Heading at top of every page:

2020 Vermont Young Adult Survey – This survey is anonymous.



Welcome to the 2020 Vermont Young Adult Survey!

This survey was designed for Vermont residents between the ages of 18 and 25. It takes about 10 to 15 minutes to complete and will ask questions about your perceptions and use of alcohol and other drugs, and other health-related topics.

If you completed this survey in 2018 and are still under age 26, welcome back!

All eligible participants can enter a drawing for cash prizes of \$100 and \$500.

Please DO NOT take this survey if:

- you have already completed the survey this year OR
- you are under 18 or over 25 OR
- you lived outside of Vermont for all of the past year

Otherwise, please continue. We sincerely appreciate your participation!

Important Information

Please read before proceeding.

This survey is completely anonymous and does not record any personally identifying information. Please answer all questions carefully and truthfully.

The survey is being conducted by the Pacific Institute for Research and Evaluation (PIRE), which is a non-profit organization contracted by the Vermont Department of Health. The information from the survey will be released in summary form only. No one from the Department of Health will have access to your individual responses.

At the end of the survey you will be able to enter a weekly drawing for a \$100 cash prize as well as one final drawing for a \$500 grand prize. Your contact information for the drawing will be saved in a separate location and can never be linked to your survey data.

You may only enter the drawing once; duplicate entries will be discarded. **Proof of age and Vermont residence will be required to receive a prize.**

The survey information will be used to help inform and improve prevention programs in Vermont.

The survey is completely voluntary. You may choose not to participate at any time. Other than the question about your age, you may skip any questions you are not comfortable answering.

As you proceed through the survey, please use the "Next" button at the bottom of each page to go to the next page and the "Back" button if you need to review or change a previous answer. Do not use your browser forward and back buttons.

Note: Question number displayed in this document match with those in the full online version. Respondents, however, may see different numbers based on the skip patterns applied.

Q1	What is your age?
	O Under 18 (1)
	O 18 (2)
	O 19 (3)
	O 20 (4)
	O 21 (5)
	O 22 (6)
	O 23 (7)
	O 24 (8)
	O 25 (9)
	O over 25 (10)

[If "Under 18" or "over 25" is selected, respondent sees this message and is exited from the survey: "Thank you for your interest. Based on your responses, you are not eligible for this survey."]

Q2 What is your sex (as assigned at birth)?	
O Male (1)	
O Female (2)	
Q3 Do you think of yourself as (please check all that apply):	
O Straight	
O Gay or lesbian	
O Bisexual	
O Trans, transgender, or gender non-conforming	
Other or unsure	

Note: all "check all that apply" questions in the survey are recorded in the data file as a set of indicator variables that are coded with a positive interger (starting with a "1" for the first response option, "2" for the second, etc., even though just using a "1" would be sufficient for all five indicators). All other response options are blank coded.

Q4 Please select the Vermont city or town where you lived the greatest amount of time during the year.
▼ Addison (1) Other (256)
[If "Other" is selected] Q5 Please enter your city or town.
[If no selection was made for town (after being prompted again), or if "other" was selected but no town name was entered, ask this question instead]
We respect your preference to not provide the town where you live. In order to make the greatest use of the information gathered in this survey, it will be helpful to know at least your <u>county</u> of residence.
Q6 Please select the Vermont county where you lived the greatest amount of time during the past year.
▼ Addison (1) Windsor (14)
Q7 Are you a student?
O No (1)
Yes, in college or vocational school, full-time (2)
Yes, in college or vocational school, part-time (3)
O Yes, in high school or a GED program (4)
Yes, in some other type of school (5)

Q8 Within the past 12 months do you recall seeing or hearing any information regarding safe storage and disposal of prescription medications?
O Yes (1)
O No (2)
Q9 Is there a location within 5 miles of where you live where leftover or unused prescription medications may be dropped off?
O Yes (1)
O No (2)
O Don't know (3)
Q10 How easy or difficult do you think it is for persons aged 18 to 20 in your community (that is the Vermont community where you live for most of the year) to buy alcohol <u>in stores</u> ?
O Very easy (1)
O Somewhat easy (2)
O Somewhat difficult (3)
O Very difficult (4)
O Don't know (5)

alcohol in bars and restaurants (when they are open)?
O Very easy (1)
O Somewhat easy (2)
O Somewhat difficult (3)
O Very difficult (4)
O Don't know (5)
Q12 How easy or difficult do you think it is for persons aged 18 to 20 in your community to buy cigarettes?
O Very easy (1)
O Somewhat easy (2)
O Somewhat difficult (3)
O Very difficult (4)
O Don't know (5)
Q13 How easy or difficult do you think it is for persons aged 18 to 20 in your community to buy e-cigarettes or other electronic vapor products?
O Very easy (1)
O Somewhat easy (2)
O Somewhat difficult (3)
O Very difficult (4)
O Don't know (5)

Q11 How easy or difficult do you think it is for persons aged 18 to 20 in your community to buy

Q14 How easy or difficult do you think it is for persons <u>your age</u> in your community to get marijuana (from any source)?
O Very easy (1)
O Somewhat easy (2)
O Somewhat difficult (3)
O Very difficult (4)
O Don't know (5)
Q15 How easy or difficult do you think it is for persons <u>your age</u> in your community to get prescription pain relievers (e.g., Oxycontin, Vicodin, Codeine) without having their own prescription?
O Very easy (1)
O Somewhat easy (2)
O Somewhat difficult (3)
O Very difficult (4)
O Don't know (5)
Q16 How much do people risk harming themselves physically or in other ways if they have <u>fivor more drinks of an alcoholic beverage once or twice a week?</u>
O No risk (1)
O Slight risk (2)
O Moderate risk (3)
O Great risk (4)
O Don't know (5)

Q17 How much do people risk harming themselves physically or in other ways if they <u>smoke</u> <u>marijuana once or twice a week</u> ?
O No risk (1)
O Slight risk (2)
O Moderate risk (3)
O Great risk (4)
O Don't know (5)
Q18 How much do people risk harming themselves physically or in other ways if they use marijuana by vaping or dabbing <u>once or twice a week</u> ?
O No risk (1)
O Slight risk (2)
O Moderate risk (3)
Great risk (4)
O Don't know (5)
Q19 How much do people risk harming themselves physically or in other ways if they <u>smoke cigarettes once or twice a week?</u>
O No risk (1)
O Slight risk (2)
O Moderate risk (3)
○ Great risk (4)
O Don't know (5)

Q20 How much do people risk harming themselves physically or in other ways if they use ecigarettes or other electronic vaping devices containing nicotine once or twice a week?
O No risk (1)
O Slight risk (2)
O Moderate risk (3)
○ Great risk (4)
O Don't know (5)
Q21 How much do people risk harming themselves physically or in other ways if they <u>use</u> <u>prescription pain relievers (e.g., Oxycontin, Vicodin, Codeine) that were not prescribed for them a few times per year?</u>
O No risk (1)
O Slight risk (2)
O Moderate risk (3)
○ Great risk (4)
O Don't know (5)
Q22 During the past 30 days , have you had at least one drink of any alcoholic beverage such as beer, wine, a malt beverage, or liquor?
O Yes (1)
O No (2)
[if "no" selected, skip to Q25]

Q23 Considering all types of alcoholic beverages, how many days during the past 30 days did you have 5 or more drinks (if male) or 4 or more drinks (if female) on a single occasion? If unsure, please provide your best estimate.
O days (1)
O 1 or 2 days (2)
O 3 to 5 days (3)
O 6 to 10 days (4)
O 11 to 19 days (5)
O 20 or more days (6)
Q24 During the past 30 days , have you driven a car or other vehicle after having too much to drink?
O Yes (1)
O No (2)
O Don't know (3)
Q25 During the past 30 days , have you used any form of marijuana?
O Yes (1)
O No (2)
[if "no" selected, skip to Q29]

Q26 On how many days in the past 30 days did you use marijuana (in any form)? If unsure, please provide your best estimate.	
O 1 or 2 days (1)	
O 3 to 5 days (2)	
O 6 to 10 days (3)	
O 11 to 19 days (4)	
O 20 or more days (5)	
Q27 During the past 30 days , in what ways did you use marijuana? (Check all that apply)	
Smoked it (includes joints, blunts, pipes, or bongs)	
O With a vaping device	
O With a dabbing rig	
O Consumed it in food	
O Consumed it in a beverage	
O In capsule form	
O In a tincture placed under the tongue	
As an ointment or balm applied to my skin	
Other (please describe)	

Q28 During the past 30 days , have you driven a car or other vehicle within three hours of using marijuana?
O Yes (1)
O No (2)
Q29 During the past 30 days , did you use any of the following tobacco products? (check all that apply)
O Cigarettes
O Cigarillos, or little cigars
O Chewing tobacco, snuff, dips, snus, or dissolvable tobacco products
O I did not use any of these products
Q30 During the past 30 days , did you use any electronic vapor products? These products include e-cigarettes, vapes, vape pens, e-cigars, e-hookahs, hookah pens, and mods.
O Yes (1)
O No (2)
Ilf ves to Q36, continue. Otherwise, skip to Q321

Q31 What substances were in the any of vaping products that you used at any time in the past 30 days? (Check all that apply)
O Nicotine
O Marijuana or hash oil
O Flavoring only
O Some other substance that you knew what it was
O Some other substance but you did not know what it was
Q32 Within the last 12 months , have you used any prescription pain relievers (e.g., OxyContin, Vicodin, Codeine) that were not prescribed to you or that were prescribed to you but you used at a higher dosage or for a different reason than prescribed?
O Yes (1)
O No (2)
Q33 Within the last 12 months , have you used any prescription sedatives (e.g., Xanax, Valium) that were not prescribed to you or that were prescribed to you but you used at a higher dosage or for a different reason than prescribed?
O Yes (1)
O No (2)
Q34 Within the last 12 months , have you used any prescription stimulants (e.g., Ritalin, Adderall) that were not prescribed to you or that were prescribed to you but you used at a higher dosage or for a different reason than prescribed?
O Yes (1)
O No (2)

Q35 Within the past 12 months , have you used any hallucinogenic drugs (such as LSD, PCP, angel dust, mescaline, peyote, or psilocybin mushrooms)?
O Yes (1)
O No (2)
Q36 Within the past 12 months , have you used any form of cocaine, including powder, crack, or freebase?
O Yes (1)
O No (2)
Q37 Within the past 12 months , have you used, even once, any form of heroin?
O Yes (1)
O No (2)
Q38 In recent weeks the coronavirus (COVID-19) pandemic profoundly disrupted many aspects of everyday life in this country. How, if at all, has this emergency influenced your use of alcohol compared to the month before the emergency began?
O I stopped using alcohol (1)
O I decreased my use of alcohol (2)
O I started using alcohol (3)
I increased my use of alcohol (4)
O None of the above (5)

Q39 How, if at all, has the COVID-19 emergency influenced your use of marijuana compared to the month before the emergency began?							
O I stopped using marijuana (1)							
O I decreased my use of marijuana (2)							
O I started using marijuana (3)							
I increased my use of marijuana (4)							
O None of the above (5)							
Q40 How, if at all, has the COVID-19 emergency influenced your use of cigarettes or other tobacco products compared to the month before the emergency began?							
I stopped using cigarettes or other tobacco products (1)							
O I decreased my use of cigarettes or other tobacco products (2)							
I started using cigarettes or other tobacco products (3)							
O I increased my use of cigarettes or other tobacco products (4)							
O None of the above (5)							
Q41 How, if at all, has the COVID-19 emergency influenced your use of nicotine supplied by an electronic vaping product compared to the month before the emergency began?							
I stopped using electronic nicotine vaping products (1)							
I decreased my use of electronic nicotine vaping products (2)							
I started using electronic nicotine vaping products (3)							
I increased my use of electronic nicotine vaping products (4)							
O None of the above (5)							

Q42 How, if at all, has the COVID-19 emergency influenced your use of prescription medications that were not prescribed to you or that you used in ways other than prescribed (also referred to as "misuse") compared to the 12 months before the emergency began?					
O I stopped misusing prescription medications (1)					
O I decreased my misuse of prescription medications (2)					
O I started misusing prescription medications (3)					
I increased my misuse of prescription medications (4)					
O None of the above (5)					
Q43 During the two weeks before the coronavirus (COVID-19) pandemic became a national emergency, were you bothered by any of the following problems? (Check all that apply)					
Had little interest or pleasure in doing things					
O Felt down, depressed, or hopeless					
Felt nervous, anxious, or on edge					
Was not able to stop or control worrying					
O None of the above					
Q44 Over the past two weeks , have you been bothered by any of the following problems? (Check all that apply)					
O Had little interest or pleasure in doing things					
Felt down, depressed, or hopeless					
Felt nervous, anxious, or on edge					
Was not able to stop or control worrying					
O None of the above					

[Q45 to Q51 for internal VDH/ADAP use only]

Q52 How do you usually describe yourself (check all that apply)?							
O White							
O Black or African American							
O Hispanic, Latino, or Spanish origin							
O Asian							
O American Indian or Alaskan Native							
Native Hawaiian or other Pacific Islander							
O Bi-Racial or Multi-Racial							
Other race, ethnicity, or origin							
Q53 What is your employment status?							
Employed for wages (full-time) (1)							
Employed for wages (part-time) (2)							
O Self-employed (3)							
○ Not employed and looking for work (4)							
Not employed and not looking for work (5)							

most like a mother to you)?
O Did not complete high school (1)
O Completed high school (2)
O Attended some college (3)
O Completed college (4)
O Completed graduate or professional school after college (5)
O Don't know (6)
Q55 Are you currently serving or have you ever served in any branch of the United States Armed Forces (including active duty, reserve, or National Guard)?
O Yes (1)
O No (2)
Q56 Is there anything else you'd like to tell us about ways in which the coronavirus (COVID-19) emergency has affected your health, well-being, or health-related behaviors?
Q57 Is there anything else you'd like to tell us or add regarding any other issues we have asked about today, or about your experience taking the survey?

Q54 What is the highest level of education completed by your mother (or the person who is

That was the last question. Thank you for your time. The next page will explain how you can enter the drawing for a prize.

If you have any questions about this survey, or would like to know where you can find more information about alcohol and other drug issues, please contact Amy Livingston at Pacific Institute for Research and Evaluation (PIRE) at (802) 652-4111 or alivingston@pire.org. You may also contact Lori Uerz at the Vermont Department of Health at (802) 652-4149 or lori.uerz@vermont.gov.

If you have questions regarding your rights as a participant in this study, you may contact Elysia Oudemans-Tilley at PIRE at 866-PIRE-ORG (866-747-3674), option "1".

This survey was approved by the Vermont Department of Health.

You are now able to **enter a drawing for a weekly \$100 cash prize and one \$500 cash prize** once the survey has ended. Winners will be asked to provide documentation of being between the ages of 18 and 25 and a Vermont resident for at least part of the year.

To enter the drawing, please respond "yes" to the question on this page. You will then be directed to a separate site and be asked to provide your name and e-mail address or phone number. This drawing entry site is entirely separate from the survey site. There is no way to connect your contact information and your survey responses.

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0	Yes	(1)
0	No	(2)

[If yes to above, respondents will see the message below. Otherwise they will skip to the "Thank you for taking our survey" message below]

Thank you for taking our survey. Click here to go to the prize drawing site now.

[link will take respondent to prize drawing site]

Thank you for taking our survey. Your response is very important to us.

For more information find us on Facebook at https://www.facebook.com/vermontyas/ or by searching for Vermont YAS.