ASSIST:

1. In your life, which of the following substances have you ever used? (NON-MEDICAL USE ONLY)

- Tobacco products (cigarettes, chewing tobacco, cigars, etc.)
- Alcoholic beverages (beer, wine, spirits, etc.)
- Cannabis (marijuana, pot, grass, hash, etc.)
- Cocaine (coke, crack, etc.)
- Amphetamine type stimulants (speed, diet pills, ecstasy, etc.)
- Inhalants (nitrous, glue, petrol, paint thinner, etc.)
- Sedatives or Sleeping Pills (Valium, Serepax, Rohypnol, etc.)
- Hallucinogens (LSD, acid, mushrooms, PCP, Special K, etc.)
- Opioids (heroin, morphine, methadone, codeine, etc.)
- Other - specify:

2. In the past three months, how often have you used the substances you mentioned (FIRST DRUG, SECOND DRUG, ETC)?

- Never
- Once or twice
- Monthly
- Weekly
- Daily or almost daily

3. During the past three months, how often have you had a strong desire or urge to use (FIRST DRUG, SECOND DRUG, ETC)?

- Never
- Once or twice
- Monthly
- Weekly
- Daily or almost daily

4. During the past three months, how often has your use of (FIRST DRUG, SECOND DRUG, ETC) led to health, social, legal or financial problems?

- Never
- Once or twice
- Monthly
- Weekly
- Daily or almost daily

5. During the past three months, how often have you failed to do what was normally expected of you because of your use of (FIRST DRUG, SECOND DRUG, ETC)?

- Never

- Once or twice
- Monthly
- Weekly
- Daily or almost daily

6. Has a friend or relative or anyone else ever expressed concern about your use of (FIRST DRUG, SECOND DRUG, ETC.)?

- No, never
- Yes, in the past 3 months
- Yes, but not in the past 3 months

7. Have you ever tried and failed to control, cut down or stop using (FIRST DRUG, SECOND DRUG, ETC.)?

- No, never
- Yes, in the past 3 months
- Yes, but not in the past 3 months

8. Have you ever used any drug by injection? (NON-MEDICAL USE ONLY)

- No, never
- Yes, in the past 3 months
- Yes, but not in the past 3 months

For scoring information, please see the full ASSIST Questionnaire available at: http://www.who.int/entity/substance_abuse/activities/assist_v3_english.pdf