



# Confidential Form

National Aboriginal and Torres Strait Islander Health Survey 2004-05

## Why this Information is Needed

The information collected in this form is about behaviours which may affect people's health. With your answers you will help us to measure the extent of some of these behaviours in the Aboriginal and Torres Strait Islander community.

## Confidentiality

The answers you provide will be treated confidentially. The Australian Bureau of Statistics is required by the *Census and Statistics Act 1905* to maintain the confidentiality of all information provided to it. This information will be released in a way that would enable an individual's response to be identified.

## Authority for this Survey

The information asked for is collected under the authority of the *Census and Statistics Act 1905*.

## Completion of this form is voluntary.

Frank Prewin  
Australian Statistician

### INTERVIEWER USE ONLY

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PERS

FOR THIS SURVEY, THE TERM "NON-MEDICAL PURPOSES" MEANS DRUGS USED:

1. "either alone or with other drugs in order to induce or enhance a drug experience";
2. "for performance (e.g. athletic) enhancement";  
or
3. "for cosmetic (e.g. body shaping) purposes"

**1 Have you ever used Pain Killers or Analgesics?**

e.g. Aspirin, Paracetamol, Mersyndol.

- Yes .....  Go to 2  
No .....  Go to 4

**2 Have you used Pain Killers or Analgesics for non-medical purposes?**

- Yes .....  Go to 3  
No .....  Go to 4

**3 Have you used Pain Killers or Analgesics for non-medical purposes in the last 12 months?**

- Yes .....  Go to 4  
No .....  Go to 4

**4 Have you ever used Tranquillisers or Sleeping Pills?**

e.g. Benzos, Temazzies, Tranks, Sleepers, Valium, Serapax, Mandrax, Mandies, Rohypnol, Rowies.

- Yes .....  Go to 5  
No .....  Go to 7

**5 Have you ever used Tranquillisers or Sleeping Pills for non-medical purposes?**

- Yes .....  Go to 6  
No .....  Go to 7

**6 Have you used Tranquillisers or Sleeping Pills for non-medical purposes in the last 12 months?**

- Yes .....  Go to 7  
No .....  Go to 7

**7 Have you ever used Amphetamines or Speed?**

e.g. Crystal, Whizz, Goey, Gogo, Zip, Uppers, Ice.

- Yes .....  Go to 8  
No .....  Go to 9

**8 Have you used Amphetamines or Speed in the last 12 months?**

- Yes .....  Go to 9  
No .....  Go to 9

**9 Have you ever used Marijuana, Hashish or Cannabis Resin?**

e.g. Pot, Grass, Weed, Ganja, Reefer, Joint, MaryJane, Rope, Yandi, Mull, Dope, Skunk, Bhang, Hash.

- Yes .....  Go to 10  
No .....  Go to 11

**10 Have you used Marijuana, Hashish or Cannabis Resin in the last 12 months?**

- Yes .....  Go to 11  
No .....  Go to 11

**11 Have you ever used Heroin?**

e.g. Hammer, Smack, Gear, Horse, H, Boy, Junk.

- Yes .....  Go to 12  
No .....  Go to 13

**12 Have you used Heroin in the last 12 months?**

- Yes .....  Go to 13  
No .....  Go to 13

**13 Have you ever used Methadone?**

e.g. Linctus (Liquid methadone), Mixture, Meth, Amps, Phy, Phials, Frizzies

Yes .....  Go to 14

No .....  Go to 16

**14 Have you used Methadone for non-medical purposes?**

Yes .....  Go to 15

No .....  Go to 16

**15 Have you used Methadone for non-medical purposes in the last 12 months?**

Yes .....  Go to 16

No .....  Go to 16

**16 Have you ever used Cocaine?**

e.g. Coke, Crack, Flake, Snow, White Lady/Girl, Happy Dust, Gold Dust, Toot, Scotty, Charlie, Cecil, C, Freebase

Yes .....  Go to 17

No .....  Go to 16

**17 Have you used Cocaine in the last 12 months?**

Yes .....  Go to 17

No .....  Go to 18

**18 Have you ever used LSD or Synthetic Hallucinogens?**

Synthetic Hallucinogens include LSD, Psilocybin, PCP, Acid, Trips, Wedges, Mephone, blotter, Microdot, Angel Dust, Fog, Loose Leaf.

Yes .....  Go to 19

No .....  Go to 20

**19 Have you used LSD or Synthetic Hallucinogens in the last 12 months?**

Yes .....  Go to 20

No .....  Go to 20

**20 Have you ever used Naturally Occurring Hallucinogens?**

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

Yes .....  Go to 21

No .....  Go to 22

**21 Have you used Naturally Occurring Hallucinogens in the last 12 months?**

Yes .....  Go to 22

No .....  Go to 22

**22 Have you ever used Ecstasy or Designer Drugs?**

e.g. XTC, E, Ecstasy, E am, "Adam", MDMA, PMA, GH

Yes .....  Go to 23

No .....  Go to 24

**23 Have you used Ecstasy or Designer Drugs in the last 12 months?**

Yes .....  Go to 24

No .....  Go to 24

**24 Have you ever sniffed Petrol?**

Yes .....  Go to 25

No .....  Go to 26

**25 Have you sniffed Petrol in the last 12 months?**

Yes .....  Go to 26

No .....  Go to 26

**26 Have you ever used Other Inhalants?**

e.g. Chroming, Solvents, Aerosols, Glue, Paint thinner, Laughing Gas, Whippits, Nitrous, Snappers, Poppers, Pearlers, Rushamines, Locker Room, Bolt, Bullet, Rush, Climax, Red Gold.

Yes .....  Go to 27

No .....  Go to 28

**27** Have you used **Other Inhalants** in the **last 12 months**?

Yes .....  ► Go to **28**

No .....  ► Go to **28**

**28** Have you ever used **Kava**?

Yes .....  ► Go to **29**

No .....  ► Go to **30**

**29** Have you used **Kava** in the **last 12 months**?

Yes .....  ► Go to **30**

No .....  ► Go to **30**

**30** You have now finished the form.  
Thank you for your help.

*Please do not fold the form.*

*Please place the form in the envelope,  
seal it and hand it back to the interviewer.*

Sample only