sheets were destroyed. The punched records do not include the address and are identified only by location number and housing unit number.

After destruction of listing sheets and housing unit record sheets, there is no way to identify addresses of sample housing units. The permanent sampling records show only the blocks in which interviews were conducted, but there is no record of specific housing units contacted.

Instrumentation

The statement of work for this study (RFP No. 271-76-3324) required an increased attempt to measure the prevalence of heroin use in this unidentified population. In particular, the development of a projective or nominative procedure for friends' use was suggested. One consequence of this, given concern with holding constant or reducing respondent burden, was deemphasis on aspects of drug use studied elsewhere. In 1977, only half of the sample was asked about Rx psychotherapeutic drugs, a phenomenon under study in other parts of the Department of Health, Education, and Welfare. A minimum number of questions on Rx psychotherapeutic drugs were retained for methodological purposes, i.e., these relatively nonthreatening questions in the early part of the protocol had been thought to serve a desensitizing function.

The 1977 data collection instruments were as follows:

- Form N: For personal interviews with adults or youth. This form contains a series of questions (Q's. 103-115) on heroin use among respondents' close friends, but does not contain questions on nonmedical use of psychotherapeutic drugs.

- Form P: For personal interviews with adults or youth. This form contains a series of questions (Q's. 22-56) on nonmedical use of psychotherapeutic drugs, but does not contain questions on heroin use among respondents' close friends.

- A self-administered questionnaire on marihuana: The same for adults or youth, filled out by respondents. These answer sheets and questions were the same for all respondents.

- Seven answer sheets: Six, one for each particular drug or drug category and one on sequence of drug use, filled out by respondents while interviewers read the questions aloud. These answer sheets and questions were the same for all respondents.

Glossary

This section was designed to aid the reader in understanding the current report. Included in this glossary are definitions of substances and frequently used terms, as well as information on table reading, i.e., "rounding," "repercentaging," "percent sign." Not included are definitions of terms or substances which seem self-explanatory, i.e., age, sex, cigarettes, heroin. In those cases where definitions have changed over time, the current definition (1977) is stated first, followed by earlier definitions. Statements in quotation marks are taken from relevant questionnaires.

Alcohol — 1977, 1976, 1974: "Alcoholic beverages -- beer, wine, and whiskey, or anything else to drink with alcohol in it."
1972: "Beer, wine, hard liquor like cocktails or highballs, or on the rocks, or straight shots."

All Adults — Persons age 18 years and over who took part in the national survey. For other age groups see: All Youth, Young Adults, Older Adults.

All Youth — Persons age 12-17 years who took part in the national survey. For other age groups see: All Adults, Young Adults, Older Adults.

Bases — The bases shown in parentheses in the tables are the actual numbers of respondents in each category. These bases should be used when estimating the statistical significance of percentage differences.

Confidence Limits — The upper and lower limits as stated in this report define the interval within which one can be 95% certain that the population value lies, i.e., if the procedure were followed in all possible samples, the statement that the population value lies in the confidence interval would be correct 95 times out of 100.

Current Drinker — 1977, 1976, 1974: Drank in past month.
1972: Drank in past seven days.

Current Drug Use — See: Use in Past Month.

Current Smoker — 1977, 1976, 1974: Smoked within past month.
1972, 1971: Smoke at "the present time."

Ever Used — Lifetime prevalence, i.e., has used the drug one or more times in his/her lifetime.

First Use In Past Year — New starts in the past year over the total membership of the specified population.

Hallucinogens — 1977, 1976: "LSD and other hallucinogens like mescaline, peyote, psilocybin, and DMT." Separate data are provided for PCP.
1974: "LSD or other hallucinogens."
1972: "LSD or something like it, such as mescaline, psilocybin, MDA, STP."

Inhalants

1977, 1976: "Glue or some other substances that people inhale for kicks or to get high. Besides glue, there are things like gasoline, some aerosols, nitrous oxide, amyl nitrite which is also called 'poppers' and other solvents."
1974: "Glue or some other inhalant."
1972: "Glue or other things you breathe in."

Large Metropolitan

Includes the top 25 Standard Metropolitan Statistical Areas (SMSA's) as of 1970, according to standards set by the U. S. Bureau of the Census*. Metropolitan areas include central cities and surrounding areas and range in size from one and one-quarter million to eleven and one-half million residents. The top 25 are as follows:

New York	Pittsburgh	Anaheim-Garden Grove-Santa Ana
Los Angeles	St. Louis	Seattle
Chicago	Baltimore	Milwaukee
Philadelphia	Cleveland	Cincinnati
Detroit	Houston	Atlanta
San Francisco	Newark	Paterson-Clifton-Passaic
Washington	Minneapolis-St. Paul	Buffalo
Boston	Dallas	San Diego
	Miami	

Other density areas are: Nonmetropolitan, Other Metropolitan.

Less Than .5%

Percents that are less than .5 (or cases in which the frequency is 0), are shown as an asterisk on all tables, i.e., on tables with percents reported to the nearest tenth as well as on tables with percents reported to the nearest whole number.

Level of Significance

On all trend tables, the level of significance for the change between 1976 and 1977 is noted as follows: SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable. When values are not provided, the reader can refer to Table 100 (p. 140) to determine the difference required for significance at .05 level.

Lifetime Prevalence

Ever used, i.e., has used the drug one or more times in his/her lifetime.

Marihuana and/or Hashish

1977, 1976, 1974: Marihuana and hashish were treated as separate categories during the data collection phase. However, for purposes of comparability with other ongoing National Institute on Drug Abuse research, these two substances have been combined in this report.
1972, 1971: Data on marihuana only, hashish not included in these surveys. Note: Although the data for earlier years is on marihuana only, it is our experience that most respondents who report using hashish have also used marihuana.

*This classification has been retained because it represents "Large Metropolitan" as it was defined in previous studies (1976, 1974, 1972, 1971).

Medical Use

"Prescribed for you by a doctor."
NOTE: In 1977, questions about medical use were administered to a random half of the households.

Nonmedical Use

1977, 1976, 1974: A "yes" or "not sure" response to any one (or more) of the following three items: (1) Did you ever take any of these kinds of pills just to see what it was like and how it would work? (2) Did you ever take any of these kinds of pills just to enjoy the feeling they give you? (3) Did you ever take any of these pills for some other nonmedical reason, and not because you needed it?
NOTE: In 1977, questions about nonmedical use were administered to a random half of the households.

1972: A "yes" response to any one (or more) of the following five items: (1) Have you ever taken these pills to help you get along with your family or other people? (2) Have you ever taken any of these pills to help you get ready for some big event, or to help you accomplish something? (3) Did you ever take one of these kinds of pills just to see what it was like and how it would work? (4) Have you ever taken any of these pills before going out, so that you could enjoy yourself more with other people? (5) Did you ever take these kinds of pills just to enjoy the feeling they give you?

Nonmetropolitan

"Nonmetropolitan" includes a sample of those areas which were not part of a Standard Metropolitan Statistical Area as of 1970, according to standards set by the U. S. Bureau of the Census; but in general, this includes smaller communities, rural non-farm areas, and rural farm areas. Other density areas are: Large Metropolitan, Other Metropolitan.

North Central

Census classifications of East North Central states (Illinois, Indiana, Michigan, Ohio, Wisconsin) and West North Central states (Iowa, Kansas, Minnesota, Missouri, Nebraska, North Dakota, South Dakota).

Northeast

Census classifications of New England states (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont) and Middle Atlantic states (New Jersey, New York, Pennsylvania).

Now a College Student

1977, 1976: "Now a College Student" defined by a "yes" response to the question: "Are you a student or taking any courses this year in a college or other kind of school?"

1974, 1971: Student status defined by selection of the response "now a college student" to the following question on educational attainment: "What is the last grade that you completed in school?"

1972: Not tabulated.

Older Adults

Persons age 26 years and older who took part in the national survey. For other age groups see: All Youth, All Adults, Young Adults.

Other Metropolitan — "Other Metropolitan" includes a sample of those Standard Metropolitan Statistical Areas which were not included in "Large Metropolitan," i.e., the top 25 Standard Metropolitan Statistical Areas as of 1970, according to standards set by the U. S. Bureau of the Census. Other density areas are: Large Metropolitan, Nonmetropolitan.

Other Opiates — NOTE: In 1977, 1976, and 1974, "Other Opiates" and "Methadone" were treated as separate entities during the data collection phase. However, for purposes of comparability with other ongoing National Institute on Drug Abuse research, other opiates and methadone have been combined under the heading of "Other Opiates" whenever possible. Footnotes will alert the reader to the inclusion or exclusion of methadone on particular tables.

1977, 1976: "Opium or other drugs containing opium and its derivatives. They are usually in the form of prescription cough syrups, pain killers, or stomach medicines -- things like morphine, codeine, dilaudid, demerol, and paregoric. Although these are frequently prescribed for medical reasons, these questions ask about the use of these drugs for nonmedical purposes -- that is, for kicks or for highs, to gain insight, or for pleasure. A list of these opiates is printed at the top of your answer sheet." Additional opiates listed on the answer sheet: hycodan, laudanum, talwin.

1974: The definition was the same, but no additional opiates were shown on the answer sheet.

Percents — Percents are shown to the nearest tenth when the data pertain to one of the four major age groups in our sample, i.e., all youth, all adults, young adults, and older adults. This practice was initiated because some of the drug use figures are so small, e.g., heroin, that rounding the percents can contribute to the distortion of the data. However, we do not mean to imply that percents expressed to the nearest tenth have any more precision than they would have if rounded to a whole number. When the data pertain to smaller subgroups, e.g., non-white youth, the percents are rounded to the nearest whole number.

Percent Sign — If there is a "%" sign next to the first figure in a column, but not the other figures in that column, then the column reads down and adds to 100%, unless otherwise explained. If there is a "%" sign next to the first figure in a row but not the other figures in that row, then the row reads across and adds to 100%, unless otherwise explained. If there is a "%" sign next to each figure in the body of a table, it means that the table is a composite and is made up of a number of partial tables; rows and columns do not add to 100%.

Population Density — Population density is grouped in three categories: Large Metropolitan, Other Metropolitan, Nonmetropolitan.

Recency of Use — "Most recent time used." The categories of recency are: "past month," "past year, not past month," and "not past year."

Region

Region is grouped in four categories: Northeast, North Central, South, West.

Repercentaging

Percentages are derived from the weighted frequencies, which are shown in the separately bound detailed tabulations. Any repercentaging or combining of subgroups which the reader may wish to do should utilize these weighted frequencies, i.e., if the reader wanted to ascertain the lifetime prevalence of marihuana among 12-15 year olds, he would use the weighted frequencies to combine 12-13 year olds with 14-15 year olds. Copies of these detailed tabulations are on file with the National Institute on Drug Abuse, the Social Research Group of The George Washington University, and Response Analysis Corporation.

Rounding

The computer tables from which we work sometimes add to 99% or 101% when they should add to 100%. Similarly, tables shown to one decimal place sometimes add to 99.9% or 100.1% instead of 100.0%. These discrepancies are due to the rounding of percents.

Sedatives

1977, 1976, 1974: "Doctors sometimes prescribe these to help relax during the day and to get a better night's sleep. People also use these on their own, to help relax and just to feel good. These are barbiturates or sedatives and are sometimes called 'downs' or 'downers.'"

NOTE: In 1977, questions about sedatives were administered to a random half of the households.

1972: "Doctors prescribe these to help relax and to get a better night's sleep. People also use these on their own -- to help relax and just to feel good. These are barbiturates and are sometimes called 'downs' or 'downers.'"

Source

Questions from the 1977 survey instrument that have been used in a particular table or figure. The following types of abbreviations are used:

Q26 Question 26 from the main interview
MJ6 Question 6 from the marihuana self-administered questionnaire
SH6 Question 6 from the hashish answer sheet
G6 Question 6 from the glue answer sheet
C6 Question 6 from the cocaine answer sheet
L6 Question 6 from the LSD answer sheet
O6 Question 6 from the opiates answer sheet
H6 Question 6 from the heroin answer sheet
SAQ6 Question 6 from the first six illicit drug answer sheets and the marihuana SAQ

South

Census classifications of South Atlantic states (Delaware, District of Columbia, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, West Virginia), East South Central states (Alabama, Kentucky, Mississippi, Tennessee), and West South Central states (Arkansas, Louisiana, Oklahoma, Texas).

Stimulants

1977, 1976, 1974: "Doctors sometimes prescribe these for losing weight. People also use them on their own to make them feel more wide-awake, peppy, or alert. They are sometimes called 'ups' or 'uppers,' 'speed,' or 'bennies.'"
NOTE: In 1977, questions about stimulants were administered to a random half of the households.

1972: "Doctors prescribe these mostly for losing weight, and sometimes to give people more energy. People also use these on their own, just to feel good. These are amphetamines. They are also called 'ups' or 'uppers,' 'speed,' 'bennies.'"

Tranquilizers

1977, 1976, 1974: "Doctors sometimes prescribe these to calm people down or quiet their nerves, or relax their muscles. People also take them on their own to make them feel better. These are tranquilizers."
NOTE: In 1977, questions about tranquilizers were administered to a random half of the households.

1972: "These help people to calm down and to quiet their nerves. Doctors prescribe them. People also take them on their own to make them feel better. These are tranquilizers."

Use in Past Month

1977, 1976: Has used within past month.
1974: Has used within past month and indicates intention to use again. In practice, intention to use was dropped in computation because virtually all past month users indicated intent to use again.
1972, 1971: Marihuana only -- self-designated current users who report usage "once a month or less," as well as those who report more frequent use.
Other drugs -- has used within past month.

Use in Past Year

Respondent reports use one or more times within past calendar year.

West

Census classifications of Mountain states (Arizona, Colorado, Idaho, Montana, Nevada, New Mexico, Utah, Wyoming,) and Pacific states (California, Oregon, Washington).

Young Adults

Persons age 18 to 25 years who took part in the national survey. For other age groups see: All Youth, All Adults, Older Adults.

Highlights of Statistical Results

Marihuana*

The public is more likely to have had experience with marihuana than with any of the other psychoactive drugs studied. More than one-fourth (28.2%) of the youth (age 12-17) report marihuana experience and about one-sixth (16.1%) report current use (use in past month). For adults (age 18 and over), the lifetime prevalence rate (24.5%) is somewhat lower than that of youth, and current use (8.2%) is half of that reported by 12-17 year olds. However, these figures mask the fact that marihuana experience is strongly related to age and that the highest prevalence rate is found among young adults age 18-25. Of this age group, six in ten have used marihuana compared to fewer than two in ten older adults (age 26 and over). Young adults also have the highest rate for current use. Fully one in four in this age group is a current user compared to only one in thirty older adults.

From 1976 to 1977, there was a significant increase in prevalence rates among both youth and young adults but not among older adults. The experience level (tried at least once) among youth rose 5.7%, and among young adults increased by 7.2%. During the same time period, there was a significant increase (3.7%) in current use among youth. No change in current use was indicated for young adults or older adults.

Inhalants

Youth (age 12-17) report greater lifetime prevalence (9.0%) than do adults (3.7%). Among adults, prevalence varies by age: 11.2% of 18-25 year olds report experience, whereas only 1.8% of those 26 and over have ever used inhalants. Current use is .7% for youth and less than .5% for both young adults and older adults.

Among both youth and adults, estimates of lifetime prevalence and current use have not changed significantly since 1976.

Hallucinogens

Experience with hallucinogens is reported by one in twenty youth (4.6%) and by a slightly larger proportion of adults (6.1%). However, adult experience differs greatly by age. Nearly one in five young adults (19.8%) report lifetime prevalence compared to fewer than one in thirty-five older adults (2.6%). Current use rates are: youth 1.6%; all adults .5%; young adults 2.0%; older adults-less than .5%.

For both youth and adults, estimates of prevalence and current use of all hallucinogens, except PCP (see p. 63), have remained relatively unchanged since the 1976 survey.

Cocaine

Adults report greater experience than youth (6.0% compared to 4.0%). The highest lifetime prevalence is found among 18-25 year olds: 19.1% of this age group report experience compared to 2.6% of those 26 and over. Current use rates are: youth .8%; all adults 1.0%; young adults 3.7%; older adults-less than .5%.

Note: See Glossary for definitions of substances and frequently used terms.

*Marihuana and/or hashish.

Among youth, estimates of prevalence and current use did not change significantly between the 1976 and 1977 surveys. However, the experience level for young adults has increased significantly between 1976 (13.4%) and 1977 (19.1%). Current use for this age group was also up: 1976 2.0%; 1977 3.7%.

Heroin

Reported experience with heroin is 1.1% among youth (age 12-17) and 1.4% among adults. Young adults report higher lifetime prevalence than do older adults (3.6% compared to .8%). Less than .5% of any age group indicates current heroin use.

Over time, prevalence and current use estimates have remained relatively unchanged for both adults and youth.

The concern that these levels of prevalence may be an underestimate of the true extent of heroin use in the unidentified population has suggested the development of more sensitive measures. Beginning with the RFP #271-76-3324 for the 1977 study, the interview incorporates heroin questions not only about own use, but about friends' use as well. Initial results are statistically encouraging, in that a significant proportion of respondents do have close friends who have used heroin, even though they deny own use. However, the conversion of these responses into corrected estimators awaits further methodological work in connection with future National Surveys. Readers interested in specific items on friends' use should see Form N, Appendix D. Details of the methodological development of this procedure are provided in Volume II, Methodology.

Opiates Other Than Heroin

Experience with other opiates is reported by one in twenty adults (5.0%) and a slightly larger proportion of youth (6.1%). Lifetime experience is highest among young adults (13.5%) and lowest among older adults (2.8%). Use in past month is 1.0% or less for all groups.

Among both youth and adults, there was no significant change in prevalence levels between the 1976 and 1977 surveys.

Nonmedical Experience with Stimulants, Sedatives, and Tranquilizers

For each of these substances, the highest prevalence and current use rates are reported by young adults. These 18-25 year olds report the most experience with stimulants (21.2%), followed by sedatives (18.4%), and tranquilizers (13.4%). Young adults report current use for each of these as follows: stimulants 2.5%; sedatives 2.8%; tranquilizers 2.4%. Among youth and older adults, prevalence rates for these substances are about 5% or less, while current use is about 1% or less.

Between the 1976 and 1977 surveys, there was no significant change in prevalence rates for youth and older adults. However, among 18-25 year olds, there was a significant increase in prevalence rates for sedatives and tranquilizers.

Note: See Glossary for definitions of substances and frequently used terms.

Alcohol

More than three-fourths of the adults report experience with alcohol compared to about half of 12-17 year olds. Current use is reported by 58.0% of adults and 31.2% of youth. Current drinking among both youth and adults did not increase between 1976 and 1977.

Cigarettes

About half of the youth and two-thirds of the adults have used cigarettes. Among youth, about two in ten are current smokers compared to four in ten adults. Reported levels of current smoking for both youth and adults have remained virtually unchanged since the 1976 survey.

Other Observations

Use of a drug "stronger"** than marihuana (and/or hashish) is reported by about one in four young adults, one in ten youth, and one in twenty-five older adults. The use of marihuana (and/or hashish) only, is reported by one in five youth, one in three young adults, and just over one in ten older adults. No illicit use of any drug is reported by more than eight in ten older adults, seven in ten youth, and only four in ten young adults.

Note: See Glossary for definitions of substances and frequently used terms.

**"Stronger" drugs defined as: hallucinogens, cocaine, heroin and other opiates.

TABLE 2a 1977

Lifetime Prevalence: All Youth

All youth: age 12-17 (1272)	1 Ever used	2 95% Confidence Limits Lower	3 95% Confidence Limits Upper
Marihuana and/or hashish	28.2%	25.2%	31.4%
Inhalants	9.0%	7.2%	11.2%
Hallucinogens	4.6%	3.4%	6.3%
Cocaine	4.0%	2.8%	5.6%
Heroin	1.1%	0.6%	2.1%
Other opiates••	6.1%	4.6%	8.0%
Stimulants (Rx)•	5.2%	3.4%	7.8%
Sedatives (Rx)•	3.1%	1.8%	5.3%
Tranquilizers (Rx)•	3.8%	2.3%	6.2%
Alcohol	52.6%	49.2%	56.0%
Cigarettes	47.3%	43.9%	50.7%

Note: See Glossary for definitions of substances and frequently used terms.

•Nonmedical use. Estimates based on split sample: N=623.

••Includes methadone.

Source: Q1, 3, 13-15, 34, 43, 52, SAQ6.

TABLE 2b 1977

Lifetime Prevalence and Recency of Use: All Youth

All youth: age 12-17 (1272)	1 Ever used	2 Past month	3 Past year, not past month	4 Not past year**	5 Never used
Marihuana and/or hashish	28.2%	16.1%	5.7	6.4	71.8
Inhalants	9.0%	.7%	1.5	6.9	91.0
Hallucinogens	4.6%	1.6%	1.5	1.5	95.4
Cocaine	4.0%	.8%	1.8	1.4	96.0
Heroin	1.1%	*%	.6	.7	98.9
Other opiates••	6.1%	.6%	2.8	2.3	92.9
Stimulants (Rx)•	5.2%	1.3%	2.4	1.1	94.8
Sedatives (Rx)•	3.1%	.8%	1.2	1.1	96.9
Tranquilizers (Rx)•	3.8%	.7%	2.2	.6	96.2
Alcohol	52.6%	31.2%	16.3	5.0	46.5
Cigarettes	47.3%	22.3%	Δ	Δ	48.6

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
•Nonmedical use. Estimates based on split sample: N=623.
••Columns 1 and 5 include methadone; columns 2-4 do not include methadone.
**Includes those who are not sure when their most recent use occurred.
ΔNot asked.
Source: Q1, 3, 13-15, 34, 43, 52, SAQ6.

TABLE 3a 1977

Lifetime Prevalence: All Adults

All adults: age 18+ (3322)	1 Ever used	2 95% Confidence Limits Lower	3 95% Confidence Limits Upper
Marihuana and/or hashish	24.5%	22.7%	26.4%
Inhalants	3.7%	3.0%	4.6%
Hallucinogens	6.1%	5.2%	7.2%
Cocaine	6.0%	5.1%	7.1%
Heroin	1.4%	1.0%	2.0%
Other opiates••	5.0%	4.2%	6.0%
Stimulants (Rx)•	8.1%	6.6%	9.9%
Sedatives (Rx)•	6.0%	4.7%	7.6%
Tranquilizers (Rx)•	4.8%	3.7%	6.3%
Alcohol	79.2%	77.4%	80.9%
Cigarettes	67.1%	65.1%	69.1%

Note: See Glossary for definitions of substances and frequently used terms.

•Nonmedical use. Estimates based on split sample: N=1647.

••Includes methadone.

Source: Q1, 3, 13-15, 34, 43, 52, SAQ6.

TABLE 3b 1977

Lifetime Prevalence and Recency of Use: All Adults

All adults: age 18+ (3322)	1 Ever used	2 Past month	3 Past year, not past month	4 Not past year**	5 Never used
Marihuana and/or hashish	24.5%	8.2%	4.6	11.8	75.5
Inhalants	3.7%	*%	*	3.1	96.3
Hallucinogens	6.1%	.5%	1.0	4.5	93.9
Cocaine	6.0%	1.0%	1.8	3.1	94.0
Heroin	1.4%	*%	*	.9	98.6
Other opiates••	5.0%	*%	.9	3.6	93.4
Stimulants (Rx)•	8.1%	1.0%	1.7	5.1	91.9
Sedatives (Rx)•	6.0%	.6%	1.4	3.7	94.0
Tranquilizers (Rx)•	4.8%	.8%	1.7	2.1	95.2
Alcohol	79.2%	58.0%	10.7	10.3	20.6
Cigarettes	67.1%	40.5%	Δ	Δ	29.5

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
•Nonmedical use. Estimates based on split sample: N=1647.
••Columns 1 and 5 include methadone; columns 2-4 do not include methadone.
**Includes those who are not sure when their most recent use occurred.
ΔNot asked.
Source: Q1, 3, 13-15, 34, 43, 52, SAQ6.

TABLE 4a 1977

Lifetime Prevalence: Young Adults

Young adults: age 18-25 (1500)	1 Ever used	2 95% Confidence Limits Lower	3 95% Confidence Limits Upper
Marihuana and/or hashish	60.1%	57.0%	63.2%
Inhalants	11.2%	9.4%	13.4%
Hallucinogens	19.8%	17.4%	22.4%
Cocaine	19.1%	16.7%	21.7%
Heroin	3.6%	2.6%	5.0%
Other opiates••	13.5%	11.5%	15.8%
Stimulants (Rx)•	21.2%	17.8%	25.1%
Sedatives (Rx)•	18.4%	15.2%	22.1%
Tranquilizers (Rx)•	13.4%	10.6%	16.7%
Alcohol	84.2%	81.8%	86.4%
Cigarettes	67.6%	64.6%	70.5%

Note: See Glossary for definitions of substances and frequently used terms.

•Nonmedical use. Estimates based on split sample: N=750.

••Includes methadone.

Source: Q1, 3, 13-15, 34, 43, 52, SAQ6.

TABLE 4b 1977

Lifetime Prevalence and Recency of Use: Young Adults

Young adults: age 18-25 (1500)	1 Ever used	2 Past month	3 Past year, not past month	4 Not past year**	5 Never used
Marihuana and/or hashish	60.1%	27.7%	10.9	21.5	39.9
Inhalants	11.2%	*%	1.4	9.5	88.8
Hallucinogens	19.8%	2.0%	4.4	13.5	80.1
Cocaine	19.1%	3.7%	6.5	9.0	80.9
Heroin	3.6%	*%	.9	2.4	96.4
Other opiates••	13.5%	1.0%	3.7	8.5	86.0
Stimulants (Rx)•	21.2%	2.5%	7.9	10.4	78.8
Sedatives (Rx)•	18.4%	2.8%	5.4	9.9	81.6
Tranquilizers (Rx)•	13.4%	2.4%	5.4	5.1	86.6
Alcohol	84.2%	70.0%	9.8	4.2	15.6
Cigarettes	67.6%	47.3%	Δ	Δ	30.3

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
•Nonmedical use. Estimates based on split sample: N=750.
••Columns 1 and 5 include methadone; columns 2-4 do not include methadone.
**Includes those who are not sure when their most recent use occurred.
ΔNot asked.
Source: Q1, 3, 13-15, 34, 43, 52, SAQ6.

TABLE 5a . 1977

Lifetime Prevalence: Older Adults

Older adults: age 26+ (1822)	1 Ever used	2 95% Confidence Limits Lower	3 95% Confidence Limits Upper
Marihuana and/or hashish	15.4%	13.4%	17.6%
Inhalants	1.8%	1.2%	2.7%
Hallucinogens	2.6%	1.8%	3.7%
Cocaine	2.6%	1.8%	3.7%
Heroin	.8%	0.4%	1.5%
Other opiates••	2.8%	2.0%	3.9%
Stimulants (Rx)•	4.7%	3.2%	6.8%
Sedatives (Rx)•	2.8%	1.7%	4.5%
Tranquilizers (Rx)•	2.6%	1.6%	4.2%
Alcohol	77.9%	75.4%	80.2%
Cigarettes	67.0%	64.2%	69.6%

Note: See Glossary for definitions of substances and frequently used terms.

•Nonmedical use. Estimates based on split sample: N=897.

••Includes methadone.

Source: Q1, 3, 13-15, 34, 43, 52, SAQ6.

TABLE 5b 1977

Lifetime Prevalence and Recency of Use: Older Adults

Older adults: age 26+ (1822)	1 Ever used	2 Past month	3 Past year, not past month	4 Not past year**	5 Never used
Marihuana and/or hashish	15.4%	3.2%	3.0	9.3	84.6
Inhalants	1.8%	*%	*	1.4	98.2
Hallucinogens	2.6%	*%	*	2.2	97.4
Cocaine	2.6%	*%	.6	1.7	97.4
Heroin	.8%	*%	*	.5	99.2
Other opiates••	2.8%	*%	*	2.6	95.3
Stimulants (Rx)•	4.7%	.6%	*	3.9	95.3
Sedatives (Rx)•	2.8%	*%	*	2.1	97.2
Tranquilizers (Rx)•	2.6%	*%	.7	1.5	97.4
Alcohol	77.9%	54.9%	10.9	11.9	21.9
Cigarettes	67.0%	38.7%	Δ	Δ	29.3

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
•Nonmedical use. Estimates based on split sample: N=897.
••Columns 1 and 5 include methadone; columns 2-4 do not include methadone.
**Includes those who are not sure when their most recent use occurred.
ΔNot asked.
Source: Q1, 3, 13-15, 34, 43, 52, SAQ6.

TABLE 6

Lifetime Prevalence, 1972-1977: All Youth

All youth: age 12-17	Ever Used 1 1972 (880)	2 1974 (952)	3 1976 (986)	4 1977 (1272)	5 1976-1977 change**
Marihuana and/or hashish	14%†	22.6%	22.5%	28.2%	S
Inhalants	6.4%	8.5%	8.1%	9.0%	NS
Hallucinogens	4.8%	6.0%	5.1%	4.6%	NS
Cocaine	1.5%	3.6%	3.4%	4.0%	NS
Heroin	.6%	1.0%	.5%	1.1%	NS
Other opiates••	Δ	6.1%	6.5%	6.1%	NS
Stimulants (Rx)•	4%	5%	4.4%	5.2%	NS
Sedatives (Rx)•	3%	5%	2.8%	3.1%	NS
Tranquilizers (Rx)•	3%	3%	3.3%	3.8%	NS
Alcohol	Δ	54%	53.6%	52.6%	NS
Cigarettes	Δ	52%	45.5%	47.3%	NS

Note: See Glossary for definitions of substances and frequently used terms.

•Nonmedical use. Estimates in 1977 based on split sample: N=623.

••Includes methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

†Marihuana only.

ΔNot asked.

Source: Q1, 3, 13-14, 34, 43, 52, SAQ6.

TABLE 7

Lifetime Prevalence, 1972-1977: All Adults

	Ever Used				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All adults: age 18+	(2411)	(3071)	(2590)	(3322)	
Marihuana and/or hashish	16%†	18.9%	21.3%	24.5%	S
Inhalants	2.1%	2.8%	3.4%	3.7%	NS
Hallucinogens	4.6%	4.5%	4.9%	6.1%	NS
Cocaine	3.2%	3.4%	4.1%	6.0%	SS
Heroin	1.3%	1.3%	1.2%	1.4%	NS
Other opiates••	Δ	3.6%	5.5%	5.0%	NS
Stimulants (Rx)•	5%	6%	7.9%	8.1%	NS
Sedatives (Rx)•	4%	4%	4.4%	6.0%	NS
Tranquilizers (Rx)•	6%	3%	4.0%	4.8%	NS
Alcohol	Δ	76%	76.7%	79.2%	NS
Cigarettes	Δ	66%	65.7%	67.1%	NS

Note: See Glossary for definitions of substances and frequently used terms.

•Nonmedical use. Estimates in 1977 based on split sample: N=1647.

••Includes methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

†Marihuana only.

ΔNot asked.

Source: Q1, 3, 13-14, 34, 43, 52, SAQ6.

TABLE 8

Use in Past Year, 1972-1977: All Youth

	Use in Past Year				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All youth: age 12-17	(880)	(952)	(986)	(1272)	
Marihuana and/or hashish	Δ	18.6%	17.9%	21.8%	NS
Inhalants	2.9%	2.4%	2.9%	2.2%	NS
Hallucinogens	3.6%	4.3%	2.8%	3.1%	NS
Cocaine	1.5%	2.7%	2.3%	2.6%	NS
Heroin	*%	*%	*%	.6%	NS
Other opiates••	Δ	3.1%	4.2%	3.4%	§
Stimulants (Rx)•	Δ	3%	2.2%	3.7%	NS
Sedatives (Rx)•	Δ	2%	1.2%	2.0%	NS
Tranquilizers (Rx)•	Δ	2%	1.8%	2.9%	NS
Alcohol	Δ	51%	49.3%	47.5%	NS
Cigarettes	Δ	Δ	Δ	Δ	-

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

•Nonmedical use. Estimates in 1977 based on split sample: N=623.

••Columns 2-3 include methadone; column 4 does not include methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable.

ΔNot asked.

Source: Q13, 15, 34, 43, 52, SAQ6.

TABLE 9

Use in Past Year, 1972-1977: All Adults

	Use in Past Year				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All adults: age 18+	(2411)	(3071)	(2590)	(3322)	
Marihuana and/or hashish	Δ	10.3%	11.5%	12.8%	NS
Inhalants	.5%	*%	.5%	.6%	NS
Hallucinogens	2.4%	1.5%	1.4%	1.5%	NS
Cocaine	1.9%	2.0%	2.0%	2.8%	NS
Heroin	*%	*%	*%	*%	NS
Other opiates••	Δ	1.3%	1.1%	1.2%	§
Stimulants (Rx)•	Δ	2%	2.5%	2.7%	NS
Sedatives (Rx)•	Δ	1%	1.7%	2.0%	NS
Tranquilizers (Rx)•	Δ	1%	2.1%	2.5%	NS
Alcohol	Δ	66%	67.1%	68.7%	NS
Cigarettes	Δ	Δ	Δ	Δ	-

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

•Nonmedical use. Estimates in 1977 based on split sample: N=1647.

••Columns 2-3 include methadone; column 4 does not include methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable.

ΔNot asked.

Source: Q13, 15, 34, 43, 52, SAQ6.

TABLE 10

Use in Past Month, 1972-1977: All Youth

All youth: age 12-17	Use in Past Month 1 1972 (880)	2 1974 (952)	3 1976 (986)	4 1977 (1272)	5 1976-1977 change**
Marihuana and/or hashish	7%†	11.6%	12.4%	16.1%	S
Inhalants	1.0%	.7%	.9%	.7%	NS
Hallucinogens	1.4%	1.3%	.9%	1.6%	NS
Cocaine	.6%	1.0%	1.0%	.8%	NS
Heroin	*%	*%	*%	*%	NS
Other opiates••	Δ	.7%	2.4%	.6%	§
Stimulants (Rx)•	Δ	1%	1.2%	1.3%	NS
Sedatives (Rx)•	Δ	1%	*%	.8%	NS
Tranquilizers (Rx)•	Δ	1%	1.1%	.7%	NS
Alcohol	Δ	34%	32.4%	31.2%	NS
Cigarettes	Δ	25%	23.4%	22.3%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

•Nonmedical use. Estimates in 1977 based on split sample: N=623.

••Columns 2-3 include methadone; column 4 does not include methadone.

**SSS: significant at .001 level; SS: signficant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable.

†Marihuana only.

ΔNot asked.

Source: Q1, 13, 34, 43, 52, SAQ6.

TABLE 11

Use in Past Month, 1972-1977: All Adults

	Use in Past Month				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All adults: age 18+	(2411)	(3071)	(2590)	(3322)	
Marihuana and/or hashish	8%†	7.0%	7.9%	8.2%	NS
Inhalants	*%	*%	*%	*%	NS
Hallucinogens	.7%	.6%	*%	.5%	NS
Cocaine	.9%	.7%	.7%	1.0%	NS
Heroin	*%	*%	*%	*%	NS
Other opiates••	Δ	*%	*%	*%	§
Stimulants (Rx)•	Δ	1%	1.2%	1.0%	NS
Sedatives (Rx)•	Δ	*%	.9%	.6%	NS
Tranquilizers (Rx)•	Δ	*%	.8%	.8%	NS
Alcohol	Δ	58%	58.8%	58.0%	NS
Cigarettes	Δ	41%	40.7%	40.5%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

•Nonmedical use. Estimates in 1977 based on split sample: N=1647.

••Columns 2-3 include methadone; column 4 does not include methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable.

†Marihuana only.

ΔNot asked.

Source: Q1, 13, 34, 43, 52, SAQ6.

TABLE 12 1977

Lifetime Prevalence and First Use in Past Year: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4	5	6	7	8
	All youth: age 12-17 (1272)		All adults: age 18+ (3322)		Young adults: age 18-25 (1500)		Older adults: age 26+ (1822)	
	First use in past year	Ever used	First use in past year	Ever used	First use in past year	Ever used	First use in past year	Ever used
Marihuana and/or hashish	7.1%	28.2%	1.2%	24.5%	2.7%	60.1%	.8%	15.4%
Inhalants	1.1%	9.0%	*%	3.7%	.9%	11.2%	*%	1.8%
Hallucinogens	1.5%	4.6%	*%	6.1%	1.1%	19.8%	*%	2.6%
Cocaine	2.1%	4.0%	.8%	6.0%	3.2%	19.1%	*%	2.6%
Heroin	.7%	1.1%	*%	1.4%	*%	3.6%	*%	.8%
Other opiates••	2.3%	6.1%	*%	5.0%	.9%	13.5%	*%	2.8%
Stimulants (Rx)•	2.2%	5.2%	.8%	8.1%	3.4%	21.2%	*%	4.7%
Sedatives (Rx)•	1.1%	3.1%	.7%	6.0%	3.4%	18.4%	*%	2.8%
Tranquilizers (Rx)•	1.7%	3.8%	1.0%	4.8%	4.1%	13.4%	*%	2.6%
Alcohol	Δ	52.6%	Δ	79.2%	Δ	84.2%	Δ	77.9%
Cigarettes	Δ	47.3%	Δ	67.1%	Δ	67.6%	Δ	67.0%

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

•Nonmedical use. Estimates based on split samples; cols. 1-2, N=623; cols. 3-4, N=1647; cols. 5-6, N=750; cols. 7-8, N=897.

••Columns 2, 4, 6, 8 include methadone; columns 1, 3, 5, 7 do not include methadone.

ΔNot asked.

Source: Q1, 3, 13-14, 33, 34, 42, 43, 51, 52, SAQ5.

TABLE 13 1977

First Use in Past Year, By Age

	First Use in Past Year						
	1	2	3	4	5	6	7
	12-13	14-15	16-17	18-21	22-25	26-34	35+
	(394)	(432)	(446)	(732)	(768)	(668)	(1153)
Marihuana and/or hashish	3%	9%	9%	4%	2%	1%	1%
Inhalants	1%	1%	1%	2%	*%	*%	*%
Hallucinogens	*%	2%	3%	2%	*%	*%	*%
Cocaine	*%	2%	4%	4%	2%	1%	*%
Heroin	*%	*%	1%	1%	*%	*%	*%
Other opiates••	1%	2%	4%	1%	*%	*%	*%
Stimulants (Rx)•	*%	3%	4%	5%	2%	*%	*%
Sedatives (Rx)•	*%	1%	2%	6%	1%	*%	*%
Tranquilizers (Rx)•	*%	1%	4%	7%	1%	1%	*%
Alcohol	Δ	Δ	Δ	Δ	Δ	Δ	Δ
Cigarettes	Δ	Δ	Δ	Δ	Δ	Δ	Δ

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

•Nonmedical use. Estimates based on split samples: col. 1, N=190; col. 2, N=212; col. 3, N=221; col. 4, N=373; col. 5, N=377; col. 6, N=329; col. 7, N=568.

••Does not include methadone.

ΔNot asked.

Source: Q33, 42, 51, SAQ5.

TABLE 14

First Use in Past Year, 1974-1977: All Youth and All Adults

	First Use in Past Year					
	1	2	3	4	5	6
	All youth: age 12-17			All adults: age 18+		
	1974	1976	1977	1974	1976	1977
	(952)	(986)	(1272)	(3071)	(2590)	(3322)
Marihuana and/or hashish	8.1%	7.4%	7.1%	1.4%	1.9%	1.2%
Inhalants	1.9%	2.4%	1.1%	*%	*%	*%
Hallucinogens	2.4%	1.8%	1.5%	*%	.6%	*%
Cocaine	1.5%	2.0%	2.1%	.9%	.8%	.8%
Heroin	*%	*%	.7%	*%	*%	*%
Other opiates••	2.0%	3.6%	2.3%	*%	.7%	*%
Stimulants (Rx)•	3%	1.1%	2.2%	*%	.9%	.8%
Sedatives (Rx)•	2%	1.2%	1.1%	*%	.9%	.7%
Tranquilizers (Rx)•	*%	1.2%	1.7%	1%	1.4%	1.0%
Alcohol	Δ	Δ	Δ	Δ	Δ	Δ
Cigarettes	Δ	Δ	Δ	Δ	Δ	Δ

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

•Nonmedical use. Estimates in 1977 based on split samples: col. 3, N=623; col. 6, N=1647.

••Columns 1, 2, 4, 5 include methadone; columns 3 and 6 do not include methadone.

ΔNot asked.

Source: Q33, 42, 51, SAQ5.

TABLE 15 1977

Spectrum of Drug Use: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
	(1272)	(3322)	(1500)	(1822)
Used drug "stronger" than marihuana and/or hashish**	9.1%	8.9%	27.0%	4.3%
Used marihuana and/or hashish only	20.3	16.2	33.7	11.7
No illicit use of any drug	70.6	74.9	39.2	84.0
Unclassifiable	*	*	*	*

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**"Stronger" drugs defined as: hallucinogens, cocaine, heroin and other opiates.

Source: MJ6, SH6, C6, L6, H6, O6.

Marihuana*

Lifetime Prevalence

One-fourth of the adults and a slightly larger proportion of youth report some lifetime experience with marihuana (24.5% of the adults compared to 28.2% of the youth). There is a marked relationship between marihuana use and chronological age. Looking at the youth data, prevalence is 8% among 12-13 year olds, rises to 29% for the 14-15 age group, and climbs to 47% for those age 16-17. Among 18-21 year olds, the rate increases to 59% and the 22-25 age group has the highest experience level with 62% reporting use of marihuana. Prevalence drops to 44% for 26-34 year olds and falls to 7% among those 35 and over.

Marihuana use is also related to sex. In each major age group, males are more likely than females to have ever used marihuana. Among males age 12-17, one-third report they ever used marihuana compared to less than one-fourth of their female counterparts. Among adult males, three in ten report marihuana experience, while fewer than two adult women in ten have ever used the substance. Similar sex differences can be seen among young adults and older adults.

From 1976 to 1977, there was a significant increase in lifetime prevalence among both youth and adults. The ever used rate for 12-17 year olds rose by 5.7% (1976 22.5%; 1977 28.2%). The following subgroups of youth registered significant increases: 14-15 year olds, males, whites, residents of the Northeast, and residents of large metropolitan areas. Three of these increases are particularly noteworthy: (1) the rate in large metropolitan areas jumped twelve points to 37%; (2) the Northeast registered a fourteen point increase and climbed to 35%; and (3) the prevalence estimate for whites went up seven points to 29%.

Among adults age 18 and over, the rate rose 3.2% in the same time period (1976 21.3%; 1977 24.5%). This increase is primarily attributable to a seven point rise among 18-25 year olds (1976 53%; 1977 60%) and an eight point increment among 26-34 year olds (1976 36%; 1977 44%). Significant increases were also registered by the following subgroups of adults: females, whites, and those with some college education.

Use in Past Month

Current use is reported by about twice as many youth as adults (16.1% as compared to 8.2%). However, the highest rate of current use is reported by adults age 18-25. More than one in four young adults reports use in past month compared to about one in thirty older adults.

Among youth, there was a significant increase (3.7%) in current use between 1976 (12.4%) and 1977 (16.1%). No change in current use was indicated for young adults or older adults during this same time period.

First Use in Past Year

Among 12-17 year olds, 7.1% report first use in past year compared to 1.2% of adults age 18 or over. In the 1976 study, similar proportions of youth (7.4%) and adults (1.9%) reported that they had used marihuana for the first time in the past year.

Note: See Glossary for definitions of substances and frequently used terms.

*Marihuana and/or hashish.

Other Observations

Lifetime frequency rates indicate that of those 12-17 year olds who have experienced marihuana (28.2%), about two in ten have used it only once or twice while three in ten have used it three to nineteen times, and four in ten have experienced it twenty times or more.

Among young adults age 18-25 who have experienced marihuana (60.1%), one in seven has used it only once or twice, while roughly one in four has used it three to nineteen times, and one in two has experienced it twenty times or more.

Note: See Glossary for definitions of substances and frequently used terms.

TABLE 16 1977

Lifetime Prevalence and Recency of Use of Marihuana and/or Hashish Among Subgroups of Youth

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
All youth: age 12-17 (1272)	28.2%	16.1%	5.7	6.4	71.8
Age:					
12-13 (394)	8%	4%	2	3	92
14-15 (432)	29%	15%	7	6	71
16-17 (446)	47%	29%	8	10	53
Sex:					
Male (641)	33%	19%	7	8	67
Female (631)	23%	13%	5	5	77
Race:					
White (1059)	29%	17%	6	5	71
Nonwhite (207)	26%	12%	3	11	74
Region:					
Northeast (277)	35%	21%	7	7	65
North Central (352)	29%	19%	4	6	71
South (443)	19%	7%	6	6	81
West (200)	36%	22%	8	6	64
Population density:					
Large metropolitan (440)	37%	22%	7	8	63
Other metropolitan (391)	28%	16%	6	7	72
Nonmetropolitan (441)	18%	10%	4	4	82

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
**Includes those who are not sure when their most recent use occurred.
Source: MJ6, SH6.

TABLE 17 1977

Lifetime Prevalence and Recency of Use of Marihuana and/or Hashish Among Subgroups of Adults

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
All adults: age 18+ (3322)	24.5%	8.2%	4.6	11.8	75.5
Age:					
18-21 (732)	59%	31%	10	17	41
22-25 (768)	62%	24%	12	26	38
26-34 (668)	44%	12%	9	23	56
35+ (1153)	7%	1%	1	5	93
Sex:					
Male (1448)	30%	11%	5	14	70
Female (1874)	19%	6%	4	9	81
Race:					
White (2827)	24%	8%	4	12	76
Nonwhite (487)	27%	8%	5	14	73
Education:					
Not high school graduate (814)	12%	3%	2	7	88
High school graduate (1282)	26%	9%	5	13	74
College (1209)	35%	12%	8	15	65
Not a graduate (672)	41%	18%	9	15	59
Graduate (537)	28%	6%	6	16	72
Now a college student (398)	54%	22%	11	21	46
Region:					
Northeast (671)	29%	11%	6	12	71
North Central (893)	24%	8%	4	11	76
South (1120)	17%	4%	3	10	83
West (638)	32%	11%	6	16	68
Population density:					
Large metropolitan (1124)	30%	11%	5	14	70
Other metropolitan (1136)	26%	9%	5	12	74
Nonmetropolitan (1062)	16%	4%	3	8	84

Some categories do not add to 100% because of rounding.

"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.

**Includes those who are not sure when their most recent use occurred.

Source: MJ6, SH6.

TABLE 18 1977

Lifetime Prevalence and Recency of Use of Marihuana and/or Hashish Among Subgroups of Young Adults

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
Young adults: age 18-25 (1500)	60.1%	27.7%	10.9	21.5	39.9
Age:					
18-21 (732)	59%	31%	10	17	41
22-25 (768)	62%	24%	12	26	38
Sex:					
Male (678)	66%	35%	11	20	34
Female (822)	55%	21%	10	24	45
Race:					
White (1266)	61%	28%	11	21	39
Nonwhite (228)	54%	24%	9	22	46
Education:					
Not high school graduate (315)	52%	22%	8	22	48
High school graduate (623)	60%	29%	10	21	40
College (553)	65%	30%	14	22	35
Not a graduate (399)	67%	32%	13	22	33
Graduate (154)	59%	22%	15	22	41
Now a college student (302)	64%	30%	14	20	36
Region:					
Northeast (292)	66%	34%	11	22	34
North Central (412)	61%	30%	11	20	39
South (496)	50%	17%	9	25	50
West (300)	67%	34%	14	19	33
Population density:					
Large metropolitan (511)	63%	31%	10	22	37
Other metropolitan (536)	64%	30%	13	22	36
Nonmetropolitan (453)	48%	18%	9	21	52

Some categories do not add to 100% because of rounding.

"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.

**Includes those who are not sure when their most recent use occurred.

Source: MJ6, SH6.

TABLE 19 1977

Lifetime Prevalence and Recency of Use of Marihuana and/or Hashish Among Subgroups of Older Adults

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
Older adults: age 26+ (1822)	15.4%	3.2%	3.0	9.3	84.6
Age:					
26-34 (668)	44%	12%	9	23	56
35+ (1153)	7%	1%	1	5	93
Sex:					
Male (770)	21%	4%	4	13	79
Female (1052)	10%	2%	2	6	90
Race:					
White (1561)	15%	3%	3	9	85
Nonwhite (259)	20%	4%	4	11	80
Education:					
Not high school graduate (499)	6%	1%	1	5	94
High school graduate (659)	16%	3%	3	10	84
College (656)	26%	6%	6	13	74
Not a graduate (273)	27%	9%	6	11	73
Graduate (383)	24%	4%	5	15	76
Now a college student (96)	38%	9%	8	22	62
Region:					
Northeast (379)	20%	5%	5	9	80
North Central (481)	14%	3%	2	9	86
South (624)	9%	1%	1	6	91
West (338)	23%	5%	3	14	77
Population density:					
Large metropolitan (613)	20%	5%	4	12	80
Other metropolitan (600)	16%	3%	3	10	84
Nonmetropolitan (609)	9%	1%	2	6	91

Some categories do not add to 100% because of rounding.

"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.

**Includes those who are not sure when their most recent use occurred.

Source: MJ6, SH6.

TABLE 20

Lifetime Prevalence and Use in Past Month of Marihuana and/or Hashish, 1971-1977: All Youth

	1	2	3	4	5	6
	1971†	1972†	1974	1976	1977	1976-1977 change**
All youth: age 12-17	(781)	(880)	(952)	(986)	(1272)	
Ever used	14%	14%	22.6%	22.5%	28.2%	S
Use in past month	6%	7%	11.6%	12.4%	16.1%	S

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

†Marihuana only.

Source: MJ6, SH6.

TABLE 21

Lifetime Prevalence and Use in Past Month of Marihuana and/or Hashish, 1971-1977: All Adults

	1	2	3	4	5	6
	1971†	1972†	1974	1976	1977	1976-1977 change**
All adults: age 18+	(2405)	(2411)	(3071)	(2590)	(3322)	
Ever used	15%	16%	18.9%	21.3%	24.5%	S
Use in past month	5%	8%	7.0%	7.9%	8.2%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

†Marihuana only.

Source: MJ6, SH6.

TABLE 22

Lifetime Prevalence and Use in Past Month of Marihuana and/or Hashish, 1971-1977: Young Adults

	1	2	3	4	5	6
	1971†	1972†	1974	1976	1977	1976-1977 change**
Young adults: age 18-25	(741)	(772)	(849)	(882)	(1500)	
Ever used	39.3%	47.9%	53.2%	52.9%	60.1%	SS
Use in past month	17.3%	27.8%	25.5%	24.6%	27.7%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

†Marihuana only.

Source: MJ6, SH6.

TABLE 23

Lifetime Prevalence and Use in Past Month of Marihuana and/or Hashish, 1971-1977: Older Adults

	1	2	3	4	5	6
	1971†	1972†	1974	1976	1977	1976-1977 change**
Older adults: age 26+	(1664)	(1613)	(2221)	(1708)	(1822)	
Ever used	9.2%	7.4%	10.0%	13.0%	15.4%	NS
Use in past month	1.3%	2.5%	2.1%	3.5%	3.2%	NS

Note: See Glossary for definitions of substances and frequently used terms.

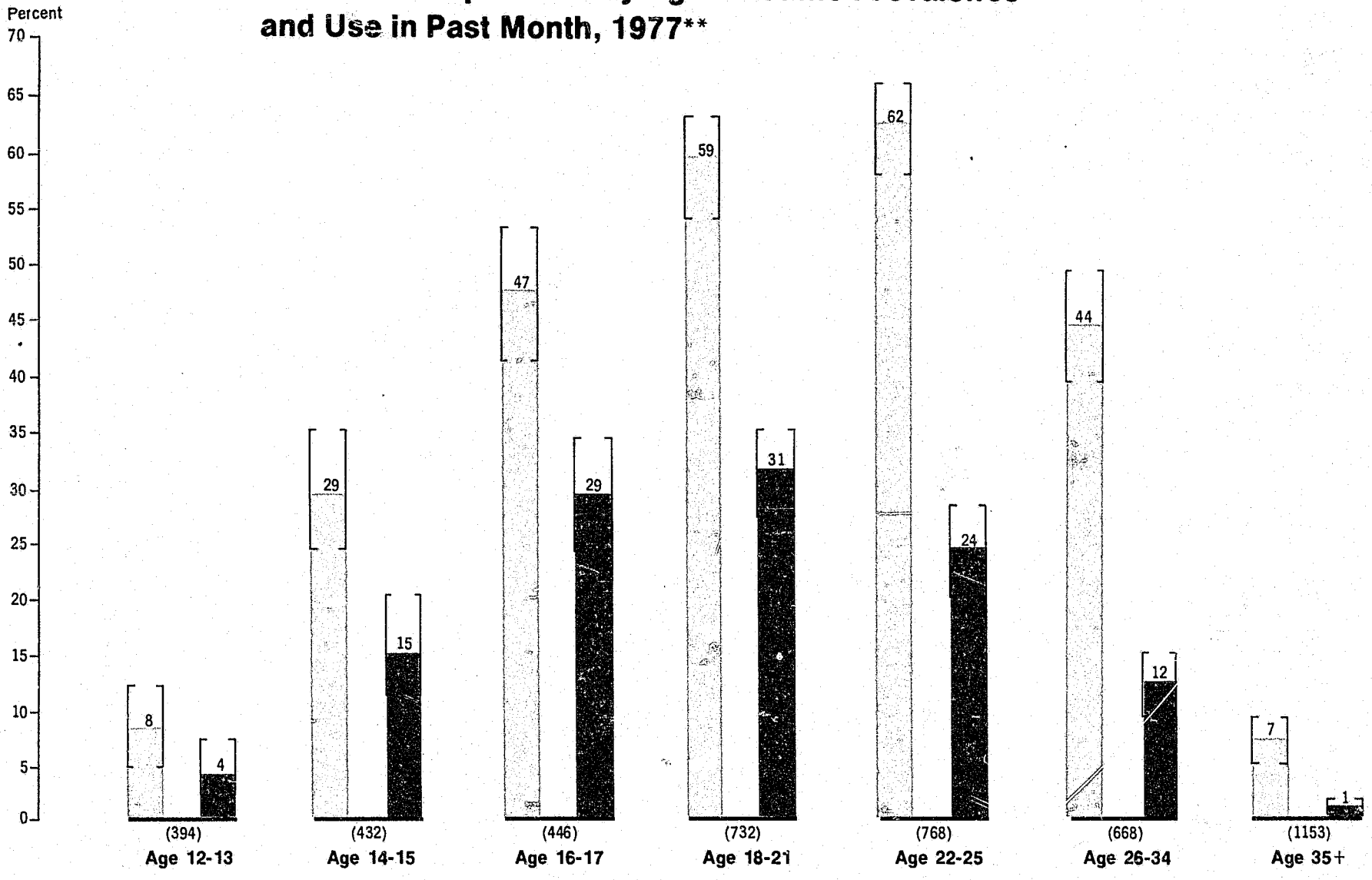
**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

†Marihuana only.

Source: MJ6, SH6.

FIGURE A

Marihuana Experience by Age: Lifetime Prevalence and Use in Past Month, 1977**



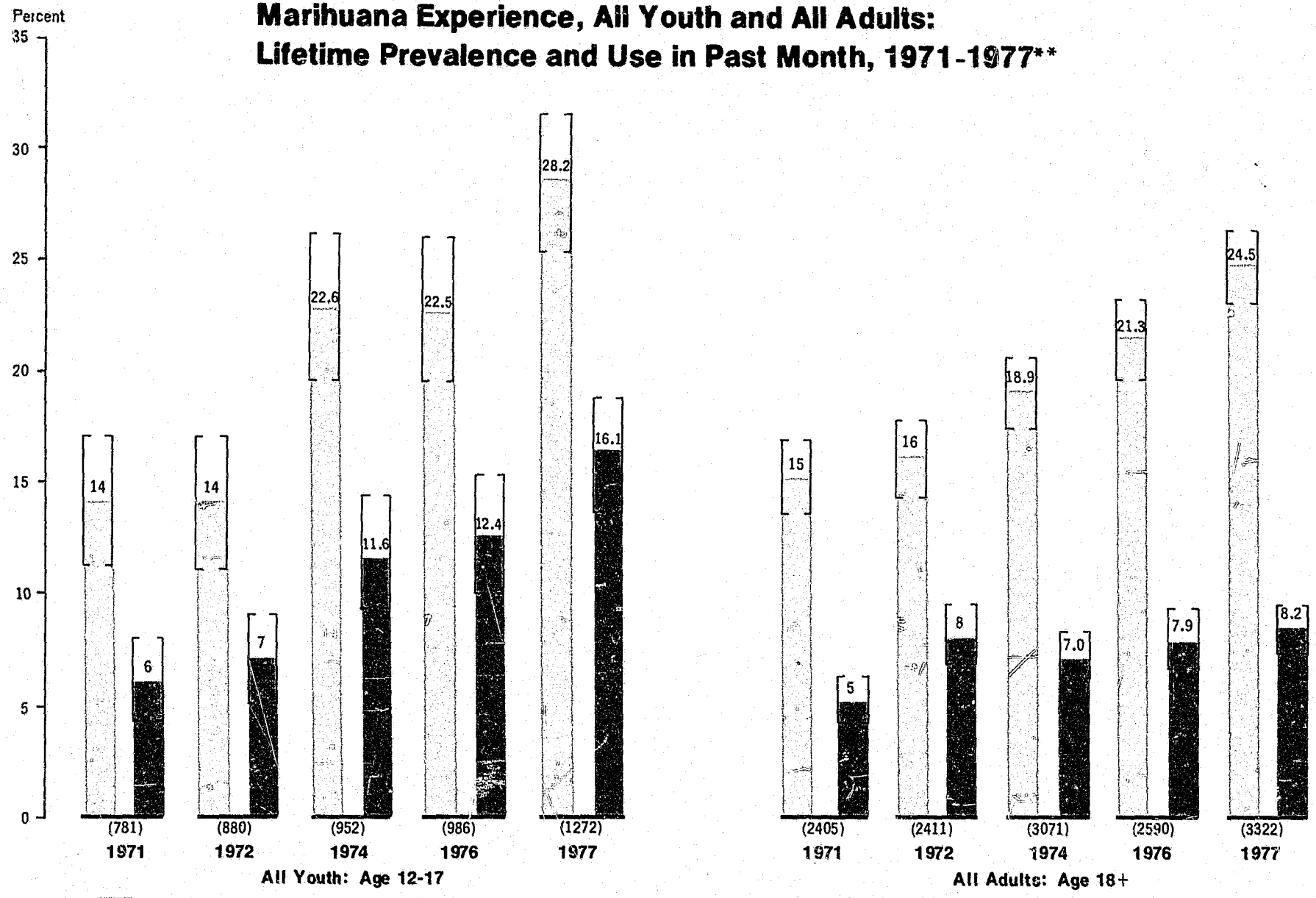
Note: See Glossary for definitions of substances and frequently used terms.

**Marihuana and/or hashish

Source: MJ6, SH6.

FIGURE B

Marihuana Experience, All Youth and All Adults: Lifetime Prevalence and Use in Past Month, 1971-1977**



Lifetime prevalence

Use in past month

[ ] Brackets indicate the 95% confidence interval surrounding the sample estimate shown by the bar.

Note: See Glossary for definitions of substances and frequently used terms.

**In 1977, 1976, and 1974, marihuana and/or hashish. In 1972 and 1971, marihuana only.

Source: MJ6, SH6.

TABLE 24

Marihuana and/or Hashish Experience Among Subgroups of Youth: Lifetime Prevalence, 1971-1977

	Ever Used					
	1	2	3	4	5	6
	1971 †	1972 †	1974	1976	1977	1976-1977 change**
All youth: age 12-17	14%	14%	22.6%	22.5%	28.2%	S
Age:						
12-13	6%	4%	6%	6%	8%	NS
14-15	10%	10%	22%	21%	29%	S
16-17	27%	29%	39%	40%	47%	NS
Sex:						
Male	14%	15%	24%	26%	33%	S
Female	14%	13%	21%	19%	23%	NS
Race:						
White	15%	16%	24%	22%	29%	SS
Nonwhite	12%	5%	17%	22%	26%	NS
Region:						
Northeast	16%	16%	26%	21%	35%	SS
North Central	13%	14%	21%	26%	29%	NS
South	7%	8%	17%	17%	19%	NS
West	26%	24%	30%	30%	36%	NS
Population density:						
Large metropolitan	15%	19%	27%	25%	37%	SS
Other metropolitan	15%	18%	22%	24%	28%	NS
Nonmetropolitan	13%	7%	18%	18%	18%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

†Marihuana only.

Source: MJ6, SH6.

TABLE 25

Marihuana and/or Hashish Experience Among Subgroups of Adults: Lifetime Prevalence, 1971-1977

	Ever Used					
	1	2	3	4	5	6
	1971 †	1972 †	1974	1976	1977	1976-1977 change**
All adults: age 18+	15%	16%	18.9%	21.3%	24.5%	S
Age:						
18-25	39%	48%	53%	53%	60%	SS
26-34	19%	20%	30%	36%	44%	SS
35+	7%	3%	4%	6%	7%	NS
Sex:						
Male	21%	22%	24%	29%	30%	NS
Female	10%	10%	14%	15%	19%	S
Race:						
White	15%	15%	18%	21%	24%	S
Nonwhite	15%	21%	27%	25%	27%	NS
Education:						
Not high school graduate	8%	5%	9%	12%	12%	NS
High school graduate	14%	13%	20%	22%	26%	NS
College	23%	32%	28%	30%	35%	S
Not a graduate	Δ	Δ	32%	30%	41%	SS
Graduate	Δ	Δ	24%	30%	28%	NS
Now a college student	44%	Δ	61%	48%	54%	NS
Region:						
Northeast	20%	14%	22%	24%	29%	NS
North Central	19%	15%	17%	19%	24%	NS
South	5%	8%	13%	17%	17%	NS
West	21%	33%	29%	29%	32%	NS
Population density:						
Large metropolitan	20%	21%	24%	26%	30%	NS
Other metropolitan	18%	20%	20%	24%	26%	NS
Nonmetropolitan	7%	6%	12%	13%	16%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

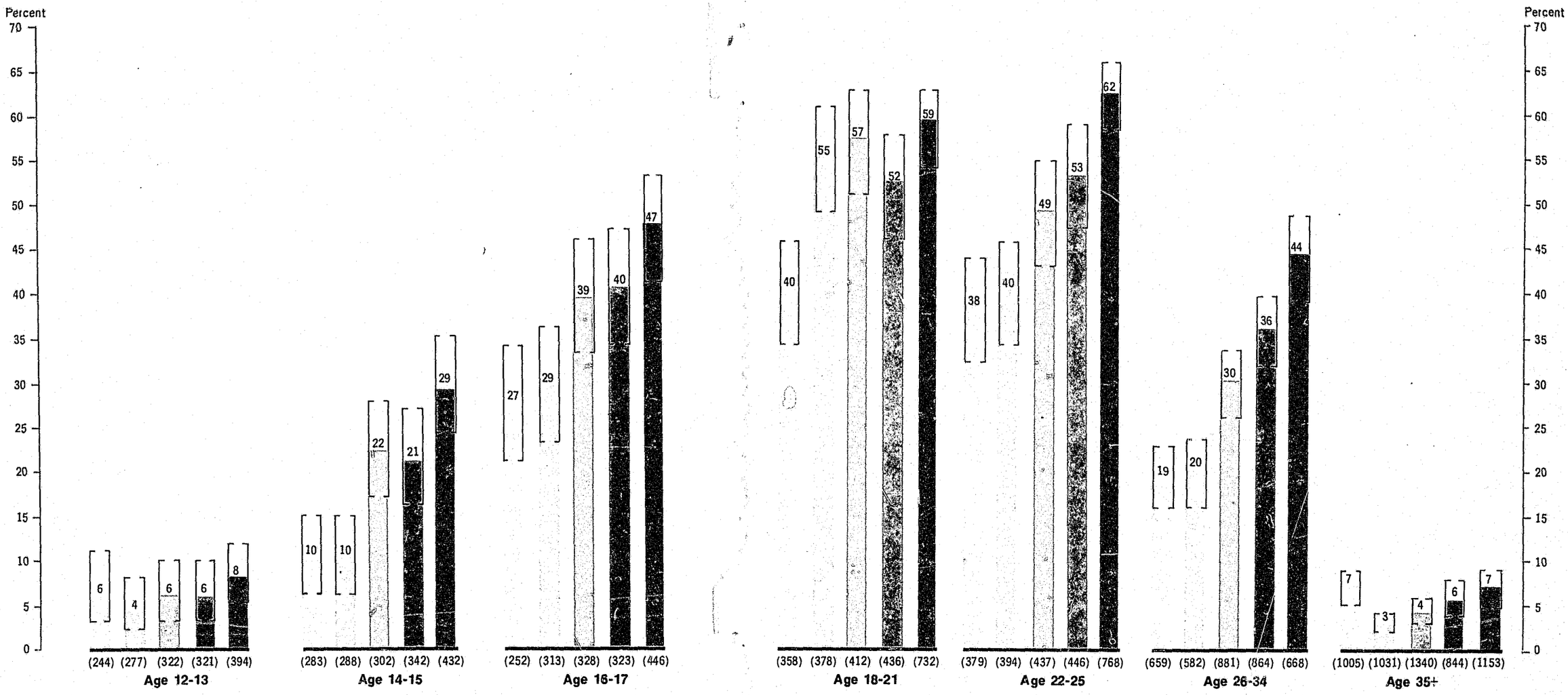
†Marihuana only.

ΔNot tabulated.

Source: MJ6, SH6.

FIGURE C

Marihuana Experience by Age: Lifetime Prevalence, 1971-1977**



Note: See Glossary for definitions of substances and frequently used terms.

**In 1977, 1976, and 1974, marihuana and/or hashish. In 1972 and 1971, marihuana only.
Source: MJ6, SH6.

TABLE 26

Marihuana and/or Hashish Experience Among Subgroups of Youth: Use in Past Month, 1971-1977

	Use in Past Month					
	1	2	3	4	5	6
	1971 †	1972 †	1974	1976	1977	1976-1977 change**
All youth: age 12-17	6%	7%	11.6%	12.4%	16.1%	S
Age:						
12-13	2%	1%	2%	2%	4%	NS
14-15	7%	6%	12%	13%	15%	NS
16-17	10%	16%	20%	22%	29%	NS
Sex:						
Male	7%	9%	12%	14%	19%	NS
Female	5%	6%	11%	10%	13%	NS
Race:						
White	Δ	8%	12%	12%	17%	S
Nonwhite	Δ	2%	9%	10%	12%	NS
Region:						
Northeast	9%	7%	14%	14%	21%	NS
North Central	5%	7%	11%	15%	19%	NS
South	2%	4%	6%	7%	7%	NS
West	11%	14%	19%	17%	22%	NS
Population density:						
Large metropolitan	9%	Δ	14%	18%	22%	NS
Other metropolitan	7%	Δ	11%	10%	16%	NS
Nonmetropolitan	3%	Δ	10%	9%	10%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

†Marihuana only.

ΔData not available.

Source: MJ6, SH6.

TABLE 27

Marihuana and/or Hashish Experience Among Subgroups of Adults: Use in Past Month, 1971-1977

	Use in Past Month					
	1	2	3	4	5	6
	1971 †	1972 †	1974	1976	1977	1976-1977 change**
All adults: age 18+	5%	8%	7.0%	7.9%	8.2%	NS
Age:						
18-25	17%	28%	26%	25%	28%	NS
26-34	5%	9%	8%	11%	12%	NS
35+	*%	*%	*%	1%	1%	NS
Sex:						
Male	7%	11%	9%	11%	11%	NS
Female	3%	5%	5%	5%	6%	NS
Race:						
White	5%	8%	7%	8%	8%	NS
Nonwhite	4%	9%	8%	10%	8%	NS
Education:						
Not high school graduate	1%	2%	3%	4%	3%	NS
High school graduate	4%	6%	7%	8%	9%	NS
College	7%	17%	10%	12%	12%	NS
Not a graduate	Δ	Δ	14%	13%	18%	NS
Graduate	Δ	Δ	6%	10%	6%	NS
Now a college student	23%	Δ	33%	24%	22%	NS
Region:						
Northeast	7%	6%	7%	9%	11%	NS
North Central	3%	9%	7%	7%	8%	NS
South	1%	3%	5%	6%	4%	NS
West	10%	17%	11%	11%	11%	NS
Population density:						
Large metropolitan	7%	9%	9%	10%	11%	NS
Other metropolitan	5%	12%	8%	9%	9%	NS
Nonmetropolitan	1%	2%	4%	4%	4%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

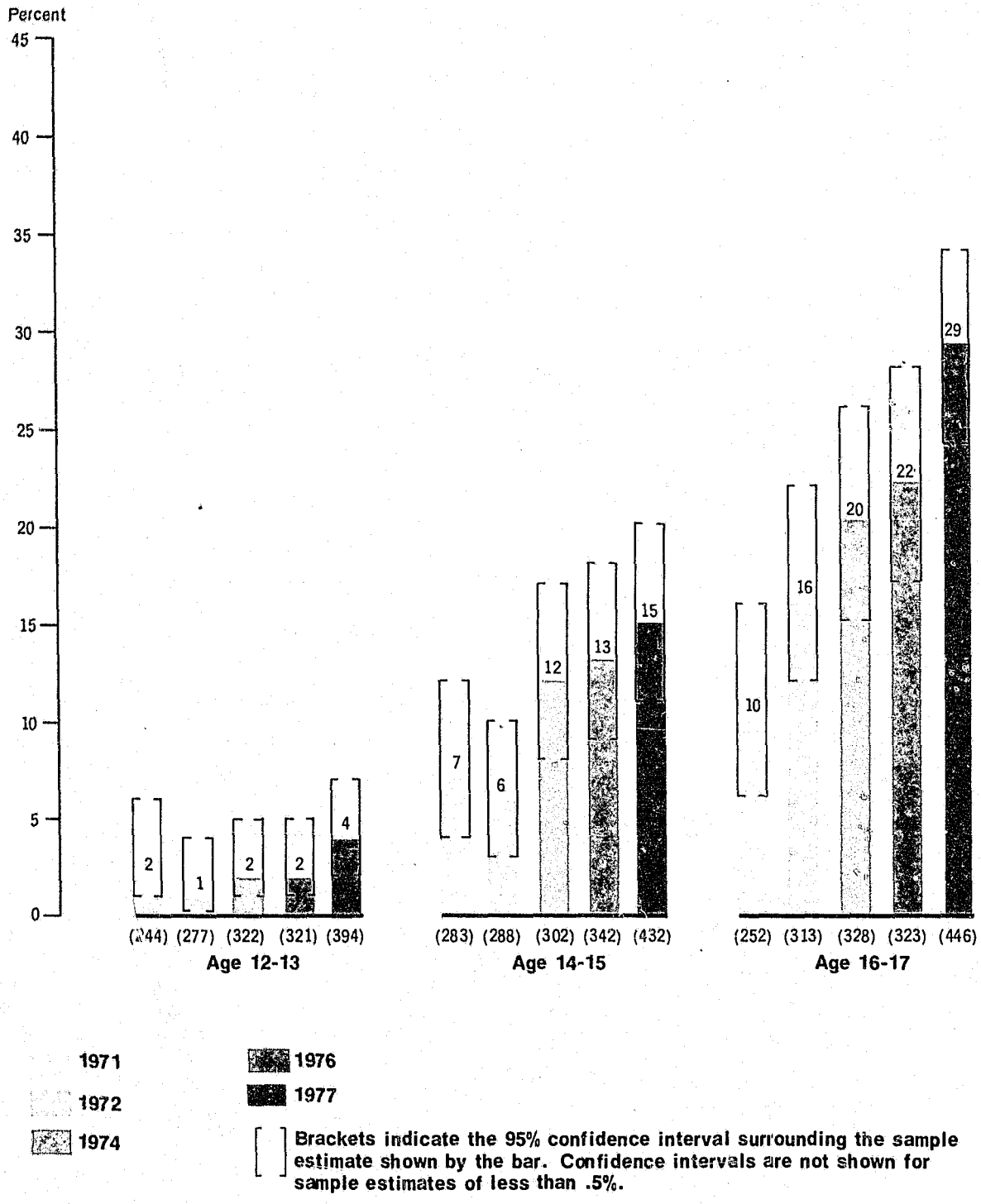
†Marihuana only.

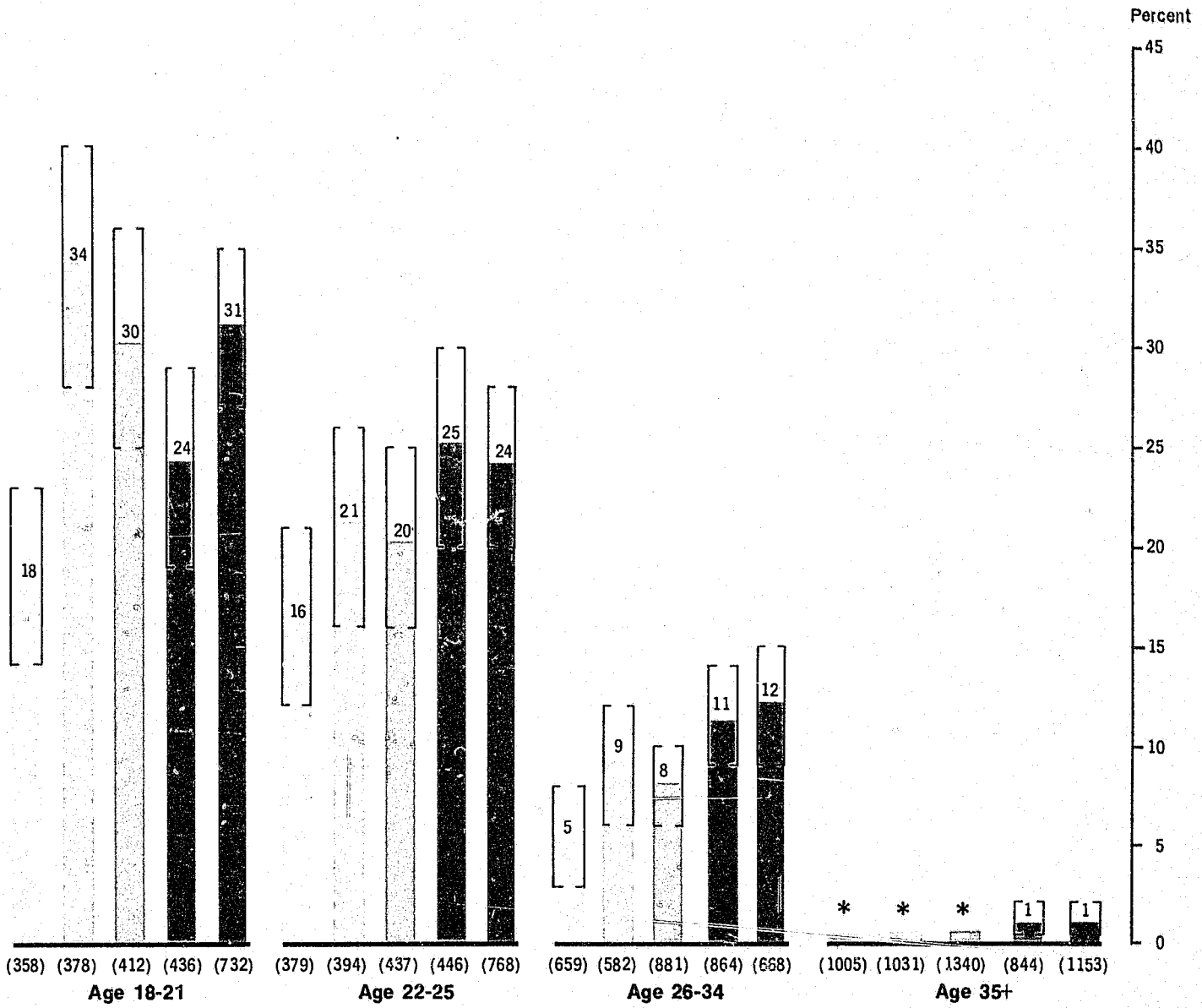
ΔNot tabulated.

Source: MJ6, SH6.

FIGURE D

Marihuana Experience by Age: Use in Past Month, 1971-1977**





Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**In 1977, 1976, and 1974, marihuana and/or hashish. In 1971 and 1972, marihuana only.

Source: MJ6, SH6.

TABLE 28

Marihuana and/or Hashish Experience by Age: First Use in Past Year, 1974-1977

	First Use in Past Year[Δ]			
	1	2	3	4
	1974	1976	1977	1976-1977 change**
All youth: age 12-17	8.1%	7.4%	7.1%	NS
Age:				
12-13	3%	3%	3%	NS
14-15	10%	9%	9%	NS
16-17	11%	10%	9%	NS
All adults: age 18+	1.4%	1.9%	1.2%	NS
Age:				
18-21	7%	8%	4%	S
22-25	2%	4%	2%	NS
26-34	1%	3%	1%	S
35+	1%	*%	1%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

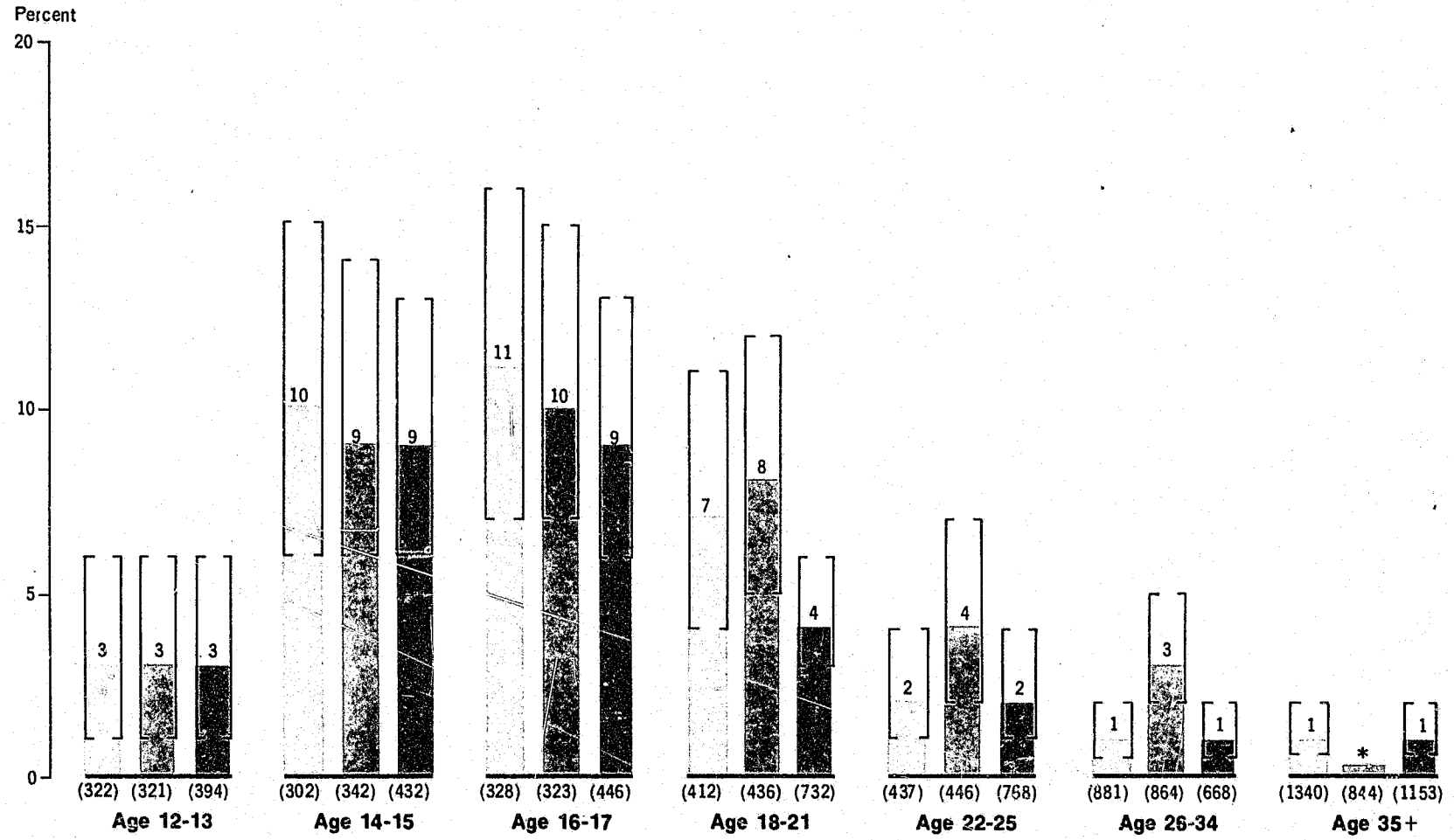
**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Δ"First Use in Past Year" not included in 1971 and 1972 studies.

Source: MJ5, SH5.

FIGURE E

Marihuana Experience by Age: First Use in Past Year, 1974-1977**



Brackets indicate the 95% confidence inverval surrounding the sample estimate shown by the bar. Confidence intervals are not shown for sample estimates of less than .5%.

Note: See Glossary for definitions of substances and frequently used terms.

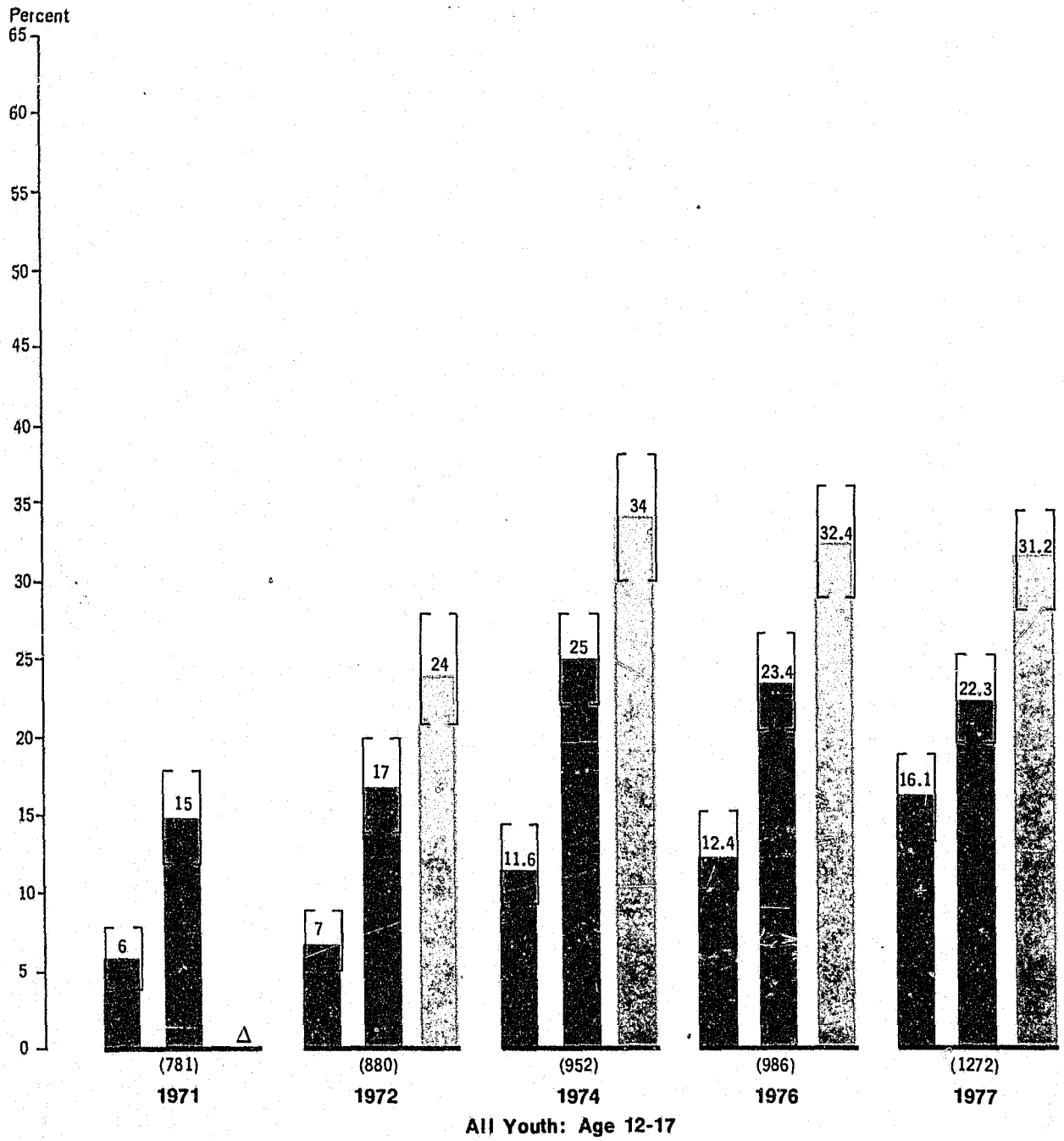
*Less than .5%.

**Marihuana and/or hashish.

Source: MJ5, SH5.

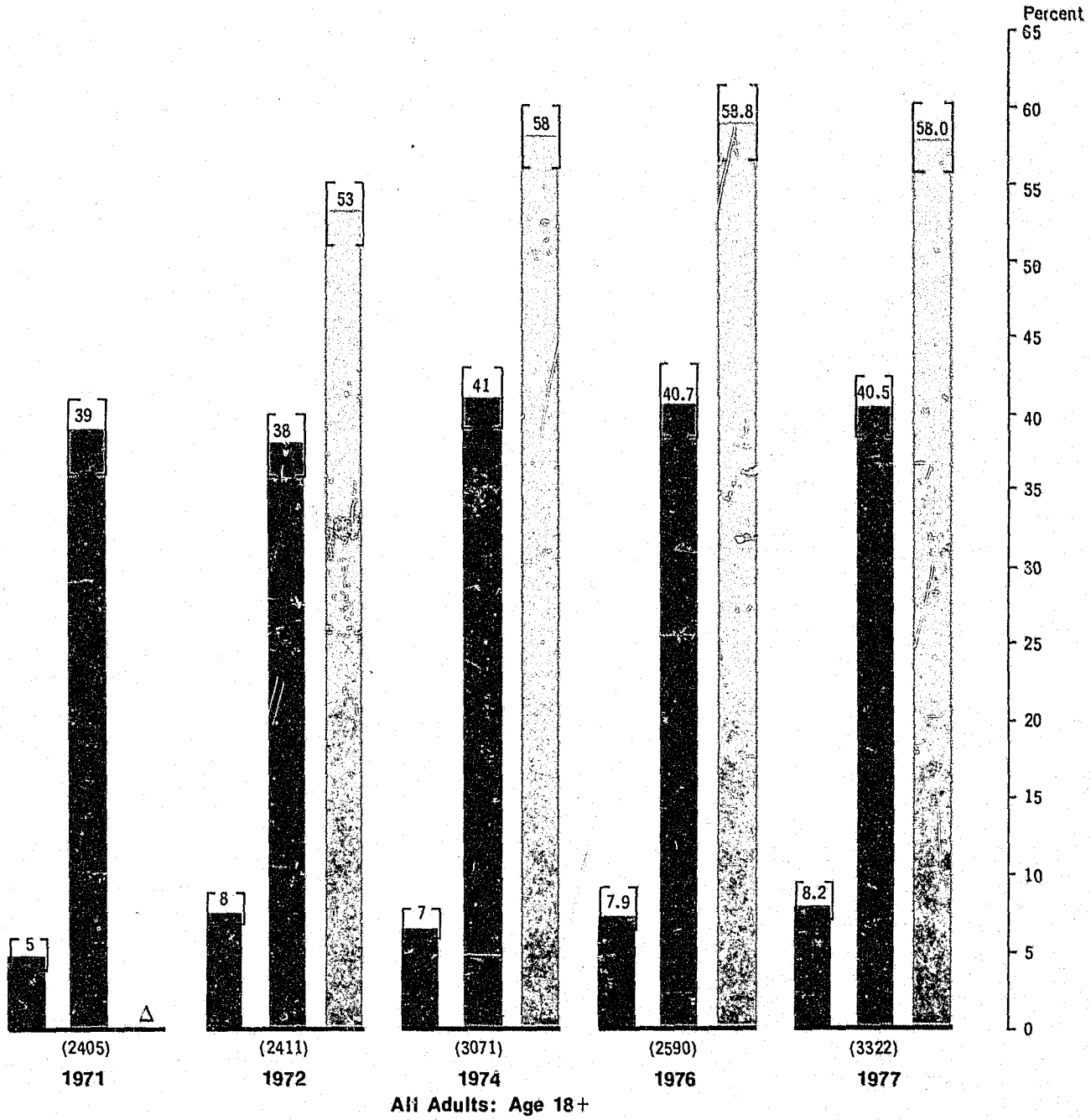
FIGURE F

Marihuana Use in Past Month, Current Smokers and Current Drinkers, 1971-1977**



Color
1 Use of marihuana in past month
2 Current smokers***
3 Current drinkers

[ ] Brackets indicate the 95% confidence interval surrounding the sample estimate shown by the bar.



Note: See Glossary for definitions of substances and frequently used terms.

**In 1977, 1976, and 1974, marihuana and/or hashish. In 1972 and 1971, marihuana only.

***In 1977, 1976, and 1974, current smoker was defined as "smoked within past month." In 1972 and 1971, current smoker was defined as "smoke at the present time."

ΔIn 1971, data on alcoholic beverages were reported separately for beer, wines, liquor, and not summed to represent any drinking of alcohol.

Source: Q1, 13, MJ6, SH6.

TABLE 29 1977

Patterns of Use, Marihuana and/or Hashish: All Youth, All Adults, Young Adults, and Older Adults

Reported as ever used	1 All youth: age 12-17 (1272)		2 All adults: age 18+ (3322)		3 Young adults: age 18-25 (1500)		4 Older adults: age 26+ (1822)	
1. Lifetime frequency of use:								
1-2 times	4.7%		5.4%		8.2%		4.6%	
3-4 times	2.4		2.7		4.7		2.2	
5-9 times	3.4	9.4	1.9	6.7	4.5	14.1	1.2	4.8
10-19 times	3.6		2.1		4.9		1.4	
20-49 times	3.7		2.5		6.4		1.5	
50-100 times	1.9	11.1	1.8	9.4	5.4	29.9	.9	4.2
More than 100 times	5.5		5.1		18.1		1.8	
Never used	71.8		75.5		39.9		84.6	
Unclassifiable	3.0		3.1		7.8		1.9	
2. First use:								
Within past month	1.3%		*%		*%		*%	
Within past six months	1.8		*		.6		*	
Six months to a year ago	4.0		.9		1.8		.6	
More than a year ago	19.3		23.0		56.6		14.3	
Not sure	1.8		*		.8		*	
Never used	71.8		75.5		39.9		84.6	
3. Pattern of use:								
Days used in past month								
5 or more	8.7%		5.0%		18.7%		1.5%	
1-4	8.0		3.3		9.0		1.8	
0, but have used it	9.5		15.5		30.8		11.6	
Never used	71.8		75.5		39.9		84.6	
Unclassifiable	2.0		.8		1.5		.6	
4. Subjective measure of use:								
Regular user	4.0%		3.0%		11.9%		.8%	
An occasional user	14.7		8.4		23.5		4.5	
A non-user	81.3		88.5		64.5		94.7	
Unclassifiable	*		*		*		*	

Some categories do not add to 100% because of rounding.

*Less than .5%.

Source: MJ5, 7-9, SH5, 7-9.

Inhalants and Hallucinogens

Inhalants

Experience with inhalants is reported by 9.0% of the 12-17 age group and 3.7% of those 18 and over. Current use is .7% among youth and less than .5% among adults. Higher lifetime prevalence is reported by adults age 18-25 (11.2%) than by those 26 and over (1.8%). Current use is less than .5% for both young adults and older adults.

Among both youth and adults, estimates of lifetime prevalence and current use have not changed significantly since 1976. Making comparisons across time, ever used rates among youth increased slightly between 1972 and 1974 and have been virtually unchanged since then (1972 6.4%; 1974 8.5%; 1976 8.1%; 1977 9.0%). Current use has remained at 1.0% or less since 1972. Among all adults, prevalence shows a slight upward trend over time (1972 2.1%; 1974 2.8%; 1976 3.4%; 1977 3.7%) while current use has continued at less than .5%.

First use in past year is 1.1% among youth and less than .5% among adults. These figures are not significantly different than rates for youth (2.4%) and adults (less than .5%) in 1976.

Lifetime frequency rates indicate that nearly half of the adults and youth who report experience with inhalants have used them only once or twice.

Hallucinogens

Among youth, 4.6% report experience with hallucinogens compared to 6.1% of the adults. Current use is 1.6% for 12-17 year olds and .5% for those 18 and over. The highest prevalence rate is found among 18-25 year olds; of this age group, nearly one in five (19.8%) reports experience with hallucinogens compared to fewer than one in thirty-five older adults (2.6%). Current use rates are 2.0% for young adults and less than .5% for older adults.

Prevalence estimates among youth have remained relatively unchanged since 1972 (1972 4.8%; 1974 6.0%; 1976 5.1%; 1977 4.6%) and current use has continued at about 1.0%. Among all adults, prevalence has not changed significantly since 1972 (1972 4.6%; 1974 4.5%; 1976 4.9%; 1977 6.1%) and current use has remained at less than 1.0%. However, ever used rates for adults age 18-25 have shown a slow upward trend in the past three years (1974 16.6%; 1976 17.3%; 1977 19.8%).

First use in past year is 1.5% among youth and less than .5% among adults. These figures are similar to the youth and adult rates in 1976.

Lifetime frequency figures indicate that more than one-third of the 12-17 year olds who report using hallucinogens have experienced them only once or twice; another third have used them three to nineteen times and one-fifth have used hallucinogens twenty times or more. Among young adults, we also find a wide range of use extending from mere experimentation to extensive experience. Of the users in this age group, just under three in ten used once or twice, over four in ten experienced this substance three to nineteen times, and a quarter used twenty times or more.

Note: See Glossary for definitions of substances and frequently used terms.

Experience with phencyclidine (PCP) is reported by 5.8% of the 12-17 year olds and 3.7% of those 18 and over. Among adults, prevalence varies by age with 13.9% of 18-25 year olds reporting use compared to 1.1% of those 26 and over.

Making comparisons across time, prevalence estimates for youth and young adults have risen since 1976. Phencyclidine experience among the 12-17 age group increased from 3.0% in 1976 to 5.8% in 1977 while the rate for 18-25 year olds rose from 9.5% to 13.9%.

TABLE 30 1977

Lifetime Prevalence and Recency of Use of Inhalants: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
All youth: age 12-17 (1272)	9.0%	.7%	1.5	6.9	91.0
All adults: age 18+ (3322)	3.7%	*%	*	3.1	96.3
Young adults: age 18-25 (1500)	11.2%	*%	1.4	9.5	88.8
Older adults: age 26+ (1822)	1.8%	*%	*	1.4	98.2

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
**Includes those who are not sure when their most recent use occurred.
Source: G6.

TABLE 31

Lifetime Prevalence and Use in Past Month of Inhalants, 1972-1977: All Youth

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All youth: age 12-17	(880)	(952)	(986)	(1272)	
Ever used	6.4%	8.5%	8.1%	9.0%	NS
Use in past month	1.0%	.7%	.9%	.7%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS; significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: G6.

TABLE 32

Lifetime Prevalence and Use in Past Month of Inhalants, 1972-1977: All Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All adults: age 18+	(2411)	(3071)	(2590)	(3322)	
Ever used	2.1%	2.8%	3.4%	3.7%	NS
Use in past month	*%	*%	*%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: G6.

TABLE 33

Lifetime Prevalence and Use in Past Month of Inhalants, 1972-1977: Young Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Young adults: age 18-25	(772)	(849)	(882)	(1500)	
Ever used	Δ	9.2%	9.0%	11.2%	NS
Use in past month	Δ	*%	.5%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS; significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: G6.

TABLE 34

Lifetime Prevalence and Use in Past Month of Inhalants, 1972-1977: Older Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Older adults: age 26+	(1613)	(2221)	(1708)	(1822)	
Ever used	Δ	1.2%	1.9%	1.8%	NS
Use in past month	Δ	*%	*%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS; significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: G6.

TABLE 35 1977

Patterns of Use, Inhalants: All Youth, All Adults, Young Adults, and Older Adults

	1		2		3		4	
	All youth: age 12-17		All adults: age 18+		Young adults: age 18-25		Older adults: age 26+	
	(1272)		(3322)		(1500)		(1822)	
Reported as ever used								
1. Lifetime frequency of use:								
1-2 times	4.4%		1.6%		5.3%		.6%	
3-4 times	1.6		.6		1.5		*	
5-9 times	.8	3.2	.5	1.5	1.4	4.1	*	.8
10-19 times	.8		*		1.2		*	
20-49 times	*		*		*		*	
50 times or more	*	*	*	*	.6	1.0	*	*
No answer/Not reported	1.0		*		.7		*	
Never used	91.0		96.3		88.8		98.2	
2. First use:								
Within past month	*%		*%		*%		*%	
Within past six months	*		*		*		*	
Six months to a year ago	.6		*		.7		*	
More than a year ago	6.7		3.4		10.1		1.7	
Not sure, no answer	1.1		*		*		*	
Never used	91.0		96.3		88.8		98.2	
3. Pattern of use:								
Days used in past month								
5 or more	*%		*%		*%		*%	
1-4	.6		*		*		*	
0, but have used it	6.2		3.3		10.4		1.5	
No answer	1.9		*		.5		*	
Never used	91.0		96.3		88.8		98.2	
4. Subjective measure of use:								
Regular user	*%		*%		*%		*%	
An occasional user	2.1		.5		1.6		*	
A non-user	97.9		99.5		98.4		99.8	
No answer	*		*		*		*	

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

Source: G5, 7-9.

TABLE 36 1977

Lifetime Prevalence and Recency of Use of Hallucinogens: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
All youth: age 12-17 (1272)	4.6%	1.6%	1.5	1.5	95.4
All adults: age 18+ (3322)	6.1%	.5%	1.0	4.5	93.9
Young adults: age 18-25 (1500)	19.8%	2.0%	4.4	13.5	80.1
Older adults: age 26+ (1822)	2.6%	*%	*	2.2	97.4

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
**Includes those who are not sure when their most recent use occurred.
Source: L6.

TABLE 37

Lifetime Prevalence and Use in Past Month of Hallucinogens, 1972-1977: All Youth

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All youth: age 12-17	(880)	(952)	(986)	(1272)	
Ever used	4.8%	6.0%	5.1%	4.6%	NS
Use in past month	1.4%	1.3%	.9%	1.6%	NS

Note: See Glossary for defintions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: L6.

TABLE 38

Lifetime Prevalence and Use in Past Month of Hallucinogens, 1972-1977: All Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All adults: age 18+	(2411)	(3071)	(2590)	(3322)	
Ever used	4.6%	4.5%	4.9%	6.1%	NS
Use in past month	.7%	.6%	*%	.5%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS; significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: L6.

TABLE 39

Lifetime Prevalence and Use in Past Month of Hallucinogens, 1972-1977: Young Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Young adults: age 18-25	(772)	(849)	(882)	(1500)	
Ever used	Δ	16.6%	17.3%	19.8%	NS
Use in past month	Δ	2.5%	1.1%	2.0%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS; significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: L6.

TABLE 40

Lifetime Prevalence and Use in Past Month of Hallucinogens, 1972-1977: Older Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Older adults: age 26+	(1613)	(2221)	(1708)	(1822)	
Ever used	Δ	1.3%	1.6%	2.6%	NS
Use in past month	Δ	*%	*%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS; significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: L6.

TABLE 41 1977

Patterns of Use, Hallucinogens: All Youth, All Adults, Young Adults, and Older Adults

	1 All youth: age 12-17		2 All adults: age 18+		3 Young adults: age 18-25		4 Older adults: age 26+	
Reported as ever used	(1272)		(3322)		(1500)		(1822)	
1. Lifetime frequency of use:								
1-2 times	1.7%		1.7%		5.6%		.7%	
3-4 times	.5		.7		2.1		*	
5-9 times	.8	1.7	1.0	2.5	3.7	8.5	*	.9
10-19 times	*		.8		2.7		*	
20-49 times	.9		.6		2.2		*	
50 times or more	*	1.0	.9	1.5	2.7	4.9	.5	.7
No answer/Not reported	*		*		1.0		*	
Never used	95.4		93.9		80.1		97.4	
2. First use:								
Within past month	*%		*%		*%		*%	
Within past six months	*		*		*		*	
Six months to a year ago	.9		*		.7		*	
More than a year ago	3.1		5.9		18.7		2.6	
Not sure, no answer	*		*		*		*	
Never used	95.4		93.9		80.1		97.4	
3. Pattern of use:								
Days used in past month								
5 or more	*%		*%		*%		*%	
1-4	1.2		*		1.7		*	
0, but have used it	2.6		5.6		17.7		2.5	
No answer	*		*		*		*	
Never used	95.4		93.9		80.1		97.4	
4. Subjective measure of use:								
Regular user	*%		*%		*%		*%	
An occasional user	2.5		2.1		7.0		.8	
A non-user	97.2		97.9		92.7		99.2	
No answer	*		*		*		*	

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

Source: L5, 7-9.

TABLE 42

Lifetime Prevalence of PCP, 1976-1977: All Youth, All Adults, Young Adults, and Older Adults

	Ever Used		
	1	2	3
	1976	1977	1976-1977 change**
All youth: age 12-17	3.0%	5.8%	SS
All adults: age 18+	2.6%	3.7%	S
Young adults: age 18-25	9.5%	13.9%	SS
Older adults: age 26+	.7%	1.1%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: L11.

Cocaine, Heroin and Other Opiates

Cocaine

Adults report higher lifetime experience levels than youth with 6.0% of those 18 and over having ever used cocaine compared to 4.0% of the youth. Current use of the substance is reported by about 1% of each group. The highest lifetime prevalence rate is found among young adults age 18-25. Of this age group, 19.1% have ever used cocaine, and 3.7% have used it in the past month. Comparable figures for adults age 26 and over are 2.6% and less than .5%.

Making comparisons across time, lifetime prevalence estimates for young people age 12-17 remained virtually unchanged between 1976 (3.4%) and 1977 (4.0%). In the same time period, lifetime prevalence among adults age 18 and over is up significantly (1976 4.1%; 1977 6.0%). This increase is primarily attributable to young adults age 18-25. Among this age group, experience with cocaine rose from 13.4% in 1976 to 19.1% in 1977. Comparable figures for older adults are 1.6% in 1976, and 2.6% in 1977. Over time, current use has continued virtually unchanged for all adults, youth, and older adults with 1% or less of each group reporting cocaine use in the past month. However, among young adults, current use was 2.0% in 1976 and 3.7% in 1977.

First use in past year is reported by 2.1% of the 12-17 age group and .8% of all adults. These figures are almost identical to the rates in 1976.

Lifetime frequency rates show that half the youth who have tried cocaine have used it only once or twice, while about four in ten have used the substance three to nineteen times. Among young adults, the group with the highest prevalence rate, we find a wider range of experience with about four out of ten users experiencing cocaine only once or twice, another four out of ten using it three to nineteen times, and two in ten using it twenty times or more.

Heroin

Reported experience with heroin is virtually the same for youth (1.1%) and adults (1.4%). However, among adults, lifetime prevalence differs by age with 3.6% of those 18-25 reporting use compared to .8% of those 26 and over. Less than .5% of any age group indicates current heroin use.

Lifetime prevalence estimates for both youth and adults have remained relatively unchanged over time. For youth, ever used rates were .5% in 1976, and 1.1% in 1977. Among adults, the figures were 1.2% in 1976, and 1.4% in 1977. Ever used rates for young adults were 3.9% in 1976, and 3.6% in 1977. Comparable figures for older adults were .5% in 1976 and .8% in 1977. Over time, current use among all groups has continued unchanged at less than .5%.

First use in past year is .7% for those age 12-17 and less than .5% for those 18 and over. These figures are similar to 1976 and 1974 rates.

Lifetime frequency figures indicate that half of the 12-17 year olds who have experienced heroin have used it only once or twice. Of young adult users, about one-third report using it once or twice, another third report using it three to nineteen times, and the last third indicate they have experienced heroin twenty times or more.

Note: See Glossary for definitions of substances and frequently used terms.

For discussion of the developmental nominative technique, the reader is referred to Highlights of Statistical Results (p. 16).

Opiates Other Than Heroin*

Experience with other opiates is reported by 6.1% of 12-17 year olds and 5.0% of all adults. The highest lifetime prevalence is reported by young adults. Of this age group, one in eight (13.5%) reports experience with other opiates compared to one in thirty-five older adults. Use in past month is 1.0% or less for all groups.

Prevalence estimates among both youth and adults remained unchanged since the last survey. Reported prevalence among youth was 6.5% in 1976, and 6.1% in 1977. Comparable figures for adults were 5.5% in 1976 and 5.0% in 1977.

Note: See Glossary for definitions of substances and frequently used terms.

*The 1974 and 1976 estimates of "use in past month" include methadone while the 1977 estimate does not. However, examination of the earlier data indicates that the inclusion of methadone made little or no difference in the "use in past month" figures.

TABLE 43 1977

Lifetime Prevalence and Recency of Use of Cocaine: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
All youth: age 12-17 (1272)	4.0%	.8%	1.8	1.4	96.0
All adults: age 18+ (3322)	6.0%	1.0%	1.8	3.1	94.0
Young adults: age 18-25 (1500)	19.1%	3.7%	6.5	9.0	80.9
Older adults: age 26+ (1822)	2.6%	*%	.6	1.7	97.4

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
**Includes those who are not sure when their most recent use occurred.
Source: C6.

TABLE 44

Lifetime Prevalence and Use in Past Month of Cocaine, 1972-1977: All Youth

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All youth: age 12-17	(880)	(952)	(986)	(1272)	
Ever used	1.5%	3.6%	3.4%	4.0%	NS
Use in past month	.6%	1.0%	1.0%	.8%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: C6.

TABLE 45

Lifetime Prevalence and Use in Past Month of Cocaine, 1972-1977: All Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All adults: age 18+	(2411)	(3071)	(2590)	(3322)	
Ever used	3.2%	3.4%	4.1%	6.0%	SS
Use in past month	.9%	.7%	.7%	1.0%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: C6.

TABLE 46

Lifetime Prevalence and Use in Past Month of Cocaine, 1972-1977: Young Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Young adults: age 18-25	(772)	(849)	(882)	(1500)	
Ever used	9.1%	12.7%	13.4%	19.1%	SS
Use in past month	Δ	3.1%	2.0%	3.7%	S

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: C6.

TABLE 47

Lifetime Prevalence and Use in Past Month of Cocaine, 1972-1977: Older Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Older adults: age 26+	(1613)	(2221)	(1708)	(1822)	
Ever used	1.6%	.9%	1.6%	2.6%	NS
Use in past month	Δ	*%	*%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: C6.

TABLE 48 1977

Patterns of Use, Cocaine: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
	(1272)	(3322)	(1500)	(1822)
Reported as ever used				
1. Lifetime frequency of use:				
1-2 times	1.9%	2.1%	7.4%	.8%
3-4 times	.7	.9	2.8	*
5-9 times	.5 } 1.5	.6 } 2.3	1.9 } 7.0	* } 1.1
10-19 times	*	.8	2.3	*
20-49 times	* } *	.6 } 1.2	2.4 } 3.9	* } .5
50 times or more	*	.6	1.5	*
No answer/Not reported	*	*	.9	*
Never used	96.0	94.0	80.9	97.4
2. First use:				
Within past month	*%	*%	*%	*%
Within past six months	*	*	.6	*
Six months to a year ago	1.6	.6	2.4	*
More than a year ago	1.4	5.1	15.6	2.3
Not sure, no answer	*	*	*	*
Never used	96.0	94.0	80.9	97.4
3. Pattern of use:				
Days used in past month				
5 or more	*%	*%	.8%	*%
1-4	1.0	.8	2.9	*
0, but have used it	2.6	4.9	14.9	2.3
No answer	*	*	.5	*
Never used	96.0	94.0	80.9	97.4
4. Subjective measure of use:				
Regular user	*%	*%	*%	*%
An occasional user	2.1	2.5	8.9	.9
A non-user	97.9	97.4	90.8	99.1
No answer	*	*	*	*

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

Source: C5, 7-9.

TABLE 49 1977

Lifetime Prevalence and Recency of Use of Heroin: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
All youth: age 12-17 (1272)	1.1%	*%	.6	.7	98.9
All adults: age 18+ (3322)	1.4%	*%	*	.9	98.6
Young adults: age 18-25 (1500)	3.6%	*%	.9	2.4	96.4
Older adults: age 26+ (1822)	.8%	*%	*	.5	99.2

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
**Includes those who are not sure when their most recent use occurred.
Source: H6.

TABLE 50

Lifetime Prevalence and Use in Past Month of Heroin, 1972-1977: All Youth

	1 1972	2 1974	3 1976	4 1977	5 1976-1977 change**
All youth: age 12-17	(880)	(952)	(986)	(1272)	
Ever used	.6%	1.0%	.5%	1.1%	NS
Use in past month	*%	*%	*%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: H6.

TABLE 51

Lifetime Prevalence and Use in Past Month of Heroin, 1972-1977: All Adults

	1 1972	2 1974	3 1976	4 1977	5 1976-1977 change**
All adults: age 18+	(2411)	(3071)	(2590)	(3322)	
Ever used	1.3%	1.3%	1.2%	1.4%	NS
Use in past month	*%	*%	*%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: H6.

TABLE 52

Lifetime Prevalence and Use in Past Month of Heroin, 1972-1977: Young Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Young adults: age 18-25	(772)	(849)	(882)	(1500)	
Ever used	4.6%	4.5%	3.9%	3.6%	NS
Use in past month	Δ	*%	*%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: H6.

TABLE 53

Lifetime Prevalence and Use in Past Month of Heroin, 1972-1977: Older Adults

	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Older adults: age 26+	(1613)	(2221)	(1708)	(1822)	
Ever used	*%	.5%	.5%	.8%	NS
Use in past month	Δ	*%	*%	*%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: H6.

TABLE 54 1977

Patterns of Use, Heroin: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
	(1272)	(3322)	(1500)	(1822)
Reported as ever used				
1. Lifetime frequency of use:				
1-2 times	.5%	*%	1.2%	*%
3-4 times	*	*	.6	*
5-9 times	* *	* *	* 1.1	* *
10-19 times	*	*	*	*
20-49 times	*	*	.7	*
50 times or more	* *	* *	.5 1.2	* *
No answer/Not reported	*	*	*	*
Never used	98.9	98.6	96.4	99.2
2. First use:				
Within past month	*%	*%	*%	*%
Within past six months	*	*	*	*
Six months to a year ago	*	*	*	*
More than a year ago	*	1.3	3.2	.7
Not sure, no answer	*	*	*	*
Never used	98.9	98.6	96.4	99.2
3. Pattern of use:				
Days used in past month				
5 or more	*	*	*	*
1-4	*	*	*	*
0, but have used it	1.0	1.3	3.2	.8
No answer	*	*	*	*
Never used	98.9	98.6	96.4	99.2
4. Subjective measure of use:				
Regular user	*%	*%	*%	*%
An occasional user	*	*	.7	*
A non-user	99.7	99.6	99.2	99.7
No answer	*	*	*	*

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

Source: H5, 7-9.

TABLE 55 1977

Lifetime Prevalence and Recency of Use of Other Opiates**: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4	5
	Ever used	Past month	Past year, not past month	Not past year**	Never used
All youth: age 12-17 (1272)	6.1%	.6%	2.8	2.3	92.9
All adults: age 18+ (3322)	5.0%	*%	.9	3.6	93.4
Young adults: age 18-25 (1500)	13.5%	1.0%	3.7	8.5	86.0
Older adults: age 26+ (1822)	2.8%	*%	*	2.6	95.3

Some categories do not add to 100% because of rounding.
"No answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
**Includes those who are not sure when their most recent use occurred.
**Columns 1 and 5 include methadone; columns 2-4 do not include methadone.
Source: 06.

TABLE 56

Lifetime Prevalence and Use in Past Month of Other Opiates, 1974-1977: All Youth

	1	2	3	4
	1974	1976	1977	1976-1977 change**
All youth: age 12-17	(952)	(986)	(1272)	
Ever used••	6.1%	6.5%	6.1%	NS
Use in past month•••	.7%	2.4%	.6%	§

Note: See Glossary for definitions of substances and frequently used terms.

••Includes methadone.

•••Columns 1 and 2 include methadone; column 3 does not include methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable.

Source: 06.

TABLE 57

Lifetime Prevalence and Use in Past Month of Other Opiates, 1974-1977: All Adults

	1	2	3	4
	1974	1976	1977	1976-1977 change**
All adults: age 18+	(3071)	(2590)	(3322)	
Ever used••	3.6%	5.5%	5.0%	NS
Use in past month•••	*%	*%	*%	§

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

••Includes methadone.

•••Columns 1 and 2 include methadone; column 3 does not include methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable.

Source: 06.

TABLE 58

Lifetime Prevalence and Use in Past Month of Other Opiates, 1974-1977: Young Adults

	1	2	3	4
	1974	1976	1977	1976-1977 change**
Young adults: age 18-25	(849)	(882)	(1500)	
Ever used••	11.8%	14.7%	13.5%	NS
Use in past month•••	.9%	1.2%	1.0%	§

Note: See Glossary for definitions of substances and frequently used terms.

••Includes methadone.

•••Columns 1 and 2 include methadone; column 3 does not include methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable.

Source: 06.

TABLE 59

Lifetime Prevalence and Use in Past Month of Other Opiates, 1974-1977: Older Adults

	1	2	3	4
	1974	1976	1977	1976-1977 change**
Older adults: age 26+	(2221)	(1708)	(1822)	
Ever used••	1.4%	3.1%	2.8%	NS
Use in past month•••	*%	*%	*%	§

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

••Includes methadone.

•••Columns 1 and 2 include methadone; column 3 does not include methadone.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant; §: significance level not calculated because categories not comparable.

Source: 06.

CONTINUED

1 OF 3

TABLE 60 1977

Patterns of Use, Other Opiates**: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
	(1272)	(3322)	(1500)	(1822)
Reported as ever used				
1. Lifetime frequency of use:				
1-2 times	2.3%	1.4%	3.8%	.8%
3-4 times	.8	.5	1.4	*
5-9 times	.9	.6	2.4	*
10-19 times	.7	.7	1.6	.5
20-49 times	*	.5	1.7	*
50 times or more	*	*	1.3	*
3-4 times, 5-9 times, 10-19 times	2.4	1.8	5.4	.9
20-49 times, 50 times or more	*	.8	3.0	*
No answer/Not reported	.6	.8	1.0	.7
Never used	94.3	95.2	86.9	97.3
2. First use:				
Within past month	*%	*%	*%	*%
Within past six months	*	*	*	*
Six months to a year ago	1.6	*	.9	*
More than a year ago	2.9	4.5	12.2	2.6
Not sure, no answer	.5	*	*	*
Never used	94.3	95.2	86.9	97.3
3. Pattern of use:				
Days used in past month				
5 or more	*%	*%	*%	*%
1-4	.6	*	.8	*
0, but have used it	4.2	4.4	11.6	2.5
No answer	.7	*	.5	*
Never used	94.3	95.2	86.9	97.3
4. Subjective measure of use:				
Regular user	*%	*%	*%	*%
An occasional user	2.9	1.4	4.3	.7
A non-user	97.0	98.5	95.6	99.3
No answer	*	*	*	*

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**Columns 1-4 do not include methadone.

Source: 05, 7-9.

Stimulants, Sedatives, Tranquilizers (Nonmedical Use)

Stimulants

Experience with nonmedical use of Rx stimulants is less prevalent among youth than among adults. One in twenty youth age 12-17 report nonmedical experience with Rx stimulants compared to one in twelve adults. Among adults, the highest experience level is reported by 18-25 year olds. Of this age group, 21.2% report nonmedical use of Rx stimulants compared to 4.7% among adults age 26 and over.

Among youth and older adults, prevalence rates did not change significantly between 1976 and 1977. However, among young adults prevalence rose 4.6% in the same time period (1976 16.6%, 1977 21.2%).

Sedatives

Reported experience with Rx sedatives shows a pattern similar to that of Rx stimulants use. That is, adults report more nonmedical experience with sedatives than do youth (6.0% compared to 3.1%). Again, the highest experience level is found among young adults with 18.4% reporting use compared to 2.8% among adults 26 and over.

From 1976 to 1977, there was no significant change in the experience level of youth or older adults. However, the prevalence rate among young adults rose by 6.5% (1976 11.9%, 1977 18.4%).

Tranquilizers

Nonmedical experience with Rx tranquilizers does not show quite as much difference by age as does reported experience with stimulants or sedatives. Lifetime prevalence is 3.8% for youth and 4.8% for adults. Once again, the highest prevalence level is found among young adults age 18-25. Of this age group, 13.4% report experience compared to 2.6% of the adults 26 and over.

Looking at prevalence data for 1976 and 1977, there was no significant change for either youth or older adults. However, among young adults, the ever used rate rose 4.3% in the same time period (1976 9.1%; 1977 13.4%).

Note: See Glossary for definitions of substances and frequently used terms.

TABLE 61 1977

Nonmedical Experience with Types of Psychotherapeutic Drugs: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
	(623)	(1647)	(750)	(897)
Rx stimulants				
Any nonmedical use	5.2%	8.1%	21.2%	4.7%
See what it was like	4.6%	6.7%	19.4%	3.4%
Enjoy the feeling	4.2%	5.6%	16.2%	2.9%
Other nonmedical reason	4.3%	5.8%	16.2%	3.1%
Rx sedatives				
Any nonmedical use	3.1%	6.0%	18.4%	2.8%
See what it was like	2.9%	5.4%	17.6%	2.2%
Enjoy the feeling	1.9%	4.2%	15.4%	1.4%
Other nonmedical reason	2.0%	4.1%	13.5%	1.6%
Rx tranquilizers				
Any nonmedical use	3.8%	4.8%	13.4%	2.6%
See what it was like	3.2%	4.5%	12.1%	2.5%
Enjoy the feeling	2.3%	3.7%	10.2%	2.0%
Other nonmedical reason	1.8%	3.1%	8.2%	1.8%

Note: See Glossary for definitions of substances and frequently used terms.

**The reader is reminded that the questions on nonmedical use of Rx psychotherapeutic drugs were on Form P of the interview schedule which was administered to a random half of the households.

Source: Q32, 41, 50.

TABLE 62 1977

Nonmedical Experience with Types of Psychotherapeutic Drugs: Lifetime Prevalence Among Subgroups of Youth

	Ever Used		
	1	2	3
	Any Rx Stimulants	Any Rx Sedatives	Any Rx Tranquilizers
All youth: age 12-17 (623)	5.2%	3.1%	3.8%
Age:			
12-13 (190)	*%	*%	1%
14-15 (212)	5%	3%	2%
16-17 (221)	10%	7%	9%
Sex:			
Male (305)	5%	4%	5%
Female (318)	5%	3%	3%
Race:			
White (515)	6%	3%	4%
Nonwhite (105)	2%	3%	2%
Region:			
Northeast (137)	5%	3%	3%
North Central (181)	6%	3%	5%
South (211)	2%	3%	3%
West (94)	9%	3%	4%
Population density:			
Large metropolitan (206)	8%	5%	5%
Other metropolitan (199)	4%	2%	4%
Nonmetropolitan (218)	3%	2%	2%

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

Source: Q34, 43, 52.

TABLE 63 1977

Nonmedical Experience with Types of Psychotherapeutic Drugs: Lifetime Prevalence Among Subgroups of Adults

	Ever Used		
	1	2	3
	Any Rx Stimulants	Any Rx Sedatives	Any Rx Tranquilizers
All adults: age 18+ (1647)	8.1%	6.0%	4.8%
Age:			
18-21 (373)	20%	19%	14%
22-25 (377)	22%	18%	13%
26-34 (329)	12%	9%	8%
35+ (568)	2%	1%	1%
Sex:			
Male (713)	11%	8%	7%
Female (934)	6%	4%	3%
Race:			
White (1398)	8%	6%	4%
Nonwhite (245)	9%	8%	8%
Education:			
Not high school graduate (420)	4%	3%	2%
High school graduate (626)	8%	6%	6%
College (592)	12%	9%	6%
Not a graduate (335)	16%	13%	8%
Graduate (257)	7%	4%	3%
Now a college student (203)	17%	14%	8%
Region:			
Northeast (333)	9%	8%	7%
North Central (444)	8%	7%	5%
South (558)	6%	4%	3%
West (312)	10%	6%	5%
Population density:			
Large metropolitan (558)	11%	9%	6%
Other metropolitan (558)	8%	6%	6%
Nonmetropolitan (531)	4%	3%	2%

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q34, 43, 52.

TABLE 64 1977

Nonmedical Experience with Types of Psychotherapeutic Drugs: Lifetime Prevalence Among Subgroups of Young Adults

	Ever Used		
	1	2	3
	Any Rx Stimulants	Any Rx Sedatives	Any Rx Tranquilizers
Young adults: age 18-25 (750)	21.2%	18.4%	13.4%
Age:			
18-21 (373)	20%	19%	14%
22-25 (377)	22%	18%	13%
Sex:			
Male (343)	26%	24%	16%
Female (407)	16%	14%	11%
Race:			
White (624)	22%	19%	13%
Nonwhite (123)	16%	16%	16%
Education:			
Not high school graduate (172)	16%	15%	14%
High school graduate (290)	22%	17%	16%
College (284)	23%	21%	11%
Not a graduate (210)	24%	23%	12%
Graduate (74)	17%	12%	9%
Now a college student (159)	21%	20%	11%
Region:			
Northeast (156)	23%	23%	17%
North Central (196)	22%	18%	12%
South (246)	14%	13%	9%
West (152)	28%	20%	16%
Population density:			
Large metropolitan (250)	25%	25%	14%
Other metropolitan (269)	21%	16%	16%
Nonmetropolitan (231)	15%	11%	9%

Note: See Glossary for definitions of substances and frequently used terms.
Source: Q34, 43, 52.

TABLE 65 1977

Nonmedical Experience with Types of Psychotherapeutic Drugs: Lifetime Prevalence Among Subgroups of Older Adults

	Ever Used		
	1	2	3
	Any Rx Stimulants	Any Rx Sedatives	Any Rx Tranquilizers
Older adults: age 26+ (897)	4.7%	2.8%	2.6%
Age:			
26-34 (329)	12%	9%	8%
35+ (568)	2%	1%	1%
Sex:			
Male (370)	7%	4%	4%
Female (527)	3%	2%	1%
Race:			
White (774)	4%	2%	2%
Nonwhite (122)	6%	5%	5%
Education:			
Not high school graduate (248)	2%	1%	1%
High school graduate (336)	5%	3%	3%
College (308)	7%	4%	4%
Not a graduate (125)	9%	6%	5%
Graduate (183)	6%	3%	2%
Now a college student (44)	9%	2%	3%
Region:			
Northeast (177)	5%	3%	4%
North Central (248)	5%	4%	3%
South (312)	4%	1%	1%
West (160)	6%	2%	2%
Population density:			
Large metropolitan (308)	7%	4%	4%
Other metropolitan (289)	4%	3%	3%
Nonmetropolitan (300)	2%	1%	1%

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q34, 43, 52.

TABLE 66

Nonmedical Experience with Types of Psychotherapeutic Drugs, Lifetime Prevalence, 1972-1977: All Youth, All Adults, Young Adults, and Older Adults

	Ever Used				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
Rx Stimulants					
All youth: age 12-17	4%	5%	4.4%	5.2%	NS
All adults: age 18+	5%	6%	7.9%	8.1%	NS
Young adults: age 18-25	12%	17%	16.6%	21.2%	S
Older adults: age 26+	3%	3%	5.6%	4.7%	NS
Rx Sedatives					
All youth: age 12-17	3%	5%	2.8%	3.1%	NS
All adults: age 18+	4%	4%	4.4%	6.0%	NS
Young adults: age 18-25	10%	15%	11.9%	18.4%	SS
Older adults: age 26+	2%	2%	2.4%	2.8%	NS
Rx Tranquilizers					
All youth: age 12-17	3%	3%	3.3%	3.8%	NS
All adults: age 18+	6%	3%	4.0%	4.8%	NS
Young adults: age 18-25	7%	10%	9.1%	13.4%	S
Older adults: age 26+	5%	2%	2.7%	2.6%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: Q34, 43, 52.

Legal Drugs

Stimulants, Sedatives, Tranquilizers (Medical Use)

Stimulants (Medical Use). One in eight adults (12.1%) report medical experience with stimulants during their lifetime and one in thirty-five (2.9%) reports use in past year. Prevalence varies by age with 18-25 year olds reporting lower medical experience (7%) than adults 26 or over (14%).

During the period 1976 to 1977, there was no significant change in lifetime medical use of stimulants among adults.

Sedatives (Medical Use). Nearly one adult in five (19.5%) reports lifetime medical experience with sedatives and one in twelve (8.7%) reports use in past year. Unlike medical experience with stimulants and tranquilizers, young adults (16%) do not report significantly different medical experience with sedatives than older adults (20%).

Looking at prevalence figures across time, there was no significant change in rates between 1976 and 1977.

Tranquilizers (Medical Use). Adults report greater medical experience with tranquilizers than with either sedatives or stimulants. More than one in three adults (34.8%) report lifetime medical experience with tranquilizers and about one in six (17.6%) reports use in past year. Medical experience with tranquilizers follows the same pattern as that of stimulants: young adults age 18-25 report lower prevalence (24%) than adults 26 or over (37%).

Between 1976 and 1977, the prevalence rate of medical use among adults has remained relatively unchanged.

Alcohol

Adults 18 and over report greater experience with alcohol (79.2%) than youth age 12-17 (52.6%). Current use is reported by 58.0% of adults and 31.2% of youth. Among adults, 18-25 year olds have a higher lifetime prevalence (84.2%) than older adults (77.9%). Current use also differs by age with 70.0% of the young adults using in the past month, compared to 54.9% of the older adults.

Making comparisons across time, current drinking among youth rose from 24% in 1972 to 34% in 1974 and has remained remarkably stable since then (1976 32.4%; 1977 31.2%). The same pattern occurs among adults; current drinking went from 53% in 1972 to 58% in 1974 and has remained virtually unchanged since then (1976 58.8%; 1977 58.0%).

Current drinkers are more likely than those who are not current drinkers to have used psychotherapeutic pills for nonmedical purposes and to have experienced marihuana (and/or hashish) and "stronger"* drugs. This finding applies to youth as well as to adults.

Note: See Glossary for definitions of substances and frequently used terms.

*"Stronger" drugs defined as: hallucinogens, cocaine, heroin and other opiates.

Cigarettes

Experience with cigarettes is reported by 47.3% of youth, compared to 67.1% of all adults. Current smoking also differs by age with 22.3% of the 12-17 year olds using cigarettes in the past month, compared to 40.5% of those 18 and over. Making comparisons across time, reported levels for both youth and adults have remained virtually unchanged since 1974.

Among both youth and adults, current smokers are more likely than those who are not current smokers to have used psychotherapeutic pills for nonmedical purposes and to have experienced other substances such as alcohol, marihuana (and/or hashish), and "stronger"* drugs.

Coffee, Tea

Among adults 18 and over, 79.2% report current coffee consumption, compared to 31.6% for youth age 12-17. Both groups report similar rates for current tea consumption (adults 61.0%; youth 60.6%).

Note: See Glossary for definitions of substances and frequently used terms.

*"Stronger" drugs defined as: hallucinogens, cocaine, heroin and other opiates.

TABLE 67** 1977

First Medical Use of Types of Rx Psychotherapeutic Drugs: All Youth and All Adults

	All youth: age 12-17 (623)			All adults: age 18+ (1647)		
	1	2	3	4	5	6
	Any Rx stimulants	Any Rx sedatives	Any Rx tranquilizers	Any Rx stimulants	Any Rx sedatives	Any Rx tranquilizers
Within the past year	.7%	3.5%	3.6%	.8%	4.2%	8.6%
More than a year ago, up to five years ago	1.1	3.0	2.8	2.5	5.0	12.2
More than five years ago	*	.6	.7	8.3	8.0	12.2
Not reported	1.7	4.1	2.0	1.3	3.0	1.9
Never used	96.4	88.9	90.9	87.1	79.8	65.1

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**The questions of medical use of Rx psychotherapeutic drugs were on Form P of the interview schedule which was administered to a random half of the households.

Source: Q29, 38, 47.

TABLE 68 1977

Most Recent Medical Use of Types of Rx Psychotherapeutic Drugs: All Youth and All Adults

	All youth: age 12-17 (623)			All adults: age 18+ (1647)		
	1	2	3	4	5	6
	Any Rx stimulants	Any Rx sedatives	Any Rx tranquilizers	Any Rx stimulants	Any Rx sedatives	Any Rx tranquilizers
Within the past month	*%	1.2%	1.7%	.9%	3.9%	9.5%
Within the past year, but not in past month	.7	3.5	3.4	2.0	4.8	8.1
More than a year ago	1.2	3.3	2.7	9.1	9.8	15.7
Not reported	1.4	3.0	1.3	.8	1.7	1.6
Never used	96.4	88.9	90.9	87.1	79.8	65.1

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

Source: Q30, 39, 48.

TABLE 69 1977

Medical Experience with Types of Rx Psychotherapeutic Drugs Among Subgroups of Adults: Lifetime Prevalence

	Ever Used		
	1	2	3
	Any Rx Stimulants	Any Rx Sedatives	Any Rx Tranquilizers
All adults: age 18+ (1647)	12.1%	19.5%	34.8%
Age:			
18-25 (750)	7%	16%	24%
26-34 (329)	15%	17%	33%
35-49 (331)	16%	20%	43%
50+ (237)	11%	22%	36%
Sex:			
Male (713)	8%	17%	27%
Female (934)	16%	21%	42%
Race:			
White (1398)	13%	21%	37%
Nonwhite (245)	8%	11%	22%
Education:			
Not high school graduate (420)	9%	16%	31%
High school graduate (626)	12%	18%	36%
College (592)	15%	24%	38%
Not a graduate (335)	13%	24%	34%
Graduate (257)	17%	24%	43%
Now a college student (203)	6%	22%	28%
Region:			
Northeast (333)	10%	20%	41%
North Central (444)	15%	19%	39%
South (558)	9%	17%	29%
West (312)	17%	23%	29%
Population density:			
Large metropolitan (558)	15%	20%	39%
Other metropolitan (558)	10%	21%	34%
Nonmetropolitan (531)	12%	16%	30%

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q29, 38, 47.

TABLE 70

Medical Experience with Types of Rx Psychotherapeutic Drugs, Lifetime Prevalence, 1972-1977: All Adults

	Ever Used				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
	(2411)	(3071)	(2590)	(1647)	
All adults: age 18+					
Rx stimulants	13%	11%	13.4%	12.1%	NS
Rx sedatives	20%	24%	20.9%	19.5%	NS
Rx tranquilizers	24%	30%	33.7%	34.8%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

Source: Q29, 38, 47.

TABLE 71 1977

Past Year Medical Use of Rx Stimulants Among Subgroups of Adults, 1972-1977

	Use in Past Year				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change
All adults: age 18+	8%	3%	3.8%	2.9%	NS
Age:					
18-25	16%	3%	5%	3%	NS
26-34	10%	4%	4%	6%	NS
35-49	6%	4%	2%	3%	NS
50+	4%	1%	4%	2%	NS
Sex:					
Male	7%	1%	1%	2%	NS
Female	9%	4%	6%	4%	NS
Race:					
White	8%	3%	4%	3%	NS
Nonwhite	5%	1%	2%	3%	NS
Education:					
Not high school graduate	5%	2%	4%	2%	NS
High school graduate	8%	3%	4%	2%	NS
College	12%	3%	4%	4%	NS
Not a graduate	Δ	4%	4%	4%	NS
Graduate	Δ	2%	3%	5%	NS
Now a college student	Δ	*%	2%	2%	NS
Region:					
Northeast	7%	3%	3%	2%	NS
North Central	8%	3%	5%	4%	NS
South	5%	2%	3%	2%	NS
West	14%	3%	4%	4%	NS
Population density:					
Large metropolitan	10%	3%	4%	3%	NS
Other metropolitan	10%	2%	5%	3%	NS
Nonmetropolitan	4%	2%	2%	3%	NS

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: Q48.

TABLE 72

Past Year Medical Use of Rx Sedatives Among Subgroups of Adults, 1972-1977

	Use in Past Year				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All adults: age 18+	11%	10%	7.3%	8.7%	NS
Age:					
18-25	15%	7%	8%	6%	NS
26-34	9%	8%	4%	7%	NS
35-49	10%	8%	5%	8%	NS
50+	10%	15%	10%	11%	NS
Sex:					
Male	9%	8%	6%	8%	NS
Female	13%	13%	8%	10%	NS
Race:					
White	10%	10%	7%	9%	NS
Nonwhite	14%	10%	8%	5%	NS
Education:					
Not high school graduate	9%	13%	9%	10%	NS
High school graduate	10%	9%	6%	6%	NS
College	14%	10%	7%	10%	NS
Not a graduate	Δ	10%	6%	11%	S
Graduate	Δ	9%	8%	8%	NS
Now a college student	Δ	4%	7%	6%	NS
Region:					
Northeast	10%	11%	7%	9%	NS
North Central	10%	11%	7%	11%	NS
South	10%	11%	8%	7%	NS
West	16%	10%	8%	8%	NS
Population density:					
Large metropolitan	13%	10%	7%	8%	NS
Other metropolitan	11%	10%	9%	9%	NS
Nonmetropolitan	9%	11%	6%	8%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: Q30.

TABLE 73

Past Year Medical Use of Rx Tranquilizers Among Subgroups of Adults, 1972-1977

	Use in Past Year				
	1	2	3	4	5
	1972	1974	1976	1977	1976-1977 change**
All adults: age 18+	17%	15%	17.9%	17.6%	NS
Age:					
18-25	14%	10%	10%	11%	NS
26-34	16%	16%	15%	18%	NS
35-49	23%	18%	19%	19%	NS
50+	15%	14%	23%	20%	NS
Sex:					
Male	12%	10%	12%	12%	NS
Female	22%	18%	23%	22%	NS
Race:					
White	17%	16%	19%	18%	NS
Nonwhite	17%	8%	12%	14%	NS
Education:					
Not high school graduate	15%	12%	16%	18%	NS
High school graduate	17%	15%	17%	18%	NS
College	19%	16%	20%	16%	NS
Not a graduate	Δ	19%	19%	15%	NS
Graduate	Δ	13%	22%	17%	NS
Now a college student	Δ	11%	16%	14%	NS
Region:					
Northeast	15%	15%	15%	20%	NS
North Central	12%	16%	20%	20%	NS
South	20%	12%	16%	16%	NS
West	22%	17%	21%	12%	SS
Population density:					
Large metropolitan	19%	17%	20%	18%	NS
Other metropolitan	16%	12%	21%	17%	NS
Nonmetropolitan	16%	14%	12%	17%	NS

Note: See Glossary for definitions of substances and frequently used terms.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

ΔNot tabulated.

Source: Q39.

TABLE 74 1977

Alcohol Consumption: All Youth, All Adults, Young Adults, and Older Adults

	1 All youth: age 12-17 (1272)	2 All adults: age 18+ (3322)	3 Young adults: age 18-25 (1500)	4 Older adults: age 26+ (1822)
1. Recency:				
Drank alcoholic beverages in past month	31.2%	58.0%	70.0%	54.9%
Drank in past, not in past month	21.4	21.2	14.2	23.0
Within past six months	11.8%	8.3%	8.0%	8.4%
Within past year	4.5	2.4	1.8	2.5
More than one year ago	4.2	9.8	4.2	11.2
Not sure, no answer	.9	.7	*	.9
Always a non-drinker	46.5	20.6	15.6	21.9
No answer	.9	*	*	*
2. Days used in past month:				
Current drinkers	31.2%	58.0%	70.0%	54.9%
Number of days:				
One to four	24.6%	28.7%	36.5%	26.7%
Five to ten	3.2	11.2	17.3	9.6
Eleven to twenty	1.8	7.0	9.4	6.3
Twenty-one or more	1.1	4.5	3.4	4.7
Every day	.5	6.7	3.4	7.5
3. Number of drinks on average day:				
Current drinkers	31.2%	58.0%	70.0%	54.9%
Number of drinks:				
One or two	19.7%	37.3%	38.6%	37.0%
Three or four	5.2	12.3	18.1	10.8
Five or more	4.8	7.7	12.4	6.4
Not sure, no answer	1.5	.7	1.0	.7

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

Source: Q13-16.

TABLE 75 1977

Alcoholic Beverages Used Within Past Month: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
	(1272)	(3322)	(1500)	(1822)
Current drinkers	31.2%	58.0%	70.0%	54.9%
Usual drink:				
Wine	5.4%	8.6%	8.7%	8.6%
Beer	20.7	22.8	37.3	19.1
Liquor	2.8	17.0	14.5	17.7
Combinations of above	1.7	8.9	8.4	9.0
No answer	.6	.6	1.1	.5

Some categories do not add to totals because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.
Source: Q19.

TABLE 76 1977

Current Drinking Among Subgroups of All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
Current drinkers	31.2%	58.0%	70.0%	54.9%
Age:				
12-13	13%			
14-15	28%			
16-17	52%			
18-21		71%	71%	
22-25		70%	70%	
26-34		70%		70%
35+		50%		50%
Sex:				
Male	37%	67%	82%	63%
Female	25%	50%	59%	48%
Race:				
White	33%	59%	72%	56%
Nonwhite	23%	51%	59%	49%
Region:				
Northeast	35%	71%	79%	69%
North Central	35%	58%	73%	54%
South	24%	42%	57%	38%
West	36%	70%	76%	68%
Population density:				
Large metropolitan	36%	71%	74%	70%
Other metropolitan	30%	55%	71%	50%
Nonmetropolitan	27%	47%	63%	44%

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q13.

TABLE 77

Current Drinking Among Subgroups of All Youth and All Adults: 1972-1977**

	All youth: age 12-17				All adults: age 18+			
	1	2	3	4	5	6	7	8
	1972	1974	1976	1977	1972	1974	1976	1977
Current drinkers	24%	34%	32.4%	31.2%	53%	58%	58.8%	58.0%
Age:								
12-13	16%	19%	19%	13%				
14-15	21%	32%	31%	28%				
16-17	35%	51%	47%	52%				
18-21					65%	70%	66%	71%
22-25					66%	68%	72%	70%
26-34					62%	68%	68%	70%
35+					46%	49%	52%	50%
Sex:								
Male	27%	39%	36%	37%	65%	69%	67%	67%
Female	21%	29%	29%	25%	42%	47%	51%	50%
Race:								
White	24%	37%	34%	33%	52%	59%	60%	59%
Nonwhite	19%	21%	23%	23%	58%	52%	51%	51%
Region:								
Northeast	28%	44%	42%	35%	65%	69%	73%	71%
North Central	28%	33%	38%	35%	55%	59%	56%	58%
South	15%	21%	21%	24%	37%	42%	43%	42%
West	28%	46%	32%	36%	62%	69%	73%	70%
Population density:								
Large metropolitan	24%	44%	38%	36%	65%	72%	71%	71%
Other metropolitan	28%	27%	33%	30%	54%	58%	59%	55%
Nonmetropolitan	20%	28%	26%	27%	39%	42%	44%	47%

Note: See Glossary for definitions of substances and frequently used terms.

**In 1972, current drinker was defined as "drank in the past seven days."

Source: Q13.

TABLE 78 1977

Use of Other Substances Among Current Drinkers and Those Who Are Not Current Drinkers: All Youth and All Adults

	All youth: age 12-17		All adults: age 18+	
	1	2	3	4
	Current drinkers	Not current drinkers	Current drinkers	Not current drinkers
Nonmedical psychotherapeutic pill user**				
Yes	21.4%	2.8%	20.8%	7.3%
No	78.6	97.2	79.2	92.7
Ever used marihuana and/or hashish				
Yes	60.0%	13.7%	36.3%	8.3%
No	40.0	86.3	63.7	91.7
Ever used "stronger" drugs***				
Yes	21.4%	3.5%	13.5%	2.6%
No	78.6	96.5	86.5	97.4

Note: See Glossary for definitions of substances and frequently used terms.

**The reader is reminded that the questions on nonmedical use of Rx psychotherapeutic drugs were on Form P of the interview schedule which was administered to a random half of the households.

***"Stronger" drugs defined as: hallucinogens, cocaine, heroin and other opiates.

Source: Q13, 32, 41, 50, MJ6, SH6, C6, L6, H6, O6.

TABLE 79

Cigarette Consumption, 1971-1977**: All Youth and All Adults

	1	2	3	4	5
	1971	1972	1974	1976	1977
1. All youth: age 12-17	(781)	(880)	(952)	(986)	(1272)
Current smokers	15%	17%	25%	23.4%	22.3%
Half pack or less a day	10%	12%	21%	18.8%	18.7%
About a pack a day	3	5	4	3.6	3.0
More than a pack a day	2	*	1	.6	*
Do not smoke now	80	82	74	76.6	77.6
No answer	5	1	*	*	*
2. All adults: age 18+	(2405)	(2411)	(3071)	(2590)	(3322)
Current smokers	39%	38%	41%	40.7%	40.5%
Half pack or less a day	14%	13%	17%	15.3%	14.8%
About a pack a day	17	15	14	14.9	15.9
More than a pack a day	8	10	10	9.9	9.5
Do not smoke now	55	59	58	59.3	59.5
No answer	6	3	1	*	*

	6	7
	All youth: age 12-17	All adults: age 18+
3. Smoking experience, 1977	(1272)	(3322)
Smoked in past month	22.3%	40.5%
Smoked in past, not now	25.0	26.6
Smoked at least 5 packs ever	4.0%	18.7%
Smoked less than 5 packs ever	20.5	7.2
Never smoked	48.6	29.5
No answer	4.0	3.4

Some categories do not add to 100% because of rounding or because "not sure" and/or "no answer" not included.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**In 1977, 1976, and 1974, current smoker was defined as "smoked within past month." In 1972 and 1971, current smoker was defined as "smoke at the present time."

Source: Q1-4.

TABLE 80

Current Smoking Among Subgroups of All Youth and All Adults: 1971-1977**

	All youth: age 12-17					All adults: age 18+				
	1	2	3	4	5	6	7	8	9	10
	1971	1972	1974	1976	1977	1971	1972	1974	1976	1977
Current smokers	15%	17%	25%	23.4%	22.3%	39%	38%	41%	40.7%	40.5%
Age:										
12-13	5%	4%	13%	11%	10%					
14-15	17%	16%	25%	20%	22%					
16-17	23%	32%	38%	39%	35%					
18-25						44%	44%	49%	49%	47%
26-34						45%	48%	47%	43%	47%
35+						36%	32%	37%	37%	36%
Sex:										
Male	16%	17%	27%	21%	23%	43%	42%	46%	45%	47%
Female	14%	17%	24%	26%	22%	36%	34%	37%	37%	35%
Race:										
White	Δ	Δ	25%	22%	23%	39%	37%	40%	40%	39%
Nonwhite	Δ	Δ	26%	28%	18%	41%	46%	49%	41%	48%
Region:										
Northeast	18%	16%	27%	22%	24%	46%	38%	47%	43%	45%
North Central	14%	19%	27%	24%	26%	38%	35%	39%	42%	42%
South	9%	17%	22%	25%	20%	37%	42%	40%	40%	39%
West	22%	16%	27%	21%	19%	37%	35%	39%	36%	35%
Population density:										
Large metropolitan	16%	16%	27%	25%	25%	41%	39%	46%	43%	43%
Other metropolitan	15%	19%	22%	22%	23%	38%	40%	40%	42%	41%
Nonmetropolitan	14%	16%	27%	24%	19%	38%	34%	38%	37%	37%

Note: See Glossary for definitions of substances and frequently used terms.

**In 1977, 1976, and 1974, current smoker was defined as "smoked within past month." In 1972 and 1971, current smoker was defined as "smoke at the present time."

ΔNot tabulated.

Source: Q1.

TABLE 81 1977

Use of Other Substances Among Current Smokers and Those Who Are Not Current Smokers: All Youth and All Adults

	All youth: age 12-17		All adults: age 18+	
	1	2	3	4
	Current smokers	Not current smokers	Current smokers	Not current smokers
Nonmedical psychotherapeutic pill user**				
Yes	27.6%	3.6%	21.8%	10.4%
No	72.4	96.4	78.2	89.6
Alcohol consumer (ever)				
Yes	80.0%	44.8%	88.2%	72.9%
No	19.3	54.3	11.6	26.8
No answer	.7	.9	*	*
Ever used marihuana and/or hashish				
Yes	68.3%	16.7%	36.9%	16.2%
No	31.7	83.3	63.1	83.8
Ever used "stronger" drugs***				
Yes	26.3%	4.1%	14.7%	5.0%
No	73.6	95.9%	85.3	95.0

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

*Less than .5%.

**The reader is reminded that the questions on nonmedical use of Rx psychotherapeutic drugs were on Form P of the interview schedule which was administered to a random half of the households.

***"Stronger" drugs defined as: hallucinogens, cocaine, heroin and other opiates.

Source: Q1, 13-14, 32, 41, 50, MJ6, SH6, C6, L6, H6, O6.

TABLE 82 1977

Consumption of Coffee and Tea: All Youth and All Adults

	1 All youth: age 12-17 (1272)	2 All adults: age 18+ (3322)
1. Coffee consumption:		
Drank coffee in past month	31.6%	79.2%
2 cups or less per day	26.5%	41.3%
3-5 cups	3.5	25.5
6 or more	1.6	12.4
Drank coffee, not in past month	29.5	9.5
Never drank coffee	36.4	10.8
Not sure, no answer	2.5	.6
2. Decaffeinated or regular:		
Drank coffee in past month	31.6%	79.2%
Mostly with caffeine	24.6%	60.7%
Mostly without caffeine	5.4	13.1
About the same amount of each	*	4.2
Not sure, no answer	1.7	1.4
3. Tea consumption:		
Drank tea in past month	60.6%	61.0%
2 cups or less per day	41.1%	44.3%
3-5 cups	13.3	10.9
6 or more cups	6.2	5.8
Drank tea, not in past month	23.3	24.3
Never drank tea	14.1	13.1
Not sure, no answer	2.1	1.6

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.
Source: Q6, 7, 9-11.

Attitudes

Beliefs About Addictiveness of Substances

At least three out of four persons in each age interval examined (12-17, 18-25, 26+) believe that alcohol and heroin are addictive (i.e., " . . . anybody who uses it regularly becomes physically and psychologically dependent on it and can't get along without it."). About 80% of both young and older adults believe that tobacco is addictive, while less than two-thirds of youth feel this is true.

With respect to marihuana, less than half of the persons in the two age groups with the most experience with marihuana (the 12-17 and the 18-25 age intervals) regard it as an addictive substance. But among persons older than age 25, close to two-thirds regard marihuana as addictive.

For these four key substances (alcohol, tobacco, heroin, and marihuana), the changes in beliefs about addictiveness among youth since 1976 are worth pointing out:

> Almost no observed change in beliefs about addictiveness for the two legal substances, alcohol and tobacco.
>
> Decreased belief in the addictiveness of the two illicit substances, heroin (1976 86.7%; 1977 78.0%) and marihuana (1976 54.3%; 1977 47.3%).

We offer differing hypotheses to explain the decreased belief in the addictiveness of each of these drugs:

> For heroin, we think the markedly reduced publicity in recent years about the drug and its effects is beginning to reflect itself in the youngest segment of the population which we measured.
>
> For marihuana, we may be observing the effects of an almost obverse situation: the increasing publicity associated with decriminalization of the substance in several states.

Beliefs About Marihuana

We have continued to include in the national survey five belief statements about marihuana, selected out of a larger pool of belief statements administered in earlier surveys, which have reflected the most differences between age groups and between persons with different amounts of experience with the drug.

If you compare the current survey with the 1976 survey on the proportions of younger persons (age 12-17) who hold these beliefs, you will see almost no change for four of the belief statements. However, a notably higher proportion of youth in 1977 than in 1976 agree with one of the items: 48.7% of youth in the current study believe that "marihuana is probably used a lot in this neighborhood" compared to 39.2% in 1976.

Note: See Glossary for definitions of substances and frequently used terms.

With respect to the age group most "at risk," 18-25 year olds, a consistent pattern appears when comparing proportions of agreement with these five belief statements between 1976 and the current study.

TABLE 83

Beliefs About Marihuana Among Young Adults: 1976-1977

	Young adults: age 18-25		
Belief statements	1976	1977	1976-1977 change**
You can try marihuana once or twice with no bad effects	69%	74%	S
You can use marihuana without ever becoming addicted to it	50%	56%	S
Marihuana makes people want to try stronger things like heroin	41%	36%	S
Marihuana is probably used a lot in this neighborhood	49%	58%	SSS
Most marihuana users in this country are from minority groups	12%	13%	NS

Percents rounded to whole numbers.

**SSS: significant at .001 level; SS: significant at .01 level; S: significant at .05 level; NS: not significant.

The pattern observed is consistent. Young adults, the age group with the highest (and increasing) amount of experience, show a change toward more receptivity and less caution about the drug. Also, like youth, young adults increasingly believe (i.e., "perceive") that marihuana is used a lot in their neighborhoods.

Five "Futures" for Marihuana

The 1977 survey included a set of questions which ask for an evaluation of five scenarios on the availability of marihuana.* Respondents were asked to read and become acquainted with all five scenarios before being asked about each individually. After all five possible futures for marihuana had been individually evaluated, respondents were asked to rank order them for acceptability.

Note: See Glossary for definitions of substances and frequently used terms.

*These scenarios were first constructed and used in the Response Analysis 1971 survey for the Commission on Marihuana and Drug Abuse. When we decided to use them again in 1977, we found that some adaptations were needed to reflect legal and other changes in the intervening years. Thus, the comparative data are based on highly comparable, but not identical, stimuli. The text you see in this section is a condensation of 1977 text (see questionnaire, Q's. 59-63 and the relevant exhibit card for the full text).

The five possible futures for marihuana are:

Marihuana a regular commercial product
Marihuana a closely regulated product
Possession for personal use legal, selling a crime
Having, using, or selling marihuana illegal
Marihuana laws made stricter than they are now

The five response alternatives are:

An ideal situation
A good solution but not ideal
Acceptable to give a try
Not very acceptable
No good at all

Below are presented 1977 data for the three major age groups for one response category: the proportions who think that each scenario is an "ideal situation" concerning marihuana availability:

TABLE 84

Ideal Marihuana Future

Marihuana future	An Ideal Situation		
	All youth: age 12-17	Young adults: age 18-25	Older adults: age 26+
Regular commercial product	5%	6%	1%
Closely regulated product	10%	16%	5%
Possession for personal use legal	9%	13%	5%
Having, using, or selling illegal	38%	20%	33%
Laws made stricter than now	36%	20%	46%

Showing the "ideal" outcomes conveys the finding that the modal "ideal situation" is on the side of maintaining or increasing controls. Even among the highest experience category, adults age 18-25, it appears that a substantial proportion favor a criminal justice* concept as the "ideal situation" concerning marihuana.

Comparing data from the above table with data for those who ever tried marihuana (data not shown), those with marihuana experience are less likely than non-users to see the criminal justice* concept as an "ideal situation." This finding applies to each of the major age groups.

Note: See Glossary for definitions of substances and frequently used terms.

*"Criminal justice" concept defined as "having, using, or selling marihuana illegal" and "marihuana laws made stricter than they are now."

Next, we focus attention on how "acceptable" the various futures are to the three major age groups. For this analysis, "acceptability" is defined as a combination of three response categories: those who think the scenario is an "ideal situation," plus those who feel it is a "good situation," plus those who feel it is "acceptable to give a try."

TABLE 85

Acceptable Marihuana Future

Marihuana future	Acceptable*		
	All youth: age 12-17	Young adults: age 18-25	Older adults: age 26+
Regular commercial product	21%	27%	9%
Closely regulated product	40%	57%	31%
Possession for personal use legal	39%	53%	28%
Having, using, or selling illegal	62%	40%	62%
Laws made stricter than now	59%	36%	65%

Percents rounded to whole numbers.

*The reader should remember that each future was evaluated separately, and those are the data we are showing. Thus, it is possible for a majority of persons to show up in favor of more than one scenario.

In terms of what is acceptable, there are pronounced differences among the age groups. The decriminalization option (possession for personal use legal) or something even more permissive (close regulation), is acceptable to a majority of the young adult group. Persons younger and persons older than this age group reflect majority approval for either what is the status quo in most states (having, using, or selling illegal), or for stricter laws than we have now.

On the opposite page is a comparison of the proportions of young adults and older adults** favoring the acceptable solutions between 1971 and now.

Note: See Glossary for definitions of substances and frequently used terms.

**These questions were not asked of youth in 1971.

TABLE 86

Acceptable Marihuana Future, Young Adults and Older Adults: 1971-1977

	Acceptable*					
	Young adults: age 18-25			Older adults: age 26+		
Marihuana future	1971	1977	1971-1977 change**	1971	1977	1971-1977 change**
Regular commercial product	18%	27%	SSS	6%	9%	SS
Closely regulated product	53%	57%	NS	25%	31%	SS
Possession for personal use legal	38%	53%	SSS	20%	28%	SSS
Having, using, or selling illegal	49%	40%	SSS	57%	62%	S
Laws made stricter than now	49%	36%	SSS	77%	65%	SSS

Percents rounded to whole numbers.

*The reader should remember that each future was evaluated separately, and those are the data we are showing. Thus, it is possible for a majority of persons to show up in favor of more than one scenario.

**SSS: significant at .001 level; S: significant at .01 level; S: significant at .05 level; NS: not significant.

Comparing 1971 and 1977, there has been a sizable increase in the proportion of young adults who find the "regular commercial product" and the "possession for personal use legal" options to be acceptable (up to 9% and 15%, respectively). Among this age group, there has been a corresponding decrease in the proportion who find the criminal justice* concept to be acceptable.

The trends among older adults are somewhat similar. This age group shows increased support for such options as "regular commercial product," "closely regulated product," and "possession for personal use legal." Like young adults, this age group also exhibits a decrease in the proportion who want "laws made stricter than now." However, unlike 18-25 year olds, the proportion of older adults who favor "having, using, or selling illegal" has increased slightly since 1971.

Note: See Glossary for definitions of substances and frequently used terms.

*"Criminal justice" concept defined as "having, using, or selling marihuana illegal" and "marihuana laws made stricter than they are now."

TABLE 87 1977

Familiarity with a Variety of Substances: All Youth and All Adults

	All youth: age 12-17 (1272)		All adults: age 18+ (3322)	
	1	2	3	4
Substance:	Never heard of	Heard of	Never heard of	Heard of
Heroin	5.5%	94.3	2.9%	96.6
Marihuana	*%	99.7	.6%	99.1
Barbiturates	25.4%	73.1	9.0%	89.3
LSD	9.3%	90.1	4.7%	94.4
Methadone	51.6%	44.4	19.0%	77.8
Cocaine	9.8%	89.6	5.0%	94.0
Amphetamines	33.1%	64.9	15.9%	81.8
Tranquilizers	5.6%	93.9	5.0%	94.5
Opium	35.6%	62.4	9.4%	88.5

"Not sure" and "no answer" omitted.

Note: See Glossary for definitions of substances and frequently used terms.
*Less than .5%.
Source: Q20.

TABLE 88 1977

Substances Regarded as Addictive: All Youth, All Adults, Young Adults, and Older Adults

	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
	(1272)	(3322)	(1500)	(1822)
Substance:				
Heroin	78.0%	87.2%	92.6%	85.8%
Alcohol	80.9	86.9	87.6	86.8
Marihuana	47.3	59.5	43.7	63.6
Tobacco	62.4	82.1	78.6	83.1
Barbiturates	49.0	68.4	73.7	67.1
Amphetamines	40.0	59.4	68.2	57.1
Cocaine	65.4	71.8	72.1	71.8
Methadone	27.7	51.2	57.4	49.6

(Multiple responses)

"No opinion" and "no answer" omitted.

Note: See Glossary for definitions of substances and frequently used terms.
Source: Q21.

TABLE 89

Substances Regarded as Addictive, 1971-1977: All Youth and All Adults

	All youth: age 12-17					All adults: age 18+				
	1	2	3	4	5	6	7	8	9	10
	1971	1972	1974	1976	1977	1971	1972	1974	1976	1977
	(781)	(880)	(952)	(986)	(1272)	(2405)	(2411)	(3071)	(2590)	(3322)
Substances:										
Heroin	85%	88%	87%	86.7%	78.0%	92%	89%	90%	87.3%	87.2%
Alcohol	69	71	78	83.3	80.9	74	75	78	85.1	86.9
Marihuana	48	50	54	54.3	47.3	65	59	68	61.7	59.5
Tobacco	58	58	62	61.8	62.4	70	67	72	79.5	82.1
Barbiturates	Δ	72	70	59.3	49.0	Δ	68	72	69.1	68.4
Amphetamines	Δ	67	61	51.9	40.0	Δ	64	65	60.4	59.4
Cocaine	Δ	66	74	72.4	65.4	Δ	75	78	74.2	71.8
Methadone	Δ	Δ	59	43.0	27.7	Δ	Δ	62	56.0	51.2

(Multiple responses)

Note: See Glossary for definitions of substances and frequently used terms.
ΔNot asked.
Source: Q21.

TABLE 90 1977

Agreement with Belief Statements About Marihuana: Age Differences Among Youth

	1	2	3	4
	All youth: age 12-17	12-13	14-15	16-17
	(1272)	(394)	(432)	(446)
Effects				
Positive				
You can try marihuana once or twice with no bad effects	50.8%	34%	53%	65%
You can use marihuana without ever becoming addicted to it	37.8%	25%	38%	50%
Negative				
Marihuana makes people want to try stronger things like heroin	61.1%	72%	64%	48%
Social Distance				
Marihuana is probably used a lot in this neighborhood	48.7%	36%	53%	56%
Most marihuana users in this country are from minority groups	26.4%	30%	28%	21%

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q57.

TABLE 91 1977

Agreement with Belief Statements About Marihuana: Age Differences Among Adults

	1 All adults: age 18+ (3322)	2 Young adults: age 18-25 (1500)	3 Older adults: age 26+ (1822)
Effects			
Positive			
You can try marihuana once or twice with no bad effects	52.5%	74.2%	47.0%
You can use marihuana without ever becoming addicted to it	28.7%	56.0%	21.8%
Negative			
Marihuana makes people want to try stronger things like heroin	61.0%	36.1%	67.3%
Social Distance			
Marihuana is probably used a lot in this neighborhood	40.3%	57.5%	35.8%
Most marihuana users in this country are from minority groups	18.1%	12.8%	19.4%

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q57.

TABLE 92

Agreement with Belief Statements About Marihuana, 1972-1977: All Youth and All Adults

	All youth: age 12-17				All adults: age 18+			
	1	2	3	4	5	6	7	8
	1972	1974	1976	1977	1972	1974	1976	1977
	(880)	(952)	(986)	(1272)	(2411)	(3071)	(2590)	(3322)
Effects								
Positive								
You can try marihuana once or twice with no bad effects	42%	49%	48.2%	50.8%	44%	46%	47.9%	52.5%
You can use marihuana without ever becoming addicted to it	31%	33%	33.6%	37.8%	26%	24%	25.0%	28.7%
Negative								
Marihuana makes people want to try stronger things like heroin	65%	59%	60.9%	61.1%	65%	62%	60.0%	61.0%
Social Distance								
Marihuana is probably used a lot in this neighborhood	22%	39%	39.2%	48.7%	31%	39%	32.6%	40.3%
Most marihuana users in this country are from minority groups**	11%	25%	27.5%	26.4%	10%	19%	17.6%	18.1%

Note: See Glossary for definitions of substances and frequently used terms.

**Question wording in 1972 differed from the wording in 1977, 1976, and 1974. The 1972 question: "Most marihuana users in this country are from minority groups like Negroes and Puerto Ricans."

Source: Q57.

TABLE 93 1977

Future of Marihuana: All Youth

All youth: age 12-17 (1272)	1 Ideal situation	2 Good solution	3 Acceptable to try	4 Not very acceptable	5 No good at all	6 No opinion
Five possible things that could happen to marihuana in the future . . .						
Marihuana becomes a regular commercial product	4.9%	6.1	10.2	17.2	59.2	2.4
Marihuana becomes a closely regulated product	9.9%	13.8	16.8	21.4	36.4	1.7
Possession of marihuana for personal use is legal, but selling marihuana is a crime	8.8%	14.5	15.7	22.0	36.5	2.6
Having, using, or selling marihuana is illegal	38.0%	18.5	5.3	16.8	18.9	2.5
Marihuana laws are made stricter than they are now	35.7%	17.2	6.3	11.4	26.6	2.7

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q59-63.

TABLE 94 1977

Future of Marihuana: All Adults

All adults: age 18+ (3322)	1 Ideal situation	2 Good solution	3 Acceptable to try	4 Not very acceptable	5 No good at all	6 No opinion
Five possible things that could happen to marihuana in the future . . .						
Marihuana becomes a regular commercial product	2.0%	4.7	5.8	16.3	68.9	2.3
Marihuana becomes a closely regulated product	7.6%	13.0	15.6	15.6	45.9	2.2
Possession of marihuana for personal use is legal, but selling marihuana is a crime	6.4%	11.9	14.3	19.9	44.3	3.2
Having, using, or selling marihuana is illegal	30.3%	21.9	5.0	19.0	21.1	2.7
Marihuana laws are made stricter than they are now	40.4%	14.7	4.0	10.5	27.2	3.2

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q59-63.

TABLE 95 1977

Future of Marihuana: Young Adults

Young adults: age 18-25 (1500)	1 Ideal situation	2 Good solution	3 Acceptable to try	4 Not very acceptable	5 No good at all	6 No opinion
Five possible things that could happen to marihuana in the future . . .						
Marihuana becomes a regular commercial product	5.5%	9.1	12.8	23.7	47.5	1.4
Marihuana becomes a closely regulated product	16.4%	18.3	22.5	15.9	25.6	1.3
Possession of marihuana for personal use is legal, but selling marihuana is a crime	13.3%	19.6	19.8	21.2	24.5	1.5
Having, using, or selling marihuana is illegal	19.6%	15.8	4.5	25.5	33.0	1.7
Marihuana laws are made stricter than they are now	20.3%	11.2	4.7	12.9	49.1	1.8

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.

Source: Q59-63.

TABLE 96 1977

Future of Marihuana: Older Adults

Older adults: age 26+ (1822)	1 Ideal situation	2 Good solution	3 Acceptable to try	4 Not very acceptable	5 No good at all	6 No opinion
Five possible things that could happen to marihuana in the future . . .						
Marihuana becomes a regular commercial product	1.0%	3.6	4.0	14.4	74.4	2.5
Marihuana becomes a closely regulated product	5.4%	11.6	13.8	15.5	51.1	2.5
Possession of marihuana for personal use is legal, but selling marihuana is a crime	4.7%	9.9	12.9	19.6	49.3	3.6
Having, using, or selling marihuana is illegal	33.1%	23.5	5.2	17.3	18.1	2.9
Marihuana laws are made stricter than they are now	45.6%	15.6	3.9	9.9	21.6	3.5

Some categories do not add to 100% because of rounding.

Note: See Glossary for definitions of substances and frequently used terms.
Source: Q59-63.

TABLE 97 1977

Best Comparative Rating of Five Marihuana Futures: All Youth, All Adults, Young Adults, and Older Adults

	Best Rating**			
	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 18-25	Older adults: age 26+
	(1272)	(3322)	(1500)	(1822)
Possible futures:				
Marihuana becomes a regular commercial product	5.2%	3.9%	7.9%	2.9%
Marihuana becomes a closely regulated product	22.4	23.1	35.7	19.8
Possession of marihuana for personal use is legal, but selling marihuana is a crime	11.6	12.2	20.0	10.1
Having, using, or selling marihuana is illegal	20.8	13.3	12.9	13.4
Marihuana laws are made stricter than they are now	36.0	42.0	20.5	47.5

"No choices made" not included.

Note: See Glossary for definitions of substances and frequently used terms.

**Respondents were asked to choose which of the five possible futures was the best for the country.

Source: Q64.

TABLE 98 1977

Worst Comparative Rating of Five Marihuana Futures: All Youth, All Adults, Young Adults, and Older Adults

	Worst Rating**			
	1	2	3	4
	All youth: age 12-17	All adults: age 18+	Young adults: age 22-25	Older adults: age 26+
	(1272)	(3322)	(1500)	(1822)
Possible futures:				
Marihuana becomes a regular commercial product	65.4%	64.9%	49.1%	68.9%
Marihuana becomes a closely regulated product	2.8	3.1	1.7	3.5
Possession of marihuana for personal use is legal, but selling marihuana is a crime	3.7	2.6	1.3	2.9
Having, using, or selling marihuana is illegal	2.6	1.4	1.7	1.4
Marihuana laws are made stricter than they are now	22.1	20.9	43.1	15.2

"No choices made" not included.

Note: See Glossary for definitions of substances and frequently used terms.

**Respondents were asked to choose which of the five possible futures was the worst for the country.

Source: Q64.

PART III - APPENDICES

Appendix A: Sampling Error and Significance of Differences

Sampling Error

The question of how close the estimates are to the population values can be answered in terms of the statistical theory of sampling. On the assumption that the effect of nonresponse is essentially random (or has been compensated for by adjustment) the theory of sampling provides a procedure for estimating "confidence limits" or "tolerance zones" which describe the relationship between sample estimates and population values -- not with certainty, but probabilistically.

Thus, it is possible to assert, with specified probability, that a percentage based on a sample will fall within a calculable distance from the population value it is designed to estimate. For example, in the reporting of sample results, it is not uncommon to use expressions as follows:

1 $\quad p' = 58\% \pm 2\%$ (95% confidence)

where p' is the estimate based on the sample and the rest of the expression indicates that the 95% confidence limits are 56% and 60%. Conventionally, confidence limits are computed for the 95% level (as above); the 90% level (yielding narrower limits); or the 99% level (yielding broader limits).

The size of the confidence interval is influenced by the number of interviews and by the proportion of survey respondents giving a particular reply. For example, for any given sample size, the confidence interval is greater when 50% of the respondents express a view than it is when either 10% or 90% do so. Similarly, the confidence interval is narrower for large samples than it is for small samples.

Frequently the confidence interval is estimated by the expression:

2 $\quad p' \pm K\,(p'\,(1-p')\,/\,n)^{\frac{1}{2}}$

when n is the sample size and K is a constant selected to provide the desired level of confidence. This formula yields the kind of symmetric confidence interval exemplified in expression 1 above. While this approximation is useful and satisfactory for most purposes, its inadequacy becomes apparent when it is applied to small percentages based on small samples. Thus the expression:

3 $\quad p' = 1\% \pm 2\%$ (95% confidence)

defines the lower limit of the confidence interval as -1%, which is not possible.

Indeed, a closer approximation to the confidence interval is available, which avoids all such impossible outcomes by recognizing that (except when the sample observation is exactly 50%) the confidence interval must be asymmetric. This closer approximation is calculated from the following expressions:

4 $\quad p_L = p' - K\,(p_L\,(1-p_L)\,/\,n)^{\frac{1}{2}}$

5 $\quad p_U = p' + K\,(p_U\,(1-p_U)\,/\,n)^{\frac{1}{2}}$

where p_L is the lower limit of the confidence interval and p_U is the upper limit of the confidence interval. This asymmetric approach to confidence intervals has been applied to Tables 2a, 3a, 4a, and 5a and to Figures A through F in this report.

For example, in Table 4a, 11.2% of the young adults in the sample said that they have used inhalants including glue; it is then possible to say, with 95% confidence (and mindful of the cautions enumerated above) that the population value for young adults in this category lies between 9.4% and 13.4%.

The table opposite illustrates the asymmetric 95% confidence intervals for various levels of observed percentages for samples of certain sizes. The table is arranged with the sample sizes arrayed in a column on the left-hand side. Across the top are observed percentages from 1% to 50%. To find the confidence interval around an observed percentage (e.g., a sample result of 1% in a sample of size 100) one would find the observed percentage (1%) along the top of the table, then one would read down the "-" and "+" columns to the row corresponding to the sample size (100), discovering, for this example that:

- the lower limit of the 95% confidence interval would be 1.0% - 0.9% = 0.1%.
- the upper limit of the 95% confidence interval would be 1.0% + 6.4% = 7.4%.

Observed percentages from 99% down to 50% are found across the bottom of the table. To find the confidence interval around an observed percentage of 80% in a sample of size 700, for example, one would locate 80% along the bottom of the table and then read up the "+" and "-" columns to the row corresponding to the sample size. Thus:

- the lower limit of the 95% confidence interval is 80.0% - 4.0% = 76.0%.
- the upper limit of the 95% confidence interval is 80.0% + 3.4% = 83.4%.

In many instances, especially in large samples and with percentages reasonably close to 50%, the advantage of asymmetric confidence limits is negligible; but for very small or very large percentages, particularly in smaller samples, the table of statistical reliability can be used to determine confidence intervals with more precision than is available in the symmetrical intervals usually provided.

As a graphic alternative to this table, nomographs which show asymmetric confidence limits are presented on pages 138 and 139. In using the nomographs, it is <u>not</u> necessary to add and subtract; the upper and lower limits themselves may be read on the left vertical axis, after finding the corresponding points specifying the sample size and sample percentage.

TABLE 99

Range of Sampling Error Around Observed Estimates

95% Confidence Intervals

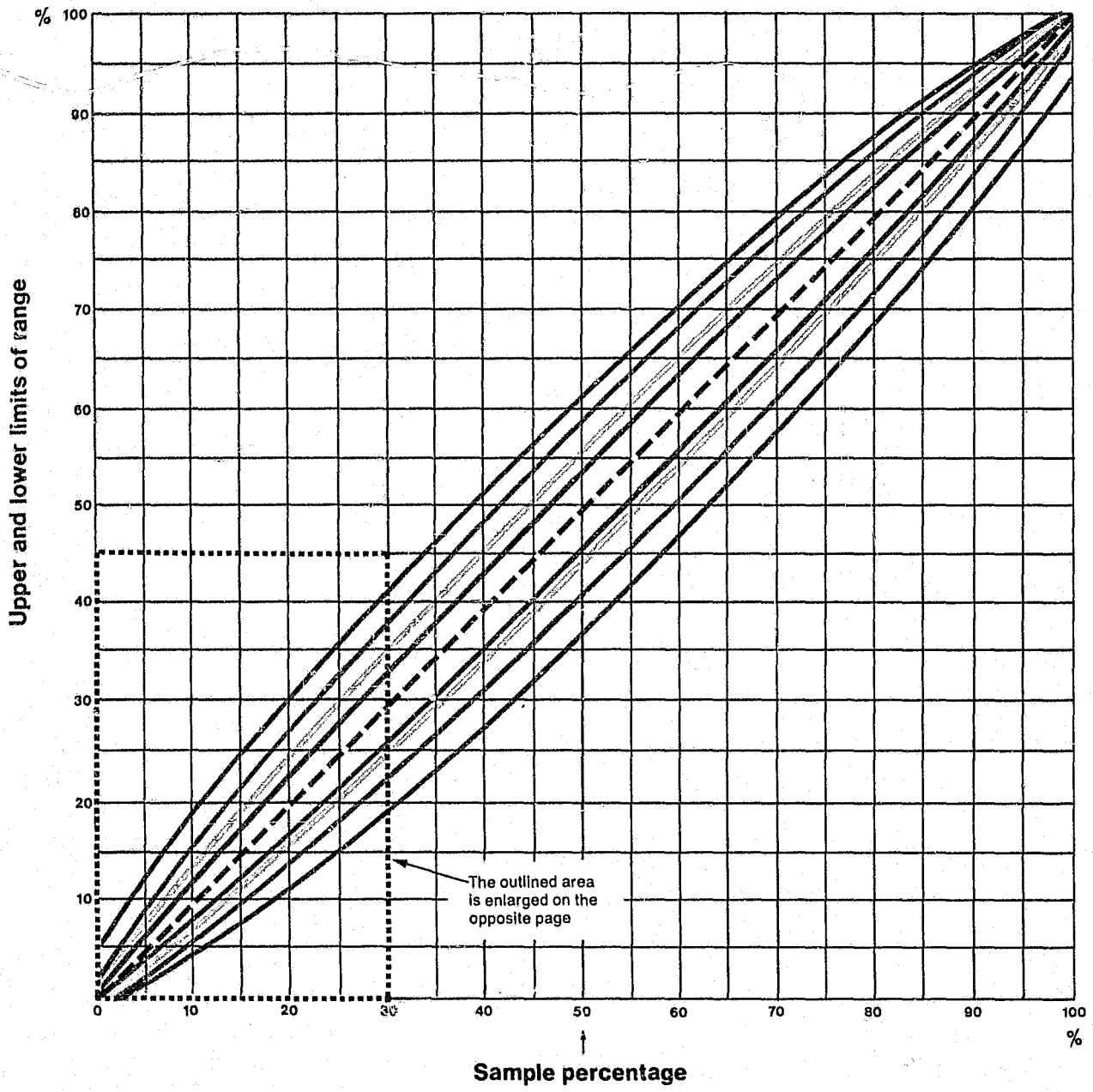
	OBSERVED PERCENTAGE (Read Down)														
	1.0%		3.0%		5.0%		10.0%		20.0%		30.0%		40.0%		50.0%
	-	+	-	+	-	+	-	+	-	+	-	+	-	+	±
n = 100	0.9%	6.4%	2.2%	7.5%	3.2%	8.3%	5.2%	9.8%	8.0%	11.4%	9.8%	12.1%	11.1%	12.2%	11.9%
200	0.8%	3.6%	1.8%	4.6%	2.6%	5.3%	4.1%	6.4%	6.0%	7.8%	7.3%	8.4%	8.1%	8.7%	8.5%
300	0.7%	2.7%	1.6%	3.5%	2.3%	4.1%	3.5%	5.1%	5.0%	6.2%	6.0%	6.8%	6.7%	7.1%	7.0%
400	0.7%	2.1%	1.5%	2.9%	2.1%	3.4%	3.1%	4.3%	4.4%	5.3%	5.3%	5.9%	5.8%	6.1%	6.1%
500	0.6%	1.8%	1.4%	2.5%	1.9%	3.0%	2.8%	3.8%	4.0%	4.7%	4.8%	5.2%	5.2%	5.5%	5.4%
600	0.6%	1.6%	1.3%	2.2%	1.8%	2.7%	2.6%	3.4%	3.7%	4.3%	4.4%	4.8%	4.8%	5.0%	5.0%
700	0.6%	1.4%	1.2%	2.0%	1.7%	2.4%	2.4%	3.1%	3.4%	4.0%	4.1%	4.4%	4.4%	4.6%	4.6%
800	0.6%	1.3%	1.2%	1.9%	1.6%	2.2%	2.3%	2.9%	3.2%	3.7%	3.8%	4.1%	4.2%	4.3%	4.3%
900	0.5%	1.2%	1.1%	1.7%	1.5%	2.1%	2.2%	2.7%	3.1%	3.5%	3.6%	3.9%	3.9%	4.1%	4.1%
1000	0.5%	1.1%	1.1%	1.6%	1.4%	2.0%	2.1%	2.6%	2.9%	3.3%	3.4%	3.7%	3.7%	3.8%	3.9%
2000	0.4%	0.7%	0.8%	1.1%	1.1%	1.3%	1.5%	1.8%	2.1%	2.3%	2.4%	2.6%	2.7%	2.7%	2.7%
3000	0.4%	0.6%	0.7%	0.9%	0.9%	1.1%	1.3%	1.4%	1.7%	1.8%	2.0%	2.1%	2.2%	2.2%	2.2%
4000	0.3%	0.5%	0.6%	0.7%	0.8%	0.9%	1.1%	1.2%	1.5%	1.6%	1.7%	1.8%	1.9%	1.9%	1.9%
5000	0.3%	0.4%	0.5%	0.6%	0.7%	0.8%	1.0%	1.1%	1.3%	1.4%	1.6%	1.6%	1.7%	1.7%	1.7%
	+	-	+	-	+	-	+	-	+	-	+	-	+	-	±
	99.0%		97.0%		95.0%		90.0%		80.0%		70.0%		60.0%		50.0%
	OBSERVED PERCENTAGE (Read Up)														

NOTE: In this table and in other tables reporting 95% confidence intervals, calculation is based on 2.45 standard errors instead of the more familiar 1.96 standard errors which would be appropriate for simple (unrestricted) random sampling; the increase in the multiplier reflects an estimate of the effect, primarily, of weighting and clustering in the present sample.

FIGURE G

Nomograph for 95% Confidence Interval

Sample Percentages between 0-100%



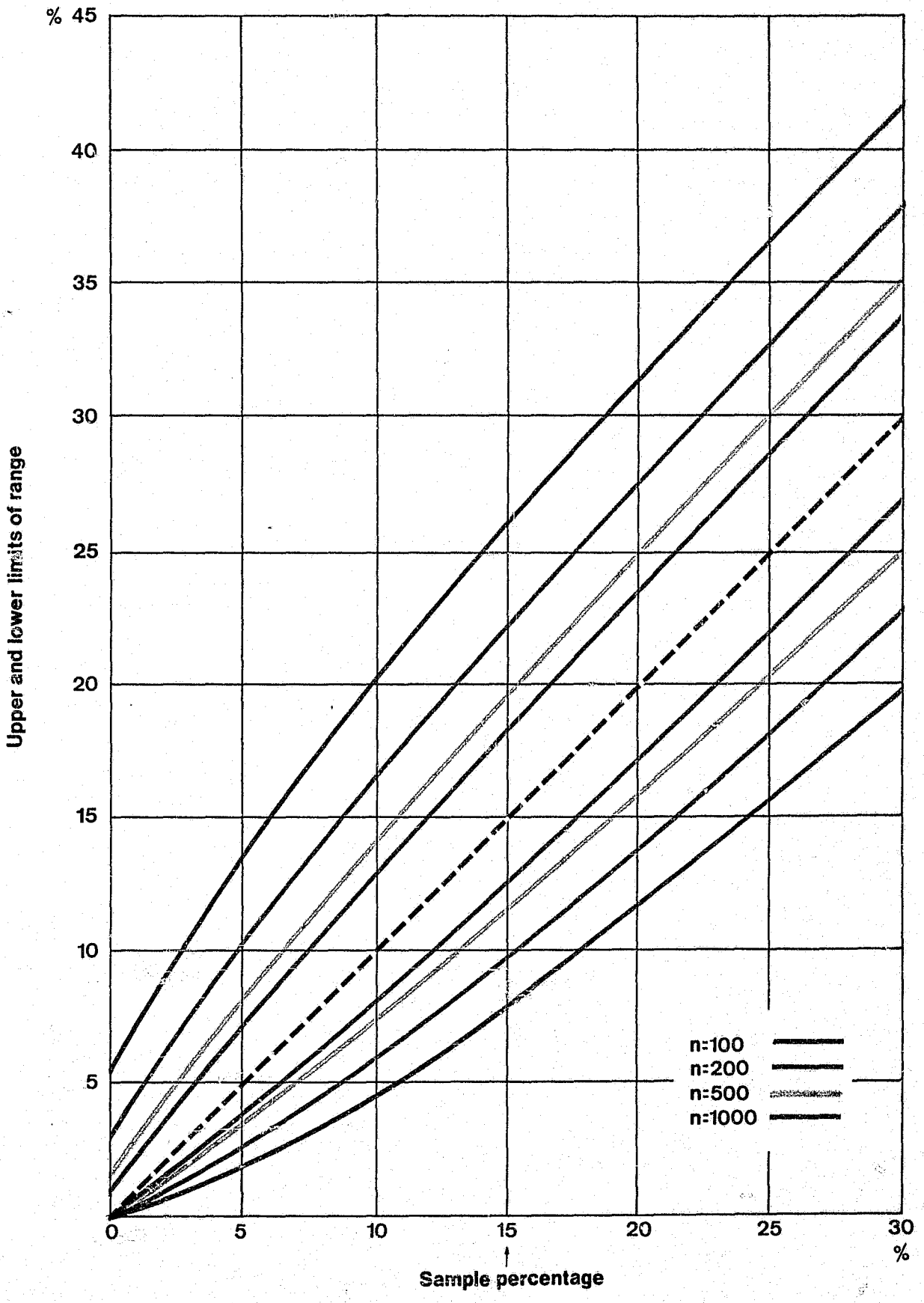
INSTRUCTIONS FOR USE OF NOMOGRAPH: At the bottom of the chart, find the vertical line representing the sample percentage for which an interval is desired (e.g., the two dark green curves for sample size 500). The points on the vertical axis corresponding to these intersections represent the upper and lower confidence limits (e.g., 44% and 50% for sample size of 500 and sample estimate of 50%).

n=100
n=200
n=500
n=1000

FIGURE H

Nomograph for 95% Confidence Interval

Sample Percentages between 0-30%



Significance of Differences

Tolerances are involved in the comparison of results from two subgroups of respondents, such as adult females (1874) and adult males (1448). If an observed percentage result is at or near 60% for one group, and 50% for the other, there would have to be a difference of at least 4.4% in order for it to be considered a real difference and not based on chance alone.

TABLE 100

Differences Required for Significance According to Sample Size

Size of samples compared	Differences Required for Significance: 10% or 90%	20% or 80%	25% or 75%	30% or 70%	35% or 65%	40% or 60%	50%
3300 and 3300	1.8%	2.4%	2.6%	2.8%	2.9%	3.0%	3.0%
3000	1.8%	2.5%	2.7%	2.8%	2.9%	3.0%	3.1%
2500	1.9%	2.6%	2.8%	2.9%	3.1%	3.2%	3.2%
2000	2.1%	2.8%	3.0%	3.2%	3.3%	3.4%	3.5%
1500	2.3%	3.1%	3.3%	3.5%	3.6%	3.7%	3.8%
1000	2.7%	3.5%	3.8%	4.1%	4.2%	4.3%	4.4%
500	3.5%	4.7%	5.1%	5.4%	5.6%	5.8%	5.9%
3000 and 3000	1.9%	2.5%	2.7%	2.9%	3.0%	3.1%	3.2%
2500	2.0%	2.7%	2.9%	3.0%	3.2%	3.3%	3.3%
2000	2.1%	2.8%	3.1%	3.2%	3.4%	3.5%	3.5%
1500	2.3%	3.1%	3.4%	3.6%	3.7%	3.8%	3.9%
1000	2.7%	3.6%	3.9%	4.1%	4.3%	4.4%	4.5%
500	3.6%	4.7%	5.1%	5.4%	5.6%	5.8%	5.9%
2500 and 2500	2.1%	2.8%	3.0%	3.2%	3.3%	3.4%	3.5%
2000	2.2%	2.9%	3.2%	3.4%	3.5%	3.6%	3.7%
1500	2.4%	3.2%	3.5%	3.7%	3.8%	3.9%	4.0%
1000	2.8%	3.7%	4.0%	4.2%	4.4%	4.5%	4.6%
500	3.6%	4.8%	5.2%	5.5%	5.7%	5.9%	6.0%
2000 and 2000	2.3%	3.1%	3.4%	3.6%	3.7%	3.8%	3.9%
1800	2.4%	3.2%	3.4%	3.6%	3.8%	3.9%	4.0%
1600	2.5%	3.3%	3.6%	3.8%	3.9%	4.0%	4.1%
1400	2.6%	3.4%	3.7%	3.9%	4.1%	4.2%	4.3%
1200	2.7%	3.6%	3.9%	4.1%	4.3%	4.4%	4.5%
1000	2.8%	3.8%	4.1%	4.3%	4.5%	4.6%	4.7%
800	3.1%	4.1%	4.4%	4.7%	4.9%	5.0%	5.1%
600	3.4%	4.6%	4.9%	5.2%	5.4%	5.6%	5.7%
400	4.0%	5.4%	5.8%	6.1%	6.4%	6.6%	6.7%
200	5.5%	7.3%	7.9%	8.3%	8.7%	8.9%	9.1%

(continued)

Size of samples compared	Differences Required for Significance: 10% or 90%	20% or 80%	25% or 75%	30% or 70%	35% or 65%	40% or 60%	50%
1000 and 1000	3.3%	4.4%	4.7%	5.0%	5.2%	5.4%	5.5%
900	3.4%	4.5%	4.9%	5.2%	5.4%	5.5%	5.6%
800	3.5%	4.6%	5.0%	5.3%	5.5%	5.7%	5.8%
700	3.6%	4.8%	5.2%	5.5%	5.8%	5.9%	6.0%
600	3.8%	5.1%	5.5%	5.8%	6.0%	6.2%	6.3%
500	4.0%	5.4%	5.8%	6.1%	6.4%	6.6%	6.7%
400	4.3%	5.8%	6.3%	6.6%	6.9%	7.1%	7.2%
300	4.8%	6.5%	7.0%	7.4%	7.7%	7.9%	8.1%
200	5.7%	7.6%	8.2%	8.7%	9.1%	9.3%	9.5%
100	7.7%	10.3%	11.1%	11.8%	12.3%	12.6%	12.8%
900 and 900	3.5%	4.6%	5.0%	5.3%	5.5%	5.7%	5.8%
800	3.6%	4.8%	5.2%	5.5%	5.7%	5.8%	6.0%
700	3.7%	4.9%	5.3%	5.7%	5.9%	6.0%	6.2%
600	3.9%	5.2%	5.6%	5.9%	6.2%	6.3%	6.5%
500	4.1%	5.5%	5.9%	6.3%	6.5%	6.7%	6.8%
400	4.4%	5.9%	6.4%	6.7%	7.0%	7.2%	7.4%
300	4.9%	6.5%	7.1%	7.5%	7.8%	8.0%	8.2%
200	5.7%	7.7%	8.3%	8.8%	9.1%	9.4%	9.6%
100	7.7%	10.3%	11.2%	11.8%	12.3%	12.7%	12.9%
800 and 800	3.7%	4.9%	5.3%	5.6%	5.8%	6.0%	6.1%
700	3.8%	5.1%	5.5%	5.8%	6.0%	6.2%	6.3%
600	4.0%	5.3%	5.7%	6.1%	6.3%	6.5%	6.6%
500	4.2%	5.6%	6.0%	6.4%	6.7%	6.8%	7.0%
400	4.5%	6.0%	6.5%	6.9%	7.2%	7.3%	7.5%
300	5.0%	6.6%	7.2%	7.6%	7.9%	8.1%	8.3%
200	5.8%	7.7%	8.4%	8.9%	9.2%	9.5%	9.7%
100	7.8%	10.4%	11.3%	11.9%	12.4%	12.7%	13.0%

(continued)

1800 and	1800	2.4%	3.3%	3.5%	3.7%	3.9%	4.0%	4.1%
	1600	2.5%	3.4%	3.6%	3.9%	4.0%	4.1%	4.2%
	1400	2.6%	3.5%	3.8%	4.0%	4.2%	4.3%	4.4%
	1200	2.7%	3.7%	4.0%	4.2%	4.4%	4.5%	4.6%
	1000	2.9%	3.9%	4.2%	4.4%	4.6%	4.7%	4.8%
	800	3.1%	4.2%	4.5%	4.8%	5.0%	5.1%	5.2%
	600	3.5%	4.6%	5.0%	5.3%	5.5%	5.7%	5.8%
	400	4.1%	5.4%	5.9%	6.2%	6.5%	6.6%	6.8%
	200	5.5%	7.3%	7.9%	8.4%	8.7%	8.9%	9.1%
1600 and	1600	2.6%	3.5%	3.8%	4.0%	4.1%	4.2%	4.3%
	1400	2.7%	3.6%	3.9%	4.1%	4.3%	4.4%	4.5%
	1200	2.8%	3.7%	4.1%	4.3%	4.5%	4.6%	4.7%
	1000	3.0%	4.0%	4.3%	4.5%	4.7%	4.8%	4.9%
	800	3.2%	4.2%	4.6%	4.9%	5.1%	5.2%	5.3%
	600	3.5%	4.7%	5.1%	5.4%	5.6%	5.7%	5.9%
	400	4.1%	5.3%	5.9%	6.3%	6.5%	6.7%	6.8%
	200	5.5%	7.3%	8.0%	8.4%	8.8%	9.0%	9.2%
1400 and	1400	2.8%	3.7%	4.0%	4.2%	4.4%	4.5%	4.6%
	1200	2.9%	3.9%	4.2%	4.4%	4.6%	4.7%	4.8%
	1000	3.0%	4.1%	4.4%	4.6%	4.8%	5.0%	5.1%
	800	3.3%	4.3%	4.7%	5.0%	5.2%	5.3%	5.4%
	600	3.6%	4.8%	5.2%	5.5%	5.7%	5.9%	6.0%
	400	4.2%	5.6%	6.0%	6.4%	6.6%	6.8%	6.9%
	200	5.6%	7.4%	8.0%	8.5%	8.8%	9.1%	9.3%
1200 and	1200	3.0%	4.0%	4.3%	4.6%	4.8%	4.9%	5.0%
	1000	3.1%	4.2%	4.5%	4.8%	5.0%	5.1%	5.2%
	800	3.4%	4.5%	4.8%	5.1%	5.3%	5.5%	5.6%
	600	3.7%	4.9%	5.3%	5.6%	5.8%	6.0%	6.1%
	400	4.2%	5.7%	6.1%	6.5%	6.7%	6.9%	7.1%
	200	5.6%	7.5%	8.1%	8.6%	8.9%	9.2%	9.4%

700 and	700	3.9%	5.2%	5.7%	6.0%	6.2%	6.4%	6.5%
	600	4.1%	5.5%	5.9%	6.2%	6.5%	6.7%	6.8%
	500	4.3%	5.7%	6.2%	6.6%	6.8%	7.0%	7.2%
	400	4.6%	6.1%	6.6%	7.0%	7.3%	7.5%	7.7%
	300	5.1%	6.8%	7.3%	7.7%	8.1%	8.3%	8.5%
	200	5.9%	7.9%	8.5%	9.0%	9.4%	9.6%	9.8%
	100	7.9%	10.5%	11.3%	12.0%	12.5%	12.8%	13.1%
600 and	600	4.2%	5.7%	6.1%	6.5%	6.7%	6.9%	7.1%
	500	4.5%	5.9%	6.4%	6.8%	7.1%	7.3%	7.4%
	400	4.7%	6.3%	6.8%	7.2%	7.5%	7.7%	7.9%
	300	5.2%	6.9%	7.5%	7.9%	8.3%	8.5%	8.7%
	200	6.0%	8.0%	8.7%	9.2%	9.5%	9.8%	10.0%
	100	7.9%	10.6%	11.5%	12.1%	12.6%	13.0%	13.2%
500 and	500	4.6%	6.2%	6.7%	7.1%	7.4%	7.6%	7.7%
	400	4.9%	6.6%	7.1%	7.5%	7.8%	8.1%	8.2%
	300	5.4%	7.2%	7.7%	8.2%	8.5%	8.8%	8.9%
	200	6.1%	8.2%	8.9%	9.4%	9.8%	10.0%	10.2%
	100	8.1%	10.7%	11.6%	12.3%	12.8%	13.1%	13.4%
400 and	400	5.2%	6.9%	7.5%	7.9%	8.3%	8.5%	8.7%
	300	5.6%	7.5%	8.1%	8.6%	8.9%	9.2%	9.4%
	200	6.4%	8.5%	9.2%	9.7%	10.1%	10.4%	10.6%
	100	8.2%	11.0%	11.9%	12.6%	13.1%	13.4%	13.7%
300 and	300	6.0%	8.0%	8.7%	9.2%	9.5%	9.8%	10.0%
	200	6.7%	8.9%	9.7%	10.2%	10.7%	11.0%	11.2%
	100	8.5%	11.3%	12.2%	13.0%	13.5%	13.9%	14.1%
200 and	200	7.3%	9.8%	10.6%	11.2%	11.7%	12.0%	12.2%
	100	9.0%	12.0%	13.0%	13.8%	14.3%	14.7%	15.0%
100 and	100	10.4%	13.9%	15.0%	15.9%	16.5%	17.0%	17.3%

Appendix B: Data Quality

In evaluating the quality of survey data, it is necessary to examine such diverse factors as completion experience, respondent understanding and cooperation, control of field work, verification of completed interviews, and procedures employed in editing and coding.

Respondent Comprehension and Attitude

TABLE 101

Interviewer Assessment of Respondents' Level of Cooperation and Understanding**

Interviewer Assessment	All Youth	All Adults
Level of Cooperation		
Very cooperative	93.8%	89.6%
Fairly cooperative	5.1	6.5
Not too cooperative	0.2	1.2
Openly hostile	*	*
No answer	1.0	2.6
Level of Understanding		
No difficulty	72.8%	77.4%
Just a little difficulty	18.1	9.2
A fair amount of difficulty$^{\Delta}$	3.3	5.3
A lot of difficulty$^{\Delta}$	1.5	2.7
No answer	4.2	5.4

Some categories do not add to 100% because of rounding.

*Less than .5%.

**On the final page of the interview schedule, interviewers were asked to estimate both the respondents' understanding of the interview and cooperation during the interview. These questions were filled out privately by the interviewers.

$^{\Delta}$ Among adults, 8.0% were reported as having a fair amount or a lot of difficulty with the questionnaire. Five subgroups of respondents were reported as having significantly more difficulty than average: 19.6% of people with less than high school education; 22.9% of nonwhites; 14.4% of residents in the South; 13.6% of people who had never used alcoholic beverages; 9.9% of people who had never used marihauna and/or hashish.

Monitoring of Field Work

A computerized field control system was employed throughout the interviewing period to provide regular status reports on completed interviewing. This system permitted close monitoring of the work and efficient reassignment of problem locations.

Since respondents were not identified on the questionnaire, it was necessary to develop a special procedure to facilitate interview verification. At the conclusion of the interview, after all questionnaire materials were sealed in the envelope, the respondent was asked to fill out a postcard giving his name, address, and telephone number. This postcard was not included in the envelope with the other materials; instead, it was mailed directly to an independent verification service. Thus, central office personnel who reviewed and edited the completed questionnaires never had an opportunity to see the verification postcards. The independent verification service carried out telephone verification of at least 15% of each interviewer's work.

The verification steps included a determination of the length of time which the interviewer spent with the respondent, a check on interviewer adherence to procedures to assure respondent anonymity and a general question relating to the topic of the interview. Any time there was a discrepancy from our expectations, all of that particular interviewer's work was verified. Any work which was not found to be acceptable was reassigned to another interviewer. Once we were certain that the interviews had been conducted honestly and according to specifications, the postcards were destroyed, and it was no longer possible to determine a respondent's name. When telephone numbers could not be obtained for respondents who had completed interviews, verification by mail was attempted.

Editing and Coding

The editing and coding functions for this study were performed by the coding staff under the direction of a fulltime coding supervisor. This work commenced during the reassignment period. Questionnaires were prepared for keypunching by first correcting any errors made in marking the closed-end questions. We resolved inconsistencies between related questions, ensured that all question skip patterns were followed, and checked that all necessary identifying information was complete and correct. Where there were discrepencies which could not be resolved or where vital interview information was missing, we contacted interviewers for clarification.

The coding requirements for this study were minimal. Occupation was coded for both forms of the questionnaire (Form N and Form P). The occupation codes were based on the classifications utilized by the U. S. Census Bureau. On Form N only, Q. 111 was coded according to a "hierarchy of credibility" that was established through consultation with the project officer and members of the Social Research Group. A detailed description of editing and coding procedures is presented in Volume II, Methodology.

Both the coding and editing were checked 100% by the coding supervisor until all work was completed satisfactorily and according to specifications. Thereafter, a 15% check was instituted.

TABLE 102

Field Classifications of Housing Units Assigned for Adult National Sample

Housing Units	N
Total assigned	8618
Vacant	663
Unknown status	39
Occupied	7916
Total occupied	7916
Eligibility unknown**	258
Not eligible***	3728
Eligible for interview	3930

**Eligibility unknown refers to those housing units for which household composition was not ascertained because of refusals or no one at home.

***Not eligible are those housing units where face sheet instructions specified that no adult interview was to be done.

TABLE 103

Field Experience for Youth Sample

Households and Interview Status	N
Households assigned	7952
Youth present (age 12-17)	1492
Presence of youth unknown	251
No youth	6209

TABLE 104

Interview Completion Experience

Interview Status	Youth Sample	Adult Sample
Eligible respondents**	1541	4081
Interviews included in analysis	1272	3322
Respondent not at home	32	111
Household composition not obtained (no one at home, refused, no report)	49	151
Respondent refused	52	365
Parents refused	112	--
Other refused	6	--
Other incomplete	18	132

**Eligible respondents refers to the number of occupied housing units eligible for interview plus estimates of eligiblity for housing units with no report on occupancy status or unknown eligibility.

TABLE 105

Completion Experience by Selected Subgroups

	Youth Sample			Adult Sample		
		Completed			Completed	
Subgroups	Eligible	N	%	Eligible	N	%
Total national sample	1541	1272	82.5	4081	3322	81.4
Region of United States						
Northeast	347	277	79.8	861	671	77.9
North Central	429	352	82.1	1079	893	82.8
South	527	443	84.1	1354	1120	82.7
West	238	200	84.0	787	638	81.1
Type of community						
Large metropolitan	671	518	77.2	1730	1373	77.1
Other metropolitan	365	314	86.0	1087	891	82.0
Nonmetropolitan	504	440	87.3	1215	1058	87.1

TABLE 106

Completion Experience After Return Visits

Visits	Youth Sample			Adult Sample		
	Completions			Completions		
	N	%	Cumulative % of total	N	%	Cumulative % of total
Initial visit	240	16%	16%	848	21%	21%
2nd visit	382	25	40	819	20	41
3rd visit	253	16	57	581	14	55
4th visit	154	10	67	393	10	65
5th visit	98	6	73	246	6	71
6th visit	64	4	77	159	4	75
7th visit	30	2	79	87	2	77
8th visit	17	1	80	62	2	78
9th visit	8	1	81	47	1	79
10th visit	5	*	81	32	1	80
11th visit	7	1	82	17	*	81
12th-15th visits	2	*	82	14	*	81
16th-22nd visits	--	--	82	4	*	81
Unknown number of visits	12	1	83	13	*	81
TOTAL	1272	83%	83%	3322	81%	81%

*Less than .5%.

Appendix C: Definition of the Sample

The Response Analysis Corporation national area probability sample was employed in this study. Sample locations, households, and specific individuals to be interviewed were specified by the sampling plan and through explicit instructions to the interviewers. No aspect of selection was left to the discretion of the interviewer.

Sample Design

A number of study requirements were merged in the sample design, including:

- A basic national sample of adults, age 18 and over.
- A national sample of youth, age 12-17.
- Within the adult sample, probability procedures were used to set selection rates for younger adults, age 18-25, at a higher level than those for adults age 26 and older. This was done in order to provide a larger base of younger adults for the study analysis, due to their presumed higher incidences of drug use. Within the older adult group, persons age 26-49 were sampled at a higher rate than those age 50 or older.

  This "oversampling" of younger adults was compensated by appropriate weights in the computer processing of study results so that total survey results reflect the actual distribution of younger and older adults in the study population. A detailed description of the weighting procedures is presented in the second section of this appendix.

Development of the sample included the following sequence of steps:

- Selection of a national sample of 103 primary areas (counties or groups of counties) stratified by geographic region, type of community, and other population characteristics.
- Selection of approximately 400 interviewing locations, or secondary areas (census enumeration districts or block groups) for the national sample.
- Field counts by trained interviewers to divide interviewing locations into sample segments of 10 to 25 housing units.
- Selection of specific sample segment in each interviewing location for field administration of the survey.
- Prelistings of housing unit addresses in all sample segments selected for this study.
- Selection of specific housing unit addresses to be contacted for the survey, and an advance mailing of a letter urging cooperation.

- Interviewer visit to each sample household to obtain listings of residents in eligible age ranges.

- Random selection, using a specific scheme assigned for each sample household, of persons to be interviewed. In any one household, the number of persons designated as part of the study sample was none, one, or two, as will be explained below.

Detail on each of these steps is provided in the remainder of this section.

Selection of the national probability sample. The Response Analysis national sample is a well dispersed area probability sample consisting of 103 primary sampling areas selected from the coterminous United States. Each of the 103 primary areas, including 38 self-representing areas plus 65 selected as a result of a stratification procedure, is a relatively heterogeneous area.

Within the 103 primary areas, 600 secondary areas were defined and selected. Secondary areas may be as small as a block or two in a densely populated area, or as large as an entire county or more in a sparsely populated rural area. A subsample of 400 interviewing locations was selected for this national study.

The national probability sample was drawn in the following way. First, the area of the coterminous United States was divided into approximately 1140 primary sampling units. Each primary sampling unit is a well-defined geographic unit, usually a county or a group of counties, with a minimum population of 50,000 in 1970. Primary sampling units are of two general types: (1) metropolitan areas, or parts of metropolitan areas; and (2) other areas.

In most cases, primary sampling units that are metropolitan areas are the same as Standard Metropolitan Statistical Areas (SMSA's) defined by the U. S. Bureau of the Census. In the census definition, each SMSA is a county or group of contiguous counties which contains one city with at least 50,000 inhabitants or more, or "twin cities" with a minimum combined population of 50,000. In addition to the county or counties containing a central city or cities, contiguous counties are included in an SMSA if, according to certain criteria, they are essentially metropolitan in character and are socially and economically integrated with the central city.

In the Response Analysis sample, exceptions to the SMSA definitions were of three general types:

- In New England, SMSA's consist of towns and cities, rather than counties. In the Response Analysis sample, we retained the county as the basic level for formation of primary sampling units. Thus, our primary sampling units may include all or part of two or more SMSA's.

- Some SMSA's include counties in two census geographic divisions (e.g., the Cincinnati SMSA consists of counties in Ohio and Indiana, in the East North Central Division, and in Kentucky in the East South Central Division). In order to maintain a strict stratification of primary sampling units on Geographic Division basis, these SMSA's were divided into two parts, corresponding to the geographic divisional classifications.

- Seven very large metropolitan areas (New York, Boston, Philadelphia, Chicago, Detroit, Los Angeles, and San Francisco) were subdivided into two or more primary sampling units. Altogether, the seven SMSA's comprise 20 primary sampling units. The objective of these subdivisions was to create smaller areas as more efficient field assignment units.

Primary sampling units that are not metropolitan areas consist of a county or a group of contiguous counties, and include a minimum 1970 population of 50,000. The minimum size condition was intended to create PSU's of sufficient population size to serve diverse survey needs, including sampling of special populations, over a long period of time. It is unlikely that we will be returning to the same households during the ten-year inter-census period.

The following criteria were used in combining counties to form primary sampling units to meet the minimum size requirement: (1) whenever possible, a city or large town was the central point for the PSU; (2) convenience of travel to different parts of the PSU from the central point; and (3) heterogeneity of population characteristics -- e.g., whenever possible entirely rural counties were added to other counties that were partly urban.

Primary sampling units were stratified in the following way. Thirty-eight large primary sampling units were included in the sample as self-representing primary areas. These range in 1970 population size from 1.1 million to 3.3 million persons, and include the 25 largest SMSA's in the United States. All other primary sampling units were grouped into 65 strata, with an average stratum population of approximately 2,000,000 persons in 1970. Within a stratum, primary sampling units are as much alike as possible in terms of geography, metropolitan or nonmetropolitan areas, population density, and other characteristics. Actual criteria used in the stratification, and the order of priority assigned to them were:

- Geographic division (within a stratum, all PSU's are in the same census geographic division -- see list of states in the Glossary under the four regions: Northeast, North Central, South, and West).

- Metropolitan or nonmetropolitan (with the exception of a few counties, strata consist entirely of SMSA's or entirely of other counties). The few exceptions occurred when an SMSA was partly in each of two geographic divisions, and one of the parts was not large enough to meet the size criteria for a PSU. Further stratification criteria for metropolitan and nonmetropolitan areas:

For SMSA's:	For other than SMSA's:
Size of the SMSA	Percent black (South only)
Population density	Population density
Percent black (South only)	Percent employed in manufacturing
Percent employed in manufacturing	Percent of land in farms
Population growth in the 1960-1970 decade	

The next step was the selection of primary sampling units. One PSU was selected with probability proportionate to size (preliminary 1970 population count) from each of the 65 strata that included two or more PSU's. The selected PSU's are primary areas in the national sample. Together with the 38 self-representing PSU's, the sample includes a total of 103 primary areas.

The secondary sampling units (SSU's) in the sample are areas of approximately 2,500 population in 1970. An SSU may be as small geographically as a block or two in a densely populated portion of a city or it may be an entire county or even larger in a sparsely populated rural area. Secondary sampling units were defined to be roughly equal in population size so that they would best serve the needs of general population studies. SSU's remain in the national sample for the same length of time.

Prior to defining secondary sampling units, land areas within PSU's were listed in the following general order:

- Municipalities of 10,000 or more in order by population size. In practice, the types of units listed depended somewhat on the detail provided in preliminary census reports for 1970 from which the listings were made.
- Places of 2,500 to 9,999 in geographic order within county.
- Remaining minor civil division or census county divisions in geographic order within county.

Primary areas (PSU's that were selected as part of the national sample) were then divided into "pairs" of secondary sampling units -- i.e., units of about 5,000 population. The pairs of SSU's are intended to provide for a convenient rotation of SSU's in the RAC sample. In effect, SSU's were selected for the sample in pairs -- then one member of each selected pair was selected as part of the initial sample. The other member of the pair was available for a systematic planned rotation of the sample. Because each unit of the pair came from the same general part of the listing, the two SSU's usually have similar geographic location and city-size characteristics, and are often within the same municipality or are rural sections of the same county, etc.

For the entire sample, the total number of secondary units to be selected was set at 600. This was based on expected needs of users of the sample for dispersion for regional studies, as well as for national studies.

To determine the number of SSU's to select, the primary area was divided into zones. For each primary area, the zone size was:

$$z = \left(\frac{P}{S}\right)\left(\frac{\text{Primary area population}}{\text{Stratum population}}\right)$$

where P = Total 1970 population (preliminary)

S = Number of secondary sampling units to be selected = 600

One zone was created for each 1/600 of the 1970 population. In self-representing primary areas, the zone size was equal to the 1/600 population interval. In other than self-representing areas, the zone was adjusted proportionate to the probability of selection of the primary area.

For each primary area, the first zone started at the beginning of the area listing for that primary area, and continued for the first z people in the population listing. The second zone started at $z+1$ and continued to $2z$ people; and so on. Incomplete zones at the end of the primary area listings were cumulated within a geographic division until the full zone size was reached. (Primary areas were taken in the order in which they were numbered -- starting with self-representing primary areas, then other metropolitan areas, then nonmetropolitan areas.) Thus, some zones included portions of two or more primary areas within the same census geographic division. Zones cumulated in this way included similar population characteristics to the extent that they were cumulated from "ends" of primary area listings and thus were primarily rural areas. Each census geographic division included one incomplete zone at the end of the primary area listing.

One secondary sampling unit (actually a pair of secondary sampling units) was selected from each zone by selecting a random number within the zone interval, and determining where it fell within the cumulated listing. The random number selected a previously defined pair of secondary sampling units.

Secondary sampling units usually consist of a number of administrative units used in the census -- either enumeration districts (ED's) or block groups (in areas for which block statistics are to be published). (Enumeration districts and block groups average approximately 800 persons.)

The 600 secondary sampling units were divided into three matched subsets of 200 SSU's each. Two of these subsets, or a total of 400 secondary sampling units, were assigned for this study.

Segment and housing unit assignments. For the national sample, trained interviewers previously were assigned to make rough field counts -- usually in segments of about 10 to 30 housing units -- to divide block groups and enumeration districts into administratively convenient survey units. Detailed maps, instructions, and count sheets were provided for these assignments. Segments were clearly defined geographic units bounded by streets, roads, streams, or other landmarks, or by specific starting and stopping addresses.

For this study probability procedures were then used to select one or more segments in each interviewing location.

Interviewers were then assigned to do prelistings of housing unit addresses in each selected sample segment. The prelistings provided close central office control over selection of the final sample of households and permitted the mailing of a letter in advance of the interviewer visits to sample households. Of course, in certain areas (primarily rural, "open country") specific street addresses were unobtainable, and letters were not sent.

From these prelists of locations, a specific final sample of housing units was randomly selected in the Princeton survey office. Letters were addressed to these sample households and mailed a day or two before interviewers received their assignments.

Probability procedures used for the selection of sample areas, interviewing locations, segments and housing units were such that for the national sample each housing unit in the coterminous United States had the same overall initial probability of selection.

Procedure within sample housing units -- adult sample. A "face sheet" for each sample housing unit provided the interviewer with a prescribed series of steps for obtaining a listing of residents of the household and the selection of respondents within eligible age ranges was accomplished by multiple forms of the face sheet. Examples of face sheets are presented in Volume II, Methodology. To accomplish the differential sampling of adults age 18-25, 26-49, and 50 or older, household composition was ascertained and households were classified in seven groups, with different selection procedures for each group (see next page).

Household Composition	Selection Procedure
One or more persons 18-25; none 26 or older	Selection in all households from 18-25 group
One or more persons 18-25 and one or more persons 26-49; none 50 or older	Selection in 5/6 of households from 18-25 group; in 1/6 of households from 26-49 group
One or more persons 18-25 and one or more persons 50 or older; none 26-49	Selection in 5/6 of households from 18-25 group; in 1/6 of households from 50 or older group
One or more persons 18-25, one or more persons 26-49, and one or more persons 50 or older	Selection in 2/3 of households from 18-25 group; in 1/6 of households from 26-49 group; in 1/6 of households from 50 or older group
One or more persons 26-49; none 18-25 or 50 or older	Selection in 1/2 of households from 26-49 group; no adult selected in 1/2 of households
One or more persons 26-49 and one or more persons 50 or older; none 18-25	Selection in 1/2 of households from 26-49 group; in 1/6 of households from 50 or older group; no adult selected in 1/3 of households
One or more persons 50 or older; no one under 50	Selection in 1/6 of households from 50 or older group; no adult selected in 5/6 of households

If there was only one person in the designated adult age group, that person was the designated respondent. If there were two or more adults in the age groups selected for interview, each eligible person was assigned a number, starting with males from oldest to youngest, then females from oldest to youngest. A random number selection table then indicated which of the adults was to be interviewed.

Probabilities of selection thus varied with the composition of the household, for different age groups, and with the number of residents within the selected age group. Weighting procedures were used to compensate for differences in selection rates; in general, the weights were inversely proportionate to the probabilities of selection. A discussion of the weighting procedures is presented in the second section of this appendix.

Selection of the youth sample. In sample locations, interviewers determined whether the households also included one or more young people in the 12-17 age range. Whether or not an adult was interviewed, persons age 12-17 were listed on the face sheet. When there was only one such youth in the household, that person was designated as the respondent. When there was more than one youth age 12-17, numbers were assigned (starting again with males oldest to youngest, then females oldest to youngest) and one person was randomly designated to be interviewed, as in the case of the adult sample.

As a result of these combined adult and youth sampling procedures, there could be none, one, or two interviews indicated for any assigned household, occurring as follows (see next page).

None: No youth 12-17
No adults 18-25
Adults 26 or older, but face sheet specifies no interview to be done

One: Adult selected, but no youth in household
or
Youth present, only adults 26 or older and face sheet specifies no interview to be done

Two: Interview one <u>each</u> of adult and youth

TABLE 107

Subsample Sizes for Youth and Adults**

	Youth					Adult				
	1	2	3	4	5	6	7	8	9	10
Subsamples	1971	1972	1974	1976	1977	1971	1972	1974	1976	1977
TOTAL	781	880	952	986	1272	2405	2411	3071	2590	3322
Age:										
12-13	244	277	322	321	394	--	--	--	--	--
14-15	283	288	302	342	432	--	--	--	--	--
16-17	252	313	328	323	446	--	--	--	--	--
18-21	--	--	--	--	--	358	378	412	436	732
22-25	--	--	--	--	--	379	394	437	446	768
26-34	--	--	--	--	--	659	582	881	864	668
35+	--	--	--	--	--	1005	1031	1340	844	1153
Sex:										
Male	383	433	442	519	641	1034	1023	1402	1029	1448
Female	398	447	510	467	631	1363	1388	1667	1561	1874
Race:										
White	Δ	Δ	811	809	1059	2027	2224	2576	2107	2827
Nonwhite	Δ	Δ	112	134	207	304	187	355	390	487
Education (adults):										
Not high school graduate	--	--	--	--	--	666	700	862	665	814
High school graduate	--	--	--	--	--	836	810	1123	986	1282
Some college	--	--	--	--	--	745	873	1006	904	1209
Region:										
Northeast	169	194	199	221	277	417	532	646	614	671
North Central	249	262	281	274	352	756	692	839	670	893
South	248	321	300	340	443	868	802	1018	854	1120
West	115	103	172	151	200	364	385	568	452	638
Population density:										
Large metropolitan	271	261	348	315	440	1013	682	993	840	1124
Other metropolitan	227	295	322	317	391	653	906	1073	897	1136
Nonmetropolitan	283	324	282	354	441	721	833	1005	853	1062

**Several tables throughout this main report compare data from this 1977 study to data from 1971, 1972, 1974, and 1976 for subgroups of the population. For the sake of clarity, we did not show the number of cases for each entry in the actual tables. This information, the unweighted number of people in each subgroup, is presented in this table. The reader may use these figures to determine the significance of group differences.

ΔOnly weighted bases were reported in the 1971 and 1972 reports.

Weighting Procedures

Weights are used in the computer processing of survey results to compensate for differences in probabilities of selection assigned to various population subgroups and to adjust for observed differences in interview completion experience.

Adult sample. Four types of weight factors were calculated for adults. The final weight for each adult was the product of the four intermediate weights. Households were sampled at varying rates depending on the presence or absence of three age subgroups: 18-25, 26-49, 50 or older. Age subgroups were then weighted inversely proportionate to the probabilities of selection assigned for field interviewing.

TABLE 108

Relative Weight Based on Selection of Age Subgroups: Adult Sample

Adult household composition	Selection rate	Relative weight
18-25 only	1	1.0
26-49 only	1/2	2.0
50 or older only	1/6	6.0
18-25 and 26-49 ...		
Selected subgroup:		
Persons 18-25	5/6	1.2
Persons 26-49	1/6	6.0
18-25 and 50 or older ...		
Selected subgroup:		
Persons 18-25	5/6	1.2
Persons 50 or older	1/6	6.0
26-49 and 50 or older ...		
Selected subgroup:		
Persons 26-49	1/2	2.0
Persons 50 or older	1/6	6.0
18-25, 26-49, and 50 or older ...		
Selected subgroup:		
Persons 18-25	2/3	1.5
Persons 26-49	1/6	6.0
Persons 50 or older	1/6	6.0

Weights were also assigned to compensate for selection rates which depended upon the number of persons eligible for interview in the selected age group.

TABLE 109

Relative Weight Based on Selection Rate Within Age Subgroup: Adult Sample

Number of persons in household in selected subgroup	Selection rate	Relative weight
1	1	1
2	1/2	2
3	1/3	3
4	1/4	4

In addition, weights were assigned to compensate for differences in interview completion rate among interviewing locations. The weight factor for each location was proportionate to the number of eligible households in that location divided by the number of completed interviews. Locations where the weight factor would be more than twice the average weight were combined with other similar locations, and weights were recalculated for the combined locations. Weights were also assigned to adjust for observed differences in interview completion rates for these population characteristics: age, sex, education, community type, and region of the country. This procedure was carried out in two ways. First, weights by demographic subgroups were calculated for the total sample. Then a separate set of weight factors was calculated for each of the two subsamples that were interviewed using the two forms of the questionnaire. The total sample weight factors were used for all questions asked of the total sample, and the subsample weight factors were used for all questions asked of only one of the two subsamples.

Youth sample. Three types of weight factors were calculated for the youth sample. Weights were assigned to compensate for selection rates which depended on the number of persons age 12-17 in the household, and weights were assigned to compensate for differences in interview completion rate among interviewing locations. The procedures followed were similar to those described for adults. In addition, weights were assigned to adjust for observed differences in interview completion rates for: age, sex, and community type. As was the case for adults, these weights were calculated separately for the total sample and for each of the two subsamples. The total sample weight factors were used for all questions asked of the total sample, and the subsample weight factors were used for questions asked of only one of the two subsamples.

TABLE 110

Weighted Sample Characteristics Compared with Census Estimates

Characteristics	Youth Sample		Adult Sample	
	Weighted sample	Census**	Weighted sample	Census**
Sex:				
Male	51%	51%	47%	47%
Female	49	49	53	53
Age:				
12-13	32%	32%	--	--
14-15	34	34	--	--
16-17	34	34	--	--
18-21	--	--	11%	11%
22-25	--	--	9	10
26-34	--	--	18	19
35-49	--	--	23	23
50 or older	--	--	39	37
Education:				
8th grade or less	--	--	17%	17%
Some high school	--	--	15	15
High school graduate	--	--	37	37
Some college	--	--	17	17
College graduate	--	--	14	14
Not reported	--	--	*	
Race:				
White	82%	84%	86%	88%
Nonwhite	16	16	12	12
Unclassifiable	2	2	2	
Marital Status:				
Married	--	--	67%	66%
Single	--	--	16	18
Widowed	--	--	9	8
Divorced/separated	--	--	7	8
Not reported	--	--	1	
Region:				
Northeast	23%	23%	23%	24%
North Central	28	29	27	27
South	34	31	32	32
West	15	17	18	18

**Source: Population Characteristics: Current Population Reports. U. S. Bureau of the Census, 1974, 1975, and 1976. Data on region for youth are from the 1970 census.

Appendix D: Interview Schedule and Related Materials

Interview Form N
Interview Form P
Marihuana Self-Administered Questionnaire
Seven Drug Answer Sheets
Exhibit Cards

INTERVIEW FORM N

Location #_____

Housing Unit #_____

Time Started: _____

SEE INSTRUCTION MANUAL:

THE INFORMATION ENTERED ON THIS FORM WILL BE HANDLED IN THE STRICTEST CONFIDENCE AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONNEL.

OMB 068S 74097
Expires: 12/31/77
RAC 3927
FORM: N

CURRENT TRENDS

INTERVIEWER: RECORD WHETHER RESPONDENT IS AN ADULT OR A YOUTH

1 ADULT
2 YOUTH

112

IF RESPONDENT IS AN ADULT, READ PARAGRAPH "A" AND PARAGRAPH "B"

PARAGRAPH A

Hello, I'm _____, and I'm working on a nationwide survey for Response Analysis Corporation of Princeton, New Jersey, sponsored by the U. S. Department of Health, Education, and Welfare. You should have received a letter from The George Washington University a few days ago, telling about this survey. (SHOW COPY OF LETTER, IF NECESSARY.) As is always true in our work, the answers which you give us will be kept strictly confidential. The results are a statistical tabulation of everyone's answers, and no names are ever connected with the survey. Most of the questions are about alcohol, tobacco, and other drugs.

PARAGRAPH B

I would like it understood between us that if I ask you any questions that you don't want to answer, obviously you don't have to. If it is all right with you, let's get started. (PAUSE TO GIVE RESPONDENT A CHANCE TO ASK QUESTIONS OR TERMINATE.) The results of this study will provide the Federal Government with its main source of information on drug experience, knowledge, and attitudes and will be used for important research and management purposes.

INTERVIEWER: AFTER READING PARAGRAPH "A" AND PARAGRAPH "B" TO RESPONDENT, GO TO Q. 1, TOP OF PAGE 2.

IF RESPONDENT IS A YOUTH, READ PARAGRAPH "A" (ABOVE) TO THE PARENT, THEN OBTAIN PARENTAL PERMISSION IN THE FOLLOWING WAY:

(HOLD OUT QUESTIONNAIRE IN A GESTURE OF OFFERING IT TO THE PARENT SO HE/SHE MAY TAKE IT IF HE/SHE WANTS TO, AND CONTINUE:) This is the questionnaire we will be using. (IF PARENT WANTS TO EXAMINE QUESTIONNAIRE, LET HIM/HER DO SO, ANSWER ANY QUESTIONS, AND THEN SAY:) If it is all right with you, we could get started. The results of this study will provide the Federal Government with its main source of information on drug experience, knowledge, and attitudes and will be used for important research and management purposes.

RECORD IF PARENT TOOK THE QUESTIONNAIRE FROM YOU: 1 YES → TAKE BACK QUESTIONNAIRE

2 NO

113

AFTER OBTAINING PARENTAL PERMISSION, READ PARAGRAPH "A" AND PARAGRAPH "B" (ABOVE) TO YOUTH WHO IS THE RESPONDENT.

SEE INSTRUCTION MANUAL:

THIS REPORT IS AUTHORIZED BY LAW (21 U.S.C. 1133, 21 U.S.C. 1172, AND 21 U.S.C. 1173). WHILE YOU ARE NOT REQUIRED TO RESPOND, YOUR COOPERATION IS NEEDED TO MAKE THE RESULTS OF THIS SURVEY COMPREHENSIVE, ACCURATE, AND TIMELY.

1. The first question is about cigarettes. During the past month, have you smoked any cigarettes?

1 YES
2 NO

114

IF "YES" ON Q. 1, ASK:

2. On the average, how many cigarettes have you smoked each day?

1 LESS THAN DAILY
2 1-5 CIGARETTES A DAY
3 ABOUT ½ PACK A DAY (6-15 CIGARETTES)
4 ABOUT A PACK A DAY (16-25 CIGARETTES)
5 ABOUT 1½ PACKS A DAY (26-35 CIGARETTES)
6 2 PACKS OR MORE A DAY (OVER 35 CIGARETTES)
7 NOT SURE

115

SKIP TO Q. 6

IF "NO" ON Q. 1, ASK:

3. Have you ever smoked cigarettes?

1 YES
2 NO -- SKIP TO Q. 6

116

4. Have you smoked at least as many as 5 packs of cigarettes (that is 100 cigarettes) during your life?

1 YES
2 NO -- SKIP TO Q. 6
3 NOT SURE

117

5. How long ago did you stop smoking cigarettes?

1 WITHIN PAST 6 MONTHS
2 WITHIN PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE

118

6. During the past month, on the average, about how many cups or glasses of hot or iced coffee did you drink each day? Include the kind <u>with</u> caffeine, and also the kind without caffeine.

1 NONE
2 LESS THAN ONE CUP
3 1 OR 2 CUPS
4 3, 4, OR 5 CUPS
5 6 TO 10 CUPS
6 MORE THAN 10 CUPS
7 NOT SURE

119

IF "NONE" ON Q. 6, ASK:

7. Did you <u>ever</u> drink coffee?

1 YES
2 NO -- SKIP TO Q. 10

120

8. About how long ago did you stop drinking coffee?

1 WITHIN PAST 6 MONTHS
2 WITHIN PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE

121

IF RESPONDENT DRANK ANY COFFEE, ASK:

9. Was this mostly the kind like Sanka without caffeine, or was it the regular kind that has caffeine in it?

1 MOSTLY THE KIND LIKE SANKA
2 MOSTLY THE KIND WITH CAFFEINE
3 ABOUT THE SAME AMOUNT OF EACH
4 NOT SURE

122

10. During the past month, on the average, about how many cups or glasses of hot or iced tea did you drink each day?

1 NONE
2 LESS THAN ONE
3 1 OR 2 CUPS
4 3, 4, OR 5 CUPS
5 6 TO 10 CUPS
6 MORE THAN 10 CUPS
7 NOT SURE

→ SKIP TO Q. 13 *123*

IF "NONE" ON Q. 10, ASK:

11. Did you ever drink tea?

1 YES
2 NO -- SKIP TO Q. 13 *124*

IF "YES" ON Q. 11, ASK:

12. About how long ago did you stop drinking tea?

1 WITHIN PAST 6 MONTHS
2 WITHIN PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE *125*

13. The next questions are about alcoholic beverages -- beer, wine, and whiskey, or anything else to drink with alcohol in it. During the past month, on about how many days did you drink any alcoholic beverages?

1 ONE TO THREE DAYS
2 FOUR DAYS
3 FIVE TO TEN DAYS
4 ELEVEN TO TWENTY DAYS
5 21 OR MORE DAYS
6 EVERY DAY
7 NONE

→ SKIP TO Q. 16 *126*

IF "NONE" ON Q. 13, ASK:

14. Was there ever a time in the past when you drank any alcoholic beverages? Or have you always been a non-drinker?

1 ALWAYS A NON-DRINKER (SKIP TO Q. 20) *127*
2 DRANK IN THE PAST

15. When was the last time you had anything to drink?

1 WITHIN PAST 6 MONTHS
2 WITHIN PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE

→ SKIP TO Q. 20 *128*

16. On the days that you drink, about how many drinks do you have on the average day? (BY A DRINK, WE MEAN THE EQUIVALENT OF A CAN OF BEER, A GLASS OF WINE, OR A SHOT GLASS OF HARD LIQUOR. IF RESPONSE OVERLAPS CATEGORIES, CIRCLE THE HIGHER OF THE TWO.)

1 ONE OR TWO
2 THREE OR FOUR
3 FIVE OR SIX
4 SEVEN OR EIGHT
5 NINE, TEN, ELEVEN
6 TWELVE OR MORE
7 NOT SURE *129*

17. Now think back over the past month and try to remember the times when you had the most to drink. About how many drinks did you have at that time? (IF RESPONSE OVERLAPS CATEGORIES, CIRCLE HIGHER ONE.)

1 ONE OR TWO → SKIP TO Q. 19
2 THREE OR FOUR
3 FIVE OR SIX
4 SEVEN OR EIGHT
5 NINE, TEN, ELEVEN
6 TWELVE OR MORE
7 NOT SURE → SKIP TO Q. 19

130

IF RESPONDENT HAD FIVE DRINKS OR MORE ON Q. 17, ASK:

18. During the past month, about how many different times did you have five or more drinks?

1 NO TIMES
2 ONE OR TWO TIMES
3 THREE OR FOUR TIMES
4 FIVE OR MORE TIMES
5 DON'T REMEMBER

131

19. When you drink, what do you usually drink -- wine, beer, or liquor?

1 WINE
2 BEER
3 LIQUOR
4 COMBINATIONS OF SAME

132

20. (SEE INTERVIEWER INSTRUCTIONS FOR A GUIDE TO PRONOUNCING THE NAMES THAT FOLLOW.) I am going to read you the names of some drugs or drug types. After I read each one, just tell me if you have ever heard of it. The first one is heroin. Have you ever heard of heroin? (ASK ABOUT EACH IN TURN, AND RECORD BELOW.)

	EVER HEARD OF?			
	YES	NO	NOT SURE	
a. Heroin	1	2	3	133
b. Marihuana	1	2	3	
c. Barbiturates	1	2	3	
d. LSD	1	2	3	
e. Methadone	1	2	3	137
f. Cocaine	1	2	3	
g. Amphetamines	1	2	3	
h. Tranquilizers	1	2	3	
i. Opium	1	2	3	141

HAND RESPONDENT CARD A

21. Please read this list and tell me which things you think are addictive. That is, anybody who uses it regularly becomes physically and psychologically dependent on it and can't get along without it. Just answer for those that you have heard about. (CIRCLE NUMBERS FOR AS MANY AS APPLY.)

1 HEROIN
2 ALCOHOL
3 MARIHUANA
4 TOBACCO
5 BARBITURATES
6 AMPHETAMINES
7 COCAINE
8 METHADONE
9 NO OPINION

142

TAKE BACK CARD A

INTERVIEWER: THIS FORM OF THE QUESTIONNAIRE GOES FROM Q. 21 ON THIS PAGE TO Q. 57 ON THE NEXT PAGE. NOTHING IS MISSING.

57. These next questions are to get your opinions about one of these substances, marihuana, which is sometimes called grass or pot. I'm going to read you five statements about marihuana. After I read each one, please tell me if you mostly agree with it or mostly disagree with it. (ASK AFTER EACH ONE AS NEEDED: Do you mostly agree or mostly disagree with that statement?)

	MOSTLY AGREE	MOSTLY DISAGREE	OTHER ANSWER	NOT SURE	
a. You can try marihuana once or twice with no bad effects.	1	2	3	4	*233*
b. You can use marihuana without ever becoming addicted to it.	1	2	3	4	*234*
c. Marihuana makes people want to try stronger things like heroin.	1	2	3	4	*235*
d. Marihuana is probably used a lot in this neighborhood.	1	2	3	4	*236*
e. Most marihuana users in this country are from minority groups.	1	2	3	4	*237*

HAND RESPONDENT SELF-ADMINISTERED QUESTIONNAIRE, LARGE RETURN ENVELOPE, AND PEN.

TELL RESPONDENT: Here is a brief questionnaire on marihuana to answer by yourself.

When you finish, I will ask you to put the questionnaire in the envelope. I will never know your answers, and no one else will ever know your answers.

I have my own blank copy of the questions in case you want to ask me about any of them.

At the top of the front page, it shows you how to record your answers. You can answer some questions by writing in a number. For the rest, just draw a circle around the number in front of the answer which fits best.

INTERVIEWER: WHILE YOU ARE WAITING, MAKE SURE THAT LOCATION NUMBER AND HOUSING UNIT ARE WRITTEN ON THE FIRST PAGE OF THIS BOOKLET.

WHEN RESPONDENT IS FINISHED, SAY:

- Did you answer the questions on both sides of the sheet? (IF NOT, WAIT WHILE RESPONDENT DOES SO.)
- Did you answer all of the questions? There is an answer category for everybody on every question, regardless of whether or not you have used marihuana.
- Did you show your answers by circling numbers or filling in the blanks? (IF RESPONDENT MADE CHECK MARKS OR "X's," ASK HIM OR HER TO CIRCLE NUMBERS ALSO.)

WHEN YOU ARE SATISFIED THAT THE WORK WAS DONE RIGHT, ASK THE RESPONDENT TO PUT THE COMPLETED QUESTIONNAIRE IN THE ENVELOPE.

HAND RESPONDENT THE PINK ANSWER SHEET (#1) AND READ THE FOLLOWING:

The next questions are set up so that I will not know what answers you give. First, the answer sheet you have allows you to show your answers to my questions, without you saying them out loud.

Second, there is a place for you to answer every question. That way people who do not use these things take the same amount of time to answer as the people who do use them.

Third, when you are through with the answer sheet, please put it in the envelope you have.

Now let's do the first one. These questions are about hashish, or hash, as many people call it. After I read the question, don't tell me the answer; just write it in the space.

Question 1. About how old were you when you first knew someone who had tried hash?

Write your age in the space -- the age when you first knew someone who had tried hash. If you never knew someone who tried hash, just draw a circle around the "X" in front of the words "never knew anyone."

WAIT AND GIVE RESPONDENT TIME TO WRITE AN ANSWER. DO NOT LOOK DIRECTLY AT THE RESPONDENT OR APPEAR TO TRY TO SEE WHAT HE OR SHE WRITES.

Here is Question 2. About how old were you when you first had the chance to try hash, if you wanted to?

AGAIN, WAIT FOR RESPONDENT TO WRITE HIS ANSWER BEFORE GOING ON TO QUESTION 3.

Question 3. Did you try hash the first time you had the chance, or did you try it later?

Circle one of the numbers that goes with Question 3 -- the number that comes closest to your answer.

CONTINUE IN THIS WAY WITH ALL THE REST OF THE QUESTIONS IN THIS SECTION.

SH4. How old were you the first time you tried hash?

SH5. About how long ago was the first time you tried hash?

SH6. When was the most recent time you used hash?

SH7. During the past month, on about how many different days did you use hash?

SH8. Just roughly, about how many times in your life have you used hash?

SH9. When it comes to using hash, do you think of yourself as a regular user, an occasional user, or a non-user?

HAVE RESPONDENT PUT COMPLETED PINK ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE YELLOW (#2) ANSWER SHEET AND SAY:

These questions are about glue or some other substances that people inhale for kicks or to get high. Besides glue, there are things like gasoline, some aerosols, nitrous oxide, amyl nitrite which is also called "poppers," and other solvents. There is a list of them printed at the top of your answer sheet.

G1. About how old were you when you first knew someone who sniffed glue or some other inhalant?

G2. About how old were you when you first had the chance to sniff glue or some other inhalant if you wanted to?

G3. Did you try to sniff glue or some other inhalant the first time you had the chance, or did you try it later?

G4. How old were you the first time you tried to sniff glue or some other inhalant?

G5. About how long ago was the first time you tried sniffing glue or some other inhalant?

G6. When was the most recent time you sniffed glue or some other inhalant?

G7. During the past month, on about how many different days did you sniff glue or some other inhalant?

G8. Just roughly, about how many times in your life have you sniffed glue or some other inhalant?

G9. When it comes to sniffing glue or some other inhalant, do you think of yourself as a regular user, an occasional user, or a non-user?

HAVE RESPONDENT PUT THE YELLOW (#2) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE GREEN (#3) ANSWER SHEET. ASK THE NEXT SET OF QUESTIONS AS BEFORE.

INTERVIEWER: PLEASE REMEMBER TO SAY "QUESTION 1," "QUESTION 2," AND NOT JUST "1," OR "2," BY ITSELF.

C1. About how old were you when you first knew someone who had tried cocaine?

C2. About how old were you when you first had the chance to try cocaine if you wanted to?

C3. Did you try cocaine the first time you had the chance, or did you try it later?

C4. How old were you the first time you tried cocaine?

C5. About how long ago was the first time you tried cocaine?

C6. When was the most recent time you used cocaine?

C7. During the past month, on about how many different days did you use cocaine?

C8. Just roughly, about how many times in your life have you used cocaine?

C9. When it comes to using cocaine, do you think of yourself as a regular user, an occasional user, or a non-user?

HAVE RESPONDENT PUT COMPLETED GREEN (#3) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE GOLD (#4) ANSWER SHEET AND SAY:

The next questions are about LSD and other hallucinogens like mescaline, peyote, psilocybin, and DMT. There is a list of them printed at the top of your answer sheet.

L1. About how old were you when you first knew someone who had tried LSD or other hallucinogens?

L2. About how old were you when you first had the chance to try LSD or other hallucinogens?

L3. Did you try LSD or other hallucinogens the first time you had the chance, or did you try it later?

L4. How old were you the first time you tried LSD or other hallucinogens?

L5. About how long ago was the first time you tried LSD or other hallucinogens?

L6. When was the most recent time you tried LSD or other hallucinogens?

L7. During the past month, on about how many different days did you use LSD or other hallucinogens?

L8. Just roughly, about how many times in your life have you used LSD or other hallucinogens?

L9. When it comes to using LSD or other hallucinogens, do you think of yourself as a regular user, an occasional user, or a non-user?

L10. This next question is about something we have not talked about yet. Did you ever hear of something called PCP, which is also called "Angel Dust?" Please show your answer on the answer sheet.

L11. Have you ever used PCP or Angel Dust?

HAVE RESPONDENT PUT COMPLETED GOLD (#4) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE GRAY (#5) ANSWER SHEET AND SAY:

These next questions are about opium or other drugs containing opium and its derivatives. They are usually in the form of prescription cough syrups, pain killers, or stomach medicines -- things like morphine, codeine, dilaudid, demerol, and paregoric. Although these are frequently prescribed for medical reasons, these questions ask about the use of these drugs for non-medical purposes -- that is, for kicks or for highs, to gain insight, or for pleasure. A list of these opiates is printed at the top of your answer sheet.

01. About how old were you when you first knew someone who had tried any of these opiates for non-medical reasons?

02. About how old were you when you first had the chance to try an opiate if you wanted to?

03. Did you try an opiate for non-medical reasons the first time you had the chance, or did you try it later?

04. How old were you the first time you tried an opiate for non-medical reasons?

05. About how long ago was the first time you tried an opiate for non-medical reasons?

06. When was the most recent time you used any of these opiates for non-medical reasons?

07. During the past month, on about how many different days did you use any of these opiates for non-medical reasons?

08. Just roughly, about how many times in your life have you used an opiate for non-medical reasons?

09. When it comes to using these opiates, do you think of yourself as a regular user, an occasional user, or a non-user?

010. Which of these things on that list have you used at some time for non-medical reasons? You may circle more than one.

HAVE RESPONDENT PUT COMPLETED GRAY (#5) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE BLUE (#6) ANSWER SHEET.

H1. About how old were you when you first knew someone who had tried heroin?

H2. About how old were you when you first had the chance to try heroin if you wanted to?

H3. Did you try heroin the first time you had the chance, or did you try it later?

H4. How old were you the first time you tried heroin?

H5. About how long ago was the first time you tried heroin?

H6. When was the most recent time you used heroin?

H7. During the past month, on about how many different days did you use heroin?

H8. Just roughly, about how many times in your life have you used heroin?

H9. When it comes to using heroin, do you think of yourself as a regular user, an occasional user, or a non-user?

H10. How many of your close friends, if any, know for sure that you have used heroin?

H11. Have you ever taken heroin with a needle?

H12. This next question is about a different substance, methadone. Have you ever used methadone when it was not part of a treatment program?

HAVE RESPONDENT PUT COMPLETED BLUE ANSWER SHEET (#6) IN THE ENVELOPE. THEN GIVE HIM THE IVORY (#7) ANSWER SHEET AND SAY:

SQ1. This next question is about the order in which people try different drugs over the course of their lives. We would like to know which drug you tried first, which drug you tried second, and so on.

a. Look at the list of drugs in box number one, and put an "X" next to the drug you tried first in your lifetime. If you never tried any of the drugs on this list, put an "X" next to the words "never tried any of these." (PAUSE WHILE RESPONDENT MARKS ANSWER.)

b. Now go to box number two, and put an "X" next to the drug you tried second in your lifetime. (INTERVIEWER: READ NEXT PART SLOWLY, WITH EMPHASIS.) If you tried just one drug on the list, and have already marked an "X" next to the name of that drug, and that is the only drug on the list which you have ever tried, then put an "X" next to the words "already marked all I have tried." If you never tried any of the drugs on this list, put an "X" next to the words "never tried any of these." (PAUSE WHILE RESPONDENT MARKS ANSWER.)

c. Now go to box number three, and put an "X" next to the drug you tried third in your lifetime. (INTERVIEWER: READ NEXT PART SLOWLY, WITH EMPHASIS.) If you tried just one or two drugs on this list and have already marked an "X" next to the name of those drugs, and those are the only drugs on the list which you have ever tried, then put an "X" next to the words "already marked all I have tried." If you never tried any of the drugs on this list, put an "X" next to the words "never tried any of these." (PAUSE WHILE RESPONDENT MARKS ANSWER.)

d-e. Now go on to "tried fourth" and "tried fifth" and do the same thing. (PAUSE WHILE RESPONDENT MARKS REMAINING ANSWERS.)

HAVE RESPONDENT PUT THE LAST ANSWER SHEET (IVORY #7) IN THE ENVELOPE. MAKE SURE THE ENVELOPE STAYS OPEN AND IS NOT SEALED UNTIL THE VERY END, BECAUSE YOU STILL HAVE TO PUT THE QUESTIONNAIRE IN IT AT THE END OF THE INTERVIEW.

THEN GO ON TO QUESTION 58 ON THE NEXT PAGE.

HAND RESPONDENT CARD F

58. Please answer this question as though everything on the list were legal and available. Regardless of what you are doing now, please read over the list and tell me which of the following you would use, if they were legal and available. (CIRCLE NUMBERS FOR AS MANY AS APPLY.)

1 MARIHUANA
2 HASH
3 COCAINE
4 LSD, MESCALINE, PEYOTE, PSILOCYBIN, DMT
5 HEROIN
6 METHADONE
7 MORPHINE, OPIUM, OTHER OPIATES
8 NOT SURE
9 NONE OF THEM

238

TAKE BACK CARD F, AND HAND RESPONDENT CARD G

59. We would like you to consider five possible things that could happen to marihuana in the future. Please read over this card which has the five different things on it; then I would like to ask you about them. (GIVE RESPONDENT PLENTY OF TIME TO READ.)

Now, let's go over these possibilities one at a time. I'll review each one with you before I ask about it. The first possibility is that marihuana becomes a regular commercial product. It is sold in stores and in vending machines. It comes under a variety of brand names. It is widely advertised.

Please tell me the statement at the bottom of the card that comes closest to how you would feel about this possibility.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

239

60. The second possibility is that marihuana becomes a closely regulated product. Again, I'll review this one with you. It is sold only in government licensed stores. You have to be 18 or older to buy it. No advertising is permitted, and no brand names. Just one name, "Marihuana." The government sets quality standards.

Please tell me the statement at the bottom of the card that comes closest to how you would feel about this possibility.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

240

61. Here is the third possibility. Possession of marihuana for personal use is not prohibited. You can have only as much marihuana as you can use yourself. Sharing it with friends is also acceptable. Selling marihuana is a crime, and selling it to anyone under 18 is especially serious.

Please tell me the statement at the bottom of the card that comes closest to how you would feel about this possibility.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

241

62. The fourth possibility is that having, using, or selling marihuana is illegal. It is not legally available to anyone. Police can make arrests for sale or possession.

Please tell me the statement at the bottom of the card that comes closest to how you feel about this situation.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

242

63. The fifth possibility is that marihuana laws and their enforcement become very strict. There are very tough penalties for having, using, or selling it. The full force of the law is used to find people who have it or sell it. The courts would make sure that persons found guilty are punished and not let off easily.

Please tell me the statement at the bottom of the card that comes closest to how you would feel about this possibility happening.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

243

64. Now, please have another look at the card with the five possibilities on it that we have just talked about. Tell me which <u>one</u> of these five you think would be best for the country. (PAUSE.) Now, tell me your <u>second</u> choice. (PAUSE.) Last, please tell me which one you think would be <u>worst</u> for the country.

	<u>BEST</u>	<u>SECOND CHOICE</u>	<u>WORST</u>
FIRST POSSIBILITY	1	1	1
SECOND POSSIBILITY	2	2	2
THIRD POSSIBILITY	3	3	3
FOURTH POSSIBILITY	4	4	4
FIFTH POSSIBILITY	5	5	5
NO CHOICES MADE	X	X	X

244-246

TAKE BACK CARD G

These questions are for statistical purposes only, to help us analyze the results of the study.

65. INTERVIEWER: RECORD SEX OF RESPONDENT.
1 MALE
2 FEMALE
247

66. Would you please tell me how old you are?
_____ AGE
X NOT GIVEN
248-249

67. Are you of Spanish origin, that is, are you from a Spanish-American family?
1 YES
2 NO -- SKIP TO Q. 70
250

IF "YES" ON Q. 67, ASK:

68. Which of these types of Spanish-Americans best describes you: Puerto Rican, Mexican, or some other Spanish-American group?
1 PUERTO RICAN
2 MEXICAN
3 SOME OTHER GROUP
—SKIP TO Q. 70
251

IF "SOME OTHER GROUP" ON Q. 68, ASK:

69. Which one is that, please? (RECORD ANSWER ON LINE BELOW.)
_____
252-253

HAND RESPONDENT CARD H

70. Which of the groups on this card best describes your family origin?
1 AMERICAN INDIAN
2 ALASKAN NATIVE
3 ASIAN
4 PACIFIC ISLANDER
5 WHITE
6 BLACK
7 OTHER (SPECIFY): _____
8 NO ANSWER
254

TAKE BACK CARD H

INTERVIEWER: IF RESPONDENT IS AN ADULT, GO TO Q. 71 ON THIS PAGE.
IF RESPONDENT IS A YOUTH, GO TO Q. 94, TOP OF PAGE 17.

IF RESPONDENT IS AN ADULT:

71. Are you a student or taking any courses this year in a college or other kind of school?
1 YES
2 NO → SKIP TO Q. 74
255

IF "YES" ON Q. 71, ASK:

72. Is that a college or a vocational school or what?
1 COLLEGE
2 COMMUNITY COLLEGE
3 VOCATIONAL SCHOOL
4 ADULT SCHOOL
5 HIGH SCHOOL
6 OTHER (specify): _____
256

73. Are you a full time student or a part time student?
1 FULL TIME
2 PART TIME
257

74. What is the last grade that you completed in school?

1 NO SCHOOLING
2 ELEMENTARY SCHOOL -- 8TH GRADE OR LESS
3 SOME HIGH SCHOOL
4 HIGH SCHOOL GRADUATE
5 SOME VOCATIONAL OR TECHNICAL SCHOOL
6 SOME COLLEGE
7 COLLEGE GRADUATE OR BEYOND
8 NO ANSWER

258

75. Are you or anyone else who lives here a veteran of the Armed Forces?

1 YES, RESPONDENT IS
2 YES, BOTH RESPONDENT AND SOME OTHER ADULT
3 YES, SOME OTHER ADULT IS, BUT NOT RESPONDENT
4 NO, NO ONE IS

259

SKIP TO Q.77

IF "RESPONDENT" OR "BOTH" ON Q. 75, ASK:

76. Did you ever serve in Vietnam?

1 YES
2 NO

260

77. Do you have any children under age 18 living here with you?

1 YES
2 NO → SKIP TO Q. 81

261

IF "YES" ON Q. 77, ASK:

78. How many children are there here who are under six years of age?

(NUMBER) *262*

79. How many who are between six and twelve years old?

(NUMBER) *263*

80. How many who are thirteen through seventeen years old?

(NUMBER) *264*

81. Do you have any children who are living with someone else or who are away from home at school or college?

1 YES
2 NO

265

82. Are you married, widowed, separated, divorced, or never married?

1 MARRIED
2 WIDOWED
3 DIVORCED OR SEPARATED
4 NEVER MARRIED
5 NO ANSWER

266

83. Are you employed at the present time, either full time or part time?

1 YES
2 NO → HAND RESPONDENT CARD I

Which of the following best describes you?

1 HOUSEWIFE
2 STUDENT
3 UNEMPLOYED
4 RETIRED
5 DISABLED

TAKE BACK CARD I

SKIP TO Q. 88

267
268

IF "YES" ON Q. 83, ASK:

84. What is your job title? _____

85. Could you please tell me what kind of work you do? (INTERVIEWER: GET ENOUGH DETAIL SO WE CAN CLASSIFY JOB.)

269-270

_____

86. What kind of business is that? What do they make or do where you work?

_____

IF NOT CLEAR WHETHER SELF-EMPLOYED, ASK:

87. Are you self-employed? 1 YES 2 NO

271

88. Are you the chief wage earner in this household?

1 YES -- SKIP TO Q. 93
2 NO -- ASK Q's. 89, 90, 91
3 NO WAGE EARNER IN THIS HOUSEHOLD -- SKIP TO Q. 93

272

IF SOMEONE ELSE (NOT RESPONDENT) IS CHIEF WAGE EARNER, ASK:

89. What is his (her) job title? _____

90. What kind of work does the chief wage earner do? (INTERVIEWER: GET ENOUGH DETAIL SO WE CAN CLASSIFY JOB.)

273-274

_____

91. What kind of business is that? What do they make or do where he (she) works?

_____

IF NOT CLEAR WHETHER SELF-EMPLOYED, ASK:

92. Is he (she) self-employed? 1 YES 2 NO

275

HAND RESPONDENT CARD J

93. For statistical purposes, we need to know which of these groups includes your total family income before taxes for last year. Include your own income and that of any members of your immediate family who are living with you. Just give me the number.

	ANNUAL	WEEKLY
1	NO INCOME	
2	UNDER $2,000	(UNDER $39)
3	$2,000 - $2,999	($39 - $57)
4	$3,000 - $4,999	($58 - $96)
5	$5,000 - $6,999	($97 - $134)
6	$7,000 - $9,999	($135 - $192)
7	$10,000 - $14,999	($193 - $288)
8	$15,000 - $24,999	($289 - $480)
9	$25,000 OR MORE	($481 OR MORE)
0	DON'T KNOW, REFUSED TO ANSWER	

276

TAKE BACK CARD J

INTERVIEWER: CONTINUE WITH ADULT RESPONDENT, Q. 103, TOP OF PAGE 18.

IF RESPONDENT IS A YOUTH:

94. Are you going to school this year?

1 YES
2 NO

305

IF "YES" ON Q. 94, ASK:

95. Do you go to school full time (that is, do you take a regular schedule of courses), or are you going to school less than full time?

1 FULL TIME
2 PART TIME
3 NOT SURE

306

96. What is the last grade that you completed in school?

1 SEVENTH GRADE OR LESS
2 EIGHTH GRADE
3 NINTH GRADE
4 TENTH GRADE
5 ELEVENTH GRADE
6 TWELFTH GRADE (HIGH SCHOOL GRADUATE)
7 BEYOND HIGH SCHOOL
8 NO ANSWER

307

97. How many brothers and sisters do you have who are older than you?

0 1 2 3 4 5 6 or more

308

98. Is the chief wage earner in this household employed at the present time, either full time or part time?

1 YES
2 NO →

309

HAND RESPONDENT CARD I

Which of the following best describes the chief wage earner?

1 HOUSEWIFE
2 STUDENT
3 UNEMPLOYED
4 RETIRED
5 DISABLED

310

TAKE BACK CARD I

SKIP TO Q. 103, TOP OF PAGE 18

IF "YES" ON Q. 98, ASK:

99. What is his (her) job title? _____

100. Could you please tell me what kind of work he (she) does? (INTERVIEWER: GET ENOUGH DETAIL SO WE CAN CLASSIFY JOB.)

311-312

_____

101. What kind of business is that? What do they make or do there?

_____

IF NOT CLEAR WHETHER SELF-EMPLOYED, ASK:

102. Is he (she) self-employed?

1 YES
2 NO

313

INTERVIEWER: CONTINUE WITH YOUTH RESPONDENT, Q. 103, TOP OF PAGE 18.

ASK EVERYONE:

103. These are the last of the questions for this survey. These questions are about people whom you know. Keep the names of these people to yourself. We want to know about them, but we do not want to know who they are. Ready?

How many people do you know who have ever used heroin?

_____NUMBER OF PEOPLE *314-315*

INTERVIEWER: TERMINATE INTERVIEW; GO TO PAGE 22 AND FILL IT IN BY YOURSELF. ← X DOES NOT KNOW ANYONE WHO EVER USED HEROIN

104. Now, we would like you to think of your close friends. Of your close friends (INTERVIEWER: READ NEXT PART SLOWLY, WITH EMPHASIS), about how many can you say for sure have ever used heroin?

_____NUMBER OF CLOSE FRIENDS WHO HAVE EVER USED HEROIN *316-317*

INTERVIEWER: TERMINATE INTERVIEW; GO TO PAGE 22 AND FILL IT IN BY YOURSELF. ← X DOES NOT HAVE ANY CLOSE FRIENDS WHO HAVE EVER USED HEROIN

HOLD UP CARD

In a moment, I will ask you to use this card. When we are through, I will leave this card with you. (INTERVIEWER: HAND CARD TO RESPONDENT.)

105. On the card I gave you, I would like you to list the initials of your close friends who you know for sure have ever used heroin. No one but you will ever see these initials. (GIVE RESPONDENT PLENTY OF TIME.)

Next, we would like to know how many of these people are living in a regular household. Please cross off the initials of anyone who is in a drug rehabilitation center, in a college dormitory, in jail, lives on a military base, or has no fixed address. (PAUSE WHILE RESPONDENT FINISHES CROSSING OUT.) Now, count the people who are left on your list. Do not count those you crossed off. The people left on your list should be those who live in regular households. How many live in regular households?

_____NUMBER LIVING IN REGULAR HOUSEHOLDS *318-319*

INTERVIEWER: TERMINATE INTERVIEW; GO TO PAGE 22 AND FILL IT IN BY YOURSELF. ← X NO ONE LIVING IN A REGULAR HOUSEHOLD

106. Please put the number "one" next to the initials of the first person left on your list. Then put the number "two" next to the initials of the second person left on your list, and so on until everyone left on your list has a different number. Do not put a number next to any of the initials that you have already crossed off. (WAIT UNTIL RESPONDENT FINISHES NUMBERING.)

I only want to ask you about one of the persons on your list. (INTERVIEWER: USE TABLE BELOW TO SELECT CORRECT INDIVIDUAL.)

INTERVIEWER: CIRCLE NUMBER OF PERSON YOU ARE GOING TO ASK ABOUT. THAT IS THE ONLY PERSON TO ASK ABOUT. NO SUBSTITUTES.

IF THE NUMBER OF CLOSE FRIENDS IN Q. 105 IS:	ASK ABOUT PERSON NUMBER:
1	1
2	1
3	2
4	3
5	1
6	3
7	1
8+	2

320

Please draw a circle around the initials of person number _____ (INSERT FROM TABLE); the remaining questions will be about this person. Is this person male or female?

1 MALE
2 FEMALE

321

107. How old is this person now? Is he/she 12-17 years old, 18-25 years old, 26-34 years old, or more than 35 years old?

1 12-17 YEARS OLD
2 18-25 YEARS OLD
3 26-34 YEARS OLD
4 35+ YEARS OLD
5 NOT SURE

322

108. As far as you know, how long ago was the first time this person tried heroin?

1 WITHIN THE PAST MONTH
2 WITHIN THE PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE

323

109. As far as you know, when was the most recent time this person used heroin?

1 WITHIN THE PAST MONTH
2 WITHIN THE PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE

324

110. When it comes to using heroin, do you think of this person as a regular user, an occasional user, or no longer a user?

1 A REGULAR USER
2 AN OCCASIONAL USER
3 NO LONGER A USER
4 NOT SURE

325

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1	1
2	2
3	3
4	4
5	2
6	4
7	2
8+	3

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325

CONTINUED

2 OF 3

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5	3
6	5
7	3
8+	5

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2	2
3	2
4	1
5	4
6	6
7	4
8+	5

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2	1
3	3
4	3
5	5
6	3
7	5
8+	6

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2	1
3	3
4	3
5	5
6	3
7	6
8+	7

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2	1
3	3
4	3
5	5
6	3
7	7
8+	8

320

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1 MALE
2 FEMALE

321

107. How old is this person now? Is he/she 12-17 years old, 18-25 years old, 26-34 years old, or more than 35 years old?

1 12-17 YEARS OLD
2 18-25 YEARS OLD
3 26-34 YEARS OLD
4 35+ YEARS OLD
5 NOT SURE

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1	1
2	1
3	3
4	3
5	5
6	3
7	2
8+	1

320

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1 MALE
2 FEMALE

321

107. How old is this person now? Is he/she 12-17 years old, 18-25 years old, 26-34 years old, or more than 35 years old?

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2 18-25 YEARS OLD
3 26-34 YEARS OLD
4 35+ YEARS OLD
5 NOT SURE

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1 A REGULAR USER
2 AN OCCASIONAL USER
3 NO LONGER A USER
4 NOT SURE

325

111. There are many different ways of knowing that another person has used heroin. Please tell me <u>how</u> you know <u>for sure</u> that this person has used heroin. (WRITE <u>EXACTLY</u> WHAT RESPONDENT SAYS. IF RESPONDENT SAYS "SOMEONE ELSE TOLD ME" OR "EVERYBODY KNOWS," RECORD VERBATIM, THEN PROBE: How do <u>they</u> know?)

326-327

112. Besides what you just told me, are there any <u>other</u> ways that you happen to know about this person's use of heroin? (WRITE <u>EXACTLY</u> WHAT RESPONDENT SAYS.)

328-329

113. Now, we would like you to think of this person's <u>other</u> close friends, besides yourself. As far as you know, how many of this person's close friends, besides yourself, know <u>for sure</u> that this person has used heroin? (RECORD VERBATIM <u>ANYTHING</u> RESPONDENT SAYS IN RESPONSE TO THIS QUESTION.)

330-331

_____ NUMBER OF CLOSE FRIENDS WHO KNOW

INTERVIEWER: TERMINATE INTERVIEW; GO TO PAGE 22 AND FILL IT IN BY YOURSELF. → X DON'T KNOW

332-333

114. Of these _____ (INSERT FROM Q. 113) close friends who know, how many of them live in regular households? Do <u>not</u> include anyone who is in a drug rehabilitation center, in a college dormitory, in jail, lives on a military base, or has no fixed address. As far as you know, how many are living in a regular household?

334-335

_____ NUMBER LIVING IN A REGULAR HOUSEHOLD

0 NO ONE LIVING IN A REGULAR HOUSEHOLD

X DON'T KNOW

115. A moment ago, I asked you how many of this person's <u>other</u> close friends know they used heroin. Some people find this question hard to answer; other people have no trouble with it. Did you find this question hard or easy to answer? (PROBE 1: <u>Why</u> was it hard/easy to answer? PROBE 2: Could you explain why you said that? PROBE 3: How certain were you about your answer? IF UNCERTAIN OR A GUESS, USE PROBE 4: <u>What</u> did you base your answer on?) (INTERVIEWER: INSERT PROBE NUMBER, E.G., P1, WITH EACH COMMENT YOU RECORD BELOW.)

1 HARD
2 EASY
3 OTHER (SPECIFY BELOW)

336

337-339

THANK YOU VERY MUCH!

<u>INTERVIEWER: NOW GO ON TO THE NEXT PAGE AND FILL IT IN BY YOURSELF.</u>

INTERVIEWER: THIS NEXT STEP IS VERY IMPORTANT. YOUR SIGNATURE ON THE FOLLOWING STATEMENT VERIFIES THAT YOU FOLLOWED INSTRUCTIONS FOR OBTAINING RESPONDENT CONSENT.

I have carried out the instructions for informing respondent (and respondent's parent, in the case of a youth) of his or her rights with respect to participating.

_____

INTERVIEWER SIGNATURE *DATE* *340-341*

LENGTH OF INTERVIEW: _____ MINUTES INTERVIEWER I. D. #: _____ *342-345*

(BE SURE YOU HAVE FILLED IN LOCATION AND HOUSING UNIT NUMBERS ON FIRST PAGE.)

INTERVIEWER: NOW FILL IN THE FOLLOWING QUESTIONS BY YOURSELF.

116. What kind of area is this interview being conducted in?

1 IN A CITY OR TOWN
2 SUBURBS OF A CITY OR TOWN *346*
3 RURAL OR OTHER SUBURBAN AREA

117. Please estimate the respondent's understanding of the interview:

1 NO DIFFICULTY -- No language or reading problem
2 JUST A LITTLE DIFFICULTY -- Almost no language or reading problem
3 A FAIR AMOUNT OF DIFFICULTY -- Some language or reading problem *347*
4 A LOT OF DIFFICULTY -- Considerable language or reading problem

118. How cooperative is the respondent -- very cooperative, fairly cooperative, not too cooperative, or openly hostile?

1 VERY COOPERATIVE
2 FAIRLY COOPERATIVE
3 NOT TOO COOPERATIVE *348*
4 OPENLY HOSTILE

119. How can we improve this interview for the next time?

349-350

NOW CLOSE INTERVIEW BOOKLET. GIVE IT TO RESPONDENT TO PUT INTO THE LARGE ENVELOPE. ASK RESPONDENT TO SEAL ENVELOPE AND TO GO WITH YOU TO MAILBOX IF HE OR SHE WANTS TO.

BE SURE THAT VERIFICATION POSTCARD IS FILLED OUT BEFORE YOU LEAVE THE HOUSE.

INTERVIEW FORM P

Location #_____

Housing Unit #_____

Time Started: _____

SEE INSTRUCTION MANUAL:

THE INFORMATION ENTERED ON THIS FORM WILL BE HANDLED IN THE STRICTEST CONFIDENCE AND WILL NOT BE RELEASED TO UNAUTHORIZED PERSONNEL.

OMB 068S 74097
Expires: 12/31/77
RAC 3927
Form: P

CURRENT TRENDS

INTERVIEWER: RECORD WHETHER RESPONDENT IS AN ADULT OR A YOUTH 1 ADULT 2 YOUTH 112

IF RESPONDENT IS AN ADULT, READ PARAGRAPH "A" AND PARAGRAPH "B"

PARAGRAPH A

Hello, I'm _____, and I'm working on a nationwide survey for Response Analysis Corporation of Princeton, New Jersey, sponsored by the U. S. Department of Health, Education, and Welfare. You should have received a letter from The George Washington University a few days ago, telling about this survey. (SHOW COPY OF LETTER, IF NECESSARY.) As is always true in our work, the answers which you give us will be kept strictly confidential. The results are a statistical tabulation of everyone's answers, and no names are ever connected with the survey. Most of the questions are about alcohol, tobacco, and other drugs.

PARAGRAPH B

I would like it understood between us that if I ask you any questions that you don't want to answer, obviously you don't have to. If it is all right with you, let's get started. (PAUSE TO GIVE RESPONDENT A CHANCE TO ASK QUESTIONS OR TERMINATE.) The results of this study will provide the Federal Government with its main source of information on drug experience, knowledge, and attitudes and will be used for important research and management purposes.

INTERVIEWER: AFTER READING PARAGRAPH "A" AND PARAGRAPH "B" TO RESPONDENT, GO TO Q. 1, TOP OF PAGE 2.

IF RESPONDENT IS A YOUTH, READ PARAGRAPH "A" (ABOVE) TO THE PARENT, THEN OBTAIN PARENTAL PERMISSION IN THE FOLLOWING WAY:

(HOLD OUT QUESTIONNAIRE IN A GESTURE OF OFFERING IT TO THE PARENT SO HE/SHE MAY TAKE IT IF HE/SHE WANTS TO, AND CONTINUE:) This is the questionnaire we will be using. (IF PARENT WANTS TO EXAMINE QUESTIONNAIRE, LET HIM/HER DO SO, ANSWER ANY QUESTIONS, AND THEN SAY:) If it is all right with you, we could get started. The results of this study will provide the Federal Government with its main source of information on drug experience, knowledge, and attitudes and will be used for important research and management purposes.

RECORD IF PARENT TOOK THE QUESTIONNAIRE FROM YOU: 1 YES ⟶ TAKE BACK QUESTIONNAIRE 113
2 NO

AFTER OBTAINING PARENTAL PERMISSION, READ PARAGRAPH "A" AND PARAGRAPH "B" (ABOVE) TO YOUTH WHO IS THE RESPONDENT.

SEE INSTRUCTION MANUAL:

THIS REPORT IS AUTHORIZED BY LAW (21 U.S.C. 1133, 21 U.S.C. 1172, AND 21 U.S.C. 1173). WHILE YOU ARE NOT REQUIRED TO RESPOND, YOUR COOPERATION IS NEEDED TO MAKE THE RESULTS OF THIS SURVEY COMPREHENSIVE, ACCURATE, AND TIMELY.

1. The first question is about cigarettes. During the past month, have you smoked any cigarettes?

1 YES
2 NO *114*

IF "YES" ON Q. 1, ASK:

2. On the average, how many cigarettes have you smoked each day?

1 LESS THAN DAILY
2 1-5 CIGARETTES A DAY
3 ABOUT ½ PACK A DAY (6-15 CIGARETTES)
4 ABOUT A PACK A DAY (16-25 CIGARETTES)
5 ABOUT 1½ PACKS A DAY (26-35 CIGARETTES)
6 2 PACKS OR MORE A DAY (OVER 35 CIGARETTES)
7 NOT SURE *115*

SKIP TO Q. 6

IF "NO" ON Q. 1, ASK:

3. Have you ever smoked cigarettes?

1 YES
2 NO -- SKIP TO Q. 6 *116*

4. Have you smoked at least as many as 5 packs of cigarettes (that is 100 cigarettes) during your life?

1 YES
2 NO -- SKIP TO Q. 6 *117*
3 NOT SURE

5. How long ago did you stop smoking cigarettes?

1 WITHIN PAST 6 MONTHS
2 WITHIN PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE *118*

6. During the past month, on the average, about how many cups or glasses of hot or iced coffee did you drink each day? Include the kind <u>with</u> caffeine, and also the kind without caffeine.

1 NONE
2 LESS THAN ONE CUP
3 1 OR 2 CUPS
4 3, 4, OR 5 CUPS
5 6 TO 10 CUPS
6 MORE THAN 10 CUPS
7 NOT SURE *119*

IF "NONE" ON Q. 6, ASK:

7. Did you <u>ever</u> drink coffee?

1 YES
2 NO -- SKIP TO Q. 10 *120*

8. About how long ago did you stop drinking coffee?

1 WITHIN PAST 6 MONTHS
2 WITHIN PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE *121*

IF RESPONDENT DRANK ANY COFFEE, ASK:

9. Was this mostly the kind like Sanka without caffeine, or was it the regular kind that has caffeine in it? *122*

1 MOSTLY THE KIND LIKE SANKA
2 MOSTLY THE KIND WITH CAFFEINE
3 ABOUT THE SAME AMOUNT OF EACH
4 NOT SURE

10. During the past month, on the average, about how many cups or glasses of hot or iced tea did you drink each day?

1 NONE
2 LESS THAN ONE
3 1 OR 2 CUPS
4 3, 4, OR 5 CUPS
5 6 TO 10 CUPS
6 MORE THAN 10 CUPS
7 NOT SURE
→ SKIP TO Q. 13 *123*

IF "NONE" ON Q. 10, ASK:

11. Did you ever drink tea?

1 YES
2 NO -- SKIP TO Q. 13 *124*

IF "YES" ON Q. 11, ASK:

12. About how long ago did you stop drinking tea?

1 WITHIN PAST 6 MONTHS
2 WITHIN PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE *125*

13. The next questions are about alcoholic beverages -- beer, wine, and whiskey, or anything else to drink with alcohol in it. During the past month, on about how many days did you drink any alcoholic beverages?

1 ONE TO THREE DAYS
2 FOUR DAYS
3 FIVE TO TEN DAYS
4 ELEVEN TO TWENTY DAYS
5 21 OR MORE DAYS
6 EVERY DAY
→ SKIP TO Q. 16 *126*
7 NONE

IF "NONE" ON Q. 13, ASK:

14. Was there ever a time in the past when you drank any alcoholic beverages? Or have you always been a non-drinker?

1 ALWAYS A NON-DRINKER (SKIP TO Q. 20) *127*
2 DRANK IN THE PAST

15. When was the last time you had anything to drink?

1 WITHIN PAST 6 MONTHS
2 WITHIN PAST YEAR
3 MORE THAN A YEAR AGO
4 NOT SURE
128
→ SKIP TO Q. 20

16. On the days that you drink, about how many drinks do you have on the average day? (BY A DRINK, WE MEAN THE EQUIVALENT OF A CAN OF BEER, A GLASS OF WINE, OR A SHOT GLASS OF HARD LIQUOR. IF RESPONSE OVERLAPS CATEGORIES, CIRCLE THE HIGHER OF THE TWO.)

1 ONE OR TWO
2 THREE OR FOUR
3 FIVE OR SIX
4 SEVEN OR EIGHT
5 NINE, TEN, ELEVEN
6 TWELVE OR MORE
7 NOT SURE
129

17. Now think back over the past month and try to remember the times when you had the most to drink. About how many drinks did you have at that time? (IF RESPONSE OVERLAPS CATEGORIES, CIRCLE HIGHER ONE.)

1 ONE OR TWO → SKIP TO Q. 19
2 THREE OR FOUR
3 FIVE OR SIX *130*
4 SEVEN OR EIGHT
5 NINE, TEN, ELEVEN
6 TWELVE OR MORE
7 NOT SURE → SKIP TO Q. 19

IF RESPONDENT HAD FIVE DRINKS OR MORE ON Q. 17, ASK:

18. During the past month, about how many different times did you have five or more drinks?

1 NO TIMES
2 ONE OR TWO TIMES
3 THREE OR FOUR TIMES *131*
4 FIVE OR MORE TIMES
5 DON'T REMEMBER

19. When you drink, what do you usually drink -- wine, beer, or liquor?

1 WINE
2 BEER *132*
3 LIQUOR
4 COMBINATIONS OF SAME

20. (SEE INTERVIEWER INSTRUCTIONS FOR A GUIDE TO PRONOUNCING THE NAMES THAT FOLLOW.) I am going to read you the names of some drugs or drug types. After I read each one, just tell me if you have ever heard of it. The first one is heroin. Have you ever heard of heroin? (ASK ABOUT EACH IN TURN, AND RECORD BELOW.)

	EVER HEARD OF?			
	YES	NO	NOT SURE	
a. Heroin	1	2	3	*133*
b. Marihuana	1	2	3	
c. Barbiturates	1	2	3	
d. LSD	1	2	3	
e. Methadone	1	2	3	*137*
f. Cocaine	1	2	3	
g. Amphetamines	1	2	3	
h. Tranquilizers	1	2	3	
i. Opium	1	2	3	*141*

HAND RESPONDENT CARD A

21. Please read this list and tell me which things you think are addictive. That is, anybody who uses it regularly becomes physically and psychologically dependent on it and can't get along without it. Just answer for those that you have heard about. (CIRCLE NUMBERS FOR AS MANY AS APPLY.)

1 HEROIN
2 ALCOHOL
3 MARIHUANA
4 TOBACCO *142*
5 BARBITURATES
6 AMPHETAMINES
7 COCAINE
8 METHADONE
9 NO OPINION

TAKE BACK CARD A, AND HAND RESPONDENT CARD B

22a. Please look at the names on this card. About how many of them have you heard of from experience or advertising or anything?

_____ ESTIMATED NUMBER
X NONE

143-44

TAKE BACK CARD B, AND HAND RESPONDENT CARD C

22b. About how many of <u>these</u> have you heard of from experience or advertising or anything?

_____ ESTIMATED NUMBER
X NONE

145-46

TAKE BACK CARD C, AND HAND RESPONDENT CARD D

22c. About how many of <u>these</u> have you heard of from experience or advertising or anything?

_____ ESTIMATED NUMBER
X NONE

147

TAKE BACK CARD D, AND HAND RESPONDENT CARD E

22d. About how many of <u>these</u> have you heard of from experience or advertising or anything?

_____ ESTIMATED NUMBER
X NONE

148-49

TAKE BACK CARD E

23. These next questions are about some different pills and drugs that you can buy in a drugstore without a prescription. In the past year, did you ever take any aspirin, or Alka-Seltzer, or other things that people take for headaches or fever or upset stomach?

1 YES
2 NO
3 DON'T REMEMBER

150

HAND RESPONDENT CARD B

24. Here are some <u>other</u> kinds of pills or drugs that you can get without a prescription. As you can see, they include sleeping pills, stimulants, pain killers, and cough syrups. Besides taking these kinds of things as medicines, some people take them just to see how they work or to enjoy the feeling.

	<u>YES</u>	<u>NO</u>	<u>NOT SURE</u>	
a. Did you ever take anything that you can buy without a prescription just to see what it was like and how it would work?	1	2	3	*151*
b. Did you ever take anything that you can buy without a prescription just to enjoy the feeling it gives you?	1	2	3	*152*
c. Did you ever take anything that you can buy without a prescription for some <u>other</u> non-medical reason, and not because you needed it?	1	2	3	*153*

INTERVIEWER: IF "NO" ON ALL THREE ABOVE, SKIP TO Q. 29. IF ANY <u>YESES</u> OR <u>NOT SURES</u>, GO ON TO Q. 25.

25. About how long ago was the first time you took anything you could buy without a prescription for non-medical reasons?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

154

26. About how long ago was the most recent time you took anything you could buy without a prescription for non-medical reasons?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

→ SKIP TO Q. 29

155

27. During the past month, on about how many different days did you use any of these things for non-medical reasons?

NUMBER OF DAYS _____
X DON'T KNOW

156-57

28. When it comes to using these things for non-medical reasons, do you think of yourself as a regular user or only an occasional user?

1 REGULAR USER
2 REGULAR USER ("BUT CAN'T ALWAYS GET IT" VOLUNTEERED)
3 OCCASIONAL USER
4 NON-USER (VOLUNTEERED)
5 NOT SURE

158

TAKE BACK CARD B, AND HAND RESPONDENT CARD C

29. Please look at the pills and read what it says at the top of the card. (PAUSE.) These are barbiturates and other sedatives that doctors prescribe to calm people down during the day, or to help them sleep at night, or sometimes for other uses.

About how long ago was the first time you had any of these pills or other pills like them prescribed for you by a doctor?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER -- SKIP TO Q. 32

159

30. About how long ago was the most recent time you took any of these pills or other pills like them prescribed for you by a doctor?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

160

→ SKIP TO Q. 32

31. What are the names of the pills you took that were prescribed by a doctor? Just give me the number from the card. Or if it's not on the card, do you know its name?

1 BUTISOL, BUTICAPS
2 CARBRITAL
3 AMYTAL
4 PLEXONAL
5 ESKABARB
6 ALURATE
7 PHENOBARBITAL
8 AMOBARBITAL
9 SECONAL
10 NEMBUTAL
11 TUINAL
12 ETHOBRAL
13 DALMANE
14 PLACIDYL
15 PENTOBARBITAL
16 SECOBARBITAL
17 DORIDEN
18 NOLUDAR
19 PAREST
20 QUAALUDE
21 SOPOR
22 METHAQUALONE
23 NOT SURE
24 OTHER (specify): _____

161-63

32. Now please look at all the pills again. (PAUSE.) People sometimes use these on their own, to help relax or just to feel good. These pills are sometimes called "downs" or "downers."

	YES	NO	NOT SURE	
a. Did you ever take any of these kinds of pills just to see what it was like and how it would work?	1	2	3	*164*
b. Did you ever take any of these kinds of pills just to enjoy the feeling they give you?	1	2	3	*165*
c. Did you ever take any of these pills for some other non-medical reason, and not because you needed it?	1	2	3	*166*

INTERVIEWER: IF "NO" ON ALL THREE ABOVE, SKIP TO Q. 38. IF ANY YESES OR NOT SURES, GO ON TO Q. 33.

33. About how long ago was the first time you took any of these pills (or other pills like them) for any of the reasons just mentioned?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

167

34. When was the most recent time you took any of these for non-medical reasons?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

→ SKIP TO Q. 38

168

35. Which of the pills on the card did you take for non-medical reasons during the past month? Just tell me their numbers. Or if it's not on the card, do you know its name?

1 BUTISOL, BUTICAPS
2 CARBRITAL
3 AMYTAL
4 PLEXONAL
5 ESKABARB
6 ALURATE
7 PHENOBARBITAL
8 AMOBARBITAL
9 SECONAL
10 NEMBUTAL
11 TUINAL
12 ETHOBRAL
13 DALMANE
14 PLACIDYL
15 PENTOBARBITAL
16 SECOBARBITAL
17 DORIDEN
18 NOLUDAR
19 PAREST
20 QUAALUDE
21 SOPOR
22 METHAQUALONE
23 NOT SURE
24 OTHER (specify):_____

169-71

36. During the past month, on about how many different days did you use any of these things for non-medical reasons?

NUMBER OF DAYS _____
X DON'T KNOW

172-73

37. When it comes to using these pills for non-medical reasons, do you think of yourself as a regular user or only an occasional user?

1 REGULAR USER
2 REGULAR USER ("BUT CAN'T ALWAYS GET IT" VOLUNTEERED)
3 OCCASIONAL USER
4 NON-USER (VOLUNTEERED)
5 NOT SURE

174

TAKE BACK CARD C, AND HAND RESPONDENT CARD D

38. These are tranquilizers, and doctors sometimes prescribe them to calm people down, quiet their nerves, or relax their muscles.

About how long ago was the first time you had any of these pills or other pills like them prescribed for you by a doctor?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER -- SKIP TO Q. 41

175

39. About how long ago was the most recent time you took any of these pills or other pills like them prescribed for you by a doctor?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

205

→ SKIP TO Q. 41

40. What are the names of the pills you took that were prescribed by a doctor? Just tell me their numbers from the card. Or if it's not on the card, do you know its name?

1 VALIUM
2 LIBRIUM, LIBRITABS
3 EQUANIL
4 SERAX
5 ATARAX
6 TRANXENE
7 VISTARIL
8 MILTOWN, MEPROSPAN, MEPROTABS
9 TYBATRAN
10 MEPROBAMATE
11 NOT SURE
12 OTHER (specify): _____

206

41. Now please look again at all the pills on the card.

	YES	NO	NOT SURE	
a. Did you ever take any of these kinds of pills just to see what it was like and how it would work?	1	2	3	207
b. Did you ever take any of these kinds of pills just to enjoy the feeling they give you?	1	2	3	208
c. Did you ever take any of these kinds of pills for some other non-medical reason, and not because you needed it?	1	2	3	209

INTERVIEWER: IF "NO" ON ALL THREE ABOVE, SKIP TO Q. 47. IF ANY YESES OR NOT SURES, GO ON TO Q. 42.

42. About how long ago was the first time you took any of these pills (or other pills like them) for any of the reasons just mentioned?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

210

43. About how long ago was the most recent time you took any of these pills for non-medical reasons?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

→ SKIP TO Q. 47

211

44. Which of these pills did you take for non-medical reasons during the past month? Just tell me their numbers from the card. Or if it's not on the card, do you know its name?

1 VALIUM
2 LIBRIUM, LIBRITABS
3 EQUANIL
4 SERAX
5 ATARAX
6 TRANXENE
7 VISTARIL
8 MILTOWN, MEPROSPAN, MEPROTABS
9 TYBATRAN
10 MEPROBAMATE
11 NOT SURE
12 OTHER (specify):_____

212

45. During the past month, on about how many different days did you use any of these things for non-medical reasons?

NUMBER OF DAYS _____
X DON'T KNOW

213-14

46. When it comes to using these pills for non-medical reasons, do you think of yourself as a regular user or only an occasional user?

1 REGULAR USER
2 REGULAR USER ("BUT CAN'T ALWAYS GET THEM" VOLUNTEERED)
3 OCCASIONAL USER
4 NON-USER (VOLUNTEERED)
5 NOT SURE

215

TAKE BACK CARD D, AND HAND RESPONDENT CARD E

47. These are pills that doctors sometimes prescribe for losing weight. They also can make people feel more wide-awake, peppy, or alert.

About how long ago was the first time you had any of these pills or other pills like them prescribed for you by a doctor?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER -- SKIP TO Q. 50

216

48. About how long ago was the most recent time you took any of these pills or others like them prescribed for you by a doctor?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

217

→ SKIP TO Q. 50

49. What are the names of the pills you took that were prescribed by a doctor? Just tell me the numbers from the card. Or if it's not on the card, do you know its name?

1 ESKATROL	9 BENZEDRINE	18 RITALIN
2 DEXAMYL	10 PONDIMIN	19 TENUATE
3 BIPHETAMINE	11 DIDREX	20 IONAMIN
4 DEXEDRINE	12 PLEGINE	21 PRELUDIN
5 DESOXYN	13 BAMADEX	22 TEPANIL
6 DESBUTAL	14 AMBAR	23 PRE-SATE
7 OBEDRIN	15 BIPHETAMINE-T	24 CYLERT
8 METHEDRINE	16 DEXTRO-AMPHETAMINE	25 NOT SURE
	17 MERATRAN	26 OTHER (specify):

218-20

50. Now please look at all the pills on the card. They are sometimes called "ups" or "uppers," "speed," or "bennies."

	YES	NO	NOT SURE	
a. Did you ever take any of these kinds of pills just to see what it was like and how it would work?	1	2	3	*221*
b. Did you ever take any of these kinds of pills just to enjoy the feeling they give you?	1	2	3	*222*
c. Did you ever take any of these kinds of pills for some other non-medical reason, and not because you needed it?	1	2	3	*223*

INTERVIEWER: IF "NO" ON ALL THREE ABOVE, SKIP TO Q. 57. IF ANY YESES OR NOT SURES, GO ON TO Q. 51.

51. About how long ago was the first time you took any of these pills (or other pills like them) for any of the reasons just mentioned?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

224

52. When was the most recent time you took any of these pills for non-medical reasons?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE

225

→ SKIP TO Q. 57

53. Which of these pills did you take for non-medical reasons during the past month? Just give me the number from the card. Or if it's not on the card, do you know its name?

1 ESKATROL
2 DEXAMYL
3 BIPHETAMINE
4 DEXEDRINE
5 DESOXYN
6 DESBUTAL
7 OBEDRIN
8 METHEDRINE
9 BENZEDRINE
10 PONDIMIN
11 DIDREX
12 PLEGINE
13 BAMADEX
14 AMBAR
15 BIPHETAMINE-T
16 DEXTRO-AMPHETAMINE
17 MERATRAN
18 RITALIN
19 TENUATE
20 IONAMIN
21 PRELUDIN
22 TEPANIL
23 PRE-SATE
24 CYLERT
25 NOT SURE
26 OTHER (specify): _____

226-28

54. During the past month, on about how many different days did you use any of these things for non-medical reasons?

NUMBER OF DAYS _____
X DON'T KNOW

229-30

55. When it comes to using these pills for non-medical reasons, do you think of yourself as a regular user or only an occasional user?

1 REGULAR USER
2 REGULAR USER ("BUT CAN'T ALWAYS GET THEM" VOLUNTEERED)
3 OCCASIONAL USER
4 NON-USER (VOLUNTEERED)
5 NOT SURE

231

56. Have you ever taken amphetamines with a needle?

1 YES
2 NO

232

TAKE BACK CARD E

57. These next questions are to get your opinions about another substance, marihuana, which is sometimes called grass or pot. I'm going to read you five statements about marihuana. After I read each one, please tell me if you mostly agree with it or mostly disagree with it. (ASK AFTER EACH ONE AS NEEDED: Do you mostly agree or mostly disagree with that statement?)

	MOSTLY AGREE	MOSTLY DISAGREE	OTHER ANSWER	NOT SURE	
a. You can try marihuana once or twice with no bad effects.	1	2	3	4	*233*
b. You can use marihuana without ever becoming addicted to it.	1	2	3	4	*234*
c. Marihuana makes people want to try stronger things like heroin.	1	2	3	4	*235*
d. Marihuana is probably used a lot in this neighborhood.	1	2	3	4	*236*
e. Most marihuana users in this country are from minority groups.	1	2	3	4	*237*

HAND RESPONDENT SELF-ADMINISTERED QUESTIONNAIRE, LARGE RETURN ENVELOPE, AND PEN.

TELL RESPONDENT: Here is a brief questionnaire on marihuana to answer by yourself.

When you finish, I will ask you to put the questionnaire in the envelope. I will never know your answers, and no one else will ever know your answers.

I have my own blank copy of the questions in case you want to ask me about any of them.

At the top of the front page, it shows you how to record your answers. You can answer some questions by writing in a number. For the rest, just draw a circle around the number in front of the answer which fits best.

INTERVIEWER: WHILE YOU ARE WAITING, MAKE SURE THAT LOCATION NUMBER AND HOUSING UNIT ARE WRITTEN ON THE FIRST PAGE OF THIS BOOKLET.

WHEN RESPONDENT IS FINISHED, SAY:

- Did you answer the questions on both sides of the sheet? (IF NOT, WAIT WHILE RESPONDENT DOES SO.)
- Did you answer all of the questions? There is an answer category for everybody on every question, regardless of whether or not you have used marihuana.
- Did you show your answers by circling numbers or filling in the blanks? (IF RESPONDENT MADE CHECK MARKS OR "X's," ASK HIM OR HER TO CIRCLE NUMBERS ALSO.)

WHEN YOU ARE SATISFIED THAT THE WORK WAS DONE RIGHT, ASK THE RESPONDENT TO PUT THE COMPLETED QUESTIONNAIRE IN THE ENVELOPE.

HAND RESPONDENT THE PINK ANSWER SHEET (#1) AND READ THE FOLLOWING:

The next questions are set up so that I will not know what answers you give. First, the answer sheet you have allows you to show your answers to my questions, without you saying them out loud.

Second, there is a place for you to answer every question. That way people who do not use these things take the same amount of time to answer as the people who do use them.

Third, when you are through with the answer sheet, please put it in the envelope you have.

Now let's do the first one. These questions are about hashish, or hash, as many people call it. After I read the question, don't tell me the answer; just write it in the space.

Question 1. About how old were you when you first knew someone who had tried hash?

Write your age in the space -- the age when you first knew someone who had tried hash. If you never knew someone who tried hash, just draw a circle around the "X" in front of the words "never knew anyone."

WAIT AND GIVE RESPONDENT TIME TO WRITE AN ANSWER. DO NOT LOOK DIRECTLY AT THE RESPONDENT OR APPEAR TO TRY TO SEE WHAT HE OR SHE WRITES.

Here is Question 2. About how old were you when you first had the chance to try hash, if you wanted to?

AGAIN, WAIT FOR RESPONDENT TO WRITE HIS ANSWER BEFORE GOING ON TO QUESTION 3.

Question 3. Did you try hash the first time you had the chance, or did you try it later?

Circle one of the numbers that goes with Question 3 -- the number that comes closest to your answer.

CONTINUE IN THIS WAY WITH ALL THE REST OF THE QUESTIONS IN THIS SECTION.

SH4. How old were you the first time you tried hash?

SH5. About how long ago was the first time you tried hash?

SH6. When was the most recent time you used hash?

SH7. During the past month, on about how many different days did you use hash?

SH8. Just roughly, about how many times in your life have you used hash?

SH9. When it comes to using hash, do you think of yourself as a regular user, an occasional user, or a non-user?

HAVE RESPONDENT PUT COMPLETED PINK ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE YELLOW (#2) ANSWER SHEET AND SAY:

These questions are about glue or some other substances that people inhale for kicks or to get high. Besides glue, there are things like gasoline, some aerosols, nitrous oxide, amyl nitrite which is also called "poppers," and other solvents. There is a list of them printed at the top of your answer sheet.

G1. About how old were you when you first knew someone who sniffed glue or some other inhalant?

G2. About how old were you when you first had the chance to sniff glue or some other inhalant if you wanted to?

G3. Did you try to sniff glue or some other inhalant the first time you had the chance, or did you try it later?

G4. How old were you the first time you tried to sniff glue or some other inhalant?

G5. About how long ago was the first time you tried sniffing glue or some other inhalant?

G6. When was the most recent time you sniffed glue or some other inhalant?

G7. During the past month, on about how many different days did you sniff glue or some other inhalant?

G8. Just roughly, about how many times in your life have you sniffed glue or some other inhalant?

G9. When it comes to sniffing glue or some other inhalant, do you think of yourself as a regular user, an occasional user, or a non-user?

HAVE RESPONDENT PUT THE YELLOW (#2) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE GREEN (#3) ANSWER SHEET. ASK THE NEXT SET OF QUESTIONS AS BEFORE.

INTERVIEWER: PLEASE REMEMBER TO SAY "QUESTION 1," "QUESTION 2," AND NOT JUST "1," OR "2," BY ITSELF.

C1. About how old were you when you first knew someone who had tried cocaine?

C2. About how old were you when you first had the chance to try cocaine if you wanted to?

C3. Did you try cocaine the first time you had the chance, or did you try it later?

C4. How old were you the first time you tried cocaine?

C5. About how long ago was the first time you tried cocaine?

C6. When was the most recent time you used cocaine?

C7. During the past month, on about how many different days did you use cocaine?

C8. Just roughly, about how many times in your life have you used cocaine?

C9. When it comes to using cocaine, do you think of yourself as a regular user, an occasional user, or a non-user?

HAVE RESPONDENT PUT COMPLETED GREEN (#3) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE GOLD (#4) ANSWER SHEET AND SAY:

The next questions are about LSD and other hallucinogens like mescaline, peyote, psilocybin, and DMT. There is a list of them printed at the top of your answer sheet.

L1. About how old were you when you first knew someone who had tried LSD or other hallucinogens?

L2. About how old were you when you first had the chance to try LSD or other hallucinogens?

L3. Did you try LSD or other hallucinogens the first time you had the chance, or did you try it later?

L4. How old were you the first time you tried LSD or other hallucinogens?

L5. About how long ago was the first time you tried LSD or other hallucinogens?

L6. When was the most recent time you tried LSD or other hallucinogens?

L7. During the past month, on about how many different days did you use LSD or other hallucinogens?

L8. Just roughly, about how many times in your life have you used LSD or other hallucinogens?

L9. When it comes to using LSD or other hallucinogens, do you think of yourself as a regular user, an occasional user, or a non-user?

L10. This next question is about something we have not talked about yet. Did you ever hear of something called PCP, which is also called "Angel Dust?" Please show your answer on the answer sheet.

L11. Have you ever used PCP or Angel Dust?

HAVE RESPONDENT PUT COMPLETED GOLD (#4) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE GRAY (#5) ANSWER SHEET AND SAY:

These next questions are about opium or other drugs containing opium and its derivatives. They are usually in the form of prescription cough syrups, pain killers, or stomach medicines -- things like morphine, codeine, dilaudid, demerol, and paregoric. Although these are frequently prescribed for medical reasons, these questions ask about the use of these drugs for non-medical purposes -- that is, for kicks or for highs, to gain insight, or for pleasure. A list of these opiates is printed at the top of your answer sheet.

01. About how old were you when you first knew someone who had tried any of these opiates for non-medical reasons?

02. About how old were you when you first had the chance to try an opiate if you wanted to?

03. Did you try an opiate for non-medical reasons the first time you had the chance, or did you try it later?

04. How old were you the first time you tried an opiate for non-medical reasons?

05. About how long ago was the first time you tried an opiate for non-medical reasons?

06. When was the most recent time you used any of these opiates for non-medical reasons?

07. During the past month, on about how many different days did you use any of these opiates for non-medical reasons?

08. Just roughly, about how many times in your life have you used an opiate for non-medical reasons?

09. When it comes to using these opiates, do you think of yourself as a regular user, an occasional user, or a non-user?

010. Which of these things on that list have you used at some time for non-medical reasons? You may circle more than one.

HAVE RESPONDENT PUT COMPLETED GRAY (#5) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE BLUE (#6) ANSWER SHEET.

H1. About how old were you when you first knew someone who had tried heroin?

H2. About how old were you when you first had the chance to try heroin if you wanted to?

H3. Did you try heroin the first time you had the chance, or did you try it later?

H4. How old were you the first time you tried heroin?

H5. About how long ago was the first time you tried heroin?

H6. When was the most recent time you used heroin?

H7. During the past month, on about how many different days did you use heroin?

H8. Just roughly, about how many times in your life have you used heroin?

H9. When it comes to using heroin, do you think of yourself as a regular user, an occasional user, or a non-user?

H10. How many of your close friends, if any, know for sure that you have used heroin?

H11. Have you ever taken heroin with a needle?

H12. This next question is about a different substance, methadone. Have you ever used methadone when it was <u>not</u> part of a treatment program?

HAVE RESPONDENT PUT COMPLETED BLUE (#6) ANSWER SHEET IN THE ENVELOPE. THEN GIVE HIM THE <u>IVORY</u> (#7) ANSWER SHEET AND SAY:

SQ1. This next question is about the order in which people try different drugs over the course of their lives. We would like to know which drug you tried first, which drug you tried second, and so on.

a. Look at the list of drugs in box number one, and put an "X" next to the drug you tried <u>first</u> in your lifetime. If you never tried <u>any</u> of the drugs on this list, put an "X" next to the words "never tried any of these." (PAUSE WHILE RESPONDENT MARKS ANSWER.)

b. Now go to box number two, and put an "X" next to the drug you tried <u>second</u> in your lifetime. (INTERVIEWER: READ NEXT PART SLOWLY, WITH EMPHASIS.) If you tried just one drug on the list, and have already marked an "X" next to the name of that drug, and that is the <u>only</u> drug on the list which you have ever tried, then put an "X" next to the words "already marked all I have tried." If you never tried <u>any</u> of the drugs on this list, put an "X" next to the words "never tried any of these." (PAUSE WHILE RESPONDENT MARKS ANSWER.)

c. Now go to box number three, and put an "X" next to the drug you tried <u>third</u> in your lifetime. (INTERVIEWER: READ NEXT PART SLOWLY, WITH EMPHASIS.) If you tried just <u>one or two</u> drugs on this list and have already marked an "X" next to the name of those drugs, and those are the <u>only</u> drugs on the list which you have ever tried, then put an "X" next to the words "already marked all I have tried." If you never tried <u>any</u> of the drugs on this list, put an "X" next to the words "never tried any of these." (PAUSE WHILE RESPONDENT MARKS ANSWER.)

d-e. Now go on to "tried fourth" and "tried fifth" and do the same thing. (PAUSE WHILE RESPONDENT MARKS REMAINING ANSWERS.)

HAVE RESPONDENT PUT THE LAST ANSWER SHEET (IVORY #7) IN THE ENVELOPE. MAKE SURE THE ENVELOPE STAYS OPEN AND IS NOT SEALED UNTIL THE VERY END, BECAUSE YOU STILL HAVE TO PUT THE QUESTIONNAIRE IN IT AT THE END OF THE INTERVIEW.

THEN GO ON TO QUESTION 58 ON THE NEXT PAGE.

HAND RESPONDENT CARD F

58. Please answer this question as though everything on the list were legal and available. Regardless of what you are doing now, please read over the list and tell me which of the following you would use, if they were legal and available. (CIRCLE NUMBERS FOR AS MANY AS APPLY.)

1 MARIHUANA
2 HASH
3 COCAINE
4 LSD, MESCALINE, PEYOTE, PSILOCYBIN, DMT
5 HEROIN
6 METHADONE
7 MORPHINE, OPIUM, OTHER OPIATES
8 NOT SURE
9 NONE OF THEM

238

TAKE BACK CARD F, AND HAND RESPONDENT CARD G

59. We would like you to consider five possible things that could happen to marihuana in the future. Please read over this card which has the five different things on it; then I would like to ask you about them. (GIVE RESPONDENT PLENTY OF TIME TO READ.)

Now, let's go over these possibilities one at a time. I'll review each one with you before I ask about it. The first possibility is that marihuana becomes a regular commercial product. It is sold in stores and in vending machines. It comes under a variety of brand names. It is widely advertised.

Please tell me the statement at the bottom of the card that comes closest to how you would feel about this possibility.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

239

60. The second possibility is that marihuana becomes a closely regulated product. Again, I'll review this one with you. It is sold only in government licensed stores. You have to be 18 or older to buy it. No advertising is permitted, and no brand names. Just one name, "Marihuana." The government sets quality standards.

Please tell me the statement at the bottom of the card that comes closest to how you would feel about this possibility.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

240

61. Here is the third possibility. Possession of marihuana for personal use is not prohibited. You can have only as much marihuana as you can use yourself. Sharing it with friends is also acceptable. Selling marihuana is a crime, and selling it to anyone under 18 is especially serious.

Please tell me the statement at the bottom of the card that comes closest to how you would feel about this possibility.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

241

62. The fourth possibility is that having, using, or selling marihuana is illegal. It is not legally available to anyone. Police can make arrests for sale or possession.

Please tell me the statement at the bottom of the card that comes closest to how you feel about this situation.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

242

63. The fifth possibility is that marihuana laws and their enforcement become very strict. There are very tough penalties for having, using, or selling it. The full force of the law is used to find people who have it or sell it. The courts would make sure that persons found guilty are punished and not let off easily.

Please tell me the statement at the bottom of the card that comes closest to how you would feel about this possibility happening.

A-1 AN IDEAL SITUATION
B-2 A GOOD SOLUTION BUT NOT IDEAL
C-3 ACCEPTABLE TO GIVE A TRY
D-4 NOT VERY ACCEPTABLE
E-5 NO GOOD AT ALL
6 NO OPINION, NO ANSWER

243

64. Now, please have another look at the card with the five possibilities on it that we have just talked about. Tell me which <u>one</u> of these five you think would be best for the country. (PAUSE.) Now, tell me your <u>second</u> choice. (PAUSE.) Last, please tell me which one you think would be <u>worst</u> for the country.

	BEST	SECOND CHOICE	WORST
FIRST POSSIBILITY	1	1	1
SECOND POSSIBILITY	2	2	2
THIRD POSSIBILITY	3	3	3
FOURTH POSSIBILITY	4	4	4
FIFTH POSSIBILITY	5	5	5
NO CHOICES MADE	X	X	X

244-46

TAKE BACK CARD G

These questions are for statistical purposes only, to help us analyze the results of the study.

65. INTERVIEWER: RECORD SEX OF RESPONDENT.
1 MALE
2 FEMALE
247

66. Would you please tell me how old you are?
_____ AGE
248-49
X NOT GIVEN

67. Are you of Spanish origin, that is, are you from a Spanish-American family?
1 YES
2 NO -- SKIP TO Q. 70
250

IF "YES" ON Q. 67, ASK:

68. Which of these types of Spanish-Americans best describes you: Puerto Rican, Mexican, or some other Spanish-American group?
1 PUERTO RICAN → SKIP TO Q. 70
2 MEXICAN → SKIP TO Q. 70
3 SOME OTHER GROUP
251

IF "SOME OTHER GROUP" ON Q. 68, ASK:

69. Which one is that, please? (RECORD ANSWER ON LINE BELOW.)

_____
252-53

HAND RESPONDENT CARD H

70. Which of the groups on this card best describes your family origin?
1 AMERICAN INDIAN
2 ALASKAN NATIVE
3 ASIAN
4 PACIFIC ISLANDER
5 WHITE
6 BLACK
7 OTHER: _____ (SPECIFY)
8 NO ANSWER
254

TAKE BACK CARD H

INTERVIEWER: IF RESPONDENT IS AN ADULT, GO TO Q. 71 ON THIS PAGE.
IF RESPONDENT IS A YOUTH, GO TO Q. 94, TOP OF PAGE 25.

IF RESPONDENT IS AN ADULT:

71. Are you a student or taking any courses this year in a college or other kind of school?
1 YES
2 NO → SKIP TO Q. 74
255

IF "YES" ON Q. 71, ASK:

72. Is that a college or a vocational school or what?
1 COLLEGE
2 COMMUNITY COLLEGE
3 VOCATIONAL SCHOOL
4 ADULT SCHOOL
5 HIGH SCHOOL
6 OTHER (specify): _____
256

_____

73. Are you a full time student or a part time student?
1 FULL TIME
2 PART TIME
257

74. What is the last grade that you completed in school?

1 NO SCHOOLING
2 ELEMENTARY SCHOOL -- 8TH GRADE OR LESS
3 SOME HIGH SCHOOL
4 HIGH SCHOOL GRADUATE
5 SOME VOCATIONAL OR TECHNICAL SCHOOL
6 SOME COLLEGE
7 COLLEGE GRADUATE OR BEYOND
8 NO ANSWER

258

75. Are you or anyone else who lives here a veteran of the Armed Forces?

1 YES, RESPONDENT IS
2 YES, BOTH RESPONDENT AND SOME OTHER ADULT
3 YES, SOME OTHER ADULT IS BUT NOT RESPONDENT → SKIP TO Q. 77
4 NO, NO ONE IS

259

IF "RESPONDENT" OR "BOTH" ON Q. 75, ASK:

76. Did you ever serve in Vietnam?

1 YES
2 NO

260

77. Do you have any children under age 18 living here with you?

1 YES
2 NO → SKIP TO Q. 81

261

IF "YES" ON Q. 77, ASK:

78. How many children are there here who are under six years of age?

_____ (NUMBER)

262

79. How many who are between six and twelve years old?

_____ (NUMBER)

263

80. How many who are thirteen through seventeen years old?

_____ (NUMBER)

264

81. Do you have any children who are living with someone else or who are away from home at school or college?

1 YES
2 NO

265

82. Are you married, widowed, separated, divorced, or never married?

1 MARRIED
2 WIDOWED
3 DIVORCED OR SEPARATED
4 NEVER MARRIED
5 NO ANSWER

266

83. Are you employed at the present time, either full time or part time?

1 YES
2 NO → HAND RESPONDENT CARD I

Which of the following best describes you? *267*

1 HOUSEWIFE
2 STUDENT
3 UNEMPLOYED
4 RETIRED
5 DISABLED *268*

TAKE BACK CARD I

SKIP TO Q. 88

IF "YES" ON Q. 83, ASK:

84. What is your job title? _____

85. Could you please tell me what kind of work you do? (INTERVIEWER: GET ENOUGH DETAIL SO WE CAN CLASSIFY JOB.)

_____ *269-70*

86. What kind of business is that? What do they make or do where you work?

_____

IF NOT CLEAR WHETHER SELF-EMPLOYED, ASK:

87. Are you self-employed? 1 YES 2 NO *271*

88. Are you the chief wage earner in this household?

1 YES -- SKIP TO Q. 93
2 NO -- ASK Q's. 89, 90, 91 *272*
3 NO WAGE EARNER IN THIS HOUSEHOLD -- SKIP TO Q. 93

IF SOMEONE ELSE (NOT RESPONDENT) IS CHIEF WAGE EARNER, ASK:

89. What is his (her) job title? _____

90. What kind of work does the chief wage earner do? (INTERVIEWER: GET ENOUGH DETAIL SO WE CAN CLASSIFY JOB.)

_____ *273-74*

91. What kind of business is that? What do they make or do where he (she) works?

_____

IF NOT CLEAR WHETHER SELF-EMPLOYED, ASK:

92. Is he (she) self-employed? 1 YES 2 NO *275*

HAND RESPONDENT CARD J

93. For statistical purposes, we need to know which of these groups includes your total family income before taxes for last year. Include your own income and that of any members of your immediate family who are living with you. Just give me the number.

	ANNUAL	WEEKLY
1	NO INCOME	
2	UNDER $2,000	(UNDER $39)
3	$2,000 - $2,999	($39 - $57)
4	$3,000 - $4,999	($58 - $96)
5	$5,000 - $6,999	($97 - $134)
6	$7,000 - $9,999	($135 - $192)
7	$10,000 - $14,999	($193 - $288)
8	$15,000 - $24,999	($289 - $480)
9	$25,000 OR MORE	($481 OR MORE)
0	DON'T KNOW, REFUSED TO ANSWER	

276

TAKE BACK CARD J

THANK YOU VERY MUCH!

INTERVIEWER: NOW GO ON TO PAGE 26. FILL IT IN BY YOURSELF.

IF RESPONDENT IS A YOUTH:

94. Are you going to school this year?
1 YES
2 NO
305

IF "YES" ON Q. 94, ASK:

95. Do you go to school full time (that is, do you take a regular schedule of courses), or are you going to school less than full time?
1 FULL TIME
2 PART TIME
3 NOT SURE
306

96. What is the last grade that you completed in school?
1 SEVENTH GRADE OR LESS
2 EIGHTH GRADE
3 NINTH GRADE
4 TENTH GRADE
5 ELEVENTH GRADE
6 TWELFTH GRADE (HIGH SCHOOL GRADUATE)
7 BEYOND HIGH SCHOOL
8 NO ANSWER
307

97. How many brothers and sisters do you have who are older than you?
0 1 2 3 4 5 6 or more
308

98. Is the chief wage earner in this household employed at the present time, either full time or part time?
1 YES
2 NO →
309

HAND RESPONDENT CARD I

Which of the following best describes the chief wage earner?
1 HOUSEWIFE
2 STUDENT
3 UNEMPLOYED
4 RETIRED
5 DISABLED
310

TAKE BACK CARD I

TERMINATE INTERVIEW; THEN GO ON TO THE NEXT PAGE AND FILL IT IN BY YOURSELF.

IF "YES" ON Q. 98, ASK:

99. What is his (her) job title? _____ *311-12*

100. Could you please tell me what kind of work he (she) does? (INTERVIEWER: GET ENOUGH DETAIL SO WE CAN CLASSIFY JOB.

_____

101. What kind of business is that? What do they make or do there?

_____

IF NOT CLEAR WHETHER SELF-EMPLOYED, ASK:

102. Is he (she) self-employed?
1 YES
2 NO
313

THANK YOU VERY MUCH!

INTERVIEWER: NOW GO ON TO THE NEXT PAGE. FILL IT IN BY YOURSELF.

INTERVIEWER: THIS NEXT STEP IS VERY IMPORTANT. YOUR SIGNATURE ON THE FOLLOWING STATEMENT VERIFIES THAT YOU FOLLOWED INSTRUCTIONS FOR OBTAINING RESPONDENT CONSENT.

I have carried out the instructions for informing respondent (and respondent's parent, in the case of a youth) of his or her rights with respect to participating.

_____

INTERVIEWER SIGNATURE DATE

340-41

LENGTH OF INTERVIEW: _____ MINUTES INTERVIEWER I.D. #: _____ *342-45*

(BE SURE YOU HAVE FILLED IN LOCATION AND HOUSING UNIT NUMBERS ON FIRST PAGE.)

INTERVIEWER: NOW FILL IN THE FOLLOWING QUESTIONS BY YOURSELF.

INTERVIEWER: THIS FORM OF THE QUESTIONNAIRE GOES FROM Q. 102 ON THE PREVIOUS PAGE TO Q. 116 ON THIS PAGE. NOTHING IS MISSING.

116. What kind of area is this interview being conducted in?

1 IN A CITY OR TOWN *346*
2 SUBURBS OF A CITY OR TOWN
3 RURAL OR OTHER SUBURBAN AREA

117. Please estimate the respondent's understanding of the interview:

1 NO DIFFICULTY -- No language or reading problem
2 JUST A LITTLE DIFFICULTY -- Almost no language or reading problem
3 A FAIR AMOUNT OF DIFFICULTY -- Some language or reading problem *347*
4 A LOT OF DIFFICULTY -- Considerable language or reading problem

118. How cooperative is the respondent -- very cooperative, fairly cooperative, not too cooperative, or openly hostile?

1 VERY COOPERATIVE
2 FAIRLY COOPERATIVE
3 NOT TOO COOPERATIVE *348*
4 OPENLY HOSTILE

119. How can we improve this interview for the next time?

349-350

NOW CLOSE INTERVIEW BOOKLET. GIVE IT TO RESPONDENT TO PUT INTO THE LARGE ENVELOPE. ASK RESPONDENT TO SEAL ENVELOPE AND TO GO WITH YOU TO MAILBOX IF HE OR SHE WANTS TO.

BE SURE THAT VERIFICATION POSTCARD IS FILLED OUT BEFORE YOU LEAVE THE HOUSE.

MARIHUANA SELF-ADMINISTERED QUESTIONNAIRE

QUESTIONNAIRE

Show your answers by circling a number next to the answer that fits.

Example: Do you ever watch news on television? (1) YES 2 NO

OR, some questions ask you to write in a number.

Example: How old were you when you got your first full-time job?

18 (estimated age)

1. About how old were you when you first knew someone who had tried marihuana?

_____(estimated age) *405-06*

X NEVER KNEW ANYONE WHO TRIED IT

2. About how old were you when you first had the chance to try marihuana if you wanted to?

_____(estimated age) *407-08*

X NEVER HAD THE CHANCE

3. Did you try marihuana the first time you had the chance or did you try it later?

1 TRIED IT AT FIRST CHANCE
2 TRIED IT AT A LATER TIME
3 NEVER TRIED IT *409*
4 NOT SURE, DON'T REMEMBER
X NEVER HAD THE CHANCE

4. How old were you the first time you tried marihuana?

_____(estimated age) *410-11*

X NEVER TRIED IT

5. About how long ago was the first time you tried marihuana?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO *412*
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

6. When was the most <u>recent</u> time that you used marihuana?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO *413*
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

PLEASE TURN PAGE OVER

7. During the past month, on about how many different days did you use marihuana?

_____(number of days) *414-15*

X NEVER USE IT

8. Just roughly, about how many times in your life have you used marihuana?

_____(number of times) *416-19*

X NEVER USED IT

9. When it comes to using marihuana, do you think of yourself as a regular user, an occasional user, or a non-user?

1 A REGULAR USER
2 AN OCCASIONAL USER *420*
3 A NON-USER

WHEN YOU ARE FINISHED, PLEASE TELL THE INTERVIEWER.

SEVEN DRUG ANSWER SHEETS

ANSWER SHEET #1

SH1. Age: _____ *421-22*
X NEVER KNEW ANYONE WHO TRIED IT

SH2. Age: _____ *423-24*
X NEVER HAD THE CHANCE

SH3. Try it first time?

1 TRIED IT AT FIRST CHANCE
2 TRIED IT AT A LATER DATE
3 NEVER TRIED IT *425*
4 NOT SURE, DON'T REMEMBER
X NEVER HAD THE CHANCE

SH4. Age: _____ *426-27*
X NEVER TRIED IT

SH5. First time?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO *428*
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

SH6. Most recent time?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO *429*
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

SH7. Number of days _____ *430-31*
X NEVER USE IT

SH8. Number of times _____ *432-34*
X NEVER USED IT

SH9. Kind of user?

1 REGULAR
2 OCCASIONAL *435*
3 NON-USER

GLUE, GASOLINE, SOME AEROSOLS, NITROUS OXIDE, AMYL NITRITE, "POPPERS," OTHER SOLVENTS

ANSWER SHEET #2

G1. Age: _____ *436-37*
X NEVER KNEW ANYONE WHO TRIED IT

G2. Age: _____ *438-39*
X NEVER HAD THE CHANCE

G3. Try it first time? *440*

1 TRIED IT AT FIRST CHANCE
2 TRIED IT AT A LATER DATE
3 NEVER TRIED IT
4 NOT SURE, DON'T REMEMBER
X NEVER HAD THE CHANCE

G4. Age: _____ *441-42*
X NEVER TRIED IT

GG5. First time? *443*

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

G6. Most recent time? *444*

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

G7. Number of days _____ *445-46*
X NEVER USE IT

G8. Number of times _____ *447-49*
X NEVER USED IT

G9. Kind of user? *450*

1 REGULAR
2 OCCASIONAL
3 NON-USER

ANSWER SHEET #3

C1. Age: _____ 451-52
X NEVER KNEW ANYONE WHO TRIED IT

C2. Age: _____ 453-54
X NEVER HAD THE CHANCE

C3. Try it first time?

1 TRIED IT AT FIRST CHANCE
2 TRIED IT AT A LATER DATE
3 NEVER TRIED IT 455
4 NOT SURE, DON'T REMEMBER
X NEVER HAD THE CHANCE

C4. Age: _____ 456-57
X NEVER TRIED IT

C5. First time?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO 458
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

C6. Most recent time?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO 459
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

C7. Number of days _____ 460-61
X NEVER USE IT

C8. Number of times _____ 462-64
X NEVER USED IT

C9. Kind of user?

1 REGULAR
2 OCCASIONAL 465
3 NON-USER

LSD, MESCALINE, PEYOTE, PSILOCYBIN, DMT

ANSWER SHEET #4

L1. Age: _____ *505-06*

X NEVER KNEW ANYONE WHO TRIED IT

L2. Age: _____ *507-08*

X NEVER HAD THE CHANCE

L3. Try it first time?

1 TRIED IT AT FIRST CHANCE
2 TRIED IT AT A LATER DATE
3 NEVER TRIED IT *509*
4 NOT SURE, DON'T REMEMBER
X NEVER HAD THE CHANCE

L4. Age: _____ *510-11*

X NEVER TRIED IT

L5. First time?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO *512*
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

L6. Most recent time?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO *513*
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

L7. Number of days? _____ *514-15*

X NEVER USE IT

L8. Number of times _____ *516-18*

X NEVER USED IT

L9. Kind of user?

1 REGULAR
2 OCCASIONAL *519*
3 NON-USER

L10. Heard of PCP or Angel Dust?

1 YES *520*
2 NO

L11. Ever used it?

1 YES
2 NO *521*
3 NEVER HEARD OF IT

OPIUM, CODEINE, COUGH SYRUP WITH CODEINE, DEMEROL, DILAUDID, HYCODAN, LAUDANUM, MORPHINE, PAREGORIC, TALWIN

ANSWER SHEET #5

01. Age: _____ 522-23

X NEVER KNEW ANYONE WHO TRIED IT

02. Age: _____ 524-25

X NEVER HAD THE CHANCE

03. Try it first time? 526

1 TRIED IT AT FIRST CHANCE
2 TRIED IT AT A LATER DATE
3 NEVER TRIED IT
4 NOT SURE, DON'T REMEMBER
X NEVER HAD THE CHANCE

04. Age: _____ 527-28

X NEVER TRIED IT

05. First time? 529

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

06. Most recent time? 530

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

07. Number of days? _____ 531-32

X NEVER USE IT

08. Number of times _____ 533-35

X NEVER USED IT

09. Kind of user? 536

1 REGULAR
2 OCCASIONAL
3 NON-USER

010. Which one? 537-38

1 OPIUM
2 CODEINE
3 COUGH SYRUP WITH CODEINE
4 DEMEROL
5 DILAUDID
6 HYCODAN
7 LAUDANUM
8 MORPHINE
9 PAREGORIC
10 TALWIN
11 OTHER (What?) _____
12 NONE OF THEM

ANSWER SHEET #6

H1. Age: _____ *539-40*

X NEVER KNEW ANYONE WHO TRIED IT

H2. Age: _____ *541-42*

X NEVER HAD THE CHANCE

H3. Try it first time?

1 TRIED IT AT FIRST CHANCE
2 TRIED IT AT A LATER DATE
3 NEVER TRIED IT *543*
4 NOT SURE, DON'T REMEMBER
X NEVER HAD THE CHANCE

H4. Age: _____ *544-45*

X NEVER TRIED IT

H5. First time?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO *546*
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

H6. Most recent time?

1 WITHIN THE PAST WEEK
2 WITHIN THE PAST MONTH
3 WITHIN THE PAST SIX MONTHS
4 SIX MONTHS TO A YEAR AGO
5 MORE THAN A YEAR AGO *547*
6 MORE THAN TWO YEARS AGO
7 MORE THAN FIVE YEARS AGO
8 NOT SURE
9 NEVER TRIED IT

H7. Number of days? _____ *548-49*

X NEVER USE IT

H8. Number of times _____ *550-52*

X NEVER USED IT

H9. Kind of user?

1 REGULAR
2 OCCASIONAL *553*
3 NON-USER

H10. _____(number of close friends who know) *554-55*

X NEVER USED IT

H11. How use?

1 YES
2 NO *556*
3 NEVER USED HEROIN

H12. Methadone use outside of treatment program?

1 YES *557*
2 NO

ANSWER SHEET #7

Tried first? 1

_____ COCAINE
_____ GLUE OR OTHER INHALANT
_____ HASHISH
_____ HEROIN *558*
_____ LSD OR OTHER HALLUCINOGEN
_____ MARIHUANA
_____ NEVER TRIED ANY OF THESE

Tried second? 2

_____ COCAINE
_____ GLUE OR OTHER INHALANT
_____ HASHISH
_____ HEROIN *559*
_____ LSD OR OTHER HALLUCINOGEN
_____ MARIHUANA
_____ ALREADY MARKED ALL I HAVE TRIED
_____ NEVER TRIED ANY OF THESE

Tried third? 3

_____ COCAINE
_____ GLUE OR OTHER INHALANT
_____ HASHISH
_____ HEROIN *560*
_____ LSD OR OTHER HALLUCINOGEN
_____ MARIHUANA
_____ ALREADY MARKED ALL I HAVE TRIED
_____ NEVER TRIED ANY OF THESE

Tried fourth? 4

_____ COCAINE
_____ GLUE OR OTHER INHALANT
_____ HASHISH
_____ HEROIN *561*
_____ LSD OR OTHER HALLUCINOGEN
_____ MARIHUANA
_____ ALREADY MARKED ALL I HAVE TRIED
_____ NEVER TRIED ANY OF THESE

Tried fifth? 5

_____ COCAINE
_____ GLUE OR OTHER INHALANT
_____ HASHISH
_____ HEROIN *562*
_____ LSD OR OTHER HALLUCINOGEN
_____ MARIHUANA
_____ ALREADY MARKED ALL I HAVE TRIED
_____ NEVER TRIED ANY OF THESE

EXHIBIT CARDS

CARD A

1. HEROIN

2. ALCOHOL

3. MARIHUANA

4. TOBACCO

5. BARBITURATES

6. AMPHETAMINES

7. COCAINE

8. METHADONE

1. COMPŌZ®
2. COPE®
3. NYTOL®
4. NERVINE®
5. SOMINEX®
6. SLEEP-EZE®
7. NŌ DŌZ®
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9. NO NOD®
10. CHERACOL COUGH SYRUP®
11. ROBITUSSIN COUGH SYRUP®
12. TERPIN-HYDRATE COUGH SYRUP®

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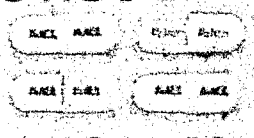
DOCTORS SOMETIMES PRESCRIBE THESE TO HELP RELAX DURING THE DAY AND TO GET A BETTER NIGHT'S SLEEP. PEOPLE ALSO USE THESE ON THEIR OWN--TO HELP RELAX AND JUST TO FEEL GOOD. THESE ARE BARBITURATES OR SEDATIVES AND ARE SOMETIMES CALLED "DOWNS" OR "DOWNERS."

1 BUTISOL®



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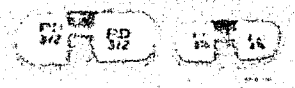
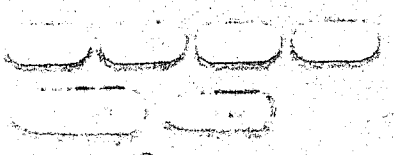
2 CARBRITAL®



3 AMYTAL®



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5 ESKABARB®

6 ALURATE®

7 PHENOBARBITAL

8 AMOBARBITAL

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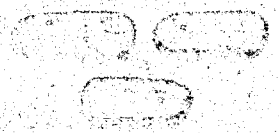
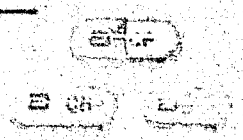
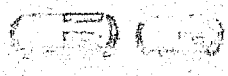


10 NEMBUTAL®

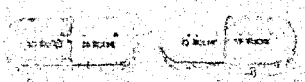


11 TUINAL®

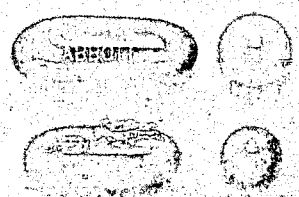
12 ETHOBRAL®



13 DALMANE®



14 PLACIDYL®



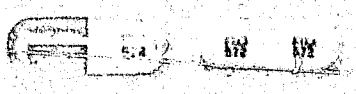
15 PENTOBARBITAL

16 SECOBARBITAL

17 DORIDEN®

18 NOLUDAR®

19 PAREST®



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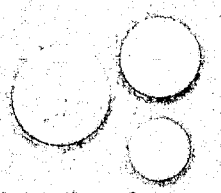
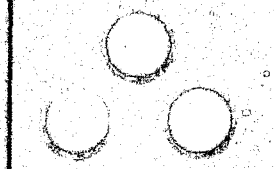
21 SOPOR®



22 METHAQUALONE

DOCTORS SOMETIMES PRESCRIBE THESE TO CALM PEOPLE DOWN OR QUIET THEIR NERVES, OR RELAX THEIR MUSCLES. PEOPLE ALSO TAKE THEM ON THEIR OWN TO MAKE THEM FEEL BETTER. THESE ARE TRANQUILIZERS.

1 
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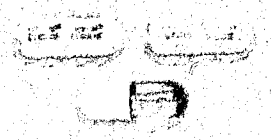
2 
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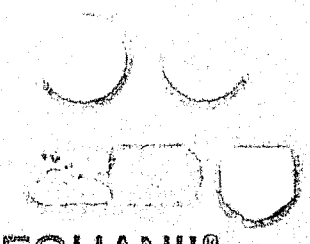
LIBRITABS®

3 
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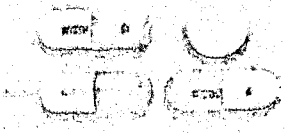
4 
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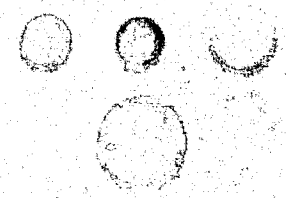
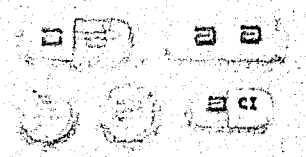
5 
ATARAX®

6 
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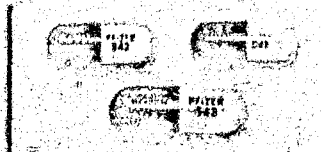
7 
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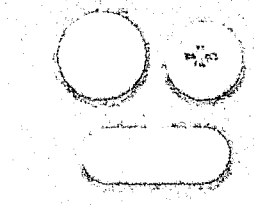
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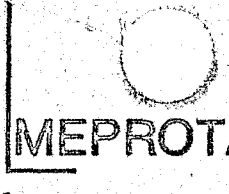
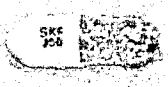
8 
MEPROSPAN®


MEPROTABS®

9 
TYBATRAN®

10 
MEPROBAMATE

DOCTORS SOMETIMES PRESCRIBE THESE FOR LOSING WEIGHT. PEOPLE ALSO USE THEIR OWN TO MAKE THEM FEEL MORE WIDE-AWAKE, PEPPY, ENERGETIC, OR ALERT. THE PILLS ON THIS CARD ARE SOMETIMES CALLED "UPS" OR "UPPERS," "SPEED," OR "BENNIES."

1 
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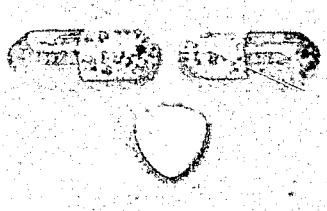
2 
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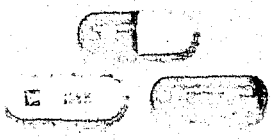
3 
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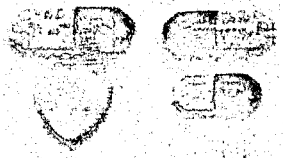
4 
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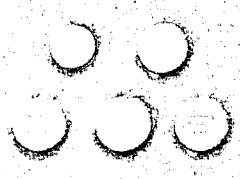
5 
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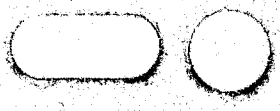
19 
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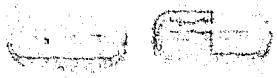
20 
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PRELUDIN®

22 
TEPANIL®

23 
PRE-SATE®

24 
CYLERT®

CARD F

1. MARIHUANA

2. HASH

3. COCAINE

4. LSD, MESCALINE, PEYOTE, PSILOCYBIN, DMT

5. HEROIN

6. METHADONE

7. MORPHINE, OPIUM, OTHER OPIATES

CARD G

FIVE DIFFERENT POSSIBILITIES FOR MARIHUANA

FIRST

Marihuana becomes a regular commercial product.
It is sold in stores and vending machines.
It comes under a variety of brand names.
It is advertised on TV, in newspapers, and magazines.

SECOND

Marihuana is sold only in government licensed stores.
You have to be 18 or older to buy it.
No advertising permitted. No brand names.
The government sets standards of quality and purity.

THIRD

Possession of marihuana for personal use is not prohibited.
You can have only as much as you can use yourself.
Selling marihuana is a crime, especially to anyone under age 18.

FOURTH

Having, using, or selling marihuana is illegal.
It is not legally available to anyone.
Police can make arrests for sale or possession.

FIFTH

Marihuana laws and their enforcement become very strict.
There are very tough penalties for having, using, or selling it.
The full force of the law is used to find people who have it or sell it.
The courts make sure that persons found guilty are punished.

WHICH STATEMENT BEST SHOWS HOW YOU FEEL:

A - AN IDEAL SITUATION
B - A GOOD SOLUTION BUT NOT IDEAL
C - ACCEPTABLE TO GIVE A TRY
D - NOT VERY ACCEPTABLE
E - NO GOOD AT ALL

CARD H

1. AMERICAN INDIAN

2. ALASKAN NATIVE

3. ASIAN

4. PACIFIC ISLANDER

5. WHITE

6. BLACK

CARD I

1. HOUSEWIFE

2. STUDENT

3. UNEMPLOYED

4. RETIRED

5. DISABLED

CARD J

	ANNUAL	WEEKLY
1.	NO INCOME	
2.	UNDER $2,000 -	(UNDER $39)
3.	$2,000 - $2,999 -	($39 - $57)
4.	$3,000 - $4,999 -	(58 - $96)
5.	$5,000 - $6,999 -	($97 - $134)
6.	$7,000 - $9,999 -	($135 - $192)
7.	$10,000 - $14,999--	(193 - $288)
8.	$15,000 - $24,999 -	($289 - $480)
9.	$25,000 OR MORE -	($481 OR MORE)

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