

ID: _____

ADOLESCENT INFORMATION
(Parent and Adolescent Name or Age/Sex Known)

INTERVIEWER: DO ONLY WITH APPROVAL (AFTER 10/31/96) FROM PARENT/GUARDIAN

INTERVIEWER HAS TALKED TO ADOLESCENT THIS CALL: SKIP TO PART B.

INTERVIEWER HAS NOT TALKED TO ADOLESCENT THIS CALL OR DON'T KNOW: Hi. I am (FIRST AND LAST NAME OF INTERVIEWER) at The University of North Carolina at Chapel Hill. The University is doing a national study of adolescents and their families. GO TO PART B.

PART B

Your telephone number was randomly selected from all telephone numbers in the United States for this study. We are evaluating a program designed to help families keep their adolescents from using alcohol and tobacco.

I would like to interview you on the telephone now. It will take about 15 minutes. I will ask about things like alcohol and tobacco use, family communication, and family rules. Even if you have never used alcohol or tobacco the information you give could help prevent use by others. Your answers will not be revealed to your parent or to anyone outside of the study. It is important for you to have privacy when answering questions, so you may want to make sure no one else can hear the questions and answers. No physical risks are expected from this study. Your participation is entirely voluntary and you can stop at any time.

You would be asked to complete similar interviews again about eight months and two years from now. There is a 50-50 chance your family will be asked to be in a program to help them prevent adolescent alcohol and tobacco use.

Dr. Karl Bauman, the professor responsible for this study, can be reached at 919/966-3900 if you would like more information.

Do you have any questions? INTERVIEWER: ANSWER ALL QUESTIONS TO YOUR SATISFACTION AND TO ADOLESCENT'S SATISFACTION OR ARRANGE FOR PROVIDING SATISFACTORY ANSWERS TO RESPONDENT.

Can I begin your interview now?

YES: GO TO ADOLESCENT INTERVIEW

NO, BUT LATER:

When would be good times to call you back for your interview? RECORD DATES/TIMES

DATES _____ _____ _____ _____

TIMES _____ _____ _____ _____

Thank you very much TERMINATE.

ADOLESCENT REFUSES ADOLESCENT INTERVIEW: Can you tell me why you don't want to participate?
RECORD REASONS FOR REFUSAL.

REASONS (USE CODE SHEET) _____

TERMINATE: Thanks for you time anyway. Good bye..

INTERVIEWER RATING OF REFUSAL STRENGTH:

VERY WEAK 1 2 3 4 5 6 7 VERY STRONG (e.g. DON'T CALL BACK!!!!)

RECORD DATE ADOLESCENT INFORMATION COMPLETED:

_____	JAN=01	APR=04	JUL=07	OCT=10
MM/DD/YY	FEB=02	MAY=05	AUG=08	NOV=11
	MAR03	JUN=06	SEPT=09	DEC=12

INTERVIEWER INITIALS AND DATE _____