

An Inventory of Alcohol, Drug, and Mental Health Data Available From the National Center for Health Statistics

This report identifies National Center for Health Statistics data sets that contain information on clinical mental disorder, psychological well-being, psychosocial risk factors, alcohol use and abuse, and drug use and abuse, and provides a detailed summary of these data elements.

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An Inventory of Alcohol, Drug, and Mental Health Data Available From the National Center for Health Statistics

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Introduction

A number of articles on the epidemiology of mental health and mental disorders, psychosocial risk factors, alcohol use and abuse, and drug use and abuse have identified information gaps that need to be filled from both a scientific and a policy standpoint. ¹⁻¹⁶ Although many of these information gaps will only be filled by the collection and analysis of new data, secondary analysis of existing data will likely provide answers, at least in part, to a good many questions.

Sources of existing data include statistical compendia such as Health, United States, ¹⁷ Mental Health, United States, ¹⁸ First Statistical Compendium on Alcohol and Health, ¹⁹ the Alcohol, Drug Abuse, and Mental Health Data Book, ²⁰ and Drug Utilization in the U.S. ²¹ A number of detailed statistical reports also exist that present findings for the alcohol, drug, and mental health areas. ²²⁻²⁹

Public-use data bases constitute another source of existing data. Although none of the three major Government agencies responsible for alcohol, drug, and mental health data (National Institute on Alcohol Abuse and Alcoholism, National Institute on Drug Abuse, and National Institute of Mental Health) has a formal public-use data tape distribution program, tapes may sometimes be obtained from these agencies upon request. The availability of public-use data tapes has not been treated systematically in the literature, but some isolated attempts have been made to catalog these data sources. One attempt—part of the joint Canadian-United States Research Seminar on Health Promotion and Disease Prevention—presented information on a broad range of alcohol, drug, and mental health data sources. ^{30,31} Information specifically on drug data bases has also been published. ^{32,33}

In an effort to stimulate the use of National Center for Health Statistics (NCHS) data for secondary analysis, the present report identifies NCHS data sets that contain information on clinical mental disorder, psychological wellbeing, psychosocial risk factors, alcohol use and abuse, and drug use and abuse, including the use of tobacco. In accorddance with Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) usage,²⁰ the acronym 'ADM' is used throughout the inventory to refer to these kinds of data. However, because of the extensiveness of NCHS data on the use of prescription and over-the-counter drugs and the limited nature of data on drug abuse, the "D" here refers to drug use rather than drug abuse.

Background

The mission of NCHS includes collection, analysis, and dissemination of data on the Nation's health. The enabling legislation for the Center's activities specifically states that the Center shall collect data in the following areas:

- The extent and nature of illness and disability of the population of the United States and its subgroups.
- The impact of illness and disability on the economy and on the well-being of the population.
- Environmental, social, and other health hazards.
- Determinants of health.
- Health resources, including health professionals by speciality and types of practice; and the supply of services by hospitals, extended care facilities, home health agencies, and other institutions.
- Utilization of health care, including ambulatory health services, hospitals, extended care facilities, home health agencies, and other institutions.
- Health care costs and financing.
- Family formation, growth, and dissolution.
- National vital statistics—births, marriages, and divorces.

The data collection mechanisms of NCHS that implement this broad mandate include general population surveys, health care surveys, special purpose surveys, and vital statistics. The organizational chart shown in the figure identifies particular data systems relevant to ADM concerns and locates these data systems within Center programs primarily responsible for them. As is evident from the chart, primary data collection and analysis responsibilities for current NCHS data systems rest with three programs: the Office of Vital and Health Care Statistics Program, the Office of Interview and Examination Statistics Program, and the Office of Analysis and Epidemiology Program.

Other programs of the Center, however, play major roles in the development, operation, and analysis of these data collection systems. The Office of Research and Methodology (ORM) provides statistical consultation and technical assistance to all NCHS programs and formulates statistical standards regarding survey design, data collection, coding, data analysis, data presentation, and statistical computation.

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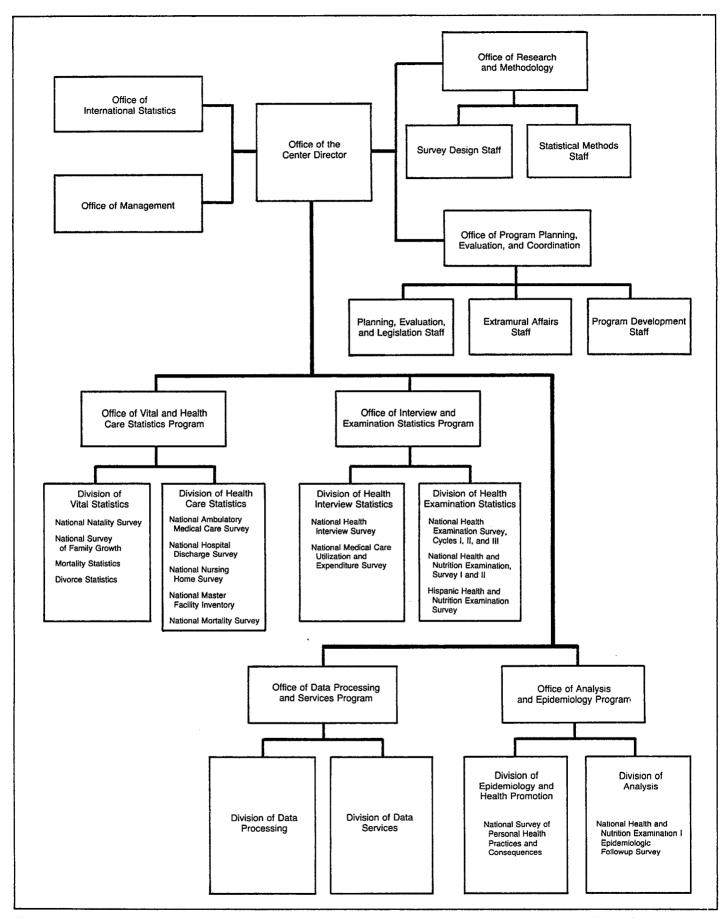


Figure: Data systems with alcohol, drug, or mental health components within the context of the organizational structure of the National Center for Health Statistics

The Office of Program Planning, Evaluation, and Coordination (OPPEC) serves as the focal point for coordination of health statistical activities within NCHS and develops and monitors the collaborative statistical activities of NCHS with other organizations and agencies, including those with ADAMHA. OPPEC also collects, assesses, maintains, and disseminates current information on State and national health statistics systems, both public and private.

The Office of Data Processing and Services Program (ODPSP) is the statistical operations component of NCHS. ODPSP is responsible for the collection of data for the National Health and Nutrition Examination Survey (NHANES) and NCHS surveys conducted by mail, as well as for data preparation, entry, and automated processing of all NCHS surveys. Editing, composing, and printing NCHS publications, and marketing, disseminating, and providing information services for NCHS statistical products are also within the purview of ODPSP. In addition, ODPSP provides training and technical assistance to NCHS staff.

The Office of International Statistics (OIS) is responsible for planning and conducting the foreign research and consultation activities of NCHS. OIS programs include a Comparative International Health Statistics Program that assembles and analyzes data available from industrialized countries. OIS also furnishes technical assistance to developing countries, such as Egypt, where the first national morbidity survey has yielded a nationwide health profile of the Egyptian population that includes indicators of alcohol consumpion.

The history of NCHS's efforts in the mental health area and the availability of basic mental health data in Center surveys have been discussed in previous publications. 34,35 Rice and Hitchcock provide a useful introduction to NCHS efforts to collect mental health data, covering such topics as mental disorder diagnosis, disability due to mental conditions, screening scales for depression and well-being, and self-perceptions of psychological and nervous disorder. These authors do not, however, discuss NCHS measures of alcohol or drug use, measures of the antecedents of mental disorders, or the use of vital statistics for the study of ADM disorders.

Scope

ADM data elements are broadly delimited for the purposes of this inventory. Items concerning diagnosis of clinical ADM disorders, including mental retardation, as well as reports of symptoms of distress are central. Also within the scope are items related to conditions or circumstances that may impact upon, or be a consequence of, a person's mental condition. Alcohol and drug use, including the use of tobacco, life event stress, Type A behavior pattern, social support, sleep disturbance, and utilization of ADM resources are examples of such conditions or circumstances. Some studies have discussed these concepts and provide examples of how they have been measured and used. 36-47 A summary table of measures included in the inventory is provided as appendix I.

In this inventory, no effort has been made to describe NCHS data systems that do not address ADM issues at some level. An overview of the complete range of NCHS

data systems is available elsewhere. 48 Most data systems within NCHS, however, contain at least some ADM components. In some cases, entire batteries are included, such as the General Well-Being Schedule⁴⁹ or the Center for Epidemiologic Studies Depression (CES-D) Scale. 50 In other cases, there are only a few relevant items. In some instances, the purpose of the question is not to elicit ADM information specifically, but rather to gather general health information, such as days lost from work or days spent in bed due to ill health. In reporting such events, respondents provide information about conditions that cause them to restrict their activity. These condition are then coded into International Classification of Diseases (ICD) categories (see appendix II for a discussion of ICD coding), including relevant ADM disorder codes.51 The Diagnostic and Statistical Manual (DSM), developed and published by the American Psychiatric Association, 52,53 has never been used in the coding of Center ADM data, although a crosswalk has been developed which allows translation of codes for the third edition of the DSM (DSM III) to codes for the Ninth Revision of the ICD, Clinical Modification (ICD-9-CM).54

Direct versus indirect measures

The inventory covers both direct and indirect measures of ADM disorders. Direct measures include, but are not limited to, items used in case ascertainment of ADM disorders, such as the National Institute of Mental Health (NIMH) Diagnostic Interview Schedule (DIS). 55,56 The depression section of the DIS, including a Spanish language translation, 57,58 has been used in the Hispanic Health and Nutrition Examination Survey (HHANES). 59 Other examples of direct indicators are items used to develop general psychiatric impairment and well-being scales, as well as items dealing with alcohol use or use of drugs.

Indirect measures include items which figure prominently in considerations of needs assessment. Being divorced, for example, does not necessarily mean that an individual is mentally ill. In the aggregate, however, divorce rates do impact on both the medical and ADM specialty sectors of the service structure of local communities, and divorce may have varying direct and indirect effects on the psychological well-being of the parties affected. 60-63

Because drug, alcohol, and psychiatric problems frequently produce physical symptoms, ^{64,65} reports of such symptoms constitute another major type of indirect measure of ADM disorders. Although the more obvious physical symptoms of ADM disorders have been included, such as speech problems, headaches, and dizzy spells, no systematic attempt has been made to identify all of the physical manifestations of ADM disorders that have been measured in NCHS data systems. Users interested in these areas may find additional NCHS data on physical symptoms of ADM disorders which have not been covered in the inventory.

Data contexts

An effort was made to identify sociodemographic and other classification variables available in each of the surveys; these are identified in appendix III. Also, an attempt was

made to place the ADM components in context by providing general descriptions of the types of non-ADM data available in each of the surveys and vital statistics systems. In response to the needs of an "Alcohol and Safety" initiative sponsored by the National Institute on Alcohol Abuse and Alcoholism (NIAAA) in collaboration with the National Institute on Drug Abuse, accident and injury data have been identified for NCHS data bases containing alcohol or drug information. These data, which may or may not be associated with ADM disorders, are illustrated in detail elsewhere. ⁶⁶ The brief descriptions of basic data elements contained in this inventory are designed only to sketch data analysis possibilities.

Coverage

The inventory covers approximately a 20-year period, with emphasis on the past 15 years—the period for which public-use data tapes are generally available.⁶⁷ Because the purpose of the inventory is to stimulate the use of NCHS alcohol, drug, and mental health data for secondary analysis, it focuses on data available through the public-use data tape distribution program. ADM data elements are only identified for data years in which public-use tapes are or will become available.

Out of scope

Only data that are either currently available or currently being collected are discussed in this inventory. Surveys that are in the planning or design stages are excluded. These include the 1985 National Nursing Home Survey; the 1985 Health Promotion Supplement to the National Health Interview Survey (NHIS); the second round of the National Health and Nutrition Examination I Epidemiologic Followup Study: Continued Followup scheduled for 1985; and the National Health and Nutrition Examination Survey III, scheduled to begin in 1987. Also excluded is the Mental Health Demographic Profile (MHDP) which, though currently being analyzed by NCHS staff, was developed by the National Institute of Mental Health. 68,69

The Center's surveys generally do not identify persons with clinical cases of ADM disorders. Therefore, no systematic attempt has been made in this inventory to identify NCHS data which might be used to clarify selected aspects of the medical problems of psychiatric patients. That there are possibilities in this area is evident from recent efforts to integrate NCHS household interview estimates with psychiatric case registry data in projections of levels of chronic diseases and disability among a psychiatric population. The identification of clinically significant depression in HHANES using NIMH DIS and of childhood behavior problems in the 1980 NHIS Child Health Supplement will, in the future, provide researchers with a data base for studying medical problems among persons with these disorders.

Even now, however, some innovative uses might be made of available data. For example, several years of NHIS data might be pooled to describe the sociodemographic and health characteristics of persons with one or more short-stay hospital discharges in the past year for an ADM disorder

or of persons who were limited in their usual activity due to an ADM disorder.

Methods

In constructing the inventory, four principal sources were consulted: questionnaires, data tape formats, methodological reports, and NCHS staff responsible for the collection and analysis of data. First, questionnaires were systematically reviewed for ADM content. In cases where the ADM content of a question was not obvious, the data tape formats were then examined for ADM coding. Methodological reports were reviewed for background information about the surveys and vital statistics systems. Program staff were consulted when necessary to clarify questions related to content, methods, coverage, and data availability.

Presentation of results

The inventory is arranged according to survey or vital statistics system. With the exception of the health examination surveys, each survey or system is described once, regardless of the number of years for which data are available. The National Health Examination Survey (NHES) Cycles I, II, and III, the National Health and Nutrition Examination Surveys (NHANES) I and II, the National Health and Nutrition Examination I Epidemiologic Followup Study, and the Hispanic Health and Nutrition Examination Survey are described separately because of the extent of ADM data contained in each. To include them in a single description would cause unnecessary confusion.

Descriptions of the surveys or data systems have five components, designed to provide a brief overview of the data system and detailed information concerning alcohol, drug, and mental health data. The format is as follows:

Survey design

The target population and geographic boundaries of the survey or vital statistics system are identified, and the sampling procedures are briefly described. The data collection method and the time period during which the data were collected are specified. Public-use data tapes may not be available for all years of the survey.

Basic data elements

A brief overview is given of the types of non-ADM data available from the data system. More complete summaries are available elsewhere. 48,75

ADM data elements

A detailed list of items related to mental disorders, psychosocial risk factors, alcohol use, and drug use is provided. For the most part, variables are listed in the order in which they appear in the questionnaires. Questionnaire items and scales are summarized whenever possible. When summarization would make interpretation difficult, the entire question is given. In two cases, the skip patterns and flow

of the questions are so complex that the appropriate sections of the questionnaires themselves are provided as appendixes. The marginals for ADM variables were not examined, and in some instances the number of cases may be quite small.

Data tape availability

Many data tapes may be purchased from the National Technical Information Service (NTIS), 5285 Port Royal Road, Springfield, Virginia 22161. Telephone: (703) 487-4650. The NTIS accession number required to order these tapes is provided. Tapes not available from NTIS are sometimes available from NCHS. The person listed as the technical contact for the data system can answer questions regarding specific tape availability. ADM and other relevant data may be located on separate tapes; therefore the purchase of more than one tape may be required. Potential users should carefully review methodological reports cited elsewhere 48 and consult with the technical contact person before purchasing tapes.

For persons affiliated with local universities, many NCHS tapes are available through the schools of public health of major universities. Schools of public health at the following universities participate in the NCHS data tape acquisition program: University of California, Berkeley; University of California, Los Angeles; Columbia University; University of Hawaii; Harvard University; University of Illinois; Johns Hopkins University; Loma Linda University; University of Michigan; University of North Carolina, Chapel Hill; University of Texas; University of Washington, Seattle; and Yale University. The names of appropriate contact persons at these schools may be obtained by contacting the Scientific and Technical Information Branch, NCHS, 3700 East-West Highway, Hyattsville, Md. 20782. Telephone: (301) 436–8500.

Questionnaire source items

This final component directs the user to references that contain the questionnaire items listed in the inventory. For the most part, these references are available from the U.S Government Printing Office, Washington, D.C. 20402. In cases where the questionnaires have not been published, a copy can usually be obtained from the technical contact person.

Appendixes

Appendix I provides a summary of the availability of ADM measures in NCHS data systems. The summary includes only major categories of variables and is not comprehensive. A detailed cross-classification of individual questions is beyond the scope of this document due to the extent of variation in the question wording and intent among the surveys. However, such a classification is available elsewhere for the NHANES and NHES surveys.

Appendix II discusses the use of the International Classification of Diseases (ICD) for coding of NCHS morbidity and mortality data. The discussion is limited to those data systems that are included in the inventory.

Appendix III provides an overview of the classification variables available for each of the data systems. The surveys are identified by their respective acronyms; the full names of the surveys can be found in the table of contents. All classification variables appropriate to the study of alcohol use, drug use, mental disorders, or psychosocial risk factors are included.

Because the alcohol questions for the Hispanic Health and Nutrition Examination Survey and the 1983 National Health Interview Survey were judged to be too detailed and not amenable to summarization, they are included in their entirety as appendixes IV and V.

Secondary analysis

NCHS surveys provide an excellent source of secondary data for analysis of ADM issues. Some of the data presented in this inventory have already been analyzed either by NCHS analysts^{76–88} or by analysts at NIAAA, ^{11,19,89–91} NIMH, ^{18,47,92–94} or at the Food and Drug Administration (FDA). ⁹⁵ However, much of NCHS's ADM data have not been analyzed, and those data that have already received attention offer potential for even further analysis.

The benefits of secondary analysis are many. ⁹⁶ On the practical side, the approach requires fewer resources—both in terms of money and time—than a full-scale survey effort. Secondary analysis also offers several substantive advantages: namely, it provides historical perspective on important issues; it permits trend studies and comparative analyses that a single research endeavor cannot achieve. Finally, secondary analysis promotes the expansion of existing theory by forcing the researcher to think broadly and abstractly to find overarching concepts or categories within which available indicators can be contained. ⁹⁶

Secondary analysis, particularly analysis of large-scale, complex surveys, requires careful consideration of the intricacies and limitations of the data. 97-101 Methods, target populations, units of analysis, and response rates vary among data systems. Items may appear similar in a questionnaire, but their possible uses can vary substantially. Trend studies, especially, warrant critical examination of methodological and measurement variation. 102-104 Detailed discussion of these issues is beyond the scope of this report, but the user is urged to consult other publications for a more complete description of the data systems and for references to detailed methodological reports. 48,75,105

Concluding remarks

The National Center for Health Statistics has collected a variety of data appropriate to the study of alcohol use, drug use, mental disorders, and psychosocial risk factors. This inventory is the first systematic attempt to identify these data and make their existence known to interested researchers and policymakers.

NCHS data have a range of epidemiological uses. Morris¹⁰⁶ first codified 7 uses of epidemiologic data almost 30

years ago. These uses are: (1) providing historical perspective; (2) community diagnosis; (3) studying the working of health services; (4) determining individual risks; (5) identifying syndromes; (6) completing the clinical picture; and (7) searching for causes. This codification has been used by a number of researchers in addressing important issues of psychiatric

epidemiology.^{13,107–110} Although NCHS data systems have not been discussed here explicitly in the Morris context, the data do offer a significant potential for extending the current state of knowledge along the lines of Morris' seven epidemiological uses.

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Section I: General population surveys

National Health Examination Survey (NHES) Cycle I

Survey design

Survey of U.S. adults ages 18–79 years, using a multistage, clustered probability sample, stratified by geographic region and population size. Approximately 6,700 persons were interviewed and examined between 1959 and 1962.

Basic data elements

Data include a household interview, medical history, medical examination, dental examination, X-ray, EKG readings, laboratory blood tests, vision and hearing tests, and anthropometric measurements. Also included are a personal medical history and results of a physician examination related to the cardiovascular system, arthritis, and diabetes. Data are located on multiple tapes.

ADM data elements

Ever fainted or blacked out?
Ever had nervous breakdown?
Ever felt close to breakdown?
Ever had trouble getting to sleep or staying asleep?
Ever bothered by nervousness—feeling fidgety and tense?
Ever unable to take care of things because "just couldn't get going"?
Ever bothered by nightmares?

Ever bothered by trembling hands? Ever troubled by sweating hands? Ever had heart palpitations? Frequency? Ever troubled by headaches in past few years? Frequency? Ever had dizzy spells? Frequency?

Data tape availability

NHES I Psychological Distress (tape no. 1002). NTIS accession no. PB 293126.

Technical contact: Dale Hitchcock

Division of Health Examination Statistics 3700 East-West Highway, Room 2–58

Hyattsville, Md. 20782 (301) 436–7081

Questionnaire source items

National Center for Health Statistics, H. J. Dupuy, A. Engel, B. K. Devine, J. Scanlon, et al.: Selected symptoms of psychological distress, United States. *Vital and Health Statistics*. Series 11, No. 37. PHS Pub. No. 1000. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, Aug. 1970.

(Question wording, but not actual questionnaire.)

National Health Examination Survey (NHES) Cycle II

Survey design

Survey of civilian noninstitutionalized U.S. children, ages 6 months to 11 years, using a multistage, clustered probability sample, stratified by geographic region and population size. Approximately 7,100 children were interviewed and examined between 1963 and 1965.

Basic data elements

Data include detailed medical and developmental histories from a household adult, usually the mother; information from the school; medical, dental, and psychological examinations; vision and hearing tests; and anthropometric measurements. Major data elements are on one tape. Approximately one-third of children examined in Cycle II were reexamined in Cycle III. These children are identified on both the Cycle II and Cycle III tapes, making longitudinal analyses possible.

ADM data elements

Child's medical history

Does child have bad dreams or nightmares?

Is child afraid of dark?

Friends:

Approximate number (few, good number, very many)?

Ages of friends relative to child?

Number of child's close friends parents know?

Reaction to meeting new children?

How well does child get along with other children?

Ever run away?

How often?

Reason?

Anything ever seriously upset or disturb child?

If so, explain.

If so, what age?

Rating of how relaxed, tense, or nervous child is.

Temperament?

Participation in:

Scouts?

Church activities?

Sports?

Fine arts activities?

Other activities?

School questionnaire

Class for gifted children?

Recommended?

Available?

Used?

Special provision for slow learners?

Recommended?

Available?

Used?

Class for mentally retarded?

Recommended?

Available?

Used?

Special provision for emotionally disturbed?

Recommended?

Available?

Used?

Child's overall adjustment?

Child's overall behavior?

Adjustment evaluation?

Attention span?

Restless classroom movement?

Behavior:

Frequently accused of fighting?

Too "rough"?

Frequently injured?

Aggressive?

Uses bad words?

Complaints about behavior from other parents?

No method of discipline works?

Frequency of required disciplinary action?

Frequency of being selected when children "choose sides"? Frequency of being chosen as leader by group?

Psychological examination

Wechsler Intelligence Scale for Children (WISC).

Vocabulary.

Block design.

Wide Range Achievement Test (WRAT).

Oral reading.

Arithmetic.

Harris-Goodenough Draw-a-Person Test.

Thematic Apperception Test.

Microfilm copies of tape transcripts are available from technical contact person. The transcripts include respondent identification numbers which permit linkage with data tape information.

Data tape availability

NHES II Integrated Data Tape (tape no. 21DT). NTIS accession no. PB 293124.

Technical contact: Dale Hitchcock

Division of Health Examination Statistics 3700 East-West Highway, Room 2–58

Hyattsville, Md. 20782 (301) 436–7081

Questionnaire source items

National Center for Health Statistics: Plan, operation, and response results of a program of children's examinations. *Vital and Health Statistics*. Series 1, No. 5. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, Oct. 1967.

(Selected questionnaire items only.)

Questionnaire available upon request from technical contact person.

National Health Examination Survey (NHES) Cycle III

Survey design

Survey of the civilian noninstitutionalized U.S. population ages 12-17 years, using a multistage, clustered probability sample, stratified by geographic region and population size. Approximately 6,800 youths were interviewed and examined between 1966 and 1970.

Basic data elements

Data include a household interview, detailed medical and developmental histories, information from the school, medical, dental, and psychological examinations, vision and hearing tests, anthropometric measurements, X-rays, and laboratory tests. Major data elements are on one tape. Approximately one-third of youths examined in Cycle III were examined earlier in Cycle II. These youths are identified on both the Cycle II and Cycle III tapes, making longitudinal analyses possible.

ADM data elements

Parent questionnaire

Is youth nervous, tense, or high strung?

Has youth been to mental hospital or guidance clinic?

Has youth seen a psychiatrist or psychologist, or has parent talked to one about youth?

Perceived importance of selected personal qualities in youth:

To be neat and clean?

To be able to defend oneself?

To have self control?

To be happy?

To obey parents?

To be dependable?

To be considerate of others?

To face life's problems calmly?

To obey the law?

To be ambitious?

To know how to keep in good health?

Inclination to consult physician if youth exhibited nervousness?

School questionnaire

Frequency disciplinary action required? Special resources for:

Gifted children?

- Available?
- Used?

Mentally retarded?

- Available?
- Used?

Slow learners?

- Available?
- Used?

Emotionally disturbed?

- Available?
- Used?

Adjustment evaluation.

Youth questionnaire

Frequency of trouble getting to sleep or staying asleep?

Frequency of bad dreams or nightmares?

Ever run away?

How often?

At what age?

Number of times in contact with police over something

done or suspected of having done?

Number of times arrested?

Type of punishment?

Tobacco use (cigarettes):

Age first smoked?

Age started smoking regularly?

Amount smoked per day?

Ever feel tense, nervous, or fidgety?

Perceived importance of selected personal qualities:

To be neat and clean?

To be able to defend oneself?

To have self control?

To be happy?

To obey parents?

To be dependable?

To be considerate of others?

To face life's problems calmly?

To obey the law?

To be ambitious?

To know how to keep in good health?

Inclination to consult physician for nervousness?

Psychological examination

Wechsler Intelligence Scale for Children (WISC).

Vocabulary.

Block design.

Wide Range Achievement Test (WRAT).

Oral reading.

Arithmetic.

Harris-Goodenough Draw-a-Person Test.

Thematic Apperception Test.

Microfilm copies of tape transcripts are available from technical contact person. The transcripts include respondent identification numbers which permit linkage with data tape information.

Data tape availability

NHES III Extended Data Tape (tape no. 3EDT).

NTIS accession no. PB 296025.

Technical contact: Dale Hitchcock

Division of Health Examination Statistics 3700 East-West Highway, Room 2–58

Hyattsville, Md. 20782

(301) 436-7081

Questionnaire source items

Questionnaire available upon request from technical contact person.

National Health and Nutrition Examination Survey I (NHANES I)

Survey design

Survey of civilian noninstitutionalized U.S. population ages 1–74 years, using a multistage, clustered probability sample, stratified by geographic region and population size. Approximately 21,000 persons were interviewed and examined between 1971 and 1974. This sample was augmented with approximately 3,000 persons ages 25–74 between 1974 and 1975.

Basic data elements

Data on all examined persons include household information, nutrition information, medical, dental, dermatological, and ophthalmological examinations, anthropometric measurements, hand-wrist X-rays (ages 1–17 only), and a variety of laboratory tests. Information on a subsample of adults includes a supplementary medical history; supplementary information concerning arthritis, respiratory conditions, and cardiovascular conditions; health care needs; an extended medical examination; and a variety of additional clinical procedures and laboratory tests. Data are located on multiple tapes.

ADM data elements

Medical history questionnaire (ages 12-74 years)

Nervous breakdown ever diagnosed by physician?

Alcohol consumption:

Had at least one drink of beer, wine, or liquor in past year?

Frequency of drinking any alcoholic beverage?

Most frequently consumed alcoholic beverage (beer, wine, or liquor)?

When drinking, amount drunk over 24-hour period of most frequently consumed alcoholic beverage?

Medicine, drug, or pill use during past 6 months for:

Insomnia?

Headache?

Upset stomach?

Nerves?

Lack of pep?

General medical history supplement (ages 25–74 years)

Tobacco use:

Cigarettes.

- Smoked at least 100 cigarettes in lifetime?
- Currently smoke cigarettes?
- Amount smoke per day?
- Length of time since smoked fairly regularly?
 If less than 1 year ago, amount smoked 1 year ago?
- Age first started smoking fairly regularly?
- Amount smoked when smoking most?

Cigars

- Smoked at least 100 cigars in lifetime?
- Currently smoke cigars?
- Amount smoke per day?
- Length of time since smoked 3 or more cigars per week?

If less than 1 year ago, amount smoked 1 year ago?

Pipe.

- Smoked at least 3 packages of pipe tobacco in lifetime?
- Currently smoke?
- Number of pipefuls per day?
- Length of time since smoked 3 or more pipefuls per week?

If less than 1 year ago, amount smoked 1 year ago?

Current use of other forms of tobacco.

- Snuff?
- Chewing tobacco?
- Other?Specify.

General Well-Being Schedule (GWB) (ages 25–74 years)

In past month:

Feeling (spirits) in general?

Bothered by nervousness?

In firm control of behavior, thoughts, emotions, or feelings?

Felt so sad, discouraged, hopeless, or had so many problems that wondered if anything was worthwhile?

Felt under any stress, strain, or pressure?

Felt happy, satisfied, or pleased with personal life?

Wondered if losing mind or losing control over actions, speech, feelings, or memory?

Anxious, worried, or upset?

Awoke fresh and rested?

Bothered by any illness, bodily disorder, pains, or fears about health?

Daily life full of interesting things?

Felt downhearted and blue?

Felt emotionally stable and sure of self?

Felt tired, worn out, used-up, or exhausted?

Concerned or worried over health?

Relaxed or tense?

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Level of energy, pep, and vitality?

Depressed or cheerful?

Personal, emotional, behavioral, or mental problems in past year severe enough to feel need for professional help?

Ever felt close to nervous breakdown?

Ever had a nervous breakdown?

Ever been a patient at a mental hospital, ward, or clinic for personal, emotional, behavioral, or mental problems?

Ever seen psychiatrist, psychologist, or psychoanalyst?

Consultation during past year for personal, emotional, behavioral, mental problem, worries, or nerves with:

Regular medical doctor?

Brain or nerve specialist?

Nurse?

Lawyer?

Police?

Clergyman?

Marriage counselor?

Social worker?

Other formal assistance?

Discuss problems with family members or friends?

Center for Epidemiologic Studies Depression Scale (CES-D) (ages 25-74 years) (1974-75)

During past week:

Unusually bothered?

Poor appetite?

Could not shake off the blues even with help of family or friends?

Felt as good as other people?

Trouble concentrating?

Depressed?

Everything an effort?

Hopeful about future?

Thought life had been a failure?

Fearful?

Restless sleep?

Happy?

Talked less than usual?

Lonely?

People unfriendly?

Enjoyed life?

Had crying spells?

Felt sad?

Felt disliked by people?

Could not get going?

Data tape availability

NHANES I General Well-Being and the CES-D Depression Scale Developed by the National Institute of Mental Health, ages 25-74 (tape no. 4171).

NTIS accession no. PB 296020.

NHANES I Medical History Questionnaire, ages 12-74 (tape no. 4081).

NTIS accession no. PB 296073.

NHANES I Detailed Medical History Supplement and Health Care Needs, Respiratory, and Cardiovascular Supplements. ages 25–74 (tape no. 4091).

NTIS accession no. PB 296029.

Technical contact: Dale Hitchcock

Division of Health Examination Statistics 3700 East-West Highway, Room 2–58

Hyattsville, Md. 20782 (301) 436–7081

Questionnaire source items

National Center for Health Statistics: Plan and operation of the Health and Nutrition Examination Survey, United States 1971–73. Vital and Health Statistics. Series 1, No. 10b DHEW Pub. No. (HSM) 73–1310. Health Services and Menta Health Administration. Washington. U.S. Government Printing Office, Feb. 1973.

National Center for Health Statistics, A. Engel, R. S. Murphy K. Maurer, and E. Collins. Plan and operation of the HANES I Augmentation Survey of Adults 25–74 years. United States, 1974–75. *Vital and Health Statistics*. Series 1, No. 14. DHEW Pub. No. (PHS) 78–1314. Public Health Service. Washington. U.S. Government Printing Office, June 1978

National Health and Nutrition Examination I (NHANES I) Epidemiologic Followup Survey

Survey design

Followup survey conducted between 1982 and 1984 with respondents (or their proxies, for deceased or disabled respondents) of the first National Health and Nutrition Examination Survey (NHANES I), initially interviewed and examined between 1971 and 1975. Interviews were conducted wherever the respondents lived, including institutions. Respondents ranged in age from 32 to 86 years.

Basic data elements

Data include a health history, a female medical history, a health condition checklist, sections on nutrition, arthritis, functional impairment, medication use, physical activity, vision and hearing impairments, and dental problems. Blood pressure, pulse rate, and weight measurements are included. Information was obtained from hospitals and nursing homes for those persons who had had admissions to such facilities. ICD-coded injury data are available for persons hospitalized for injuries. Death certificates and hospital records were obtained for NHANES I participants who had died, and proxies provided information on the decedents' last days.

ADM data elements

Subject questionnaire

Mental Status Ouestionnaire (MSO I):

What is your complete address (number and street, city, State)?

How old are you?

When were you born (month, year)?

Who is president?

Who was president before him?

What is today's date (month, day, year)?

Migraines ever diagnosed by physician?

Year first diagnosed?

Hospitalized since 1970 for this condition?

Cirrhosis ever diagnosed by physician?

Year first diagnosed?

Hospitalized since 1970 for this condition?

Nervous breakdown ever diagnosed by physician?

Year first diagnosed?

Hospitalized since 1970 for this condition?

Psychotropic drug use:

Currently taking prescription tranquilizers?

Currently taking prescription antidepressants? Stayed overnight in mental health facility since 1970? Mental Status Questionnaire (MSQ II).

Tobacco use:

Cigarettes.

- Smoked at least 100 cigarettes in lifetime?
- Currently smoke cigarettes?
- Quit in past year?
- Chronological history of attempts to quit?
- Amount currently smoke?
- Length of time smoked this amount?
- Average amount smoked per day over the years?
- Mostly smoked filtered or unfiltered?

Cigars or Pipe.

- Ever smoked cigars or pipe?
- Currently smoke cigars or pipe?

Other tobacco.

- Ever use snuff?
- Ever use chewing tobacco?
- Ever been married to a smoker?

Alcohol consumption:

Ever had at least 12 drinks in 1 year?

Main reason for not drinking?

At least one drink in past year?

Main reason for not drinking in past year?

Age when quit drinking?

Frequency of alcohol consumption?

Quantity drink on drinking days?

Number of months in past 12 consumed at least 1 drink?

Number of days in past 12 months had 9 or more drinks

in 1 day?

Number of days in past 12 months had 5 or more drinks in 1 day?

Current drinking compared to 1 year ago?

Self-perceived drinking level?

Usual drinking pattern at ages 25, 35, 45, 55, 65, and 75, as applicable?

Ever drank more than largest amount reported above for 3 or more months?

Amount consumed during this period?

Age when started drinking this amount?

Length of time for which this amount was typical?

Average consumption per day, week, month, or year of:

- cans or bottles of beer?
- glasses of wine?
- shots or drinks of hard liquor, either straight or in a mixed drink?

Sleep disturbance:

Frequency of trouble falling asleep?

Frequency of waking up during night?

Frequency of waking up early?

Frequency of needing a nap?

Sleep problems compared to 1 year ago?

Frequency of taking prescription sleeping pills?

Average number of hours of sleep a night?

Frequency of feeling too weak, too tired, or not having enough energy to do things?

Coronary-prone (Type A) behavior:

Strong need to excel?

Usually feel pressed for time?

Hard driving and competitive?

Eat too quickly?

Upset when must wait in line?

Extroversion:

Like to have people around?

Cheerful?

Do not like to chat?

Very active?

Prefer to work alone?

Strong emotional attachment to friends?

Dominant, forceful, and assertive?

Ever done things for "kicks" or "thrills"?

Openness to new experiences:

Do not like to waste time daydreaming?

Poetry has little or no effect?

Often try new and foreign foods?

Set in ways?

Enjoy solving problems or puzzles?

Active imagination?

Center for Epidemiologic Studies Depression Scale (CES-D)

During past week:

Unusually bothered?

Poor appetite?

Could not shake off the blues even with help of family

or friends?

Felt as good as other people?

Trouble concentrating?

Depressed?

Everything an effort?

Hopeful about future?

Thought life had been a failure?

Fearful?

Slept restlessly?

Happy?

Talked less than usual?

Lonely?

People unfriendly?

Enjoyed life?

Had crying spells?

Felt sad?

Felt disliked by people?

Could not get going?

Abbreviated General Well-Being Schedule (GWB)

In past month:

Feeling (spirits) in general?

Felt under any stress, strain, or pressure?

Happy, satisfied, or pleased with personal life?

Anxious, worried, or upset?

Bothered by any illness, bodily disorder, pains, or fears

about health?

Felt emotionally stable and sure of self?

Concerned or worried over health?

Relaxed or tense?

Level of energy, pep, and vitality?

Depressed or cheerful?

Social support

Household members in addition to respondent?

Age?

Sex?

Relationship to respondent?

If living alone, how long?

Number of close friends and relatives?

Data tape availability

Currently in the field. Public-use tapes expected to be available approximately December 1986.

Technical contact: Helen Barbano

Division of Analysis

3700 East-West Highway, Room 2-27

Hyattsville, Md. 20782

(301) 436-5975

Questionnaire source items

Questionnaire may be obtained by writing to technical contact person.

National Health and Nutrition Examination Survey II (NHANES II)

Survey design

Survey of the civilian noninstitutionalized U.S. population ages 6 months-74 years, using a multistage, clustered probability sample, stratified by geographic region and population size. Approximately 21,000 persons were interviewed and examined between 1976 and 1980.

Basic data elements

Data include household information, a medical history, nutrition information, medication and vitamin usage, a medical examination, anthropometric measurements, and a variety of clinical procedures and laboratory tests. Information is located on multiple tapes.

ADM data elements

Child's Medical History Questionnaire (ages 6 months-11 years)

Speech problems?

Stammering?

Stuttering?

Cause of speech problem?

Age speech problem began?

Enrolled in special education?

Type?

Ever received speech therapy from:

Speech therapist?

Neurologist?

Psychologist?

Other?

Characteristics of therapy:

Duration?

Age at initiation?

Provided by school?

Currently receiving therapy?

Reason for discontinuing?

Physician ever diagnosed:

Brain damage?

Emotional problem or disturbance?

Hyperactivity?

Mental retardation?

Adult Medical History Questionnaire (ages 12-74 years)

Nervous breakdown ever diagnosed by physician?

Number of years ago had first nervous breakdown? Tobacco use: (ages 18–74 years)

Cigarettes.

- Smoked at least 100 cigarettes in lifetime?
- Currently smoke?
- Amount smoke per day?
- Length of time since smoked fairly regularly?
- If less than 1 year ago, amount smoked 1 year ago?
- Age started smoking fairly regularly?
- Amount smoked per day when smoking most?
 Cigars
- Currently smoke cigars?
- Number per day or week?

Pipe.

- Currently smoke a pipe?
- Number of pipefuls of tobacco a day or week?

Health History Supplement (ages 12-74 years)

Tobacco use (cigarettes only): (ages 12-17 years)

Smoked at least 100 cigarettes in lifetime?

Currently smoke?

Amount smoke per day?

Length of time since smoked fairly regularly?

- If less than 1 year ago, amount smoked 1 year ago?

Amount smoked per day when smoking most?

Age started smoking fairly regularly?

(Coronary-prone) Behavior Questionnaire (ages 25–74 years)

Trouble finding time to get hair styled?

Changes in heart beat when under stress?

Speed of eating?

Feel like hurrying along person who takes too long to come to point?

How often do you put words in others' mouths to speed things up?

How often arrive late to meet spouse or friend?

While waiting for person at public place, do you:

Sit and wait.

Walk about.

Read or write something?

When younger, did people consider you hard driving and competitive?

Would spouse or closest friend rate you now as hard driving or competitive?

How do you react to interruptions in midst of a job?

How do you handle repeated interruptions?

When playing games with 10-year olds, how often do you let them win?

When playing on a team, how important is your level of skill?

How do you feel about competition on the job or in outside activities?

Does your job "stir you to action"?

Quality of your work when working under deadline?

Content to remain at present job level for next 5 years?

Taken less than allotted number of vacation days in past 3 years?

Number of different job titles in past 10 years?

In your job or housework:

Amount of time spent sitting down?

Amount of time spent walking or moving about?

Amount of time using lots of arm, leg, or back muscles?

Outside of your job or housework, how often do you:

Walk as much as a mile getting to and from work, stores, etc.?

Take hikes or walks in good weather?

Take part in activities that require a lot of body movement or energy?

Do you follow a regular exercise program?

Number of hours each week spent in moderately strenuous or strenuous exercise?

Data tape availability

NHANES II Medical History 6 months-11 years (tape no. 5010).

NTIS accession no. PB 83-215616.

NHANES II Health History Supplement, ages 12-74 years (tape no. 5305).

NTIS accession no. PB 83-256537.

NHANES II Medical History, ages 12-74 years (tape no. 5020).

NTIS accession no. PB 83-154815.

NHANES II Behavior Questionnaire.

Contact Division of Health Examination Statistics for tape information.

Technical contact: Dale Hitchcock

Questionnaire source items

Division of Health Examination Statistics 3700 East-West Highway, Room 2–58

Hyattsville, Md. 20782 (301) 436–7081

National Center for Health Statistics, A. McDowell, A. Engel, T. T. Massey, and K. Maurer: Plan and operation of the Second National Health and Nutrition Examination Survey. 1976–80. *Vital and Health Statistics*. Series 1, No. 15. DHHS Pub. No. (PHS) 81–1317. Public Health Service. Washington. U.S. Government Printing Office, July 1981.

Hispanic Health and Nutrition Examination Survey (HHANES)

Survey design

Survey of persons of Hispanic origin, ages 6 months-74 years. The sample was drawn from a universe comprising 228 counties in Texas, Arizona, Colorado, New Mexico, and California, and the New York City and Miami areas, where an estimated 76 percent of the Hispanic-origin population of the United States resides. Approximately 12,000 persons were interviewed and examined between 1982 and 1984.

Basic data elements

Data include a medical history, medication and vitamin usage, health care needs, utilization of health services, a medical examination, a dental examination, anthropometric measurements, nutrition, and a variety of clinical procedures and laboratory tests.

ADM data elements

Child questionnaire (ages 6 months-11 years)

Any physical or mental problem or defect at birth?

Brain or nervous system involved?

Physician ever diagnosed:

Mental retardation?

- Ever treated by physician?

Speech problems?

- Age first had problems?
- Still have problems?
- Ever treated by physician?

Psychological or behavioral problems?

- Age first had problems?
- Still have problems?
- Ever treated by physician?

Use of nonprescription medicines in past 2 weeks:

Pain relievers, such as aspirin or Tylenol?

Sleeping tablets, sedatives, or tranquilizers? Antidepressants, stimulants, or pep pills?

Medicines for indigestion?

Use of prescription medicines in past 2 weeks:

Name?

Strength?

Prescribed dosage?

Prescribed frequency?

Problem for which prescribed?

Frequency taken?

Side effects?

- Specify
- Behavioral response to side effects?
 (such as, quit taking medicine)

Adult questionnaire (ages 12-74 years)

Tobacco use: (ages 20-74 years)

Cigarettes.

- Smoked at least 100 cigarettes in lifetime?
- Age first started smoking fairly regularly?
- Currently smoke?
- Length of time since smoked fairly regularly?
- Date last smoked fairly regularly?
- Amount currently smoke or smoked when last smoked regularly?
- Ever a period when smoked more?
- Amount smoked when smoking most?
- Brand of cigarettes smoked?
- Type of cigarette?

Filter tip or nonfilter tip?

Menthol or plain?

Hardpack or softpack?

Regular, king size, 100, or 120 millimeter?

High, medium, or low tar and nicotine?

Cigars.

- Currently smoke?
- Number per day or week?

Pipe.

- Currently smoke?
- Number of pipefuls per day or week?
- Anyone else in household smoke cigarettes, cigars, or a pipe inside the home?

Physician ever diagnosed cirrhosis of the liver?

Still have?

Number of years ago first diagnosed?

Use of nonprescription medicines in past 2 weeks:

Pain relievers such as aspirin or Tylenol?

Sleeping tablets, sedatives, or tranquilizers?

Antidepressants, stimulants, or pep pills?

Medicines for indigestion?

Use of prescription medicines in past 2 weeks:

Name?

Strength?

Prescribed dosage?

Prescribed frequency?

Problem for which prescribed?

Frequency taken?

Side effects?

- Specify

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- Behavioral response

(such as, quit taking medicine)

Adult questionnaire supplement (ages 12-74 years)

Tobacco use: (ages 20-74 years)

Cigarettes.

- Smoked at least 100 cigarettes in lifetime?
- Age first started smoking fairly regularly?
- Currently smoke?
- Length of time since smoked fairly regularly?
- Date last smoked fairly regularly?
- Amount currently smoke or smoked when last smoked regularly?
- Ever a period when smoked more?
- Amount smoked when smoking most?
- Brand of cigarettes smoked?
- Type of cigarette?

Filter tip or nonfilter tip?

Menthol or plain?

Hardpack or softpack?

Regular, king size, 100, or 120 millimeter?

High, medium, or low tar and nicotine?

Anyone else in household smoke cigarettes, cigars, or a pipe inside the home?

Alcohol consumption—73 questions. See appendix IV for detail.

Drug abuse:

Respondent is shown a card with a list of barbiturates and other sedatives and asked if he or she ever takes these kinds of pills:

- Just to see what they are like?
- Just to enjoy the feeling they give?
- For other nonmedical reasons?

Most recent time taken barbiturates or sedatives for nonmedical reasons?

Age when first had a chance to try marijuana or hash if wanted to?

- Age when first tried marijuana or hash?
- Most recent time used marijuana or hash?
- Number of days used marijuana or hash in past 30 days?
- Number of times in entire life used marijuana or hash? Age when first had a chance to try inhalants if wanted

to?

- Age when first used inhalants?

Ever used the following for kicks or to get high?

- Gasoline or lighter fluid?
- Spray paint?

- Other aerosol sprays?
- "Shoe shine," glue, or toluene?
- Lacquer thinner, other paint solvents?
- Amyl nitrite or poppers?
- Halothane, ether, or other anesthetics?
- Nitrous oxide, whippets?
- "Locker Room" odorizers?

Last time used one of these to get high?

Age when first had chance to try cocaine if wanted to?

- Age when first tried cocaine?
- Most recent time used cocaine?

Diagnostic Interview Schedule (DIS) Depression Section (ages 20–74 years)

Has there ever been a period lasting 2 weeks or more when you:

Felt sad, blue, depressed, or lost all interest and pleasure in things?

Lost appetite?

Lost weight without trying, as much as 2 pounds a week?

Increased eating, resulting in weight gain of 2 or more pounds a week?

Had trouble falling asleep, staying asleep, or waking up too early?

Were sleeping too much?

Felt tired out all the time?

Talked or moved more slowly than normal?

Could not sit still?

Ever had a period of several weeks when interest in sex was a lot less than usual?

- Told doctor or other professional?
- Took medication more than once?

Did decreased interest in sex interfere with your life or activities a lot?

Has there ever been a period of 2 weeks or more when you(r):

Felt worthless, sinful, or guilty?

Had trouble concentrating?

Thoughts came much slower than usual and seemed mixed up?

Thought a lot about death, either your own or someone else's, or death in general?

Felt like you wanted to die?

Felt so low you thought of committing suicide?

Attempted suicide?

Ever a time when feelings of depression and some of these other problems occurred in the same month?

Ever a period when several of these problems occurred in same month?

When having some of these problems, were you feeling OK or feeling low, depressed, blue, or uninterested in everything?

Longest spell ever felt depressed and had several other problems at same time?

Had more than one spell when felt depressed and had several other problems at same time?

Did spell(s) occur just after someone close died? Had any spell of depression along with these other problems at times when the depression was not due to a death?

Are you in one of these spells now?

When did last spell end?

Age when felt depressed for at least 2 weeks and had largest number of these other problems at same time?

Center for Epidemiologic Studies Depression Scale (CES-D) (ages 20-74 years)

In past week:

Unusually bothered?

Poor appetite?

Could not shake off the blues even with help of family

or friends?

Felt as good as other people?

Trouble concentrating?

Depressed?

Everything an effort?

Hopeful about future?

Thought life had been a failure?

Fearful?

Slept restlessly?

Happy?

Talked less than usual?

Lonely?

People unfriendly? Enjoyed life? Had crying spells? Felt sad? Felt disliked by people? Could not get going?

Data tape availability

Survey currently in the field. Public-use data tapes will be available at a future date.

Technical contact: Claudia Moy

Division of Health Examination Statistics 3700 East-West Highway, Room 2-58

Hyattsville, Md. 20782

(301) 436-7081

Questionnaire source items

National Center for Health Statistics: Data Collection Forms of the Hispanic HANES. DHHS. Public Health Service. Hyattsville, Md. Undated.

Available from: Scientific and Technical Information Branch

3700 East-West Highway, Room 1-57

Hyattsville, Md. 20782 (301) 436–8500

National Health Interview Survey (NHIS)

Survey design

This general household health survey of the civilian noninstitutionalized U.S. population employs a multistage probability design that permits continuous sampling throughout the year. The survey is designed so that the sample of households interviewed each week is representative of the target population, and weekly samples are additive over time. Independent samples are selected each year. Interviews have been conducted annually since 1957 with approximately 111,000 persons living in about 42,000 households.

Basic data elements

Data include information on acute illnesses and injuries, disability days associated with acute and chronic conditions (for example, bed days, work-loss days, and school-loss days), prevalence of selected chronic conditions and impairments, limitation of activity as a result of one or more chronic conditions or impairments, and use of physicians, dentists, and short-stay hospitals. Data are located on multiple tapes.

ADM data elements

Core questionnaire items

Restricted activity in past 2 weeks due to mental condition?

Number of bed days?

Number of work-loss days? (ages 17 years and over)

Number of school-loss days? (ages 6-16 years)

Number of reduced activity days?

Limitation of activity due to mental condition?

Unable to perform usual activity for one's age and sex group?

Limited in kind or amount of usual activity?

Limited, but not in usual activity?

Physician visit(s) in past 2 weeks due to mental condition?

Short-stay hospitalizations because of mental condition?

Number of discharges?

Number of days?

Average length of stay?

Chronic conditions?

Stammering or stuttering? (1971; 1977-84)

Mental retardation? (1971; 1977-84)

Migraines? (1973; 1978-84)

Cirrhosis of the liver? (1975; 1978-84)

Ulcer? (1975; 1978-84)

Limitation of activity because of: (1977)

Emotional condition?

Nervous condition?

Number of times married? (1973)

Smoking Supplement (ages 17 years and over) (1970)

Cigarettes:

Smoked at least 100 cigarettes in lifetime?

Currently smoke?

Length of time since smoked fairly regularly?

Reason(s) for quitting:

- Wanted to prove to yourself that you could?
- Had illness which thought would worsen?
- Felt smoking would damage health?
- Expense?
- Smell of smoke on breath and clothing?
- Doctor advised?
- Relative or friend's urging?
- Stains on teeth and fingers?
- To set good example?
- Media warnings about dangers of smoking?
- Smoking no longer enjoyable?
- Other?

Specify.

If more than one reason, main reason?

If quit less than 1 year ago, amount smoked 1 year ago?

Amount smoke per day?

Usually smoke regular, king, or extra long?

Usually smoke filtered or unfiltered?

Amount smoked when smoking most?

Age when started smoking fairly regularly?

Cigars:

Smoked at least 50 cigars in lifetime?

Currently smoke?

Amount smoked per day or week?

Length of time since smoked 3 or more per week?

If less than 1 year, amount smoked 1 year ago?

Usually smoke full size, cigarillos, or cigarette size?

Pipe:

Smoked at least 3 packages of pipe tobacco in lifetime? Currently smoke?

Amount smoked per day or week?

Length of time since smoked 3 or more pipefuls a week?

If less than 1 year, amount smoked 1 year ago?

Other tobacco use:

Snuff?

Chewing?

Other?

Prescribed Medicines Supplement (all ages) (1973)

Use of prescription medication in 2-week reference period?

Name of medication?

Condition for which medication was taken?

Method obtained:

Written prescription?

Refill?

Call to pharmacist?

Given by physician?

Source of payment?

Total cost?

Hypertension Supplement (ages 17 years and over) (1974)

Smoked at least 100 cigarettes in lifetime?

Currently smoke?

Amount smoke?

Ever tried to stop?

Tried to stop because of specific condition(s)?

- Specify.

Health Habits Supplement (ages 20 years and over) (1976)

Use of medicines, drugs, or pills for insomnia during the past 6 months?

Used one or more times per week?

Advised by doctor to take this medication?

Use of aspirin or aspirin-type pills in past 6 months?

Use one or more times per week?

Use of tobacco (cigarettes only)?

Smoked at least 100 cigarettes in lifetime?

Currently smoke?

Amount smoke?

Ever tried to stop?

Ever advised by doctor to stop?

- Advised to stop because of condition(s)?

Specify.

H-1 (Health Habits) Supplement (ages 20 years and over) (1977)

Alcohol consumption:

Frequency of drinking wine?

- Quantity consumed at one sitting?

Frequency of drinking beer?

- Quantity consumed at one sitting?

Frequency of drinking liquor?

- Ouantity consumed at one sitting?

Five or more drinks at one sitting in past 12 months?

Tobacco use (cigarettes only):

Smoked at least 100 cigarettes in lifetime?

Currently smoke?

Amount smoke per day?

Disability Supplement (ages 3 years and over) (1977)

Psychological counseling in past 12 months? (ages 3 and over)

Currently receiving?

Helped by it?

Currently need counseling?

Tried to get counseling?

Prescription medication taken for hyperactivity? (ages 3–18 years)

Smoking Supplement (ages 17 years and over) (1978–80)

Smoked at least 100 cigarettes in lifetime?

Age started smoking fairly regularly?

Currently smoke?

Amount smoke?

Amount smoked per day when smoking most?

Brand smoked (most)?

Type of cigarettes:

Filter or nonfilter?

Plain or menthol?

Hardpack or softpack?

Regular, king size, or 100 millimeter?

Ever made serious attempt to quit?

Number of times?

Number of times in past 12 months?

Length of time since start of last attempt to quit?

Length of time off cigarettes the last time?

Home Care Supplement (all ages) (1979-80)

Due to mental condition, needs help with:

Walking?

Going outside?

Using toilet?

Bathing?

Dressing?

Eating?

Getting in and out of bed?

Preparing meals?

Shopping for personal items?

Routine household chores?

Handling money?

Social support:

Had visits from a friend, relative, or neighbor (during 2-week reference period)?

- Number of visits?

Went to visit a friend, relative, or neighbor (during

2-week reference period)?

- Number of visits?

Child Health Supplement (ages 17 years and under) (1981)

Marital history of biological mother:

Current marital status?

Number of marriages?

Dates of marriages?

Dates of divorces, annulments, or deaths of spouses?

Length of time since separation?

Low birth weight (less than 5-1/2 pounds)?

Child ever had chronic conditions:

Ulcer?

· 整理教育各分的 西京人名

Stammering or stuttering?

Autism?

Mental retardation?

Migraines?

Frequent or severe headaches?

Use of medications during 2-week reference period:

Pain relievers such as aspirin or Tylenol?

- Main health problem for which child took the medication?
- Prescribed by physician?
- Recommended by physician?
- Frequency taken in past 3 months?

Tranquilizers or sedatives?

- Main health problem for which child took the medication?
- Prescribed by physician?
- Recommended by physician?
- Frequency taken in past 3 months?

Ever suspended or expelled from school?

Number of times?

Length of time since last suspension or expulsion?

Has school ever requested conference to discuss problems?

Length of time since last request?

Behavior (3 years and older).

Wet bed in past 12 months?

- Number of times?

Suck thumb or fingers?

Ever run away from home?

- Number of times?
- Age the last time?

Medication to control activity or behavior?

Ever seen a psychiatrist, psychologist, or psychoanalyst about any emotional, mental, or behavioral problem?

- Still seeing this person?
- Last time saw this person?

During past 12 months, has parent felt or has anyone suggested that child needed help for any emotional, mental, or behavioral problem:

Behavioral problems (4 years and older).

Have the following often, sometimes, or never been true of the child in the past 3 months?

- Sudden changes in mood or feelings?
- Feelings or complaints that no one loves him/her?
- Rather high strung, tense, or nervous?
- Cheats or tells lies?
- Too fearful or anxious?
- Argues too much?
- Difficulty concentrating, cannot pay attention for long?
- Easily confused, seems to be in a fog?
- Bullies, or is cruel or mean to others?
- Disobedient at home?
- Disobedient at school?
- Does not seem to feel sorry after misbehaves?
- Trouble getting along with other children?
- Trouble getting along with teachers?

- Impulsive, or acts without thinking?
- Feels worthless or inferior?
- Not liked by other children?
- Difficulty getting mind off certain thoughts, has obsessions?
- Restless or overly active, cannot sit still?
- Stubborn, sullen, or irritable?
- Very strong temper and loses it easily?
- Unhappy, sad, or depressed?
- Withdrawn, does not get involved with others?
- Breaks things on purpose?
- Clings to adults?
- Cries too much?
- Demands a lot of attention?
- Too dependent on others?
- Feels others are out to get him/her?
- Hangs around kids who get into trouble?
- Secretive?
- Worries too much?

Alcohol-Health Practices Supplement (ages 18 years and over) (1983)

Alcohol consumption — 26 questions.

See appendix V for detail.

Tobacco use (cigarettes only):

Smoked at least 100 cigarettes in lifetime?

Currently smoke?

Amount smoke?

Length of time since last smoked fairly regularly?

Tried to quit within past 5 years?

Methods of quitting used:

- Formal program?
- Consultation with health professional?
- Special filters or holders?
- Low tar and nicotine cigarettes?
- Stopped or tried to stop with friends, relatives, or acquaintances?
- Stopped entirely on own?
- Other method?Specify.

Aging Supplement (ages 55 years and over) (1984)

Length of time widowed, divorced, or separated? Social support:

Number of living sons?

Number of living daughters?

How quickly can children reach respondent?

Frequency of seeing any of children?

Frequency of talking on telephone with any of children?

Frequency of getting mail from any of children?

Number of living brothers?

Number of living sisters?

Telephone call service available to check on well-being (for persons residing in retirement community or complex)?

Use of a community service in past 12 months which

makes routine telephone calls to check on the health of elderly people?

During the past 2 weeks did you:

- Get together socially with friends or neighbors?
- Talk with friends or neighbors on the telephone?
- Get together with any relatives?
- Talk with any relatives on the telephone?
- Go to church or temple for services or other activities?
- Go to a show or movie, sports event, club meeting, classes, or other group event?

Present social activities sufficient?

Friend, relative, or neighbor available who would take care of you for:

- A few days, if necessary?
- A few weeks, if necessary?

Ever had Alzheimer's disease?

Ever worry about health in past year?

Perceived control over future health?

Frequency of having trouble remembering things in past year?

Frequency compared with 1 year ago?

Frequency of getting confused in the past year?

Frequency compared with 1 year ago?

Data tape availability

National Health Interview Survey, core data

Data year	NTIS accession no
1969	PB 235543
1970	PB 237322
1971	PB238524
1972	PB 285460
1973	PB 285511
1974	PB 285517
1975	PB 281126
1976	PB 300423
1977	PB 80-203953
1978	PB 81-179285
1979	PB 82-157173
1980	PB 83-248922
1981	PB 84-111657

National Health Interview Survey, Supplements

1970	Smoking
1973	Prescribed Medicines
1974	Hypertension
1976	Health Habits
1977	H-1 (Health Habits)
	Supplement
1977	Disability
1978-80	Smoking
197980	Home Care
1981	Child Health (Available in future)
1983	Alcohol-Health Habits
1984	(Available in future) Aging (Available in future)

Supplement tapes are available from the Division of Health Interview Statistics with the exception of the 1970 Smoking Supplement, which is available only as part of the core data tape distributed by NTIS. The 1977 Health Habits Supplement is available both as part of the core data tape and as a supplement tape.

Technical contact: Marie Marano

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Questionnaire source items

National Center for Health Statistics, G. E. Blanken: Current estimates from the Health Interview Survey, United States, 1969. Vital and Health Statistics. Series 10, No. 63. PHS Pub. No. 1000. Public Health Service. Washington. U.S. Government Printing Office, June 1971.

National Center for Health Statistics, M. H. Wilder: Current estimates from the Health Interview Survey, United States, 1970. *Vital and Health Statistics*. Series 10, No. 72. DHEW Pub. No. (HSM) 72–1054. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, May 1972.

National Center for Health Statistics, R. W. Wilson: Current estimates from the Health Interview Survey, United States, 1971. *Vital and Health Statistics*. Series 10, No. 79. DHEW Pub. No. (HSM) 73–1505. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, Feb. 1973.

National Center for Health Statistics, R. W. Wilson: Current estimates from the Health Interview Survey, United States, 1972. *Vital and Health Statistics*. Series 10, No. 85. DHEW Pub. No. (HRA) 74–1512. Health Resources Administration. Washington. U.S. Government Printing Office, Sept. 1973.

National Center for Health Statistics, M. H. Wilder: Current estimates from the Health Interview Survey, United States, 1973, *Vital and Health Statistics*. Series 10, No. 95. DHEW Pub. No. (HRA) 75–1522. Health Resources Administration. Washington. U.S. Government Printing Office, Oct. 1974.

National Center for Health Statistics, P. W. Ries: Current estimates from the Health Interview Survey, United States, 1974. *Vital and Health Statistics*. Series 10, No. 100. DHEW Pub. No. (HRA) 77–1527. Health Resources Administration. Washington. U.S. Government Printing Office, Feb. 1977.

National Center for Health Statistics, T. F. Drury: Current estimates from the Health Interview Survey, United States, 1975. *Vital and Health Statistics*. Series 10, No. 115. DHEW Pub. No. (HRA) 77–1543. Health Resources Administration. Washington. U.S. Government Printing Office, Mar. 1977.

National Center for Health Statistics, E. R. Black: Current estimates from the Health Interview Survey, United States, 1976. Vital and Health Statistics. Series 10. No. 119. DHEW

Pub. No. (PHS) 78-1547. Public Health Service. Washington. U.S. Government Printing Office, Nov. 1977.

National Center for Health Statistics, L. J. Howie and T. F. Drury: Current estimates from the Health Interview Survey, United States, 1977. *Vital and Health Statistics*. Series 10, No. 126. DHEW Pub. No. (PHS) 78–1554. Public Health Service. Washington. U.S. Government Printing Office, Sept. 1978.

National Center for Health Statistics, J. D. Givens: Current estimates from the Health Interview Survey, United States, 1978. *Vital and Health Statistics*. Series 10, No. 130. DHEW Pub. No. (PHS) 80–1551. Public Health Service. Washington. U.S. Government Printing Office, Nov. 1979.

National Center for Health Statistics, S. S. Jack and P. W. Ries: Current estimates from the Health Interview Survey,

United States, 1979. Vital and Health Statistics. Series 10. No. 136. DHHS Pub. No. (PHS) 81–1564. Public Health Service. Washington. U.S. Government Printing Office, Apr. 1981.

National Center for Health Statistics, S. S. Jack: Cur ent estimates from the Health Interview Survey, United States, 1980. Vital and Health Statistics. Series 10, No. 139. DHHS Pub. No. (PHS) 82–1567. Public Health Service. Washington. U.S. Government Printing Office, Dec. 1981.

National Center for Health Statistics, B. Bloom: Current estimates from the National Health Interview Survey, United States, 1981. Vital and Health Statistics. Series 10, No. 141. DHHS Pub. No. (PHS) 82–1569. Public Health Service. Washington, U.S. Government Printing Office, Oct. 1982.

National Medical Care Utilization and Expenditure Survey (NMCUES)

Survey design

This health care expenditures and utilization survey is of a panel of 17,500 civilian noninstitutionalized individuals throughout the United States and 13,400 individuals from Medicaid enrollment lists in California, Michigan, New York, and Texas. A multistage area probability sampling procedure was used and five mutually exclusive samples were obtained. Data were collected in 5 rounds of household interviews, conducted at 3-month intervals in 1980 and 1981.

Basic data elements

Data include access to medical care, episodes of illness and injury, number of bed days, restricted activity days, hospital admissions, physician and dental visits, other medical care encounters, and purchases of prescribed medicine. Detailed data were obtained for each contact with the medical care system.

ADM data elements

Restricted activity since (reference date) because of mental condition?

Number of bed days?

Number of work-loss days?

Number of days cut down on activities?

Limitation of activity because of mental condition?

Unable to perform usual activity for one's age and sex group?

Limited in kind or amount of usual activity?

Limited, but not in usual activity?

Visit to a medical person since (reference date)?

Type of professional seen?

- Psychiatrist?
- Psychologist?
- Psychiatric social worker?
- Other mental health person?

Number of times seen (since reference date)?

Visit to emergency room because of a mental condition?
Visit to a hospital clinic or outpatient department since (reference date)?

Type of professional seen:

- Psychiatrist?
- Psychologist?
- Social worker?

Hospitalized because of a mental condition?

Number of nights?

Received a separate bill for treatment by psychiatrist while hospitalized?

In addition to all previously mentioned contacts, any other visits to a psychiatrist, psychologist, psychiatric social worker, or any other mental health person?

Number of times since (reference date)?

Medicines prescribed for mental condition?

Date last obtained?

Number of times obtained since (reference date)?

Total cost?

Amount of money spent on pain relievers since (reference date)?

NOTE: The reference date for the first round of interviews was January 1, 1980. The reference date for rounds 2-4 was 3 months prior to the interview. The date for the last round was December 31, 1980.

Data tape availability

National Medical Care Utilization and Expenditure Survey, 1980.

NTIS accession no. PB 83-229542.

Technical contact: Robert Wright

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Questionnaire source items

National Center for Health Statistics, G. S. Bonham: Procedures and questionnaires of the National Medical Care Utilization and Expenditure Survey. *National Medical Care Utilization and Expenditure Survey*. Series A, Methodological Report No. 1. DHHS Pub. No. 83–20001. Public Health Service. Washington. U.S. Government Printing Office, Mar. 1983.

National Survey of Personal Health Practices and Consequences (NSPHPC)

Survey design

Telephone-administered, 2-wave panel survey is of 3,025 adults ages 20-64 years, living in households with telephones in the 48 contiguous United States. The multistage probability sample was selected using a random-digit-dialing technique. The first wave of the survey was conducted in 1979. In 1980, 2,436 of the Wave I respondents were successfully contacted and reinterviewed with virtually the same questionnaire.

Basic data elements

Data include information on personal health practices (such as smoking, drinking, sleeping, eating, physical activity, brushing and flossing teeth, using seatbelts), health status, functional limitations, use of health services, and history of family longevity.

ADM data elements

Frequency of taking medicines in past month? (1980)

Aspirin?

Medicine for indigestion?

Sleeping pills?

Tranquilizers?

Taken valium in past year? (1980)

Last time taken valium?

Tobacco use (cigarettes only):

Smoked at least 100 cigarettes in lifetime? (1979)

Smoked at least 100 cigarettes in past year? (1980)

Currently smoke?

Amount smoked?

Tar and nicotine level?

- Tar and nicotine level compared to 1 year ago? (1980)
- Change due to health-related condition? (1980)

Changed number or brand of cigarettes in past 2 years? (1979)

- Change due to health-related condition?

Amount smoked compared to 1 year ago? (1980)

- Change due to health-related condition?

Serious attempt to quit smoking in past 2 years?(1979)

Serious attempt to quit smoking in past year? (1980)

Alcohol consumption:

Ever drink alcoholic beverages?

- If not, did you drink 2 years ago? (1979)

Changed drinking pattern because a health-related problem?

Frequency of drinking wine, beer, liquor?

Amount drink per day on drinking days?

Drink more or less than 2 years ago? (1979)

Drink more or less than 1 year ago? (1980)

Worry about health in past year?

Perceived control over health?

Perceived control over high blood pressure?

Frequency of headaches, generally?

Energy level compared with peers?

Degree of emotional stress associated with job? Social support:

Social group participation?

- Labor or professional organizations?
- Church?
- Scouts or other organized youth groups?
- Community service?
- Social groups?

Religious attendance?

Number of close relatives?

Number of close friends?

Frequency of visits with any close friends and relatives?

Number of friends and relatives seen at least monthly?

Enough close friends and relatives?

Marital happiness?

Enjoyment of free time?

Time on hands?

Happiness these days?

Abbreviated General Well-Being Schedule.

In past month, frequency of feeling:

- Cheerful and lighthearted?
- Loved and wanted?
- Downhearted and blue?
- Lonely?

Inability to cope with daily problems? (1980)

Life events in past 5 years? (past year for Wave II)

Death of spouse or child?

Problems with steady date or fiance?

Serious financial difficulties or problems?

Own serious illness, injury, or operation?

Serious illness, injury, or operation of one of your children?

Serious illness, injury, or operation of spouse?

Unable to get medical treatment when seriously needed

for self, spouse, or child? Marital separation or divorce?

Other problems related to marriage?

Personal, emotional, behavioral, or mental problems in past year?

Severe?

Less than severe?

Needed professional help?

Sought professional help?

Ever had nervous breakdown?

Ever close to nervous breakdown?

Close to nervous breakdown in past year?

Still bothered?

NOTE: Items appear in both Waves I and II unless otherwise indicated.

Data tape availability

National Survey of Personal Health Practices and Consequences, Waves I and II.

NTIS accession no. PB 83-104323.

Technical contact: Patricia M. Golden

Division of Epidemiology and Health

Promotion

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Questionnaire source items

National Center for Health Statistics, K. M. Danchik, C. A. Schoenborn, and J. Elinson: Highlights from Wave I of the National Survey of Personal Health Practices and Consequences, United States, 1979. *Vital and Health Statistics*. Series 15, No. 1. DHHS Pub. No. (PHS) 81–1162. Public Health Service. Washington. U.S. Government Printing Office, June 1981.

National Center for Health Statistics, R. K. Eisenstadt and C. A. Schoenborn: Basic data from Wave II of the National Survey of Personal Health Practices and Consequences, United States, 1980. Working Paper Series. No. 13, Oct. 1982.

Section II: Health care statistics

National Ambulatory Medical Care Survey (NAMCS)

Survey design

Survey of approximately 3,000 non-Federal physicians in office-based practices in the 48 contiguous United States, who provide information using medical record encounter forms, on a systematic sample of about 50,000 patient visits annually. The survey is conducted weekly throughout the year, using a multistage probability sample. Between 1973 and 1981 NAMCS was conducted annually. Beginning in 1985, it will be conducted on a triennial basis.

Basic data elements

Reasons for visit and ICD-coded diagnoses (coded according to the ICD revision in use at the time of data collection), including injuries and poisonings, are listed up to a maximum of three each. See appendix II for discussion of ICD coding. Also included are data on whether or not a patient was ever seen for the particular problem before, length of time since onset of the problem, and diagnostic and therapeutic services ordered or provided.

ADM data elements

Patient information

Reason for visit:

Principal?

Other?

Seriousness? (1973-78)

Physician diagnosis (ICD coding):

Principal?

Other?

Treatment or service ordered or provided:

Prescription?

Psychotherapy or therapeutic listening?

Family or social counseling? (1980-81)

Disposition of visit?

Duration of visit?

Mental status examination administered? (1979-81)

Names of medications prescribed? (1980-81)

Physician information

Specialty?

Type of practice (for example, group or private)

Data tape availability

National Ambulatory Medical Care Survey.

Data year	NTIS accession no.
1973	PB 293900
1975	PB 290478
1976	PB 291152
1977	PB 80-130230
1978	PB 80-204092
1979	PB 82-122029
1980	PB 82-191941
1981	PB 83-199570

National Ambulatory Medical Care Survey—drug mentions.

Data year	NTIS accession no.
1980	PB 83-154799
1981	PB 83-199570

Technical contact: Ray Gagnon

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Questionnaire source items

NOTE: Although the titles of the following reports indicate only 1 data year, identical questionnaires were used for the 1 or 2 years shown in parentheses after the citation.

National Center for Health Statistics, J. E. DeLozier and R. O. Gagnon: The National Ambulatory Medical Care Survey, 1973 summary, United States, May 1973–April 1974. *Vital and Health Statistics*. Series 13, No. 21. DHEW Pub No. (HRA) 76–1772. Health Resources Administration Washington. U.S. Government Printing Office, Oct. 1975 (1973–74)

National Center for Health Statistics, H. Koch and T. McLemore: The National Ambulatory Medical Care Survey, 1975 summary, United States, January-December 1975. Vital and Health Statistics. Series 13, No. 33. DHEW Pub. No. (PHS 78-1784. Public Health Service. Washington. U.S. Government Printing Office, Jan. 1978. (1975-76)

National Center for Health Statistics, T. Ezzati and T. McLemore: The National Ambulatory Medical Care Survey, 1977 summary, United States, January-December 1977. *Vital and Health Statistics*. Series 13, No. 44. DHEW Pub. No. (PHS) 80–1795. Public Health Service. Washington. U.S. Government Printing Office, Apr. 1980. (1977–78)

National Center for Health Statistics, R.O. Gagnon, J. E. DeLozier, and T. McLemore: The National Ambulatory Medical Care Survey, United States, 1979, summary. *Vital and Health Statistics*. Series 13, No. 66. DHHS Pub. No. (PHS)

82-1727. Public Health Service. Washington. U.S. Government Printing Office, Sept. 1982.(1979)

National Center for Health Statistics, B. K. Cypress: Patterns of ambulatory care in general and family practice, the National Ambulatory Medical Care Survey, United States, January 1980–December 1981. *Vital and Health Statistics*. Series 13, No. 73. DHHS Pub. No. (PHS) 83–1734. Public Health Service. Washington, U.S. Government Printing Office, Sept. 1983. (1980–81)

National Hospital Discharge Survey (NHDS)

Survey design

Survey of patient discharges from about 450 short-stay, non-Federal hospitals throughout the United States, using a two-stage probability sample. Hospital selection is stratified by bed size, geographic region, and ownership. Data are abstracted from the face sheets of a systematic sample of discharged patients. The survey has been conducted annually since 1965.

Basic data elements

For the years 1965–82, data elements included patient characteristics (age, race, marital status); hospital characteristics (location, size, and ownership); all-listed diagnoses, including injuries and poisonings (coded according to the ICD revision in use at the time of data collection); all-listed procedures; average length of stay; and discharge status. In addition, an item on expected source of payment was included from 1977–82. See appendix II for discussion of ICD coding.

ADM data elements

Selected diagnoses of ADM disorders^a (ICD coding):

Organic psychotic conditions.

Schizophrenic disorders.

Other psychoses.

Anxiety states.

Other neuroses and personality disorders.

Alcohol dependence syndrome.

Drug dependence syndrome.

Nondependent abuse of drugs (including alcohol).

Other mental disorders.

Mental retardation.

Data tape availability

National Hospital Discharge Survey.

Data year	NTIS accession no.
1970	PB 270763
1971	PB 270765
1972	PB 270767
1973	PB 270769

^aThese disorders are listed for illustrative purposes only. All disorders listed on the hospital record are available on the tape.

1974	PB 270771
1975	PB 270773
1976	PB 82-179227
1977	PB 82-179326
1978	PB 82-179342
1979	PB 82-179334
1980	PB 83-126318
1981	Available from technical
	contact person.
1982	Available from technical
	contact person.

Technical contact: Robert Pokras

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Questionnaire source items

NOTE: Although the titles of the following reports indicate only 1 data year, identical questionnaires were used for the years shown in parentheses after the citation.

National Center for Health Statistics, A. L. Ranofsky: Utilization of short-stay hospitals, annual summary for the United States, 1974. Vital and Health Statistics. Series 13. No. 26. DHEW Pub. No. (HRA) 76–1777. Health Resources Administration. Washington. U.S. Government Printing Office, Sept. 1976. (1965–76)

National Center for Health Statistics, B. J. Haupt: Utilization of short-stay hospitals, annual summary for the United States, 1977. Vital and Health Statistics. Series 13, No. 41. DHEW Pub. No. (PHS) 79–1557. Public Health Service. Washington. U.S. Government Printing Office, Mar. 1979. (1977–78)

National Center for Health Statistics, E. McCarthy: Inpatient utilization of short-stay hospitals, by diagnosis, United States, 1979. *Vital and Health Statistics*. Series 13. No. 69. DHHS Pub. No. (PHS) 83–1730. Public Health Service. Washington. U.S. Government Printing Office, Dec. 1982. (1979–80)

National Center for Health Statistics, E. J. Graves and B. J. Haupt: Utilization of short-stay hospitals, United States, 1981 annual summary. *Vital and Health Statistics*. Series 13, No. 72. DHHS Pub. No. (PHS) 83–1733. Public Health Service. Washington. U.S. Government Printing Office, Aug. 1983. (1981–82)

National Nursing Home Survey (NNHS)

Survey design

Survey of current residents, discharged residents, and employees of U.S. nursing homes, using a two-stage cluster probability sample. Nursing home selection was stratified by bed size and type of service. A systematic sample of current residents, discharged residents (1977), and employees was then selected. Two cycles of NNHS have been conducted. The 1973-74 national survey covered approximately 1,900 nursing homes, 19,000 current residents, and 21,000 employees. The 1977 national survey covered approximately 1,500 nursing homes, 7,000 current residents, 5,100 discharged residents, and 13,600 employees. The national sample was augmented in 1977 in California, Illinois, Massachusetts, New York, and Texas to produce State-level estimates. The total sample for these 5 States included 650 nursing homes, 3,100 current residents, 2,500 discharged residents, and 5,700 employees.

Basic data elements

Administrative information is available for the facility and the staff. Data for current and discharged residents consist of information on diagnoses (including "accident, poisonings, and violence" in 1973-74 and "hip and other fractures" in 1977), functional status, physician and other services received, visitors, and overnight leave.

ADM data elements

Facility questionnaire

Persons accepted with the following primary diagnoses? (1977)

Mental illness or emotional disturbance?

Mental retardation?

Alcoholism?

Drug addiction?

Senility?

Services routinely provided on premises?

Counseling by social worker, psychologist, or mental health worker? (1973-74)

Counseling or therapy by psychiatrist, psychologist, or mental health worker? (1977)

Counseling by social worker? (1977)

Services provided to nonresidents:

Friendly visiting? (1973–74; 1977)

Daily telephone checking service? (1973–74; 1977)

Psychiatric care? (1977)

Resident questionnaire

Place of residence prior to current admission?

Mental hospital or other long-term speciality hospital?

Facility for mentally retarded? (1977)

Mental hospital? (1977)

Anticipated place of residence after discharge?

Mental hospital? (1977)

Primary reason for admission?

Behavioral (disruptive behavior, mental deterioration)? (1973-74)

Social (lack of family or family interest)? (1973-74;

Mental illness? (1977)

Mental retardation? (1977)

Disruptive behavior? (1977)

Primary diagnosis at time of admission? (1973-74)

Senility?

Mental disorders (mental retardation, psychoses, neuroses, and the like)?

Primary diagnosis at time of last medical examination?

Senility? (1973-74)

Mental disorders (mental retardation, psychoses,

neuroses, and the like)?(1973-74)

Chronic brain syndrome? (1977)

Mental retardation? (1977)

Neurosis? (1977)

Psychosis? (1977)

Senile psychosis (senile dementia)?(1977)

Senile, not psychotic? (1977)

Other mental disorders? Specify. (1977)

Alcoholism? (1977)

Cirrhosis of the liver? (1977)

Drug addiction? (1977)

Ulcers? (1977)

Current conditions or impairments?

Senility? (1973-74; 1977)

Mental illness? (1973-74; 1977)

Mental retardation? (1973–74; 1977)

Chronic brain syndrome? (1977)

Insomnia? (1977)

Alcoholism? (1977)

Drug addiction? (1977)

Medications received during past 7 days? (1973-74)

Tranquilizers?

Hypnotics, sedatives?

Antidepressants?

Conditions for which resident received medication in past 7 days? (1977)

Senility?

Mental illness?

Mental retardation?

Chronic brain syndrome?

Insomnia?

Alcoholism?

Drug addiction?

Tranquilizers received in past 7 days? (1977)

For what conditions?

Number of times in past month resident received professional counseling by social worker, psychologist, or other mental health worker? (1973–74)

Number of hours during the past month resident received: (1977)

Counseling or therapy by a psychiatrist, psychologist, or other mental health worker?

Counseling by a social worker?

Resident exhibits any of the following behavioral problems:

Depressed or withdrawn? (1973-74; 1977)

Agitated, nervous? (1973-74; 1977)

Abusive, aggressive, disruptive? (1973-74; 1977)

Confused, senile? (1973-74)

Disturbed sleep? (1973–74)

Wandering? (1977)

Other problem behavior? (1973-74; 1977)

Frequency behavioral problem is exhibited? (1973-74)

Current nonverbal communication of physical needs due to mental or emotional problem? (1977)

Extra nursing care required because resident is: (1977)

Depressed or withdrawn?

Agitated, nervous?

Abusive, aggressive, disruptive?

Prone to wandering?

Exhibiting other problem behavior?

Participation in organized recreational activities in the facility in past month? (1977)

Participation in recreational or leisure activities outside the facility in the past month? (1973–74; 1977)

Reasons for not participating?

- Not interested?
- Confused?
- Behavioral problem?
- No one to accompany?

Leave from facility for 1 night or longer during past 12 months?

Most recent place of visit? (1977)

- Length of time?

Usual place of visit? (1973-74)

- Frequency?

Why no overnight leave? (1977)

- Not interested?
- Confused, disoriented, frightened?

- Behavioral problem?
- No place to go?

Visitors?

Relationship to resident? (1977)

Frequency with which resident has any visitors? (1973–74; 1977)

Discharged resident questionnaire: (1977)

Resident discharged to mental hospital?

Exhibition of any of the following conditions or impairments by former resident?

Senility?

Mental retardation?

Mental illness?

Chronic brain syndrome?

Insomnia?

Alcoholism?

Drug addiction?

Primary diagnosis at time of former resident's admission?

Chronic brain syndrome?

Mental retardation?

Neurosis?

Psychosis?

Senile psychosis?

Senile, not psychotic?

Other mental disorders?

- Specify.

Drug addiction?

Alcoholism?

Cirrhosis of the liver?

Ulcers?

During month prior to discharge, did former resident receive:

Counseling or therapy by a psychiatrist, psychologist, or other mental health worker?

Counseling by a social worker?

Reality orientation?

Staff questionnaire

Number of nondegree training courses taken in past year in mental or social problems of the aged or chronically ill? (1973–74)

Enrollment in past 12 months in nondegree training courses in mental or social problems of the aged or chronically ill? (1977)

Performs work, counseling services? (1977)

Data tape availability

National Nursing Home Survey, 1973-74.

Available from NCHS, Division of Health Care Statistics.

National Nursing Home Survey, 1977.

NTIS accession no. PB 80-188030.

National Nursing Home Survey, 1977, Five States (Calif., Ill., Mass., N.Y., Tex.).

NTIS accession no. PB 80-188717.

Technical contact: Esther Hing

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Questionnaire source items

National Center for Health Statistics, A. Sirrocco and H.W. Koch: Nursing homes in the United States, 1973-74, National Nursing Home Survey. *Vital and Health Statistics*. Series

14, No. 17. DHEW Pub. No. (HRA) 78–1812. Health Resources Administration. Washington. U.S. Government Printing Office, Oct. 1977.

National Center for Health Statistics, J. F. Van Nostrand, A. Zappolo, E. Hing, et al.: The National Nursing Home Survey, 1977 Summary for the United States. *Vital and Health Statistics*. Series 13, No. 43. DHEW Pub. No. (PHS) 79–1794. Public Health Service. Washington. U.S. Government Printing Office, July 1979.

National Master Facility Inventory (NMFI)

Survey design

Survey of all hospitals in the United States, carried out annually from 1963 through 1976. Survey of all nursing and related care homes in the United States was carried out in 1963, 1967, 1969, 1971, 1973, 1976, 1978, 1980, and 1982. The data were gathered using a mail questionnaire.

Basic data elements

Comprehensive list of U.S. facilities that provide medical, nursing, personal, or custodial care to groups of unrelated persons on an inpatient basis. Data for hospitals include name of facility, ownership, type of facility, number of beds, days of care, discharges, admissions, type of service, outpatient visits, employees, and facilities and services offered. Data for nursing homes and other health facilities include name of facility, address, number of beds, ownership, type of facility, ages and sexes served, and number of residents.

ADM data elements

Nursing and related care homes

Resident facility for:

Emotionally disturbed? (1971-80)

Alcoholics or drug abusers? (1971)

Alcoholics? (1973-80)

Drug abusers? (1973-80)

Mentally retarded? (1971-80)

- Programs provided for mentally retarded: (1971)
- Classes for educable children?
- Classes for trainable children?
- Classes for profoundly retarded children?
- Classes for adults?
 - Specify.
- Vocational training or counseling?
- Occupational therapy?
- Physical therapy?
- Other programs?
 - Describe.
- None of the above.

^bData for years subsequent to 1976 are available from the American Hospital Association, 840 Lake Shore Drive, Chicago, III. 60611.

Number of residents during the previous night with the following: (1973)

Emotional disturbance (excluding senility)?

Mental retardation?

Facility accepts: (1976)

Mentally ill or emotionally disturbed?

Mentally retarded?

Alcoholics?

Drug addicts?

Senile?

Number of full-time employees in this facility who are: (1973–82)

Psychologists? (1973)

Medical social workers?

Recreation therapists or activities directors?

Number of part-time employees in this facility who are: (1973-82)

Psychologists? (1973)

Medical social workers?

Recreation therapists or activities directors?

Hospitals

Type of service hospital provides to majority of patients?

Psychiatric?

Narcotic addiction? (1971-74)

Mental retardation? (1971; 1974-76)

Alcoholism?

Facilities and services located within the hospital?

Psychiatric inpatient unit?

- Number of beds?

Psychiatric outpatient unit?

Psychiatric partial hospitalization program?

Psychiatric emergency services?

Psychiatric foster or home care?

Psychiatric consultation and education services?

Clinical psychology services? (1972–76)

Social work department? (1973)

Alcohol or chemical dependency inpatient unit? (1975–76)

- Number of beds?

Alcoholism or chemical dependency outpatient services? (1975–76)

Admission of psychiatric patients to general service? (1971)
Organized treatment program for drug abuse patients? (1971)

^{&#}x27;Items appear in all years of the survey unless otherwise noted.

Data tape availability

National Master Facility Inventory—nursing homes, and other health facilities.

Data year	NTIS accession no.
1971	PB 287270
1973	PB 287268
1976	PB 287230
1980	PB 83-178459
1982	Expected to be available
	Mar. 1985

National Master Facility Inventory—hospitals.

Data year	NTIS accession no.
1971	PB 284912
1972	PB 284914
1973	PB 284916
1974	PB 284918
1975	PB 284920
1976	PB 284922

Technical contact: Al Sirrocco

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Questionnaire source items

National Center for Health Statistics, A. Sirrocco: Inpatient health facilities as reported from the 1971 MFI Survey. Vital

and Health Statistics. Series 14, No. 12. DHEW Pub. No. (HRA) 74-1807. Health Resources Administration. Washington. U.S. Government Printing Office, Mar. 1974.

National Center for Health Statistics, A. Sirrocco: Inpatient health facilities as reported from the 1973 MFI Survey. *Vital and Health Statistics*. Series 14, No. 16. DHEW Pub. No. (HRA) 76–1811. Health Resources Administration. Washington. U.S. Government Printing Office, May 1976.

National Center for Health Statistics, J. F. Sutton and A. Sirrocco: Inpatient health facilities as reported from the 1976 MFI Survey. *Vital and Health Statistics*. Series 14, No. 23. DHEW Pub. No. (PHS) 80–1818. Public Health Service. Washington. U.S. Government Printing Office, Jan. 1980.

National Center for Health Statistics, G. W. Strahan: Inpatient health facilities statistics, United States, 1978. *Vital and Health Statistics*. Series 14, No. 24. DHHS Pub. No. (PHS) 80–1819. Public Health Service. Washington. U.S. Government Printing Office, Mar. 1981.

National Center for Health Statistics, A. Sirrocco: Nursing and related care homes, as reported from the 1980 NMFI Survey. *Vital and Health Statistics*. Series 14, No. 29. DHHS Pub. No. (PHS) 84–1824. Public Health Service. Washington. U.S. Government Printing Office, Dec. 1983.

Section III: Vital statistics surveys

National Survey of Family Growth (NSFG) Cycle III

Survey design

Survey of U.S. women ages 15–44 years, conducted on a cyclical basis. using a multistage area probability sample. Cycle III interviews were conducted in 1982 with approximately 8,000 women, including both ever married and never married women.

Basic data elements

Data include marital history, a detailed pregnancy history, fecundity and expected or intended future births, pregnancy planning practices and utilization of specific contraceptive methods, the source of financing of family planning services, and information on sex education and the sexually active population.

ADM data elements

Average number of cigarettes smoked per day during last pregnancy?

Frequency of drinking any alcoholic beverages during last pregnancy?

Data tape availability

National Survey of Family Growth, Cycle III. 1982 Combined Respondent-Interval File. NTIS accession no. PB 85–100022.

Technical contact: William Pratt, Ph.D.

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Questionnaire source items

Questionnaire available from technical contact person.

National Natality Survey (NNS) and National Fetal Mortality Survey (NFMS)

Survey design

National Natality Surveys, conducted in 1963-69, 1972, and 1980, were based on probability samples of registered births occurring in a calendar year in each registration area in the United States. For the first time in 1980, the natality survey was accompanied by the 1980 National Fetal Mortality Survey based on a sample of registered late fetal deaths. In the 1980 NNS-NFMS, questionnaires were mailed to married mothers, hospitals where the deliveries occurred, attendants at delivery, and X-ray technicians and radiologists. In 1967-69 and 1972, NNS samples were limited to in-wedlock births, and questionaires were mailed to mothers. In 1972, hospitals and attendants were also surveyed. The data sets consist of birth certificate information for all sample births and questionnaire information for survey respondents. In cases of nonresponse, imputation procedures were employed to complete the data file and weight the samples up to national estimates. Information on smoking and alcohol use was collected from married mothers in the 1967-69 NNS and in the 1980 NNS-NFMS. Samples consisted of approximately 3,600 live births to married women in each of the 1967-69 surveys, and 9,941 live births and 6,386 late fetal deaths to married and unmarried women in the 1980 survey. In 1967, the survey response rate was 91 percent; in 1968-69, it was 87 percent. In 1980, of the 7,825 married women with live births and 4,815 married women with fetal deaths who were sent questionnaires, response rates were 79.5 percent and 74.5 percent, respectively.

Basic data elements

Survey data include about 300 items, such as medical care of the mother, breastfeeding practices, information about previous pregnancies, childbearing expectations, sterilization, health status of mother and child, marital history, electronic fetal monitoring (1980), and amniocentesis (1980). In addition, the vital record contains basic sociodemographic data, State of birth, number of previous children born alive, number of fetal deaths, birth order, birthweight, and completed weeks of pregnancy.

ADM data elements

Tobacco use:

Smoked at all during 12 months before delivery? (1967-69; 1980)

Smoking practices before you found out you were pregnant:

- Amount smoked per day? (1967–69; 1980)
- Brand? (1980)
- Filter or nonfilter? (1980)
- Hard or softpack? (1980)
- Menthol or regular? (1980)
- Regular length, king size, or 100 or 120 millimeter?
 (1980)

Smoking practices after you found out you were pregnant:

- Amount smoked per day? (1967-69; 1980)
- Brand? (1980)
- Filter or nonfilter? (1980)
- Hard or softpack? (1980)
- Menthol or regular? (1980)
- Regular length, king size, or 100 or 120 millimeter?
 (1980)

Alcohol consumption: (1980)

Drank any alcoholic beverages (beer, wine, or liquor) during the 12 months prior to delivery?

Alcohol consumption prior to pregnancy:

- Frequency of drinking any alcoholic beverage?
- Number of drinks on drinking days?

Alcohol consumption during pregnancy:

- Frequency of drinking any alcoholic beverages?
- Number of drinks on drinking days?

Type(s) of alcohol usually consumed (beer, wine, or liquor)?

Medication use: (1980)

Number of aspirin tablets taken per month during pregnancy?

Data tape availability

National Natality Surveys.

Data year	NTIS accession no.
1964-66 (one tape)	PB 237326
1967	PB 300997
1968	PB 301157
1969	PB 300999
1972	PB 301358

The National Natality Survey and the National Fetal Mortality Survey—1980.

NTIS accession no. PB 84-177310.

Technical contact: Paul Placek, Ph.D., or
Kenneth Keppel, Ph.D.
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Hyattsville, Md. 20782

(301) 436-8954

Questionnaire source items

National Center for Health Statistics, K. G. Keppel, P. J. Placek, S. Botman, and I. M. Shimizu: Methods and response

characteristics, 1980 National Natality and Fetal Mortality Surveys. *Vital and Health Statistics*. Series 1. Public Health Service. DHHS, Hyattsville, Md. To be published.

National Mortality Survey (NMS)

Survey design

The survey is based on a systematic random sample of all deaths occurring in the United States to persons 35–84 years of age in 1966, 1967, and 1968. The sample was stratified for month of death, geographic area, age, and selected causes of death related to smoking. A total sample of about 19,500 decedents was drawn over the 3 years. Questionnaires were mailed to surviving relatives or other informants, with a final response rate of 95 percent. In cases where portions or all of the survey information was not obtained, imputation procedures were employed to complete the data file.

Basic data elements

Survey data include value of things owned by decedents and spouse, total family income of decedent's family in year before death, date of birth of surviving spouse, number of decedent's children in household, date of birth of oldest child in household, and number of children under 18 years old in family. In addition to sociodemographic information, death certificate data include place of death, date of death, underlying cause, and relationship of informant to decedent.

ADM data elements

Tobacco use:

Did the deceased smoke as many as five packs of cigarettes in entire life?

During the period of heaviest smoking, average amount smoked per day?

During year before death, average amount smoked per day?

Three years before death, average amount smoked per day?

Three years before death, smoked cigars? Three years before death, smoked a pipe?

Data tape availability

National Mortality Survey, 1966–68 (one tape). NTIS accession no. PB 80–117138.

Technical contact: Isadore Seeman

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Questionnaire source items

Questionnaires available from technical contact person.

Section IV: Vital statistics

Mortality Statistics (MS)

Survey design

One hundred percent of deaths have been registered in the United States since 1933. Deaths are registered by the States and reported to NCHS on an ongoing basis.

Basic data elements

Detailed data include characteristics of the location of residence of the deceased; age at death; day of death (1972–77); whether or not autopsy was performed (1972–77); whether or not findings were used (1972-77); multiple causeof-death codes (1968-present), and underlying cause-of-death codes, which include codes for accidents and injuries. (Coded according to the ICD revision in use at the time of data collection. See appendix II for discussion of ICD coding). Local area summary and cause-of-death summary tapes contain selected data from the detailed tapes.

ADM data elements

Selected causes of death (ICD coding):

Senile and presenile organic psychotic conditions.

Alcoholic psychosis.

All other psychoses.

Alcohol dependence syndrome.

Drug dependence.

Other neurotic, personality and nonpsychotic mental disorders.

Mental retardation.

Senility without mention of psychosis.

Suicide by:

- Drugs.
- Other solid or liquid substances.
- Gases and vapors.
- Hanging, strangulation, and suffocation.
- Handgun.
- All other and unspecified firearms.
- All other means.

Diseases of the digestive system.

Chronic liver disease and cirrhosis, specified as alcoholic.

Homicide.

Data tape availability

Vital Statistics Mortality—detail, 1968-81.

Data year	NTIS accession no.
1968	PB 300800
1969	PB 299676
1970	PB 299679
1971	PB 300802
1972	PB 300885
1973	PB 300805
1974	PB 300807
1975	PB 300809
1976	PB 300811
1977	PB 300798
1978	PB 81-125106
1979	PB 83-132357
1980	PB 83-261552
1981	PB 84-213016

Vital Statistics Mortality—local area summary, 1968-81.

Data year	NTIS accession no
1968	PB 238827
1969	PB 80-126618
1970	PB 80-108749
1971	PB 80-126642
1972	PB 80-126667
1973	PB 80-133374
1974	PB 80-126683
1975	PB 80-134158
1976	PB 80-134117
1977	PB 80-131675
1978	PB 81-100232
1979	PB 83-143230
1980	PB 83-261636

Vital Statistics Mortality—cause-of-death summary.

Data year	NTIS accession no.
1968	PB 80-126550
1969	PB 80-133358
1970	PB 80-133333
1971	PB 80-133317

1972	PB 80-133275
1973	PB 80-126576
1974	PB 80-133291
1975	PB 80-134133
1976	PB 80-134091
1977	PB 80-126592
1978	PB 81-100257
1979	PB 83-132373
1980	PB 83-261578
1981	PB 84-213032

Vital Statistics Mortality—multiple cause of death, detail, 1968-80.

Data year	NTIS accession no.
1968	PB 82-191800
1969	PB 82-155011
1970	PB 82-121716
1971	PB 82-142654
1972	PB 82-191966
1973	PB 82-191644
1974	PB 82-186164
1975	PB 82-157322
1976	PB 81-186827
1977	PB 81-217382
1978	PB 82-105743
1979	PB 83-153031
1980	PB 84-112200

Technical contact: Mabel Smith

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Questionnaire source items

National Center for Health Statistics: Vital Statistics of the United States, 1968, Vol. II, Mortality, Part B. DHEW Pub. No. (HSM) 72–1102. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, 1971.

National Center for Health Statistics: Vital Statistics of the United States, 1969, Vol. II, Mortality, Part B. DHEW

Pub. No. (HSM) 73–1102. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, 1973.

National Center for Health Statistics: Vital Statistics of the United States, 1970. Vol. II, Mortality, Part B. DHEW Pub. No. (HRA) 74–1102. Health Resources Administration. Washington, U.S. Government Printing Office, 1974.

National Center for Health Statistics: Vital Statistics of the United States, 1971, Vol. II, Mortality, Part B. DHEW Pub. No. (HRA) 75–1102. Health Resources Administration. Washington. U.S. Government Printing Office, 1974.

National Center for Health Statistics: Vital Statistics of the United States, 1972, Vol. II, Mortality, Part B. DHEW Pub. No. (HRA) 76–1115. Health Resources Administration. Washington. U.S. Government Printing Office, 1975.

National Center for Health Statistics: Vital Statistics of the United States, 1973, Vol. II, Mortality, Part B. DHEW Pub. No. (HRA) 76–1102. Health Resources Administration. Washington. U.S. Government Printing Office, 1975.

National Center for Health Statistics: Vital Statistics of the United States, 1974, Vol. II, Mortality, Part B. DHEW Pub. No. (HRA) 76–1115. Health Resources Administration. Washington. U.S. Government Printing Office, 1976.

National Center for Health Statistics: Vital Statistics of the United States, 1975, Vol. II, Mortality, Part B. DHEW Pub. No. (PHS) 78–1102. Public Health Service. Washington. U.S. Government Printing Office, 1977.

National Center for Health Statistics: Vital Statistics of the United States, 1976, Vol. II, Mortality, Part B. DHEW Pub. No. (PHS) 80–1101. Public Health Service. Washington. U.S. Government Printing Office, 1980.

National Center for Health Statistics: Vital Statistics of the United States, 1977, Vol. II, Mortality, Part B. DHHS Pub. No. (PHS) 80–1102. Public Health Service. Washington. U.S. Government Printing Office, 1980.

National Center for Health Statistics: Vital Statistics of the United States, 1978, Vol. II, Mortality, Part B. DHHS Pub. No. (PHS) 82–1102. Public Health Service. Washington. U.S. Government Printing Office, 1982.

Volumes for subsequent data years are not yet published.

Divorce Statistics (DS)

Survey design

Divorce counts are obtained from all States and counties in the United States. In addition, States in the divorce registration area (DRA) provide either microfilm copies of divorce certificates or machine-readable data tapes. The detailed divorce tapes contain a sample from the microfilm records and all of the records from States that supply machine-readable tapes. Detailed data are available for all years since 1958 for States in the DRA. The following States have participated in the DRA: Alabama, Alaska, California, Connecticut, Delaware, Georgia, Hawaii, Idaho, Illinois, Iowa, Kansas, Kentucky, Maryland, Massachusetts, Michigan, Missouri, Montana, Nebraska, New Hampshire, New York, North Carolina, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Utah, Vermont, Virginia, Wisconsin, and Wyoming, and the Virgin Islands. The total number of participating States has expanded from 14 in 1958 to 31 in 1981. California dropped out in 1978.

Basic data elements

For 1958-67 data are published showing tabulations of counts of divorces by region, State, and county. For registration States there are also tabulations on the plaintiff, duration of the marriage, and number of children. Shown separately for the husband and wife are race, ages at marriage and divorce, and marriage order.

From 1968 forward computer tapes are available in addition to the published annual volumes. These tapes contain region, division, and State of divorce and marriage; month and year of marriage, separation, and divorce, and durations between these events; plaintiff; and number of children under 18 years of age. They also contain, separately for the husband and wife, age, race, education, and number of times married, widowed, and divorced. Not all items are reported by every registration State in every year.

ADM data elements

Total U.S. population

Number of divorces by region, State, and county.

Divorce registration area States

Number of this marriage. Previous marital status.

Duration of marriage. Number of children under 18 years of age.

Data tape availability

Vital Statistics—Divorce, detail, 1968-81.

Data year	NTIS accession no.
1968	PB 238824
1969	PB 238825
1970	PB 80-186745
1971	PB 80-187164
1972	PB 80-187180
1973	PB 80-187149
1974	PB 80-187123
1975	PB 80-186786
1976	PB 80-186760
1977	PB 80-186729
1978	PB 81-100216
1979	PB 81-238800
1980	PB 83-242644
1981	PB 84-164185

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Questionnaire source items

National Center for Health Statistics: Vital Statistics of the United States, 1968, Vol. III, Marriage and Divorce, DHEW Pub. No. (HSM) 72–1103. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, 1971.

National Center for Health Statistics: Vital Statistics of the United States, 1969, Vol. III, Marriage and Divorce. DHEW Pub. No. (HSM) 73–1103. Health Services and Mental Health Administration. Washington. U.S. Government Printing Office, 1972.

National Center for Health Statistics: Vital Statistics of the United States, 1970, Vol. III, Marriage and Divorce. DHEW Pub. No. (HRA) 75–1103. Health Resources Administratior. Washington. U.S. Government Printing Office, 1974.

National Center for Health Statistics: Vital Statistics of the United States, 1971, Vol. III, Marriage and Divorce. DHEW Pub. No. (HRA) 76–1103. Health Resources Administration. Washington. U.S. Government Printing Office, 1975.

National Center for Health Statistics: Vital Statistics of the United States, 1972, Vol. III, Marriage and Divorce. DHEW Pub. No. (HRA) 76–1105. Health Resources Administration. Washington. U.S. Government Printing Office, 1976.

National Center for Health Statistics: Vital Statistics of the United States, 1973, Vol. III, Marriage and Divorce. DHEW Pub. No. (HRA) 77-1103. Health Resources Administration. Washington. U.S. Government Printing Office, 1977.

National Center for Health Statistics: Vital Statistics of the United States, 1974. Vol. III, Marriage and Divorce. DHEW Pub. No. (PHS) 78–1103. Public Health Service. Washington. U.S. Government Printing Office, 1977.

National Center for Health Statistics: Vital Statistics of the United States, 1975, Vol. III, Marriage and Divorce. DHEW Pub. No. (PHS) 79–1103. Public Health Service. Washington. U.S. Government Printing Office, 1979.

National Center for Health Statistics: Vital Statistics of the United States, 1976, Vol. III, Marriage and Divorce. DHEW Pub. No. (PHS) 81–1103. Public Health Service. Washington. U.S. Government Printing Office, 1980.

National Center for Health Statistics: Vital Statistics of the United States, 1977, Vol. III, Marriage and Divorce. DHEW Pub. No. (PHS) 81–1121. Public Health Service. Washington. U.S. Government Printing Office, 1981.

National Center for Health Statistics: Vital Statistics of the United States, 1978, Vol. III, Marriage and Divorce. DHEW Pub. No. (PHS) 82–1103. Public Health Service. Washington. U.S. Government Printing Office, 1982.

National Center for Health Statistics: Vital Statistics of the United States, 1979, Vol. III, Marriage and Divorce. DHEW Pub. No. (PHS) 84–1103. Public Health Service. Washington. U.S. Government Printing Office, 1984.

Volumes for subsequent data years are not yet published.

Appendixes

Appendixes

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Appendix I
Summary of alcohol, drug,
and mental health
(ADM) measures

Summary of alcohol, drug, and mental health (ADM) measures

Table I: Summary of alcohol, drug use, and mental health (ADM) measures, by survey or data system

ADM measures ^{1,2}	NHES Cycle I	NHES Cycle II	NHES Cycle III	NHANES I	NHANES I Followup	NHANES II	HHANES
Mental health scales or indexes							
CES-D ³			•	x	×		x
Coronary-prone behavior					x	X	
DIS Depression Section ⁴							X
General Well-Being Schedule ⁵				X	X		
Mental Status Exam					X		
Openness to New Experiences					X		
Mental health single items							
tappiness				×	×		X
Mental status	v	~	v	v	v	v	
Nervousness or breakdown	X	X X	X X	X X	X	X X	x
Suicide		^	^	^		^	â
Physical symptoms						•	
Headaches and migraines	×						
Nightmares	x	x	x				
Other sleep disturbances	×		X	X	X		×
Speech problems						X	X
Other symptoms of distress	X			X	X		
Clinical conditions							
Alzheimer's or senility							
Cirrhosis ⁶					X		×
Hyperactivity		×				X	
Mental retardation						X	X
Utilization or provision							
Mental health services			x	X	X		
Special school resources		×	×				
Other health services for mental condition			, X	X			
Medication use or prescription							
Aspirin				×			X
Psychotropics				X	X		X
Sleeping pills				X	X		X
Psychosocial risk factors							
Life events or stress				x			
Social support		X		X	X		
Psychological examination							
wisc ⁷	X	X					
WRAT ⁶	X	X					
Draw-a-person ⁹	X	X X	x				
Substance abuse		•	.,				
Alcohol use or abuse				x	x		×
Drug use or abuse				^	^		x
Smoking			X	x	×	X	â

¹ Variables are not identical across surveys.
2 Some variables noted individually are also components of scales or indexes.
3 Center for Epidemiologic Studies Depression Scale.
4 Diagnostic Interview Schedule Depression Section.
5 The General Well-Being Schedule is abbreviated in the NHANES Followup and the NSPHPC.
6 Cirrhosis may or may not be associated with alcohol consumption.
7 Wechsler Intelligence Scale for Children.
8 Wide Range Achievement Test.
9 Harris-Goodenough Draw-a-Person Test.

Table I: Summary of alcohol, drug use, and mental health (ADM) measures, by survey or data system—Con.

IHIS	NMCUES	NSPHPC	NAMCS	NHDS	NNHS	NMFI	NSFG	NNS NFMS	NMS	MS
					,					
				•						
		×								
		×								
x		^	X							
X X X		x								
X		×			X	x				
										Х
v		v								
X		X								
					X					
X										
v					~	x				x
X					X X	^				^
X X X										
X					X	X				Х
x	x	x	x		x	x				
^	^	^	^		^	^				
X	x		x	x						
X X X	X	X	v		~			X		
X	X X X	X X X	X X		X X					
X X		X X								
Х		X			X					
v		x				Y	x	x		¥
X					X	×				X X
X		Х					x	x	X	• •

Appendix II
International Classification
of Diseases (ICD)

International Classification of Diseases (ICD)

The International Classification of Diseases (ICD) is published by the World Health Organization and is revised approximately every 10 years. The Ninth Revision of the ICD, including the ICD-9-CM (a clinical modification of the ICD developed jointly by NCHS, the Health Care Financing Administration, and other U.S. organizations in the health care field), came into use in 1979 for all NCHS surveys that employ the ICD coding system. Prior to the Ninth Revision, NCHS data systems did not all begin using the new revisions in the same data year. The Eighth Revision (including the ICD-Adapted) was used from approximately 1968 to 1978, and the Seventh Revision was used from approximately 1958 to 1967. Users who intend to use condition data from these earlier years should consult the data system's technical contact regarding the ICD revision in use at the time and any modifications made to the official ICD codes.

A study of the comparability of the Eighth and the Ninth Revisions using data from three of the Center's morbidity surveys (that is, the National Health Interview Survey, the National Ambulatory Medical Care Survey, and the National Hospital Discharge Survey) is just being completed, and comparability ratios will be available. An independent study has been conducted by the Division of Vital Statistics, and comparability ratios between the Eighth and Ninth Revisions for selected causes of death are currently available. An earlier publication presented similar comparability ratios for the Seventh and Eighth Revisions. These ratios assist

researchers in interpreting trends in ICD-coded conditions that may be attributable to changes in the classification system.

ICD is used for classifying conditions reported by respondents in the National Health Interview Survey and the National Medical Care Utilization and Expenditure Survey. An extensive coding manual developed by the Division of Health Interview Statistics provides detailed guidelines for the coding of selected diagnoses and impairments (impairment codes are independent of ICD). ICD is also used for classifying cause of death for the Center's mortality statistics.

ICD-9-CM has been used since 1979 in classifying physician diagnoses reported in the National Ambulatory Medical Care Survey, the National Hospital Discharge Survey, and the examination components of the National Health and Nutrition Examination Surveys and Hispanic Health and Nutrition Examination Survey.

However, neither ICD nor ICD-9-CM are used in all Center surveys. The Health Examination Surveys, Cycles I, II, and III, and the National Nursing Home Survey contain data on clinical conditions, but these data are coded using non-ICD coding schemes. In the case of the Nursing Home Survey, a precoded list of selected diagnoses, very much like but not identical to ICD-9-CM categories, is used. The National Survey of Personal Health Practices and Consequences and the National Master Facility Inventory, the National Survey of Family Growth, and the National Natality Survey contain no condition data that call for medical coding.

NOTE: This appendix discusses the use of the ICD only in those NCHS surveys that are covered in this inventory.

Appendix III Classification variables

Classification variables

Table II: Classification variables available for analysis of alcohol, drug, and mental health data, by survey or data system

Classification ¹	NHES Cycle	NHES Cycle	NHES Cycle	NHANES	NHANES I	NHANES	
variables	, i	<i>ÎI</i>	,,,,	1	Followup		HHANES
Sex	x	x	x	X	x	X	X
Age	X	X	X	X	X	X	×
Race	X	X	X	X	X	X	X
Hispanic origin ³					X	X	X
Ancestry or national origin				X	X	X	X
Education of individual	X	x	X	X	X	X	X
Education of head of household	X	X	X	X	X	X	X
Personal income					X		
Family income	X	X	X	X	X	X	X
Marital status	X			X	X	x	X
Employment status	X		X	X	x	x	x
Labor force status	X		X	X	X	X	X
Occupation ⁴	X			X	X	X	X
Industry ⁴	X			X	X	X	X
Class of worker ⁵	X			×		x	×
Region ⁶	x	x	x	x	x	x	×
Location of residence ⁷	x	x	x	x	^	x	Ŷ
Size of location of residence	x	x	x	x		â	×
Place of birth	• •	x	x	x	X	x	Ŷ
Veteran status	x		~	^	~	x	Ŷ
Twin status	^	x	x			^	^
Number of persons in household	×	â	x	x	x	x	x
Family relationship ⁸	x	^	^	x	x	x	Ŷ
Family structure ⁹	^	x	×	^	^	^	Ŷ
Number of rooms ¹⁰		^	^	v		v	0
Medical insurance ¹¹				*		X	Č
Disability status ¹²					x	x	Š
Disability Status					^	^	^

Classification variables are inapplicable to the National Master Facility Inventory.

Division of Vital Statistics (DVS): Mortality Statistics (MS) and Divorce Statistics (DS).

Defined by the respondent.

Coded according to the latest available Census of Population Alphabetical Index of Industries and Occupations.

Government (local. State, Federal), private industry, self-employed, without pay, not in labor force.

Regions are not defined the same in all surveys.

Metropolitan versus nonmetropolitan residence.

Relationship of household members to each other.

Persence of one or both parents. Asked only of persons under 25 years of age.

Can be used along with number of persons in the household to create a measure of density.

Level of detail varies by survey. Insurance data may not be available for every data year.

Limitation of major and other activities due to chronic condition(s).

Table II: Classification variables available for analysis of alcohol, drug, and mental health data, by survey or data system—Con.

						NSFG Cycle	NNS and		DΝ	/S²
NHIS	NMCUES	NSPHPC	NAMCS	NHDS	NNHS	III	NFMS	NMS	MS	DS
X	X	X	X	X	x	x	X	X	X	×
X	X	x	X	x	X	X	X	X	X	X
Х	X	X	X	X	X	X	X	X	×	Х
Х	X	X	X	X	X	X	X			
						X	X			
Х	X	X				X	X			Х
X X	x						X			
X	X					X	X			
Х	X	X				X	X	X		
X X	X	X		X	X	X	X	X	X	Х
Х	X	X				× ×	X			
Х	X	X				X				
X X X						X	X			
Х	×					X	X			
Х	X						X			
X	X X	X	X	X	×	X	X		X	
X	X	X X	X X		x	X	X		X X	
X X X									×	
									x	X
X	X								.,	
X	X	x				X ¹³	×	×		
X	X X					X ¹³	x	X X		
X X X X								X		
X										
Х	X			X		X				
Х	×	X								

Appendix IV
HHANES
alcohol consumption
questions

HHANES alcohol consumption questions

D1.	I would like to talk to you about drinking alcoholic beverages. Alcoholic beverages include liquor such as whiskey, rum, gin, vodka or tequila, or beer, or wine.	
D2.	In you entire life have you had at least 12 drinks of any kind of alcoholic beverage?	(215) 1 Y 2 N(D4)
D3.	In any one year have you had at least 12 drinks of any kind of alcoholic beverage?	(216) 1 [] Y(D5) 2 [] N

		DO NOT READ.
D4.	What is your main reason for not drinking?	01 NO NEED/NOT NECESSARY 02 DON'T CARE FOR/DISLIKE IT 03 MEDICAL/HEALTH REASONS 04 RELIGIOUS/MORAL REASONS 05 BROUGHT UP NOT TO DRINK 06 COSTS TOO MUCH 07 FAMILY MEMBER ALCOHOLIC 08 INFREQUENT DRINKER 09 OTHER 10 specify
D5.	Not counting small tastes, how old were you when you started drinking alcoholic beverages?	years old
	HAND CALENDAR CARD.	
D6.	Did you have a drink during the period outlined in red?	(219) 1 🗆 Y(D8) 2 🗆 N
D7.	When was your last drink? ENTER DATE AND CHECK BOX	220 - 222 Month Day Year 223 1 □ before 4-week reference period, less than 1 year from end of reference period (D32) 2 □ 1 or more years ago from end of reference period (D64)
D8.	During that period, when did you last have a drink?	224 - 226
D9.	Let's talk about the 4 weeks outlined in red.	(227) 00 □ none or never (D13)
	During that 4-week period, on how many days did you drink any beer?	days
D10.	During that 4-week period, on the day(s) when you drank beer, about how many beers did you drink (a day)?	beers number
D11.	During those four weeks, what was the total number of beers you drank?	229beers
D12.	How many ounces were in a typical can or bottle or glass that you drank during that period?	ounces
D13.	During that 4-week period, on how many days did you drink any wine?	231) 00 □ none or never (D17) days
D14.	During that 4-week period, on the day(s) when you drank wine, about how many glasses of wine did you drink (a day)?	232)glasses

D15. During those four weeks, what was the total number of glasses of wine that you drank?	233)glasses
D16. How many ounces were in a typical glass that you drank during that period?	Ounces number
D17. During that 4-week period, on how many days did you drink any liquor, such as whiskey, rum, gin, vodka, or tequila?	235) 00 🗆 none or never (D21) ————————days
D18. During that 4-week period, on the day(s) when you drank liquor, such as whiskey, rum, gin, vodka, or tequila, about how many drinks did you have a (day)?	236)drinks
D19. During those four weeks, what was the total number of drinks of liquor you drank?	drinks drinks
D20. How many ounces of liquor were in a typical glass that you drank during that period?	ounces number
D21. CHECK ITEM: REFER TO QUESTIONS D9, D13, AND D17 AND MARK FIRST APPROPRIATE BOX.	239 1 □ only one beverage type (D24) 2 □ drank every day (D24) 3 □ other (D22)
D22. I have asked you about beer, wine, and liquor separately. Now I want you to think about them combined.	
D23. During those 4 weeks outlined in red, on how many days altogether did you drink any kind of alcoholic beverage, that is, beer, or wine, or liquor?	OR OR number days
D24. During those 4 weeks, did you have more than (largest number in D10, D14, or D18) drink(s) of any kind of alcoholic beverage on a single day?	(241) 1 Y 2 N(D29)
D25. During those 4 weeks, on how many days did you have more than (largest number in D10, D14, or D18) drinks(s) of any kind of alcoholic beverage, that is, beer, wine, or liquor?	01 □ one day only (D28)
D26. What was the largest number of drinks you had on any one of those days?	243 — drinks
D27. On how many days during those 4 weeks did you have (number in D26) drinks?	number days (D29)

D28. How many drinks did you have on that day?	245 drinks
D29. Was your drinking during those four weeks typical of your drinking over the past 12 months?	(246) 1 🗆 Y(D31) 2 🗆 N
D30. Did you drink more or less than usual during those 4 weeks?	1 □ more (D51)
D31. For how many years has this been typical of your drinking?	248)years (D51)
D32. Let's talk about the 4-week period ending the day you had your last drink.	
During those 4 weeks, on how many days did you drink any beer?	(249) 00 ☐ none or never (D36) ———days
D33. During that 4-week period, on the day(s) when you drank beer, about how many beers did you drink (a day)?	250 — beers
D34. During those four weeks, what was the total number of beers you drank?	251) — number beers
D35. About how many ounces were in a typical can or bottle or glass of beer that you drank during that period?	252) — ounces
D36. During those 4 weeks, on how many days did you drink any wine?	(253) 00 □ none or never (D40)
D37. During that 4-week period, on the day(s) when you drank wine, about how many glasses of wine did you drink (a day)?	(254)glasses
D38. During those four weeks, what was the total number of glasses of wine that you drank?	255) — glasses
D39. About how many ounces were in a typical glass that you drank during that period?	256ounces
D40. During those 4 weeks, on how many days did you drink any liquor, such as whiskey, rum, gin, vodka or tequila?	257) 00 none or never (D44)

D41. During that 4-week period, on the day(s) when you drank liquor, such as whiskey, rum, gin, vodka or tequila, about how many drinks did you have (a day)?	258) — number drinks
D42. During those four weeks, what was the total number of drinks you had?	(259) —drinks
D43. About how many ounces of liquor were in a typical drink you had during that period?	260ounces .
D44. CHECK ITEM: REFER TO QUESTIONS D32, D36, AND D40 AND MARK FIRST APPROPRIATE BOX.	1 only one beverage type (D47) 2 drank every day (D47) 3 other (D45)
D45. I have asked you about beer, wine, and liquor separately. Now I want you to think about them combined.	
D46. During those 4 weeks, on how many days altogether did you drink any kind of alcoholic beverage, that is, beer, or wine, or liquor?	01 □ one day only OR
	number days
D47. Was your drinking during those 4 weeks typical of your drinking during the 12 months before your last drink?	263 1 □ Y(D49), 2 □ N
D48. Did you drink more or less than usual during those 4 weeks?	264) 1 more } (D50)
D49. For how many years did you drink the same as you did in the 4 weeks before your last drink?	number years
D50. What is your main reason for not drinking since (date in D7)?	DO NOT READ. 10 NO NEED/NOT NECESSARY 10 DON'T CARE FOR/DISLIKE IT 10 MEDICAL/HEALTH REASONS 10 RELIGIOUS/MORAL REASONS 10 ALCOHOLIC/PROBLEM DRINKING (SELF) 10 OTHER 10 Specify
D51. Now think back over the 12-month period before your last drink. In how many of those months did you have at least one drink of any alcoholic beverage, that is, either beer or wine or liquor?	267 — months

D52. During those months, on how many days did you have 9 or more drinks of <u>any</u> alcoholic beverage?	268) — days
D53. On how many days did you have at least 5 drinks of any alcoholic beverage?	269 — days
D54. The next few questions are about drinking during your lifetime beginning with the age you started drinking and ending with your last drink.	
Was there ever a period in your life when you considered yourself to be a heavy drinker?	(270) 1 Y 2 N (D57)
D55. How many years were you a heavy drinker?	years
D56. When you were a heavy drinker, how many drinks of alcoholic beverages did you have in a typical week?	(272) — drinks
D57. Was there ever a period in your life when you considered yourself to be a moderate drinker?	(273) 1 □ Y 2 □ N (D60)
D58. How many years were you a moderate drinker?	number years
D59. When you were a moderate drinker, how many drinks of alcoholic beverages did you have in a typical week?	275) — drinks
D60. Was there ever a period in your life when you considered yourself to be a light drinker?	(276) 1 □ Y 2 □ N (D63)
D61. How many years were you a light drinker?	277years
D62. When you were a light drinker, how many drinks of alcoholic beverages did you have in a typical week?	278) drinks
D63. Do you now consider yourself to be a light, moderate, or heavy drinker?	279 1 abstainer 2 light (E1) 4 heavy
D64. The next few questions are about drinking during your lifetime beginning with the age you started drinking and ending with your last drink.	
Was there ever a period in your life when you considered yourself to be a heavy drinker?	280 1 U Y 2 U N (D67)

D65. How many years were you a heavy drinker?	281)years
D66. When you were a heavy drinker, how many drinks of alcoholic beverages did you have in a typical week?	(282) — drinks
D67. Was there ever a period in your life when you considered yourself to be a moderate drinker?	(283) 1 □ Y 2 □ N (D70)
D68. How many years were you a moderate drinker?	284)years
D69. When you were a moderate drinker, how many drinks of alcoholic beverages did you have in a typical week?	(285) — number drinks
D70. Was there ever a period in your life when you considered yourself to be a light drinker?	(286) 1 □ Y 2 □ N (D73)
D71. How many years were you a light drinker?	287years
D72. When you were a light drinker, how many drinks of alcoholic beverages did you have in a typical week?	288) —drinks
D73. What is your main reason for not drinking since (<u>date</u> <u>in D7</u>)?	DO NOT READ. 01 NO NEED/NOT NECESSARY 02 DONT' CARE FOR/DISLIKE IT 03 MEDICAL/HEALTH REASONS 04 RELIGIOUS/MORAL REASONS 05 ALCOHOLIC/PROBLEM DRINKING (SELF) 06 COSTS TOO MUCH 07 FAMILY MEMBER AN ALCOHOLIC OR PROBLEM DRINKER 08 NFREQUENT DRINKER
	10 specify

Appendix V
NHIS 1983
alcohol consumption
questions

		RT 64]		
	O. ALCOHOL/HEALTH PRACTICES PAGE			Refer to 6.	19
	Sample Person Number	3-4	03	1 🔲 Less than 5 years (7b)	
	Refer to household composition and age.	5		2 5 years or more (8)	
I	1 Deleted (Next SP)		7a. In the	past 5 years, have you EVER tried to stop smo	king cigarettes? 20
	2 Under 18 (Next SP)		ŀ	1 ☐ Yes 2 ☐ No (8)	
01	3 ☐ 18 and over, callback required (Next SP)		b. Now	I am going to read a list of methods which son	ne people use to
	4 🔲 18 and over, noninterview (Specify, THEN next SP)		stop:	smoking cigarettes. Tell me which of these me	thods you used in
	5 🗆 18 and over, available (1)		I	ast 5 years to stop or try to stop smoking.	
Rea	d to respondent:			id you attend a formal program SUCH S SmokEnders, the American Cancer	
(Na	me of SP), the following questions concern your health practices,		l s	ociety program or American Lung	on 0 □ No
pres	king, and alcohol use. (It is not necessary for anyone else to be sent.)		^	ssociation program? 1 🗌 Y	es 2 No 21
1 *	v many hours do you usually sleep at night?		(2) D	id you go to a health professional for	
	Hours	6-7	p	elp, SUCH AS a physician, sychologist, or psychiatrist? 1 🔲 Y	es 2 🗆 No 22
2. Hov	v often do you eat breakfast — almost every day, sometimes.	8	1	id you use special filters or cigarette	
	ly, or <u>never?</u>	-	h h	olders to regulate the amount of	
	1 L Every day			moke inhaled in an attempt to stop moking? 1 🔲 Y	es 2 No 23
	2 Sometimes		į		20110
	3 ☐ Rarely or never 8 ☐ Other (Specify)			id you switch to lower tar and icotine cigarettes in an attempt to	
2 1		9	st	op smoking? 1 🔲 Y	es 2 No 24
alme	uding evening snacks, how often do you eat between meals — ost every day, sometimes, rarely, or never?		(5) D	id you stop or try to stop smoking	
	1 D Every day			ith a few friends, relatives, or cquaintances? 1 🔲 Y	es 2 No 25
	2 D Sometimes			·	55 2 LJ 140 L
	3 Rarely or never			id you stop or try to stop entirely on our own? 1 🏻 Y	es 2 No 26
	8 Other (Specify)	10	_	id you use some other method to stop	
4. Wou	ild you say that you are physically more active, less active, or It as active as other persons your age?	10	(7,0	rtry to stop smoking? 1 🔲 Y	es 2 🗆 No 🔼 27
	1 More active			(S	pecify)
	2 🔲 Less active			· · · · · · · · · · · · · · · · · · ·	
	3 🔲 Same			to respondent:	
	8 Other (Specify)		These are lie	e next questions are about drinking alcoholic b quor such as whiskey, rum, gin, or vodka, and	everages. Included beer, and wine, and
5a. Have	you smoked at least 100 cigarettes in your life?	11	any o	ther type of alcoholic beverage.	
_	1 ☐ Yes 2 ☐ No (8)		8a. In YO	UR ENTIRE LIFE have you had at least 12 drin olic beverage?	ks of ANY kind of
b. Do y	ou smoke cigarettes now?	12	4.00.	1 ☐ Yes 2 ☐ No (8c)	28
	1 ☐ Yes 2 ☐ No				7 7 7 29
c. On ti	ne average, about how many cigarettes a day [do/did] you smoke?	13-14		Y ONE YEAR have you had at least 12 drinks of the second in the second i	of ANY kind of
	Number 98 \(\sime\) Never smoked regularly (8)		aicon.	1 ☐ Yes (9) 2 ☐ No	
		15		, 	[30-31
02	Refer to 5b. □ "Yes" in 5b (7)		c. What	is your MAIN reason for not drinking?	30-31
02	2 \(\text{''No'' in 5b (6)} \)			00 ☐ No need/not necessary 01 ☐ Don't care for/dislike it)
		16-18		02 Medical/health reasons	
6. Abou	It how long has it been since you last smoked cigarettes fairly larly?	10-18		os 🗆 Religious/moral reasons	ļ
1090	2 □ Days			04 Brought up not to drink	(36)
	Number 3 Weeks	l		05 Costs too much	(.==.
	Number 2 ☐ Days 3 ☐ Weeks 4 ☐ Months 5 ☐ Years			06 Pamily member an alcoholic or problem of	frinker
	€ 5!! Years			07 🔲 Infrequent drinker	
	ooo ☐ Never smoked regularly (8)			88 Other (Specify)	J

9. Not	counting small tast	es, how old w	ere you when you started	32-33	13a. Durin	g that 2-week period, on how many days did you drink any	66-67
drini	king alcoholic beve	rages?			liquo	, such as whiskey, rum, gin, or vodka?	
	Voor	s old				Days	ļ
Hand	d calendar.	5 Olu				00 ☐ None or never (05)]
10a. Did	you have a drink dendar/ beginning M	londay, (<u>date</u>)	eek period [outlined on that and ending Sunday (<u>date</u>)]?		b. Durir abou	g that 2-week period, on the day(s) when you drank liquor, t how many drinks did you have a day?	68-69
	1 ☐ Yes	2□ N	o (10c)	34		Drinks	
b. Duri	ng that period, whe	en did you last	have a drink?	35-40		g that 2-week period, what was the total number of drinks of	70-72
	Month	Date	19(11) Year		•	Drinks	. 1
c. Whe	n was your last drin	nk prior to tha	t 2-week period?	41-46	d. Abou	It how many ounces of liquor were in a typical drink that	73-74
					you	and during that period?	
	Month .	Date	19 Year			Ounces	
	Refer to 10c.			47		Refer to 11a, 12a, and 13a.	75
04	1 Over 2 week	s, less than 1	year (17)			1 ☐ One day and one beverage type (16)	
O -T	2 1 year or mo		•		05	2 ☐ Only one beverage type (15)	
11a Duzi	ng that 2-week per	iod, on how m	any days did you drink any beer	7 48-49		3 ☐ 14 days in 11a, 12a, or 13a (Intro)	
1 (4. 54.		,	,,			8 ☐ Other (14)	
	Day	's				to respondent:	
	00 None or nev	er (12)			l hav	e asked you about beer, wine, and liquor separately. Now I t you to think about them combined.	
h Duri	ing that 2-week per	iod. on the day	y(s) when you drank beer,	50-51		r you to trink about them combined. ng the 2-week period [outlined on that calendar/beginning Monda	1V.
abou	ut how many beers	did you drink	a day?		ldate	and ending Sunday (date)], on how many days altogether did you	i
			Beers		drini	alcoholic beverages, that is, beer, or wine, or liquor?	76-77
				52-54		Days (15)	70-77
	ing that 2-week per drank?	ioα, what was	the total number of beers	<u> </u>	-	o1 ☐ One day only <i>(16)</i>	
·	_				INTRO	I have asked you about beer, wine, and liquor separately. Now want you to think about them combined.	/ I
		ers		55-56	Cofe	r to questions 11b, 12b, and 13b.	
	ut how many cunce r that you drank dui		pical can or bottle or glass of d?	0000	15a Duzi	ng that 2-week period, did you have more than (largest number	
2001	at you aram aa.				<u>in 1</u>	b, 12b, or 13b) drink(s) on a single day?	
		nces		F7 F0	4	1 ☐ Yes 2 ☐ No (16)	78
12a. Duri	ing that 2-week per	iod, on how m	nany days did you drink any wine	97-56	b. Duri	ng that 2-week period, on how many days did you have more than	79-80
	Day	/s			(<u>larg</u>	est number in 11b, 12b, or 13b) drink(s) of beer, or wine, or liquor?	
	oo ☐ None or nev				į	Days	
				59-60	1	o1 ☐ One day only (15e)	
b. Dur	ing that 2-week per ut how many glass:	rioa, on the da es of wine did	y(s) when you drank wine, you drink a day?		c. Wha	it was the largest number of drinks you had on any one of	81-82
						e days?	
			Glasses	- +	1	Drinks	
		riod, what was	s the total number of glasses of	61-63		now many days during that 2-week period did you have	83-84
l win	e you drank?					ow many days during that 2-week period did you have here in 15c) drinks?	
	Gla	sses]	- 40	
d. Abo	out how many ounc	es of wine we	re in a typical glass that you	64-65		Days (16)	85-86
dra	nk during that perio	od?	•		e. Hov	v many drinks did you have on that day?	00-00
	Oui	nces	a			Drinks	
· · · · · · · · · · · · · · · · · · ·							

	RT 65	. T		
16a. Was the amount of your drinking during that 2-week period typical	3-4		ing that 2 week period on h	T 6= -
or your urinking during the past 12 months?		liqu	ing that 2-week period, on how many days did you drink any lor, such as whiskey, rum, gin, or vodka?	27-2
1 ☐ Yes (16c) 2 ☐ No	5		Days	
 b. Was the amount of your drinking during that 2-week period more or less than your drinking during the past 12 months? 	6		oo☐ None or never (O6)	
1 ☐ More (23) 2 ☐ Less (23)		b. Dui abo	ing that 2-week period, on the day(s) when you drank liquor, ut how many drinks did you have a day?	29-3
c. For how many years has this been typical of your drinking?	7-8		———— Drinks	
Years (23) 00 Less than one (23)		c. Dur	ing that 2-week period, what was the total number of drinks	31-3
Read to respondent:		07 11	quor you had?	
Let's talk about the 2-week period ENDING WITH AND INCLUDING the day you had your last drink.			Drinks	
17a. During that 2-week period, on how many days did you drink any beer?		d. Abo	ut how many ounces of liquor were in a typical drink that	34-3
Days	9-10	you	had during that period?	104-0
00 None or never (18)			Ounces	
 b. During that 2-week period, on the day(s) when you drank beer, about how many beers did you drink a day? 	11-12		Refer to 17a, 18a, and 19a.	36
		06	1 Only one beverage type (21)	
Beers			2 ☐ 14 days in 17a, 18a, or 19a (21) 8 ☐ Other (20)	
c. During that 2-week period, what was the total number of beers	13-15	Control		
you drank?	13-15		to respondent: e asked you about beer, wine, and liquor separately. Now I	
_		******	you to timik about them combined.	
Beers		20. Duri	ng the 2-week period ENDING WITH AND INCLUDING the day	
d. About how many ounces were in a typical can or bottle or glass of beer that you drank during that period?	16-17		had your last drink, on how many days altogether did you drink holic beverages, that is, beer, or wine, or liquor?	
Ounces			Days	37-38
		21a. Was	the amount of your drinking during that 2-week period typical	39
18a. During that 2-week period, on how many days did you drink any wine?	18-19	ot yo	annang during the 12 months before your last drink?	
	ļ		1 ☐ Yes (21c) 2 ☐ No	
Days	ł	b. Wae	the amount of your drinking during that 2-week period more	40
oo□ None or never (19)		or les drink	• wan your unitking during the 12 months before your last	40
 b. During that 2-week period, on the day(s) when you drank wine, about how many glasses of wine did you drink a day? 	20-21		1 ☐ More (22) 2 ☐ Less (22)	
Glasses	1	c. For h	ow many years was this typical of your drinking?	41-42
			Years 00 🗆 Less than one	
c. During that 2-week period, what was the total number of glasses of wine you drank?	22-24	FOOTNOTE		
Glasses				
d. About how many ounces of wine were in a typical glass that you drank during that period?	25-26			
Cunces				
HIC LED LONG A GAR				

22a. What is your MAIN reason for not drinking since (date in 10c)? 00 No need/not necessary		25f. When you were a moderate drinker, how many drinks of alcoholic beverages did you have in a week?		
01 Don't care for/dislike it		Drinks oo 🗌 Less	than one	
o2☐ Medical/health reasons o3☐ Religious/moral reasons		g. Was there ever a period in your life when y	you considered 67	
o4☐ Alcoholic/problem drinker-self		yourself to be a light drinker?		
05☐ Costs too much		1 ☐ Yes 2 ☐ No	(07)	
06☐ Family member an alcoholic or problem drinker		h. For how many years were you a light drinl	(92)	
07□ Quit drinking (23b)		ii. 101 now many years were you a night dime		
08 Infrequent drinker (23a)		Years 00 Less	than one	
b. Have you completely stopped drinking alcoholic beverages?	45	i. When you were a light drinker, how many		
1 ☐ Yes (23b) 2 ☐ No		beverages did you have in a week?		
23a. During the past year, in how many MONTHS did you have at least	46-47	Drinks oo 🗆 Less	s than one	
one drink of ANY alcoholic beverage?		Refer to 25a, 25d, and 25g.	72	
Manaka (24)		07 1 25a, 25d, and 25g are all "No	·' (25j)	
Months (24)		8 Other (25n)		
b. During the year before your last drink, in how many MONTHS did you have at least one drink of ANY alcoholic beverage?	18-49			
		25j. Was there ever a period in your life when to be a very light, occasional, or infrequer	you considered yourself ————	
Months 00 D None (25)		• • • • • • •		
24a. During [that month/those months], on how many DAYS did you	50-52	1 ☐ Yes 2 ☐ No	(25m)	
have 9 or more drinks of ANY alcoholic beverage?		k. For how many years were you a very light infrequent drinker?	, occasional, or	
Days 000 ☐ None b. During [that month/those months], on how many DAYS did you		·		
b. During [that month/those months] , on how many DAYS did you	53-55	Years 00 Less	s than one	
have 5 or more drinks of ANY alcoholic beverage? (Include the (number in 24a) days you had 9 or more drinks.)		I. When you were a very light, occasional, o	r infrequent drinker.	
(Manasa Mara Isa da Isa		how many drinks of alcoholic beverages of week?	lid you have in a	
Days 000 🗌 None				
Read to respondent:		Drinks oo 🗆 Les	s than one	
These next questions are about drinking during your lifetime		m. Do you now consider yourself to be an ab		
beginning with the age you started drinking. I will ask you about heavy, moderate, and light drinking.		occasional, or infrequent drinker?		
25a. Was there ever a period in your life when you considered		1 ☐ Light 2 ☐ Moderate)	
yourself to be a heavy drinker?		3 ☐ Heavy	ļ	
1 ☐ Yes 2 ☐ No (25d)	56	4 ☐ Abstainer		
b. For how many years were you a heavy drinker?	57-58	5 Very light, occasional, infrequ	ent (31)	
Years 00 Less than one		8 Other (Specify)		
c. When you were a heavy drinker, how many drinks of alcoholic	59-61	*	J	
beverages did you have in a week?	55-01	n. Do you now consider yourself to be an ab	etainer er a light 79	
		moderate, or heavy drinker?	stailer or a light,	
Drinks 000 🗆 Less than one		₁ ☐ Light)	
d. Was there ever a period in your life when you considered yourself to be a moderate drinker?	62	2 Moderate		
		₃ ☐ Heavy ₄ ☐ Abstainer	l	
1 10 1-09,	lar -	5 [] Very light, occasional, infrequ	ent (31)	
e. For how many years were you a moderate drinker?		8 Other (Specify)	1	
Years oo 🗍 Less than one		₹	J	
331 1 E000 (Mai) 0/(0				

Read to respondent: I would like you to think about your drinking of alcoholic beverages, that is, beer, or wine, or liquor, around (date in 10c.)		29f. Who	an you were a moderate sholic beverages did yo	e drinker, how many drinks of u have in a week?	103-10
26a. In a typical week, on how many days did you drink alcoholic beverages?			Drinks	00 ☐ Less than one	
		g. Was	there ever a period in reself to be a light drinke	vour life when you considered	105
Days 00□ None (27) b. On the day(s) when you drank, about how many drinks did you	80-81		1 ☐ Yes		
have a day?	82-83	h. For	how many years were y	you a light drinker?	106-10
Drinks			Years	00☐ Less than one	
c. For how many years was this typical of your drinking?	84-85	T I AAUG	n you were a light drin	ker, how many drinks of alcoholic	108109
Years 00□ Less than one		Deve	rages did you have in a	a week?	
98□ Not typical			———— Drinks	00 Less than one	
27. During the year before your last drink, in how many MONTHS did you have at least one drink of ANY alcoholic beverage?		08	Refer to 29a, 29d, ar 1 ☐ 29a, 29d, and 29 8 ☐ Other (30)	nd 29g. 9g are all ''No'' (29j)	110
Months 00□ None (29) \	86-87			•	
28a. During [that month/those months], on how many DAYS did you have 9 or more drinks of ANY alcoholic beverage?	88-90	29j. Was to be	there ever a period in y a very light, occasions	our life when you considered yourself al, or infrequent drinker?	111
nave 5 of more utiliks of ANY alcoholic beverage?			1□ Yes	2 □ No <i>(30)</i>	
Days 000 None		k. For h	ow many years were ve	ou a very light, occasional, or	112-113
have 5 or more drinks of ANY alcoholic house and the duty of	91-93	intre	quent drinker?		
(number in 28a) days you had 9 or more drinks.)				oo Less than one	• • • • •
Days ooo⊟ None		I. When	n you were a very light, drinks of alcoholic be	occasional, or infrequent drinker, how verages did you have in a week?	114-115
Read to respondent:			Drinks	00 Less than one	
These next questions are about drinking during your lifetime beginning with the age you started drinking. I will ask you about heavy, moderate and light drinking.	g e,	30a. What	is your MAIN reason f	or not drinking since (date in 10c)?	116117
29a. Was there ever a period in your life when you considered yourself to be a heavy drinker?	Į		01 Don't care for/dis 02 Medical/health re	like it	
1 Yes 2 No (29d)	94		03 Religious/moral re	easons	
	95-96		04 Alcoholic/problem	n drinker-self	
_			06 Family member as	n alcoholic or problem drinker	
140			07∟ Quit drinking 08∏ Infrequent drinker	(31)	
beverages did you have in a week?	97-99				
Drinks oool Less than one		b. Have		d drinking alcoholic beverages?	118
d. Was there ever a period in your life when you considered yourself to be a moderate drinker?	100	FOOTNOTES	1∏ Yes	2 □ No	
1 Yes 2 No (29g)	j				
e. For how many years were you a moderate drinker?	01-102				
Years ool Less than one					
M HIS 1 (SB) (1983) 19-3-82)	Page :	23			

31a.	Some people have problem had a family or marital pro-	ms related to drinking. Have you EVER oblem related to YOUR drinking?	3-4	34a. Did you EVER have any (other) health problem related to YOUR drinking?	29
	1 Yes	2 🗌 No (32)	5	1 ☐ Yes 2 ☐ No (35)	
Ь.	What problem did you hav	ve?	6-11	b. What was the health problem?)-35
c.	Anything else?		NCN		
	Yes (Reask 31b	and c)	- та -	c. Anything else?	NCN
		1 year or more" in 04 (32)	12	☐ Yes (Reask 34b and c) ☐ No	
a.	12 months?	these problems] occur in the past		Mark box of ask.	36
	1 ☐ Yes	2 🗆 No		d. Did [this problem/any of these problems] occur in the past	
32a.	Have you EVER had a job o	or work problem related to	13	1 ☐ Yes 2 ☐ No	
	1 ☐ Yes	2 🗌 No (33)		35a. While YOU were driving, did you EVER have a motor vehicle accident or traffic violation related to YOUR drinking?	37
b.	What problem did you have		14-19		
	-			b. Which, a motor vehicle accident or traffic violation?	38
				1 ☐ Accident 2 ☐ Violation 3 ☐ Both	
c.	Anything else?		NCN	Mark box or ask. ''1 year or more" in O4 (36)	39
	🗌 Yes (Reask 32b a	and c)		c. Did you have a [motor vehicle accident/(or) traffic violation] related to YOUR drinking in the past 12 months?	
	Mark box or ask.	1 year or more" in O4 (33)	20	1	
d.	Did [this problem/any of the state of the st	these problems] occur in the past		1 ☐ Yes 2 ☐ No	
	1 ☐ Yes	2 🔲 No		FOOTNOTES	
33a.		ury related to YOUR drinking?	21		
b.	What was the injury?		22-27		
c.	Anything else? Yes (Reask 33b)		NCN	- -	
d		1 year or more" in O4 (34) se injuries] occur in the past 12 months?	28	-	
u.	1 Yes	2 No			
	11.703	2 LJ 11V			

	ne whether or not you have EVER had any of the itions even if you have mentioned them before.	following		FOOTNOTES
а. Нуре	rtension or high blood pressure? 1 🗌 Yes	2 🗆 No	40	
b. Hard	ening of the arteries? 1 Yes	2 🔲 No	41	
c. Tach	ycardia, arrhythmia, or rapid heart? 1 🗌 Yes	2 🗆 No	42	
d. Arthr	itis or rheumatism? 1 Yes	2 🗆 No	43	
e. Conv	ulsions or seizures? 1 Yes	2 🗆 No	44	
f. Black	couts? 1 Yes	2 🗆 No	45	
g. Shor	ness of breath? 1 Yes	2 🗆 No	46	
h. Insor	nnia or sleeplessness? 1 🗆 Yes	2 🗌 No	47	
i. Hepa	titis? 1 Yes	2 🗆 No	48	
j. Any o	lisease of the pancreas? 1 Yes	2 🗌 No	49	
k. An ul	cer, other than a skin ulcer? 1 🗆 Yes	2 🗌 No	50	
I. Any s	astrointestinal bleeding? 1 Yes	2 🗌 No	51	
m. Diab	etes?1 Yes	2 🗌 No	52	
	attack or heart failure? 1 Yes	2 🗆 No	53	
o. Coro	nary heart disease? 1 Yes	2 🗆 No	54	
p. Strok	e or hemorrhage of the brain? 1☐ Yes	2 🗆 No	55	
-	na pectoris? 1 Yes	2 🗌 No	56	
	er? 1 Yes	2 🗌 No	57	
s. Yello	w jaundice? 1 Yes	2 🗆 No	58	
-	liver? 1 Yes	2 🗆 No	59	
u. Enlar	ged liver? 1 Yes	2 🗌 No	60	
	osis of the liver? t Yes	2 🗆 No	61	
w. Any c	ther liver trouble? 1 Yes	2 🗆 No	62	
	or delirium tremens? 1 Yes	2 □ No	63	
y. Alcol	aolism?1 Yes	2 □ No	64	
	Mark by observation. Mark all that apply.			
	Who was present during the interview? 1☐ Telephone interview		65	
	1 ☐ No one else present		66	
09	1 ☐ Husband/wife		67	
	ı ☐ Child/children under 18 years old		68	
	1 ☐ Parent(s)		69	
	1 🗆 Other adult(s)		70	

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