

Section H

H1. About what proportion of your friends and acquaintances use Tranquillisers/Sleeping Pills for non-medical purposes?
(e.g. Benzos, Temazzies, Tranks, Sleepers, Valium, Serapax, Mandrax, Mandies, Rohypnol, Rowies)

- All
Most
About half
A few
None

H2. Have you ever used Tranquillisers/Sleeping Pills for non-medical purposes?

Yes (Continue) No (Skip to J1)

H3. About what age were you when you first used Tranquillisers/Sleeping Pills for non-medical purposes?

Age in years:

H4. Have you used Tranquillisers/Sleeping Pills for non-medical purposes in the last 12 months?

Yes (Continue) No (Skip to J1)

H5. During the past 12 months, did you want to or try to stop or cut down on your use of Tranquillisers/Sleeping Pills for non-medical purposes, but found that you couldn't?

Yes No

H6. Have you used Tranquillisers/Sleeping Pills for non-medical purposes in the last month?

Yes (Continue) No (Skip to H8)

H7. Have you used Tranquillisers/Sleeping Pills for non-medical purposes in the last week?

Yes No

H8. In the last 12 months, how often did you use Tranquillisers/Sleeping Pills for non-medical purposes?
(Mark one response only)

- Every day
Once a week or more
About once a month
Every few months
Once or twice a year

H9. Where do/did you usually obtain Tranquillisers/Sleeping Pills for non-medical purposes?

(Mark one response only)

- Friend or acquaintance
Brother or sister
Parent
Spouse or partner
Other relative
Dealer on the street
Dealer delivers to my home
Visit to the dealer's house
Dealer at another location
Doctor shopping/forged script
Steal it
Other

H10. Where do/did you usually use Tranquillisers/Sleeping Pills for non-medical purposes?

(Mark all that apply)

- In my own home
At a friend's house
At private parties
At raves/dance parties
At restaurants/cafes
At licensed premises (e.g. pubs, clubs)
At School, TAFE, University etc
At my workplace
In public places (e.g. parks)
In a car or other vehicle
Somewhere else

H11. Which of the following did you use at the same time, on at least one occasion that you used Tranquillisers/Sleeping Pills for non-medical purposes?

(Mark all that apply)

- Alcohol
Marijuana/Cannabis
Heroin
Cocaine/Crack
Anti-depressants
Pain killers/Analgesics
Barbiturates
Amphetamines/Speed
Ecstasy/Designer Drugs
Other

Not used any of the above at the same time as Tranquillisers/sleeping pills for non-medical purposes

H12. What drug would you mostly use when Tranquillisers/Sleeping Pills for non-medical purposes are not available?

(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

There is no Section I

Reminder:

Please cross inside the box, like this:



If you see a (skip to) after the box you have just marked, go straight to the question indicated.

Section J

J1. About what proportion of your friends and acquaintances use Steroids for non-medical purposes? (e.g. Roids, Juice)

- All
- Most
- About half
- A few
- None

J2. Have you ever used Steroids for non-medical purposes?

- Yes (Continue) No (Skip to K1)

J3. About what age were you when you first used Steroids for non-medical purposes?

Age in years:

J4. Have you used Steroids for non-medical purposes in the last 12 months?

- Yes (Continue) No (Skip to K1)

J5. During the past 12 months, did you want to or try to stop or cut down on your use of Steroids for non-medical purposes but found that you couldn't?

- Yes No

J6. Have you used Steroids for non-medical purposes in the last month?

- Yes (Continue) No (Skip to J8)

J7. Have you used Steroids for non-medical purposes in the last week?

- Yes No

J8. In the last 12 months, how often did you use Steroids for non-medical purposes?

(Mark one response only)

- Every day
- Once a week or more
- About once a month
- Every few months
- Once or twice a year

J9. Where do/did you usually obtain Steroids for non-medical purposes?

(Mark one response only)

- Friend or acquaintance
- Brother or sister
- Parent
- Spouse or partner
- Other relative
- Dealer on the street
- Dealer delivers to my home
- Visit to the dealer's house
- Dealer at another location
- At gyms/sporting clubs/fitness centres
- Doctor shopping/forged script
- Steal it
- Other

J10. Where do/did you usually use Steroids for non-medical purposes?

(Mark all that apply)

- In my own home
- At a friend's house
- At private parties
- At raves/dance parties
- At restaurants/cafes
- At licensed premises (e.g. pubs, clubs)
- At School, TAFE, University etc
- At my workplace
- In public places (e.g. parks)
- In a car or other vehicle
- At gyms/sporting clubs/fitness centres
- Somewhere else

J11. How have you used Steroids for non-medical purposes?

(Mark all that apply)

- Swallowed
- Injected

J12. Which of the following did you use at the same time, on at least one occasion that you used Steroids for non-medical purposes?

(Mark all that apply)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- Not used any of the above at the same time as Steroids for non-medical purposes

J13. What drug would you mostly use when Steroids for non-medical purposes are not available?

(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

Section K

K1. About what proportion of your friends and acquaintances use Barbiturates for non-medical purposes?
(e.g. Barbies, Barbs, Downers, Red, Purple Hearts)

- All
Most
About half
A few
None

K2. Have you ever used Barbiturates for non-medical purposes?

Yes (Continue) No (Skip to L1)

K3. About what age were you when you first used Barbiturates for non-medical purposes?

Age in years:

K4. Have you used Barbiturates for non-medical purposes in the last 12 months?

Yes (Continue) No (Skip to L1)

K5. During the past 12 months, did you want to or try to stop or cut down on your use of Barbiturates for non-medical purposes, but found that you couldn't?

Yes No

K6. Have you used Barbiturates for non-medical purposes in the last month?

Yes (Continue) No (Skip to K8)

K7. Have you used Barbiturates for non-medical purposes in the last week?

Yes No

K8. In the last 12 months, how often did you use Barbiturates for non-medical purposes?

(Mark one response only)

- Every day
Once a week or more
About once a month
Every few months
Once or twice a year

K9. Where do/did you usually obtain Barbiturates for non-medical purposes?

(Mark one response only)

- Friend or acquaintance
Brother or sister
Parent
Spouse or partner
Other relative
Dealer on the street
Dealer delivers to my home
Visit to the dealer's house
Dealer at another location
Doctor shopping/forged script
Steal it
Other

K10. Where do/did you usually use Barbiturates for non-medical purposes?

(Mark all that apply)

- In my own home
At a friend's house
At private parties
At raves/dance parties
At restaurants/cafes
At licensed premises (e.g. pubs, clubs)
At School, TAFE, University etc
At my workplace
In public places (e.g. parks)
In a car or other vehicle
Somewhere else

K11. Which of the following did you use at the same time, on at least one occasion that you used Barbiturates for non-medical purposes?
(Mark all that apply)

- Alcohol
 - Marijuana/Cannabis
 - Heroin
 - Cocaine/Crack
 - Tranquillisers/Sleeping Pills
 - Anti-depressants
 - Pain killers/Analgesics
 - Amphetamines/Speed
 - Ecstasy/Designer Drugs
 - Other
- Not used any of the above at the same time as Barbiturates for non-medical purposes

K12. What drug would you mostly use when Barbiturates for non-medical purposes are not available?
(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

Section L

L1. About what proportion of your friends and acquaintances use Amphetamines/Speed for non-medical purposes?
(e.g. Crystal, Whizz, Goey, Gogo, Zip, Uppers, Ice)

- All
- Most
- About half
- A few
- None

L2. Have you ever used Amphetamines/Speed for non-medical purposes?

Yes (Continue) No (Skip to M1)

L3. About what age were you when you first used Amphetamines/Speed for non-medical purposes?

Age in years:

L4. Have you used Amphetamines/Speed for non-medical purposes in the last 12 months?

Yes (Continue) No (Skip to M1)

L5. During the past 12 months, did you want to or try to stop or cut down on your use of Amphetamines/Speed for non-medical purposes, but found that you couldn't?

Yes No

L6. Have you used Amphetamines/Speed for non-medical purposes in the last month?

Yes (Continue) No (Skip to L8)

L7. Have you used Amphetamines/Speed for non-medical purposes in the last week?

Yes No

L8. In the last 12 months, how often did you use Amphetamines/Speed for non-medical purposes?
(Mark one response only)

- Every day
- Once a week or more
- About once a month
- Every few months
- Once or twice a year

L9. Where do/did you usually obtain Amphetamines/Speed for non-medical purposes?
(Mark one response only)

- Friend or acquaintance
- Brother or sister
- Parent
- Spouse or partner
- Other relative
- Dealer on the street
- Dealer delivers to my home
- Visit to the dealer's house
- Dealer at another location
- Doctor shopping/forged script
- Steal it
- Other

L10. Where do/did you usually use Amphetamines/Speed for non-medical purposes?
(Mark all that apply)

- In my own home
- At a friend's house
- At private parties
- At raves/dance parties
- At restaurants/cafes
- At licensed premises (e.g. pubs, clubs)
- At School, TAFE, University etc
- At my workplace
- In public places (e.g. parks)
- In a car or other vehicle
- Somewhere else

L11. On a day you use Amphetamines/Speed, on average how many points or grams do you normally have?

Number of points Number of grams
OR

If less than 1 (e.g. half) write in 1

L12. What form of Amphetamines/Speed do you use?
(Mark all that apply)

- Powder
- Liquid
- Crystal
- Tablet
- Prescription amphetamines

L13. How have you used Amphetamines/Speed?
(Mark all that apply)

- Smoked
- Snorted
- Swallowed
- Injected
- Other

L14. Which of the following did you use at the same time, on at least one occasion that you used Amphetamines/Speed for non-medical purposes?
(Mark all that apply)

- Alcohol
 - Marijuana/Cannabis
 - Heroin
 - Cocaine/Crack
 - Tranquillisers/Sleeping Pills
 - Anti-depressants
 - Pain killers/Analgesics
 - Barbiturates
 - Ecstasy/Designer Drugs
 - Other
- Not used any of the above at the same time as Amphetamines/speed for non-medical purposes

L15. What drug would you mostly use when Amphetamines/Speed for non medical purposes is not available?
(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Ecstasy/Designer Drugs
- Other
- No other drug

Section M

M1. About what proportion of your friends and acquaintances use Marijuana or Cannabis?
(e.g. Pot, Grass, Weed, Reefer, Joint, MaryJane, Acapulco Gold, Rope, Mull, Cone, Spliff, Dope, Skunk, Bhang, Ganja, Hash, Chronic)

- All
Most
About half
A few
None

M2. Have you ever used Marijuana (or Cannabis)?

Yes (Continue) No (Skip to N1)

M3. About what age were you when you first used Marijuana (or Cannabis)?

Age in years:

M4. Have you used Marijuana (or Cannabis) in the last 12 months?

Yes (Continue) No (Skip to N1)

M5. During the past 12 months, did you want to or try to stop or cut down on your use of Marijuana (or Cannabis), but found that you couldn't?

Yes No

M6. Have you used Marijuana (or Cannabis) in the last month?

Yes (Continue) No (Skip to M8)

M7. Have you used Marijuana (or Cannabis) in the last week?

Yes No

M8. In the last 12 months, how often did you use Marijuana (or Cannabis)?

(Mark one response only)

- Every day
Once a week or more
About once a month
Every few months
Once or twice a year

M9. Where do/did you usually obtain Marijuana (or Cannabis)?

(Mark one response only)

- Friend or acquaintance
Brother or sister
Parent
Spouse or partner
Other relative
Dealer on the street
Dealer delivers to my home
Visit to the dealer's house
Dealer at another location
Grew my own/Made it myself
Steal it
Other

M10. Where do/did you usually use Marijuana (or Cannabis)?

(Mark all that apply)

- In my own home
At a friend's house
At a private party
At raves/dance parties
At restaurants/cafes
At licensed premises (e.g. pubs, clubs)
At School, TAFE, University etc
At my work place
In public places (e.g. parks)
In a car or other vehicle
Somewhere else

M11. On a day you use Marijuana (or Cannabis), on average how many cones, bongs or joints do you normally have?

Number of cones, bongs or joints:

If less than 1 (e.g. half) write in 1

M12. What form of Marijuana (or Cannabis) do you use?

(Mark all that apply)

- Leaf
- Heads
- Resin (including Hash)
- Oil (including Hash Oil)
- Skunk
- Other

M13. How have you used Marijuana (or Cannabis)?

(Mark all that apply)

- Smoked as joints (e.g. reefers, spliffs)
- Smoked from a bong or pipe
- By eating it (e.g. Hash Cookies)
- Cannabis and tobacco mixed

M14. Which of the following did you use at the same time, on at least one occasion that you used Marijuana (or Cannabis)?

(Mark all that apply)

- Alcohol
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other

Not used any of the above at the same time as Marijuana (or Cannabis)

M15. What drug would you mostly use when Marijuana (or Cannabis) is not available?

(Mark one response only)

- Alcohol
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

Reminder:



Are you filling in the boxes correctly?



Are you shading the boxes fully for any mistakes?

Section N

N1. About what proportion of your friends and acquaintances use Heroin?
(e.g. Hammer, Smack, Gear, Horse, H, Boy, Junk)

- All
Most
About half
A few
None

N2. Have you ever used Heroin?

Yes (Continue) No (Skip to O1)

N3. About what age were you when you first used Heroin?

Age in years:

N4. Have you used Heroin in the last 12 months?

Yes (Continue) No (Skip to O1)

N5. During the past 12 months, did you want to or try to stop or cut down on your use of Heroin, but found that you couldn't?

Yes No

N6. Have you used Heroin in the last month?

Yes (Continue) No (Skip to N8)

N7. Have you used Heroin in the last week?

Yes No

N8. In the last 12 months, how often did you use Heroin?
(Mark one response only)

- Every day
Once a week or more
About once a month
Every few months
Once or twice a year

N9. Where do/did you usually obtain Heroin?
(Mark one response only)

- Friend or acquaintance
Brother or sister
Parent
Spouse or partner
Other relative
Dealer on the street
Dealer delivers to my home
Visit to the dealer's house
Dealer at another location
Doctor shopping/forged script
Steal it
Other

N10. Where do/did you usually use Heroin?
(Mark all that apply)

- In my own home
At a friend's house
At a private party
At raves/dance parties
At restaurants/cafes
At licensed premises (e.g. pubs, clubs)
At School, TAFE, University etc
At my work place
In public places (e.g. parks)
In a car or other vehicle
Somewhere else

N11. On a day you use Heroin, on average how many hits do you normally have?

Number of hits:

N12. What form of Heroin do you use?

(Mark all that apply)

- Heroin powder
- Heroin rock

N13. How have you used Heroin?

(Mark all that apply)

- Smoked
- Snorted
- Swallowed
- Injected
- Other

N14. Which of the following did you use at the same time, on at least one occasion that you used Heroin?

(Mark all that apply)

- Alcohol
- Marijuana/Cannabis
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- Not used any of the above at the same time as Heroin

N15. What drug would you mostly use when Heroin is not available?

(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

Section O

O1. About what proportion of your friends and acquaintances use Methadone other than that which was supplied as part of a medically supervised maintenance program? (e.g. Done, Junk, Jungle Juice)

- All
- Most
- About half
- A few
- None

O2. Have you ever used Methadone which has not been supplied to you medically?

- Yes (Continue) No (Skip to P1)

O3. About what age were you when you first used Methadone which had not been supplied to you medically?

Age in years:

O4. Have you used Methadone which had not been supplied to you medically in the last 12 months?

- Yes (Continue) No (Skip to P1)

O5. During the past 12 months, did you want to or try to stop or cut down on your use of Methadone which had not been supplied to you medically, but found that you couldn't?

- Yes No

O6. Have you used Methadone which had not been supplied to you medically in the last month?

- Yes (Continue) No (Skip to O8)

07. Have you used Methadone which had not been supplied to you medically in the last week?

Yes No

08. In the last 12 months, how often did you use Methadone which has not been supplied to you medically?

(Mark one response only)

- Every day
- Once a week or more
- About once a month
- Every few months
- Once or twice a year

09. Where do/did you usually obtain Methadone which has not been supplied to you medically?

(Mark one response only)

- Friend or acquaintance
- Brother or sister
- Parent
- Spouse or partner
- Other relative
- Dealer on the street
- Dealer delivers to my home
- Visit to the dealer's house
- Dealer at another location
- Doctor shopping/forged script
- Steal it
- Other

010. Where do/did you usually use Methadone which has not been supplied to you medically?

(Mark all that apply)

- In my own home
- At a friend's house
- At private parties
- At raves/dance parties
- At restaurants/cafes
- At licensed premises (e.g. pubs, clubs)
- At School, TAFE, University etc
- At my work place
- In public places (e.g. parks)
- In a car or other vehicle
- Somewhere else

011. On a day you use Methadone which has not been supplied to you medically, on average how many hits do you normally have?

Number of hits:

012. What form of Methadone which has not been supplied to you medically do you use?

(Mark all that apply)

- Methadone syrup
- Physeptone tablets

013. How have you used Methadone which has not been supplied to you medically?

(Mark all that apply)

- Swallowed
- Injected

014. Which of the following did you use at the same time, on at least one occasion that you used Methadone which had not been supplied to you medically?

(Mark all that apply)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- Not used any of the above at the same time as Methadone which has not been supplied to you medically

O15. What drug would you mostly use when Methadone which has not been supplied to you medically is not available?

(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

Section P

P1. About what proportion of your friends and acquaintances use Cocaine?
(e.g. Coke, Crack, Flake, Snow, White Lady/Girl, Happy Dust, Gold Dust, Toot, Scotty, Charlie, Cecil, C, Freebase)

- All
- Most
- About half
- A few
- None

P2. Have you ever used Cocaine?

- Yes (Continue) No (Skip to Q1)

P3. About what age were you when you first used Cocaine?

Age in years:

P4. Have you used Cocaine in the last 12 months?

- Yes (Continue) No (Skip to Q1)

P5. During the past 12 months, did you want to or try to stop or cut down on your use of Cocaine, but found that you couldn't?

- Yes No

P6. Have you used Cocaine in the last month?

- Yes (Continue) No (Skip to P8)

P7. Have you used Cocaine in the last week?

- Yes No

P8. In the last 12 months, how often did you use Cocaine?

(Mark one response only)

- Every day
- Once a week or more
- About once a month
- Every few months
- Once or twice a year

P9. Where do/did you usually obtain Cocaine?
(Mark one response only)

- Friend or acquaintance
- Brother or sister
- Parent
- Spouse or partner
- Other relative
- Dealer on the street
- Dealer delivers to my home
- Visit to the dealer's house
- Dealer at another location
- Doctor shopping/forged script
- Steal it
- Other

P10. Where do/did you usually use Cocaine?
(Mark all that apply)

- In my own home
- At a friend's house
- At private parties
- At raves/dance parties
- At restaurants/cafes
- At licensed premises (e.g. pubs, clubs)
- At School, TAFE, University etc
- At my work place
- In public places (e.g. parks)
- In a car or other vehicle
- Somewhere else

P11. On a day you use Cocaine, on average how many 'hits' or 'lines' do you normally have?

Number of hits or lines:

If less than 1 (e.g. half) write in 1

P12. What form of Cocaine do you use?
(Mark all that apply)

- Cocaine Powder
- Crack Cocaine (Smokable Crystal)

P13. How have you used Cocaine?
(Mark all that apply)

- Smoked
- Snorted
- Swallowed
- Injected
- Other

P14. Which of the following did you use at the same time, on at least one occasion that you used Cocaine?

(Mark all that apply)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other

Not used any of the above at the same time as Cocaine

P15. What drug would you mostly use when Cocaine is not available?

(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

Reminder:

Please cross inside the box, like this:



If you see a (skip to) after the box you have just marked, go straight to the question indicated.

Section Q

Q1. About what proportion of your friends and acquaintances use LSD/Synthetic Hallucinogens or Naturally Occurring Hallucinogens?

Synthetic Hallucinogens include LSD, Psilocybin, MDA, PCP, Acid, Trips, Wedges, Windowpane, Blotter, Microdot, Angel Dust, Hog, Loveboat.

Naturally Occurring Hallucinogens include Magic Mushrooms, Blue Meanies, Gold Tops, Mushies, Datura, Angel's Trumpet.

- All
Most
About half
A few
None

Q2. Have you ever used any Hallucinogens (e.g. LSD/Synthetic or Naturally Occurring Hallucinogens)?

Yes (Continue) No (Skip to R1)

Q3. Have you ever used LSD/Synthetic Hallucinogens?

Yes (Continue) No (Skip to Q6)

Q4. About what age were you when you first used LSD/Synthetic Hallucinogens?

Age in years:

Q5. Have you used LSD/Synthetic Hallucinogens in the last 12 months?

Yes No

Q6. Have you ever used Naturally Occurring Hallucinogens?

Yes (Continue) No (Skip to Instruction before Q9)

Q7. About what age were you when you first used Naturally Occurring Hallucinogens?

Age in years:

Q8. Have you used Naturally Occurring Hallucinogens in the last 12 months?

Yes No

IF HAVE USED LSD/SYNTHETIC HALLUCINOGENS OR NATURALLY OCCURRING HALLUCINOGENS IN THE LAST 12 MONTHS ie. Yes at Q5 OR Q8 CONTINUE

IF HAVE NOT USED LSD/SYNTHETIC HALLUCINOGENS NOR NATURALLY OCCURRING HALLUCINOGENS IN THE LAST 12 MONTHS ie. No at Q5 AND Q8 SKIP TO R1

Q9. During the past 12 months, did you want to or try to stop or cut down on your use of LSD/Synthetic or Naturally Occurring Hallucinogens but found that you couldn't?

Yes No

Q10. Have you used LSD/Synthetic or Naturally Occurring Hallucinogens in the last month?

Yes (Continue) No (Skip to Q12)

Q11. Have you used LSD/Synthetic or Naturally Occurring Hallucinogens in the last week?

Yes No

Q12. In the last 12 months, how often did you use LSD/Synthetic or Naturally Occurring Hallucinogens? (Mark one response only)

- Every day
Once a week or more
About once a month
Every few months
Once or twice a year

Q13. Where do/did you usually obtain LSD/Synthetic or Naturally Occurring Hallucinogens?
(Mark one response only)

- Friend or acquaintance
- Brother or sister
- Parent
- Spouse or partner
- Other relative
- Dealer on the street
- Dealer delivers to my home
- Visit to the dealer's house
- Dealer at another location
- Doctor shopping/forged script
- Steal it
- Other

Q14. Where do/did you usually use LSD/Synthetic or Naturally Occurring Hallucinogens?
(Mark all that apply)

- In my own home
- At a friend's house
- At private parties
- At raves/dance parties
- At restaurants/cafes
- At licensed premises (e.g. pubs, clubs)
- At School, TAFE, University etc
- At my work place
- In public places (e.g. parks)
- In a car or other vehicle
- Somewhere else

Q15. On a day you use LSD/Synthetic or Naturally Occurring Hallucinogens, on average how many 'trips' do you normally have?

Number of trips:

Q16. What form of LSD/Synthetic or Naturally Occurring Hallucinogens do you use?
(Mark all that apply)

- Tabs
- Liquid
- Magic Mushrooms
- Datura/Angel's Trumpet

Q17. Which of the following did you use at the same time, on at least one occasion that you used LSD/Synthetic or Naturally Occurring Hallucinogens?
(Mark all that apply)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- Not used any of the above at the same time as LSD/Synthetic or Naturally Occurring Hallucinogens

Q18. What drug would you mostly use when LSD/Synthetic or Naturally Occurring Hallucinogens are not available?
(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

Section R

R1. About what proportion of your friends and acquaintances use Ecstasy/Designer Drugs? (e.g. XTC, E, Ex, Eccy, E and C, Adam, MDMA, PMA, GHB)

- All
Most
About half
A few
None

R8. In the last 12 months, how often did you use Ecstasy/Designer Drugs?

(Mark one response only)

- Every day
Once a week or more
About once a month
Every few months
Once or twice a year

R9. Where do/did you usually obtain Ecstasy/Designer Drugs?

(Mark one response only)

- Friend or acquaintance
Brother or sister
Parent
Spouse or partner
Other relative
Dealer on the street
Dealer delivers to my home
Visit to the dealer's house
Dealer at another location
Doctor shopping/forged script
Steal it
Other

R10. Where do/did you usually use Ecstasy/Designer Drugs?

(Mark all that apply)

- In my own home
At a friend's house
At private parties
At raves/dance parties
At restaurants/cafes
At licensed premises (e.g. pubs, clubs)
At School, TAFE, University etc
At my work place
In public places (e.g. parks)
In a car or other vehicle
Somewhere else

R11. On a day you use Ecstasy/Designer Drugs, on average how many tablets/pills do you normally have?

Number of tablets/pills:

If less than 1 (e.g. Half) write in 1

R2. Have you ever used Ecstasy/Designer Drugs?

Yes (Continue) No (Skip to S1)

R3. About what age were you when you first used Ecstasy/Designer Drugs?

Age in years:

R4. Have you used Ecstasy/Designer Drugs in the last 12 months?

Yes (Continue) No (Skip to S1)

R5. During the past 12 months, did you want to or try to stop or cut down on your use of Ecstasy/Designer Drugs, but found that you couldn't?

Yes No

R6. Have you used Ecstasy/Designer Drugs in the last month?

Yes (Continue) No (Skip to R8)

R7. Have you used Ecstasy/Designer Drugs in the last week?

Yes No

R12. Which of the following did you use at the same time, on at least one occasion that you used Ecstasy/Designer Drugs?
(Mark all that apply)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Other
- Not used any of the above at the same time as Ecstasy/Designer Drugs

R13. What drug would you mostly use when Ecstasy/Designer Drugs are not available?
(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Other
- No other drug

Section S

S1. About what proportion of your friends and acquaintances use Inhalants?
(e.g. Solvents, Aerosols, Glue, Petrol, Laughing Gas, Whippits, Nitrous, Snappers, Poppers, Pearlers, Rushamines, Locker Room, Bolt, Bullet, Rush, Climax, Red Gold)

- All
- Most
- About half
- A few
- None

S2. Have you ever used Inhalants?

- Yes (Continue) No (Skip to T1)

S3. About what age were you when you first used Inhalants?

Age in years:

S4. Have you used Inhalants in the last 12 months?

- Yes (Continue) No (Skip to T1)

S5. During the past 12 months, did you want to or try to stop or cut down on your use of Inhalants, but found that you couldn't?

- Yes No

S6. Have you used Inhalants in the last month?

- Yes (Continue) No (Skip to S8)

S7. Have you used Inhalants in the last week?

- Yes No

S8. In the last 12 months, how often did you use Inhalants?

(Mark one response only)

- Every day
- Once or twice a week
- About once a month
- Every few months
- Once or twice a year

S9. Where do/did you usually obtain Inhalants?

(Mark one response only)

- Friend or acquaintance
- Brother or sister
- Parent
- Spouse or partner
- Other relative
- Dealer on the street
- Dealer delivers to my home
- Visit to the dealer's house
- Dealer at another location
- Buy at a shop/retail outlet
(e.g. petrol station, hardware store, Supermarket etc.)
- Doctor shopping/forged script
- Steal it
- Other

S10. Where do/did you usually use Inhalants ?

(Mark all that apply)

- In my own home
- At a friend's house
- At private parties
- At raves/dance parties
- At restaurants/cafes
- At licensed premises (e.g. pubs, clubs)
- At School, TAFE, University etc
- At my work place
- In public places (e.g. parks)
- In a car or other vehicle
- Somewhere else

S11. On a day you use Inhalants, on average how many hits do you normally have?

Number of hits:

S12. Which of the following did you use at the same time, on at least one occasion that you used Inhalants?

(Mark all that apply)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- Not used any of the above at the same time as Inhalants

S13. What drug would you mostly use when Inhalants are not available?

(Mark one response only)

- Alcohol
- Marijuana/Cannabis
- Heroin
- Cocaine/Crack
- Tranquillisers/Sleeping Pills
- Anti-depressants
- Pain killers/Analgesics
- Barbiturates
- Amphetamines/Speed
- Ecstasy/Designer Drugs
- Other
- No other drug

Reminder:



Are you filling in the boxes correctly?



Are you shading the boxes fully for any mistakes?