

## Assessment:

### JCCS Drug and Alcohol Scale

#### DRUG AND ALCOHOL USE

The first section contains questions about alcohol and drug use and problems related to using alcohol and drugs. We are interested in your use of alcohol and drugs in your lifetime and also in the past three months. Please answer all of the questions honestly. Remember, all of your answers are completely confidential.

V1. Have you ever drunk alcohol in your lifetime? (That includes beer, wine, or hard liquor.)

- Yes
- No
- Refuse to Answer

V2. Has alcohol use ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V2 is equal to 1, then skip to V4.

V3. Has alcohol use been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V4. How many days did you drink alcohol in the past three months (90 days)?

- 
- Refuse to Answer

DA4. On the days you drank in the past 3 months, how many drinks did you usually have in a day? Count shots as one drink and 40 ounce bottles as 4 drinks.

- # Drinks a day
- Refuse to Answer

DA5. In the past 3 months, 90 days, how many days have you drunk so much at one time that you were sick and or lost consciousness?

- # Days
- Refuse to Answer

V5. Have you ever used marijuana (pot, grass, weed, hash, THC, marinol) in your lifetime?

- Yes
- No
- Refuse to Answer

V6. Has marijuana use ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V6 is equal to 1, then skip to V8.

V7. Has marijuana use been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V8. How many days did you use marijuana in the past three months, 90 days?

- 
- Refuse to Answer

DA7. On the days you used marijuana or cannabis in the past 3 months, how many times per day did you use it, on average?

- # Times per day
- Refuse to Answer

V11. In your lifetime, have you ever used sedatives, tranquilizers, or antidepressants that were not prescribed for you by a doctor? These include phenobarbital, Seconal, Valium, Prozac, Zoloft, Elavil, Xanax, Wellbutrin, Effexor, benzodiazepine (benzos), or similar drugs not prescribed for you.

- Yes
- No
- Refuse to Answer

V12. Has the use of nonprescribed sedatives, tranquilizers, or antidepressants ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V12 is equal to 1, then skip to V14.

V13. Has the use of nonprescribed sedatives, tranquilizers, or antidepressants been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V14. How many days did you use nonprescribed sedatives, tranquilizers, or antidepressants in the past three months, 90 days?

Refuse to Answer

DA. On the days you used nonprescribed sedatives, tranquilizers, or antidepressants in the past 3 months, how many times per day did you use it, on average?

# Times per day   
Refuse to Answer

V15. In your lifetime, have you ever used pain killers or opiates that were not prescribed for you by a doctor? These include Demerol, codeine, Darvon, Percodan, Vicodin, MS Contin, OxyContin, or similar pain-killing drugs not prescribed for you. (Do not include heroin.)

- Yes
- No
- Refuse to Answer

V16. Has the use of nonprescribed pain killers or opiates ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V16 is equal to 1, then skip to V18.

V17. Has the use of nonprescribed pain killers or opiates been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V18. How many days did you use nonprescribed pain killers or opiates in the past three months, 90 days?

Refuse to Answer



V20. Has the use of hallucinogenic drugs ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V20 is equal to 1, then skip to V22.

V21. Has the use of hallucinogenic drugs been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V22. How many days did you use hallucinogenic drugs in the past three months, 90 days?

Refuse to Answer

DA7. On the days you used hallucinogenic drugs in the past 3 months, how many times per day did you use it, on average?

# Times per day       
Refuse to Answer

V23. In your lifetime, have you ever used designer or club drugs such as MDMA (ecstasy, X), ketamine (K, special K), 2CB (bromo, nexus), GHB (G), deprimine (depo), or Rohypnol (rufinol, rufies)?

- Yes
- No Skip to V27
- Refuse to Answer

V24. Has the use of designer or club drugs ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V24 is equal to 1, then skip to V26.

V25. Has the use of designer or club drugs been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V26. How many days did you use designer or club drugs in the past three months, 90 days?

Refuse to Answer

DA. On the days you used designer or club drugs in the past 3 months, how many times per day did you use it, on average?

# Times per day   
Refuse to Answer

V27. In your lifetime, have you ever inhaled, breathed in, "huffed", or sniffed amyl or butyl nitrate (poppers, rush), glue, locker room, amyl nitrate, pain, gasoline, nail polish, or other substances that get you high?

- Yes
- No Skip to V31
- Refuse to Answer

V28. Has inhaling or huffing ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V28 is equal to 1, then skip to V30.

V29. Has inhaling or huffing been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V30. How many days did you inhale or huff in the past three months, 90 days?

Refuse to Answer

DA. On the days you inhaled and huffed in the past 3 months, how many times per day did you use it, on average?

# Times per day   
Refuse to Answer

V31. In your lifetime, have you ever used stimulants or uppers such as methamphetamine (meth, crystal, crank, speed, ice, glass) or amphetamines (Dexadrine, diet pills)? Do not include cocaine (crack, rock, blow) or any drugs that were prescribed for you by a doctor.

Yes  
No Skip to V35  
Refuse to Answer

V32. Has the use of stimulants or uppers ever been a problem for you? (Choose one)

Never  
Rarely  
Sometimes  
Often  
Very Often  
Refuse to Answer

If V32 is equal to 1, then skip to V34.

V33. Has the use of stimulants or uppers been a problem for you in the last 3 months? (Choose one)

Never  
Rarely  
Sometimes  
Often  
Very Often  
Refuse to Answer

V34. How many days did you use stimulants or uppers in the past three months, 90 days?

Refuse to Answer

DA7. On the days you used stimulants or uppers in the past 3 months, how many times per day did you use it, on average?

# Times per day   
Refuse to Answer

V35. In your lifetime, have you ever used cocaine in any form? This includes crack, rock, blow, flake, powder, or speedball. This includes when cocaine is combined with other drugs, for example, heroin.

Yes  
No Skip to V39  
Refuse to Answer

V36. Has the cocaine or crack use ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V36 is equal to 1, then skip to V38.

V37. Has the cocaine or crack use been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V38. How many days did you use cocaine or crack in the past three months, 90 days?

Refuse to Answer

DA7. On the days you used cocaine or crack in the past 3 months, how many times per day did you use it, on average?

# Times per day

Refuse to Answer

V39. In your lifetime, have you ever used heroin (smack, horse, junk, chiva)?

Yes

No

Skip to V43

Refuse to Answer

V40. Has heroin use ever been a problem for you? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

If V36 is equal to 1, then skip to V42.

V41. Has heroin use been a problem for you in the last 3 months? (Choose one)

- Never
- Rarely
- Sometimes
- Often
- Very Often
- Refuse to Answer

V42. How many days did you use heroin in the past three months, 90 days?

Refuse to Answer

DA. On the days you used heroin in the past 3 months, how many times per day did you use it, on average?

# Times per day

Refuse to Answer

V43. In your lifetime, have you ever used methadone that was not prescribed for you by a doctor or given to you as part of a treatment program?

Yes

No

Skip to V47

Refuse to Answer

V44. Has the use of nonprescribed methadone ever been a problem for you? (Choose one)

Never

Rarely

Sometimes

Often

Very Often

Refuse to Answer

If V44 is equal to 1, then skip to V46.

V45. Has the use of nonprescribed methadone been a problem for you in the last 3 months? (Choose one)

Never

Rarely

Sometimes

Often

Very Often

Refuse to Answer

V46. How many days did you use nonprescribed methadone in the past three months, 90 days?

Refuse to Answer

DA7. On the days you used nonprescribed methadone in the past 3 months, how many times per day did you use it, on average?

# Times per day

Refuse to Answer

V47. In the past three months, how many days total did you use one or more of the nonprescribed drugs asked about earlier?

Refuse to Answer

V48. In your lifetime, have you injected or been injected with any drugs, steroids, vitamins, or other substances? This includes injecting in a vein, muscle, or under the skin. (Do not include injections given to you by a doctor or nurse, or injections you give to yourself as prescribed by a doctor.)

Yes  
No Skip to V53  
Refuse to Answer

V49. Have you injected or been injected with (except by a doctor or nurse) any drugs, steroids, vitamins, or other substances in the past three months, 90 days?

Yes  
No Skip to V53  
Refuse to Answer

V50. In the past three months, how many times did you inject such drugs or have such drugs injected by someone else?

\_\_\_\_\_  
zero 000 Skip to V53  
Refuse to Answer

V51. Of these [Response to V50] times, how many times did you not inject with a clean, sterile needle that had never been used by someone else?

\_\_\_\_\_  
Refuse to Answer

V52. Of these [Response to V50] times, how many times did you share a cooker or cotton with someone else?

\_\_\_\_\_  
Refuse to Answer

SP12. How many times in the past 3 months have you visited a needle exchange program?

# Times \_\_\_\_\_  
zero Skip to instruction before SEX1  
Refuse to Answer Skip to instruction before SEX1

SP13. How many needles and/or syringes did you exchange or receive per visit, on the average?

# Needles/Syringes \_\_\_\_\_  
Refuse to Answer

V53. How many times in your life have you been treated for alcohol problems?

\_\_\_\_\_  
Refuse to Answer

V54. How many times in your life have you been treated for drug problems?

\_\_\_\_\_  
Refuse to Answer

If V53 is equal to 0 and V54 is equal to 0, then skip to instruction before V59.

V55. What is the total number of months in your lifetime you have received treatment in an outpatient setting for alcohol or drugs? Include participation in self-help groups such as A.A., N.A., or C.A.

(Enter "0" if less than 2 weeks. Enter "1" if 2 weeks to 1 month.)

MONTHS

Refuse to Answer (Months)

If V55 is equal to 0, then skip to V57.

V56. What is the total number of months in the last three months you have received treatment in an outpatient setting for alcohol or drugs? Include participation in self-help groups such as A.A., N.A., or C.A.

(Enter "0" if less than 2 weeks. Enter "1" if 2 weeks to 1 month.)

MONTHS

Refuse to Answer (Months)

V57. What is the total number of months in your lifetime you have received treatment in an inpatient, residential setting for alcohol or drugs? This includes detox programs.

(Enter "0" if less than 2 weeks. Enter "1" if 2 weeks to 1 month.)

MONTHS

Refuse to Answer (Months)

If V57 is equal to 0, then skip to instruction before V59.

V58. What is the total number of months in the last 3 months you have received treatment in an inpatient, residential setting for alcohol or drugs, including detox programs?

(Enter "0" if less than 2 weeks. Enter "1" if 2 weeks to 1 month.)

MONTHS

Refuse to Answer (Months)

If V1 is equal to 0, then skip to instruction before V60.

V59. Since you started drinking alcohol, what is the longest period of time you have voluntarily gone without having a drink?

(Enter "0" if less than 2 weeks. Enter "1" if 2 weeks to 1 month. Check "Not Applicable" if you have never used alcohol on a regular basis.)

MONTHS

Refuse to Answer (Months)

Not Applicable (Months)

If V5 is equal to 0 and V11 is equal to 0 and V15 is equal to 0 and V19 is equal to 0 and V23 is equal to 0 and V27 is equal to 0 and V31 is equal to 0 and V35 is equal to 0 and V39 is equal to 0 and V43 is equal to 0, then skip to V61.

V60. Since you started using recreational drugs, what is the longest period of time you have voluntarily gone without using drugs?

(Enter "0" if less than 2 weeks. Enter "1" if 2 weeks to 1 month. Check "Not Applicable" if you have never used drugs on a regular basis.)

MONTHS

Refuse to Answer (Months)

Not Applicable (Months)

DA26. Have you ever tried to cut down on your use of alcohol and or drugs?

Yes

No

Refuse to Answer

DA27. Have you ever needed larger amounts of alcohol and or drugs to get the same effect, or to get as high as you did before?

Yes

No

Refuse to Answer

DA28. Have you ever felt you needed or were dependent on alcohol and or drugs?

Yes

No

Refuse to Answer

DA29. Have you ever had withdrawal symptoms from alcohol and or drugs because you stopped or cut down on your use of it or them?

Yes

No

Refuse to Answer

If SP10A is equal to 1 and (SP10B is equal to 1 or SP10C is equal to 1 or SP10D is equal to 1 or SP10E is equal to 1) then you indicated that in the past 3 months you never shared needles but also indicated that you do share needles by your other responses. Please correct your response." skip to SP10.