

INDIVIDUAL ASSESSMENT MODULE

INFORMANT'S ID: _____ DATE **IND_ID**

ADMINISTERED: _____

RELATIVE'S ID NUMBER: _____ **RIND_ID**

RELATIONSHIP: _____

Let me ask you some questions about your (RELATIVE):	N	Y	U	
Would you say that you know/knew him/her well?	FH_IAS1	1	5	9

When was the last time you had any contact with him/her? **FH_IAS2** YEAR: __/__/__
 (CODE SILENTLY) Deceased? NO, ALIVE 1
 YES, DECEASED...5

INTERVIEWER: WHICH SECTIONS WILL BE COMPLETED? (CHECK ALL THAT APPLY)

- | | |
|-----------------|----------------|
| ___ ALC | ___ MAN |
| ___ DRUG | ___ SCH |
| ___ DEP | ___ ASP |

ALC

- | | | | | |
|---|----------|----------|----------|--|
| Because of drinking, did your (RELATIVE) ever have problems, such as: | N | Y | U | |
|---|----------|----------|----------|--|
1. using alcohol in larger amounts or over a longer period than s/he intended? 1 5 9 **F_AL1**
 2. being unable to stop or cut down on drinking? 1 5 9 **F_AL2**
 3. spending a lot of time drinking or being hung over? 1 5 9 **F_AL3**
 4. being unable to work, go to school or take care of household responsibilities? 1 5 9 **F_AL4**
 5. being high from drinking when s/he could get hurt? 1 5 9 **F_AL5**
 6. having accidental injuries? 1 5 9 **F_AL6**
 7. reducing or giving up important activities? 1 5 9 **F_AL7**
 8. objections from family or friends, or at work or school? 1 5 9 **F_AL8**
 9. having a legal problem (DWIs, arrests)? 1 5 9 **F_AL9**
 10. having blackouts? 1 5 9 **F_AL10**
 11. going on binges or benders, drinking 2 or more days without sobering up? 1 5 9 **F_AL11**
 12. physical health problems (liver disease, pancreatitis)? 1 5 9 **F_AL12**
 13. emotional or psychological problems (uninterested, depressed, suspicious/paranoid, having strange ideas)? 1 5 9 **F_AL13**
 14. withdrawal symptoms (shakes, seizures/convulsions, DTs)? 1 5 9 **F_AL14**
 15. needing to drink a great deal more in order to get an effect, or finding that s/he could no longer get drunk on the amount s/he used to drink? 1 5 9 **F_AL15**
 16. any kind of treatment or hospitalization? 1 5 9 **F_AL16**
 17. making rules to control drinking (never drinking alone, never drinking before 5 p.m.), drinking before breakfast, or drinking non-beverage alcohol like vanilla extract, cough syrup, or rubbing alcohol? 1 5 9 **F_AL17**
 18. trouble at work or school or getting into fights while drinking? 1 5 9 **F_AL18**

19. losing friends because of his/her drinking, considering him/herself an excessive drinker, or feeling guilty about his/her drinking? 1 5 9 **F_AL19**

IF 3 OR MORE 5's CODED IN Q.1-19, CONTINUE. OTHERS SKIP TO NEXT SECTION.

20. Did (RELATIVE) have a period of a month or more when 3 or more of these experiences occurred together? **F_AL20**

NO (SKIP TO 21) 1
 YES 5
 DON'T KNOW (SKIP TO 21) 9

a. How old was (RELATIVE) the first/last time (he/she) had three or more of these experiences occurring within a period lasting a month or longer?

F_AL_AO AGE ONS: ___/___
F_AL_O ONS: 1 2 3 4 5
F_AL_AR AGE REC: ___/___
F_AL_R REC: 1 2 3 4 5

21. OMIT PHRASE IN BRACKETS IF 20 CODED NO.

[Since (RELATIVE) developed problems at about age (AGE ONSET IN #20),] was there ever a period of three months or longer when (RELATIVE) did not have anything to drink?

F_AL21

NO (SKIP TO NEXT SECTION) 1
 YES 5
 DON'T KNOW .. (SKIP TO NEXT SECTION) 9

a. How old was (RELATIVE) when these periods occurred?

AGE to AGE

F_ALON1 Period 1 ___ to **F_ALOFF1** ___
F_ALON2 Period 2 ___ to **F_ALOFF2** ___
F_ALON3 Period 3 ___ to **F_ALOFF3** ___
F_ALON4 Period 4 ___ to **F_ALOFF4** ___

DRUG

This is a list of some drugs people use (HAND DRUG LIST). Which of these drugs has your (RELATIVE) had problems with?

RECORD DRUGS: _____

DRUG CODE:

 , , , , , , , , ,

Because of his/her drug use, did your (RELATIVE) ever have problems, such as:

	N	Y	U	
1. using drugs in larger amounts or over a longer period than s/he intended?	1	5	9	F_DR1
2. being unable to stop or cut down on use of drugs?	1	5	9	F_DR2
3. spending a lot of time using drugs or recovering from their effects?	1	5	9	F_DR3
4. being unable to work, go to school or take care of household responsibilities?	1	5	9	F_DR4
5. being high from drugs when s/he could get hurt?	1	5	9	F_DR5
6. having accidental injuries?	1	5	9	F_DR6
7. reducing or giving up important activities?	1	5	9	F_DR7
8. problems with family or friends, or at work or school?	1	5	9	F_DR8
9. having legal problems (arrests for possessing, selling or stealing drugs)?	1	5	9	F_DR9
10. physical health problems (hepatitis, overdose)?	1	5	9	F_DR10
11. emotional or psychological problems (uninterested, depressed, suspicious/paranoid, having strange ideas)?	1	5	9	F_DR11
12. withdrawal symptoms?	1	5	9	F_DR12
13. needing larger amounts of drug(s) to get an effect, or finding that s/he could no longer get high on the amount s/he used to use?	1	5	9	F_DR13
14. any kind of treatment or hospitalization?	1	5	9	F_DR14

IF 3 OR MORE 5'S CODED IN Q.1-14, CONTINUE. OTHERS SKIP TO NEXT SECTION.

15. Did (RELATIVE) have a period of a month or longer when 3 or more of these experiences occurred together?

F_DR15

- NO (SKIP TO 16) 1
- YES 5
- DON'T KNOW (SKIP TO 16) 9

a. How old was (RELATIVE) the first/last time (he/she) had three or more of these experiences occurring within a period lasting a month or longer?

F_DR_AO AGE ONS: ___/___

F_DR_O ONS: 1 2 3 4 5

F_DR_AR AGE REC: ___/___

F_DR_R REC: 1 2 3 4 5

16. OMIT PHRASE IN BRACKETS IF 15. CODED NO.

[Since (RELATIVE) developed problems at about age (AGE ONSET IN #15),] was there ever a period of three months or longer when (RELATIVE) did not take any (LIST DRUGS)?

F_DR16

- NO (SKIP TO NEXT SECTION) 1
- YES 5
- DON'T KNOW .. (SKIP TO NEXT SECTION) 9

a. How old was (RELATIVE) when these periods occurred?

AGE to AGE
F_DRON1 Period 1 ___ to **F_DROFF1** ___
F_DRON2 Period 2 ___ to **F_DROFF2** ___
F_DRON3 Period 3 ___ to **F_DROFF3** ___
F_DRON4 Period 4 ___ to **F_DROFF4** ___

DEP

INTERVIEWER: SX SHOULD OCCUR IN SAME TIME PERIOD

While depressed, did your (RELATIVE) also ...

N Y U

- 1. become anxious, worried or irritable? 1 5 9 **F_DP1**
- 2. cry often or become tearful? 1 5 9 **F_DP2**
- 3. lose interest in things s/he usually enjoyed? 1 5 9 **F_DP3**
- 4. lose or gain appetite/weight, without trying to? 1 5 9 **F_DP4**
- 5. sleep too much or too little? 1 5 9 **F_DP5**
- 6. move or speak slower than usual? 1 5 9 **F_DP6**
- 7. pace or wring his/her hands? 1 5 9 **F_DP7**
- 8. have less energy or feel tired out? 1 5 9 **F_DP8**
- 9. become unable to work/take care of house/go to school? 1 5 9 **F_DP9**
- 10. feel guilty, worthless or blame him/herself? 1 5 9 **F_DP10**
- 11. have trouble concentrating or making decisions? 1 5 9 **F_DP11**
- 12. think or talk a lot about death or suicide? 1 5 9 **F_DP12**
- 13. attempt suicide? 1 5 9 **F_DP13**
- 14. have any kind of treatment or hospitalization? 1 5 9 **F_DP14**

IF NO 5'S IN QUESTIONS 1-14, SKIP TO NEXT SECTION.

**IF (RELATIVE) HAD 3 OR MORE 5'S CODED IN ALCOHOL SECTION, CONTINUE.
OTHERS SKIP TO INSTRUCTIONS BEFORE Q. 16.**

- 15. Did these experiences (LIST ALL 5'S CODED IN 1-14) occur only when (RELATIVE) was having problems with alcohol? (USE CLUSTERING AND ABSTINENCE INFORMATION IF AVAILABLE FROM ALCOHOL SECTION TO ASSIST RESPONDENT.) **F_DP15**
 - ALWAYS WITH ALCOHOL 3
 - SOMETIMES WITH ALCOHOL 4
 - NEVER WITH ALCOHOL 5
 - DON'T KNOW 9

**IF (RELATIVE) HAD 3 OR MORE 5'S CODED IN DRUG SECTION, CONTINUE.
OTHERS SKIP TO NEXT SECTION.**

- 16. Did these experiences (LIST 5'S CODED IN 1-14) occur only when (RELATIVE) was having problems with drugs? (USE CLUSTERING AND ABSTINENCE INFORMATION IF AVAILABLE FROM DRUG SECTION TO ASSIST RESPONDENT.) **F_DP16**
 - ALWAYS WITH DRUGS 3
 - SOMETIMES WITH DRUGS 4
 - NEVER WITH DRUGS 5
 - DON'T KNOW 9

MAN

INTERVIEWER: SX SHOULD OCCUR IN SAME TIME PERIOD

While being much more active than usual, did your (RELATIVE) also seem...

N Y U

- 1. too happy/high/excited? 1 5 9 **F_MN1**
- 2. very irritable? 1 5 9 **F_MN2**
- 3. to feel that s/he had special gifts or powers? 1 5 9 **F_MN3**
- 4. to need less sleep? 1 5 9 **F_MN4**
- 5. more talkative than usual? 1 5 9 **F_MN5**
- 6. to jump from one idea to another? 1 5 9 **F_MN6**
- 7. easy to get off the track? 1 5 9 **F_MN7**
- 8. involved in too many activities at work or school? 1 5 9 **F_MN8**
- 9. too sociable? 1 5 9 **F_MN9**
- 10. to have more interest in sex than usual? 1 5 9 **F_MN10**
- 11. to show poor judgement (spending sprees)? 1 5 9 **F_MN11**
- 12. Did s/he have any kind of treatment or hospitalization? 1 5 9 **F_MN12**

IF NO 5'S IN QUESTIONS 1-12, SKIP TO NEXT SECTION.

**IF (RELATIVE) HAD 3 OR MORE 5'S CODED IN ALCOHOL SECTION, CONTINUE.
OTHERS SKIP TO INSTRUCTIONS BEFORE Q. 14.**

- 13. Did these experiences (LIST 5'S CODED IN 1-12) occur only when (RELATIVE) was having problems with alcohol? (USE CLUSTERING AND ABSTINENCE INFORMATION IF AVAILABLE FROM ALCOHOL SECTION TO ASSIST RESPONDENT.) **F_MN13**
 - ALWAYS WITH ALCOHOL 3
 - SOMETIMES WITH ALCOHOL 4
 - NEVER WITH ALCOHOL 5
 - DON'T KNOW 9

**IF (RELATIVE) HAD 3 OR MORE 5'S CODED IN DRUG SECTION, CONTINUE.
OTHERS SKIP TO NEXT SECTION.**

- 14. Did these experiences (LIST 5'S CODED IN 1-12) occur only when (RELATIVE) was having problems with drugs? (USE CLUSTERING AND ABSTINENCE INFORMATION IF AVAILABLE FROM DRUG SECTION TO ASSIST RESPONDENT.) **F_MN14**
 - ALWAYS WITH DRUGS 3
 - SOMETIMES WITH DRUGS 4
 - NEVER WITH DRUGS 5
 - DON'T KNOW 9

SCH

When your (RELATIVE) had unusual beliefs and experiences, did s/he also...

N Y U

- 1. believe people were following him/her? 1 5 9 **F_SZ1**
- 2. believe someone was trying to hurt or poison him/her? 1 5 9 **F_SZ2**
- 3. believe someone was reading his/her mind? 1 5 9 **F_SZ3**
- 4. believe s/he was under control of some person/power/force? 1 5 9 **F_SZ4**
- 5. believe someone could put thoughts into his/her mind? 1 5 9 **F_SZ5**
- 6. believe someone could steal thoughts out of his/her mind? 1 5 9 **F_SZ6**
- 7. believe s/he had special powers or special mission? 1 5 9 **F_SZ7**
- 8. see things that were not really there? 1 5 9 **F_SZ8**
- 9. hear voices when no one was around? 1 5 9 **F_SZ9**
- 10. have any kind of treatment or hospitalization? 1 5 9 **F_SZ10**

IF NO 5'S CODED IN QUESTIONS 1-10, SKIP TO NEXT SECTION.

**IF (RELATIVE) HAD 3 OR MORE 5'S CODED IN ALCOHOL SECTION, CONTINUE.
OTHERS SKIP TO INSTRUCTIONS BEFORE Q. 12.**

- 11. Did these experiences (LIST 5'S CODED IN 1-10) occur only when (RELATIVE) was having problems with alcohol? (USE CLUSTERING AND ABSTINENCE INFORMATION IF AVAILABLE FROM ALCOHOL SECTION TO ASSIST RESPONDENT.) **F_SZ11**
 - ALWAYS WITH ALCOHOL 3
 - SOMETIMES WITH ALCOHOL 4
 - NEVER WITH ALCOHOL 5
 - DON'T KNOW 9

**IF (RELATIVE) HAD 3 OR MORE 5'S CODED IN DRUG SECTION, CONTINUE.
OTHERS SKIP TO NEXT SECTION.**

- 12. Did these experiences (LIST 5'S CODED IN 1-10) occur only when (RELATIVE) was having problems with drugs? (USE CLUSTERING AND ABSTINENCE INFORMATION IF AVAILABLE FROM DRUG SECTION TO ASSIST RESPONDENT.) **F_SZ12**
 - ALWAYS WITH DRUGS 3
 - SOMETIMES WITH DRUGS 4
 - NEVER WITH DRUGS 5
 - DON'T KNOW 9

ASP

Before s/he was 15, did your (RELATIVE) have problems like:

N Y U

- 1. troubles with teachers (expelled/suspended from school)? 1 5 9 **F_AS1**
- 2. frequently starting physical fights? 1 5 9 **F_AS2**
- 3. running away from home overnight? 1 5 9 **F_AS3**
- 4. lying frequently? 1 5 9 **F_AS4**
- 5. troubles with the law? 1 5 9 **F_AS5**
- 6. stealing (from family or outside the home)? 1 5 9 **F_AS6**
- 7. being truant often? 1 5 9 **F_AS7**
- 8. being physically cruel to animals or people? 1 5 9 **F_AS8**
- 9. deliberately destroying others' property? 1 5 9 **F_AS9**
- 10. using weapons in fights? 1 5 9 **F_AS10**
- 11. deliberately engaging in fire setting? 1 5 9 **F_AS11**

Since s/he was 15, did your (RELATIVE) have problems like:

- 12. being frequently unemployed? 1 5 9 **F_AS12**
- 13. being fired from several jobs? 1 5 9 **F_AS13**
- 14. being involved in criminal activities? 1 5 9 **F_AS14**
- 15. being arrested or sent to prison? 1 5 9 **F_AS15**
- 16. being in debt? 1 5 9 **F_AS16**
- 17. being irresponsible as a spouse or parent? 1 5 9 **F_AS17**
- 18. travelling from place to place without fixed address? 1 5 9 **F_AS18**
- 19. using assumed names or aliases? 1 5 9 **F_AS19**
- 20. making money illegally? 1 5 9 **F_AS20**
- 21. driving while intoxicated or speeding? 1 5 9 **F_AS21**
- 22. being unfaithful/unable to sustain relationships? 1 5 9 **F_AS22**

IF AT LEAST ONE 5 IS CODED IN Q.1-11 AND AT LEAST TWO 5'S ARE CODED IN Q.12-22, SKIP TO INSTRUCTIONS BEFORE Q.23. OTHERS SKIP TO NEXT RELATIVE.

IF RELATIVE HAD THREE OR MORE 5'S CODED IN ALCOHOL SECTION, ASK Q.23. OTHERS SKIP TO Q.24.

- 23. Did these experiences (LIST 5'S CODED IN 12-22) occur only when (RELATIVE) was having problems with alcohol? (USE CLUSTERING AND ABSTINENCE INFORMATION IF AVAILABLE FROM ALCOHOL SECTION TO ASSIST RESPONDENT. **F_AS23**)
 - ALWAYS WITH ALCOHOL 3
 - SOMETIMES WITH ALCOHOL 4
 - NEVER WITH ALCOHOL 5
 - DON'T KNOW 9

IF (RELATIVE) HAD THREE OR MORE 5'S CODED IN DRUG SECTION ASK Q. 24. OTHERS SKIP TO NEXT RELATIVE.

- 24. Did these experiences (LIST 5'S CODED IN 12-22) occur only when (RELATIVE) was having problems with drugs? (USE CLUSTERING AND ABSTINENCE INFORMATION IF AVAILABLE FROM DRUG SECTION TO ASSIST RESPONDENT.) **F_AS24**
 - ALWAYS WITH DRUGS 3

SOMETIMES WITH DRUGS	4
NEVER WITH DRUGS	5
DON'T KNOW	9