SERVICES (SR) NZ SECTION 11


*D87 EQUALS ‘1’ OR *M48 EQUALS ‘1’ OR *PD65 EQUALS ‘1’ OR
*SP41 EQUALS ‘1’, OR *SO39 EQUALS ‘1’, OR *AG38 EQUALS ‘1’, OR *G59 EQUALS ‘1’ OR
*SD13 EQUALS ‘1’ OR *SD26 EQUALS ‘1’ .................................................................................... 1 GO TO *SR3
ALL OTHERS ........................................................................................................................................ 2

*SR2. Have you ever in your lifetime been admitted for an overnight stay in a hospital or other facility to receive help for problems with your emotions, nerves, mental health, or your use of alcohol or drugs?

YES......................................................................1
NO ...............................................................5 GO TO *SR9.1
DON’T KNOW ..............................................8 GO TO *SR9.1
REFUSED ..................................................9 GO TO *SR9.1

*SR3. [IF *SR1 EQUALS ‘1’: Earlier in the interview you mentioned being hospitalised for problems with your emotions, nerves or mental health.] How many times in your lifetime has this occurred?

_________ TIMES

DON’T KNOW .............................................998
REFUSED ....................................................999

*SR4. INTERVIEWER CHECKPOINT (SEE *SR3)

*SR3 EQUALS ‘1’ ............................................................................................................................ 1
ALL OTHERS ............................................................................................................................... 2 GO TO *SR6

*SR5a. Was this in the past month, past six months, past year, or more than a year ago?

PAST MONTH .................................................. 1 GO TO *SR5c
PAST SIX MONTHS ........................................ 2 GO TO *SR5c
PAST YEAR .................................................... 3 GO TO *SR5c
MORE THAN A YEAR AGO ........................... 4
DON’T KNOW ..............................................8
REFUSED ....................................................9

*SR5b. How old were you at the time of this admission?

_________ YEARS OLD

DON’T KNOW ..............................................998
REFUSED ....................................................999
**SR5c.** How long did you stay in the hospital during this admission?

___________ DURATION NUMBER

CIRCLE UNIT OF TIME:  DAYS ....1  WEEKS ......2  MONTHS .... 3  YEARS.....4

DON’T KNOW ................................. 998
REFUSED ....................................... 999

GO TO *SR9.1

**SR6.** Altogether on those (NUMBER FROM *SR3) occasions, how long did you spend in the hospital?

___________ DURATION NUMBER

CIRCLE UNIT OF TIME:  DAYS ....1  WEEKS ......2  MONTHS .... 3  YEARS.....4

DON’T KNOW ................................. 998
REFUSED ....................................... 999

**SR7.** How old were you at the time of your first admission?

_________ YEARS OLD

DON’T KNOW ...............................998
REFUSED .......................................999

**SR8.** In the past 12 months, have you been admitted for an overnight stay for problems with your emotions, nerves or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

YES ........................................ 1  GO TO *SR9
NO ........................................... 5
DON’T KNOW .................................. 8
REFUSED ....................................... 9

**SR8a.** How old were you at the time of your most recent admission for any of these problems?

_________ YEARS OLD  GO TO *SR9.1

DON’T KNOW ...............................998  GO TO *SR9.1
REFUSED .......................................999  GO TO *SR9.1

**SR9.** During the past 12 months, about how many days out of those 365 did you stay in hospital for these problems?

___________ DURATION NUMBER

DON’T KNOW .................................998
REFUSED .......................................999
*SR9.1 Did you ever use an internet support group or chat room to get help for problems with your emotions, nerves or mental health?

YES ......................................... 1
NO ........................................... 5 GO TO *SR10
DON’T KNOW .......................... 8 GO TO *SR10
REFUSED ..................................... 9 GO TO *SR10

*SR9.1a. When was the last time – in the past month, past six months, past year, or more than a year ago?

PAST MONTH ..................................... 1
PAST SIX MONTHS ................................. 2
PAST YEAR .......................................... 3
MORE THAN A YEAR AGO ...................... 4 GO TO *SR10
DON’T KNOW .......................... 8 GO TO *SR10
REFUSED ..................................... 9 GO TO *SR10

*SR9.1b. In the past 12 months, how many times did you use an internet support group or chat room for problems with your emotions, nerves or mental health?

_________ TIMES

DON’T KNOW ........................................ 998
REFUSED ............................................. 999

*SR10. (IF *SR9.1 EQUALS ‘1’: Not counting the internet support group,) Did you ever in your life go to a self-help group for help with your emotions, nerves or mental health?

YES ......................................... 1
NO ........................................... 5 GO TO *SR11
DON’T KNOW .......................... 8 GO TO *SR11
REFUSED ..................................... 9 GO TO *SR11

*SR10a. How old were you the first time (you went to a self-help group for any of these problems)?

_________ YEARS OLD

DON’T KNOW ..................................... 998
REFUSED ............................................. 999

*SR10b. When was the last time – in the past month, past six months, past year, or more than a year ago?

PAST MONTH ..................................... 1
PAST SIX MONTHS ................................. 2
PAST YEAR .......................................... 3
MORE THAN A YEAR AGO ...................... 4 GO TO *SR11
DON’T KNOW .......................... 8 GO TO *SR11
REFUSED ..................................... 9 GO TO *SR11

*SR10c. In the past 12 months, how many times did you go to a self-help group meeting?

_________ TIMES

DON’T KNOW ..................................... 998
REFUSED ............................................. 999
**SR11.** Did you ever use a helpline for problems with your emotions, nerves or mental health?

YES ............................................... 1
NO .................................................... 5 GO TO *SR12
DON’T KNOW ............................... 8 GO TO *SR12
REFUSED ..................................... 9 GO TO *SR12

*SR11a. How old were you the first time (you used a helpline for any of these problems)?

_________ YEARS OLD

DON’T KNOW .................................... 998
REFUSED ........................................ 999

*SR11b. When was the last time – in the past month, past six months, past year, or more than a year ago?

PAST MONTH ................................. 1
PAST SIX MONTHS ........................... 2
PAST YEAR ...................................... 3
MORE THAN A YEAR AGO ............... 4 GO TO *SR12
DON’T KNOW ............................... 8 GO TO *SR12
REFUSED ..................................... 9 GO TO *SR12

*SR11c. In the past 12 months, how many times did you use a helpline?

_________ TIMES

DON’T KNOW .................................... 998
REFUSED ........................................ 999

**SR12.** Did you ever in your life have a session of psychological counselling or therapy that lasted 30 minutes or longer with any type of professional?

YES .................................................. 1
NO .................................................... 5 GO TO *SR13
DON’T KNOW ............................... 8 GO TO *SR13
REFUSED ..................................... 9 GO TO *SR13

*SR12a. How old were you the first time (you had a session of psychological counselling or therapy)?

_________ YEARS OLD

DON’T KNOW .................................... 998
REFUSED ........................................ 999

**SR13.** Did you ever get a prescription or medicine for your emotions, nerves or mental health (IF *SC26.2* EQUALS ‘1’ OR *SC26.3* EQUALS ‘1’ OR *SC26.4* EQUALS ‘1’: or substance use) from any type of professional?

YES .................................................. 1
NO .................................................... 5 GO TO *SR14
DON’T KNOW ............................... 8 GO TO *SR14
REFUSED ..................................... 9 GO TO *SR14

*SR13a. How old were you the first time (you were given this sort of prescription or medicine)?

_________ YEARS OLD

DON’T KNOW .................................... 998
REFUSED ........................................ 999

*D72 EQUALS ‘1’ OR *M33 EQUALS ‘1’ OR PD50 EQUALS ‘1’ OR
*SP27 EQUALS ‘1’ OR *SO25 EQUALS ‘1’ OR *AG24 EQUALS ‘1’, OR *G44 EQUALS ‘1’ OR
*SD12 EQUALS ‘1’ OR *SD25 EQUALS ‘1’

1

ALL OTHERS

2

*SR15. INTERVIEWER CHECKPOINT (SEE *SR1, *SR14, *SR12, *SR13)

*SR1 EQUALS ‘1’ OR *SR14 EQUALS ‘1’ OR *SR12 EQUALS ‘1’ OR
*SR13 EQUALS ‘1’

1

GO TO *SR17

2

ALL OTHERS

*SR16. (Showcard 21) Did you ever in your lifetime go to see any of the professionals on this list for problems with your emotions, nerves, mental health or your use of alcohol or drugs?

YES ........................................................1
NO .......................................................5
DON’T KNOW ......................................8
REFUSED ...........................................9

GO TO *SR122

*SR17: (IF *SR16 EQUALS ‘1’: Which ones? Just give me the letters. PROBE: Any other? / ALL OTHERS: (Showcard 21) which of the following types of professionals did you ever see about problems with your emotions or nerves or your use of alcohol or drugs? Just give me the letters? (PROBE: Any others?)

RECORD ALL MENTIONS

A. PSYCHIATRIST .................................................................1
B. GENERAL PRACTITIONER OR FAMILY DOCTOR .........................2
C. ANY OTHER MEDICAL DOCTOR, LIKE A CARDIOLOGIST OR
   (WOMEN: GYNECOLOGIST / MEN: UROLOGIST) .........................3
D. PSYCHOLOGIST ...............................................................4
E. SOCIAL WORKER, YOUTH AID WORKER, CHILD WELFARE OFFICER, SCHOOL COUNSELLOR, TEACHER .................................................................5
F. COUNSELLOR (OTHER THAN SCHOOL COUNSELLOR) .................6
G. ANY OTHER MENTAL HEALTH PROFESSIONAL, SUCH AS A PSYCHOTHERAPIST
   OR PSYCHIATRIC NURSE ..................................................7
H. A GENERAL NURSE, OCCUPATIONAL THERAPIST, OR OTHER HEALTH PROFESSIONAL 8
I. A RELIGIOUS OR SPIRITUAL ADVISOR LIKE A MINISTER, PRIEST, OR TOHUNGA ....9
J. ANY OTHER HEALER, LIKE AN HERBALIST, HOMEOPATH, NATUROPATH, CHIROPRACTOR, SPIRITUALIST, TRADITIONAL HEALER, OR ENERGY HEALER ......................10

DON’T KNOW ...............................................................................98

REFUSE .........................................................................................99

149
*SR18. INTERVIEWER CHECKPOINT: (SEE *SR17)

*SR17 EQUALS ‘1’ ............................................................................................... 1
*SR17 EQUALS ‘2’ OR *SR17 EQUALS ‘3’ ......................................................... 2 GO TO *SR27
*SR17 EQUALS ‘4’ ............................................................................................... 3 GO TO *SR40
*SR17 EQUALS ‘5’ ............................................................................................... 4 GO TO *SR48
*SR17 EQUALS ‘6’ ............................................................................................... 5 GO TO *SR57
*SR17 EQUALS ‘7’ ............................................................................................... 6 GO TO *SR66
*SR17 EQUALS ‘8’ ............................................................................................... 7 GO TO *SR74
*SR17 EQUALS ‘9’ ............................................................................................... 8 GO TO *SR87
*SR17 EQUALS ‘10’ .............................................................................................. 9 GO TO *SR100
ALL OTHERS ................................................................................................. 10 GO TO *SR128

*SR19. How old were you the first time you talked to a psychiatrist about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

______ YEARS OLD
DON’T KNOW .......... 998
REFUSED ............... 999

*SR20. When was the last time?
Was it:
during the past month?
more than a month to six months ago?
more than six months to twelve months ago?
or more than twelve months ago?
PAST MONTH ................................................................. 1 GO TO *SR22
MORE THAN A MONTH TO SIX MONTHS AGO........................ 2 GO TO *SR22
MORE THAN SIX MONTHS TO TWELVE MONTHS AGO .......... 3 GO TO *SR22
MORE THAN TWELVE MONTHS AGO................................. 4 GO TO *SR22
DON’T KNOW. ........................................................................... 8 GO TO *SR26
REFUSE ....................................................................................... 9 GO TO *SR26

*SR21. How old were you the last time [you talked to a psychiatrist about your emotions (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use)?]?

______ YEARS OLD
DON’T KNOW .......... 998
REFUSED ............... 999

GO TO *SR26

*SR22. During the past 12 months, how many visits did you make to a psychiatrist?

______ VISIT (S)
DON’T KNOW ......................... 98 GO TO *SR23
REFUSED ......................... 99 GO TO *SR23

*SR22a. How many minutes did (this visit last/ these visits last on average)?

______ MINUTES
DON’T KNOW ......................... 998
REFUSED ......................... 999
*SR23. In general, how satisfied are you with the treatments and services you received from the psychiatrist in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

INTERVIEWER: IF MORE THAN ONE PSYCHIATRIST SEEN: ASK ABOUT THE ONE R WAS MOST SATISFIED WITH

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very satisfied</td>
<td>1</td>
</tr>
<tr>
<td>Satisfied</td>
<td>2</td>
</tr>
<tr>
<td>Neither satisfied, nor dissatisfied</td>
<td>3</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>4</td>
</tr>
<tr>
<td>Very dissatisfied</td>
<td>5</td>
</tr>
<tr>
<td>Don’t know</td>
<td>8</td>
</tr>
<tr>
<td>Refused</td>
<td>9</td>
</tr>
</tbody>
</table>

*SR24. Did the psychiatrist help you a lot, some, a little, or not at all?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>A lot</td>
<td>1</td>
</tr>
<tr>
<td>Some</td>
<td>2</td>
</tr>
<tr>
<td>A little</td>
<td>3</td>
</tr>
<tr>
<td>Not at all</td>
<td>4</td>
</tr>
<tr>
<td>Don’t know</td>
<td>8</td>
</tr>
<tr>
<td>Refused</td>
<td>9</td>
</tr>
</tbody>
</table>

*SR25. Have you stopped seeing the psychiatrist or are you still being treated?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stopped</td>
<td>1</td>
</tr>
<tr>
<td>(If vol) Stopped seeing one psychiatrist</td>
<td>2</td>
</tr>
<tr>
<td>AND being treated by another</td>
<td>GO TO *SR26</td>
</tr>
<tr>
<td>Still being treated</td>
<td>3</td>
</tr>
<tr>
<td>Don’t know</td>
<td>8</td>
</tr>
<tr>
<td>Refused</td>
<td>9</td>
</tr>
</tbody>
</table>

*SR25a. Did you complete the full recommended course of treatment? Or did you stop before the psychiatrist wanted you to stop?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Completed treatment</td>
<td>1</td>
</tr>
<tr>
<td>Stopped</td>
<td>5</td>
</tr>
<tr>
<td>Don’t know</td>
<td>8</td>
</tr>
<tr>
<td>Refused</td>
<td>9</td>
</tr>
</tbody>
</table>

*SR26. INTERVIEWER CHECKPOINT: (SEE *SR17)

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SR17 equals ‘2’ or *SR17 equals ‘3’</td>
<td>1</td>
</tr>
<tr>
<td>*SR17 equals ‘4’</td>
<td>2</td>
</tr>
<tr>
<td>*SR17 equals ‘5’</td>
<td>3</td>
</tr>
<tr>
<td>*SR17 equals ‘6’</td>
<td>4</td>
</tr>
<tr>
<td>*SR17 equals ‘7’</td>
<td>5</td>
</tr>
<tr>
<td>*SR17 equals ‘8’</td>
<td>6</td>
</tr>
<tr>
<td>*SR17 equals ‘9’</td>
<td>7</td>
</tr>
<tr>
<td>*SR17 equals ‘10’</td>
<td>8</td>
</tr>
<tr>
<td>All others</td>
<td>9</td>
</tr>
</tbody>
</table>
*SR27. How old were you the first time you talked to (IF *SR17 EQUALS ‘1’: any other type of medical doctor/ALL OTHERS: a medical doctor) about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

______ YEARS OLD
DON’T KNOW .......... 998
REFUSED ................. 999

*SR28. When was the last time?
Was it:
during the past month?
more than a month to six months ago?
more than six months to twelve months ago?
or more than twelve months ago?

  PAST MONTH .............................................      1   GO TO *SR30
  MORE THAN A MONTH TO SIX MONTHS AGO 2   GO TO *SR30
  MORE THAN SIX MONTHS TO TWELVE MONTHS AGO 3   GO TO *SR30
  MORE THAN TWELVE MONTHS AGO...
  DON’T KNOW................................. 8   GO TO *SR39
  REFUSED......................................... 9   GO TO *SR39

*SR29. How old were you the last time [you talked to a medical doctor (IF *SR17 EQUALS ‘1’: other than a psychiatrist) about your emotions (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use)]]?

______ YEARS OLD
DON’T KNOW ........... 998
REFUSED ................. 999

*SR30. Did a medical doctor (IF *SR17 EQUALS ‘1’: other than a psychiatrist) ever recommend that you go to a mental health specialist, clinic or programme?

  YES.......................................... 1
  NO........................................ 5   GO TO *SR34
  DON’T KNOW.............................. 8   GO TO *SR34
  REFUSED.................................... 9   GO TO *SR34

*SR31. How old were you the first time [a medical doctor (IF *SR17 EQUALS ‘1’: other than a psychiatrist) ever referred you to a mental health specialist, clinic or programme]?

______ YEARS OLD
DON’T KNOW ............ 998
REFUSED ................. 999

*SR32. INTERVIEWER CHECKPOINT: (SEE *SR28)

  *SR28 EQUALS ‘1’ – ‘3’............................................. 1
  ALL OTHERS.................................................. 2   GO TO *SR39
*SR33. During the past 12 months, did a medical doctor recommend that you go to a mental health specialist, clinic, or programme?

YES ...................................................................... 1
NO ........................................................................ 5
DON’T KNOW .................................................... 8
REFUSED ............................................................ 9

GO TO *SR35

*SR34. INTERVIEWER CHECKPOINT: (SEE *SR17)

*SR28 EQUALS ‘1’ – ‘3’........................................................1
ALL OTHERS..........................................................................2
GO TO *SR39

*SR35. During the past 12 months, how many visits did you make to a medical doctor (IF *SR17 EQUALS ‘1’: other than a psychiatrist) where you talked about your emotions, nerves or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use)?

_________ VISIT(S)

DON’T KNOW .................................................... 98
REFUSED ............................................................ 99

GO TO *SR36

*SR35a. How many minutes did (this visit last/ these visits last on average)?

_________ MINUTES

DON’T KNOW .................................................... 998
REFUSED ............................................................ 999

GO TO *SR36

*SR36. In general, how satisfied are you with the treatments and services you received from the medical doctor in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

INTERVIEWER: IF MORE THAN ONE MEDICAL DOCTOR SEEN: ASK ABOUT THE ONE R WAS MOST SATISFIED WITH

VERY SATISFIED ..................................................... 1
SATISFIED ........................................................... 2
NEITHER SATISFIED NOR DISSATISFIED ........ 3
DISSATISFIED ....................................................... 4
VERY DISSATISFIED ........................................... 5
DON’T KNOW ..................................................... 8
REFUSED ............................................................ 9

*SR37. Did the medical doctor help you a lot, some, a little, or not at all?

A LOT ................................................................. 1
SOME .................................................................. 2
A LITTLE ............................................................. 3
NOT AT ALL ...................................................... 4
DON’T KNOW ..................................................... 8
REFUSED ............................................................ 9
*SR38. Have you stopped seeing the medical doctor about your emotional (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance) problems or are you still being treated?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>STOPPED</td>
<td>1</td>
</tr>
<tr>
<td>(IF VOL) STOPPED SEEING ONE DOCTOR AND BEING TREATED BY ANOTHER</td>
<td>2</td>
</tr>
<tr>
<td>STILL BEING TREATED</td>
<td>3</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>8</td>
</tr>
<tr>
<td>REFUSED</td>
<td>9</td>
</tr>
</tbody>
</table>

*SR38a. Did you complete the full recommended course of treatment? Or did you stop before the medical doctor wanted you to stop?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMPLETED TREATMENT</td>
<td>1</td>
</tr>
<tr>
<td>STOPPED</td>
<td>5</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>8</td>
</tr>
<tr>
<td>REFUSED</td>
<td>9</td>
</tr>
</tbody>
</table>

*SR39. INTERVIEWER CHECKPOINT (SEE *SR17)

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SR17 EQUALS ‘4’</td>
<td>1</td>
</tr>
<tr>
<td>*SR17 EQUALS ‘5’</td>
<td>2</td>
</tr>
<tr>
<td>*SR17 EQUALS ‘6’</td>
<td>3</td>
</tr>
<tr>
<td>*SR17 EQUALS ‘7’</td>
<td>4</td>
</tr>
<tr>
<td>*SR17 EQUALS ‘8’</td>
<td>5</td>
</tr>
<tr>
<td>*SR17 EQUALS ‘9’</td>
<td>6</td>
</tr>
<tr>
<td>*SR17 EQUALS ‘10’</td>
<td>7</td>
</tr>
<tr>
<td>ALL OTHERS</td>
<td>8</td>
</tr>
</tbody>
</table>

*SR40. How old were you the first time you talked to a psychologist about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>___________ YEARS OLD</td>
<td></td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>998</td>
</tr>
<tr>
<td>REFUSED</td>
<td>999</td>
</tr>
</tbody>
</table>

*SR41. When was the last time?

Was it:
- during the past month?
- more than a month to six months ago?
- more than six months to twelve months ago?
- or more than twelve months ago?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAST MONTH</td>
<td>1</td>
</tr>
<tr>
<td>MORE THAN A MONTH TO SIX MONTHS AGO</td>
<td>2</td>
</tr>
<tr>
<td>MORE THAN SIX MONTHS AGO TO 12 MONTHS AGO</td>
<td>3</td>
</tr>
<tr>
<td>MORE THAN 12 MONTHS AGO</td>
<td>4</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>8</td>
</tr>
<tr>
<td>REFUSED</td>
<td>9</td>
</tr>
</tbody>
</table>
*SR42. How old were you the last time [you talked to a psychologist about your emotions (IF *SC26.2 EQUALS '1' OR *SC26.3 EQUALS '1' OR *SC26.4 EQUALS '1': or substance use)]?

______ YEARS OLD
DON'T KNOW ............ 998
REFUSED ................. 999

GO TO *SR47

*SR43. During the past 12 months, how many visits did you make to a psychologist??

______ VISIT(S)
DON'T KNOW .................. 98  GO TO *SR44
REFUSED ....................... 99  GO TO *SR44

*SR43a. How many minutes did (this visit last/ these visits last on average)?

______ MINUTES
DON'T KNOW .................. 998
REFUSED ....................... 999

*SR44. In general, how satisfied are you with the treatments and services you received from the psychologist in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

INTERVIEWER: IF MORE THAN ONE PSYCHOLOGIST SEEN: ASK ABOUT THE ONE R WAS MOST SATISFIED WITH

VERY SATISFIED ..................... 1
SATISFIED ............................ 2
NEITHER SATISFIED OR DISSATISFIED .... 3
DISSATISFIED .......................... 4
VERY DISSATISFIED ................... 5
DON'T KNOW ......................... 8
REFUSED .............................. 9

*SR45. Did the psychologist help you a lot, some, a little, or not at all?

A LOT .................................................. 1
SOME.............................................. 2
A LITTLE ........................................... 3
NOT AT ALL ................................. 4
DON'T KNOW ......................... 8
REFUSED .............................. 9

*SR46a. Have you stopped seeing the psychologist or are you still being treated?

STopped ................................................... 1
(IF VOL) STOPPED SEEING ONE PSYCHOLOGIST AND BEING TREATED BY ANOTHER ................. 2  GO TO *SR47
STILL BEING TREATED ......................... 3  GO TO *SR47
DON'T KNOW ........................................ 8  GO TO *SR47
REFUSED .......................................... 9  GO TO *SR47
*SR46b. Did you complete the full recommended course of treatment? Or did you stop before the psychologist wanted you to stop?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>COMPLETED TREATMENT</td>
<td>1</td>
</tr>
<tr>
<td>STOPPED</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>8</td>
</tr>
<tr>
<td>REFUSED</td>
<td>9</td>
</tr>
</tbody>
</table>

*SR47. INTERVIEWER CHECKPOINT: (SEE *SR17)

- **SR17 EQUALS ‘5’** ..................... 1
- **SR17 EQUALS ‘6’** ........................ 2  GO TO *SR57
- **SR17 EQUALS ‘7’** ........................ 3  GO TO *SR66
- **SR17 EQUALS ‘8’** ........................ 4  GO TO *SR74
- **SR17 EQUALS ‘9’** ........................ 5  GO TO *SR87
- **SR17 EQUALS ‘10’** ....................... 6  GO TO *SR100
- **ALL OTHERS** .............................. 7  GO TO *SR109

*SR48. How old were you the first time you talked to one of those professionals listed in category E on showcard 21 about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

_______ YEARS OLD

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW</td>
<td>998</td>
</tr>
<tr>
<td>REFUSED</td>
<td>999</td>
</tr>
</tbody>
</table>

*SR49. When was the last time?

Was it:
- during the past month?
- more than a month to six months ago?
- more than six months to twelve months ago?
- or more than twelve months ago?

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAST MONTH</td>
<td>1</td>
</tr>
<tr>
<td>MORE THAN A MONTH TO SIX MONTHS AGO</td>
<td>2</td>
</tr>
<tr>
<td>MORE SIX MONTHS TO TWELVE MONTHS AGO</td>
<td>3</td>
</tr>
<tr>
<td>MORE THAN 12 MONTHS AGO</td>
<td>4</td>
</tr>
<tr>
<td>DON’T KNOW</td>
<td>8</td>
</tr>
<tr>
<td>REFUSED</td>
<td>9</td>
</tr>
</tbody>
</table>

*SR50. (Showcard 21) How old were you the last time [you talked to one of those professionals listed in category E about your emotions, nerves or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use)]?

_______ YEARS OLD

<table>
<thead>
<tr>
<th>Option</th>
<th>Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW</td>
<td>998</td>
</tr>
<tr>
<td>REFUSED</td>
<td>999</td>
</tr>
</tbody>
</table>

GO TO *SR56
**SR51.** (Showcard 21) During the past 12 months, how many times have you seen any professional listed in category E about your emotions, nerves or mental health?  
_________ VISIT(S)  
DON’T KNOW .................................................98  GO TO *SR52  
REFUSED .....................................................99  GO TO *SR52  

**SR51a.** How many minutes did (this visit last/ these visits last on average)?  
_________ MINUTES  
DON’T KNOW ..................................................998  
REFUSED ......................................................999  

**SR52.** (Showcard 22) In which of these locations did you see any professional listed in category E?  

<table>
<thead>
<tr>
<th>Location</th>
<th>Mention</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Hospital Emergency Department</td>
<td>1</td>
</tr>
<tr>
<td>B. Psychiatric Outpatient Clinic, Sector Base or Community Mental Health Service</td>
<td>2</td>
</tr>
<tr>
<td>C. Drug or Alcohol Outpatient Clinic</td>
<td>3</td>
</tr>
<tr>
<td>D. Private Rooms</td>
<td>4</td>
</tr>
<tr>
<td>E. Social Service Agency or Department</td>
<td>5</td>
</tr>
<tr>
<td>F. Programme in Jail or Prison</td>
<td>6</td>
</tr>
<tr>
<td>G. Drop-in Centre or Programme for People with Emotional Problems with Alcohol or Drugs</td>
<td>7</td>
</tr>
<tr>
<td>H. Church or Other Religious Building</td>
<td>8</td>
</tr>
<tr>
<td>I. Other (Specify)</td>
<td>9</td>
</tr>
</tbody>
</table>

DON’T KNOW ...........................................................................................................98  
REFUSED ..................................................................................................................99  

**SR53.** In general, how satisfied are you with the treatments and services you received from that professional in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?  

INTERVIEWER: IF MORE THAN ONE PROFESSIONAL SEEN: ASK ABOUT THE ONE R WAS MOST SATISFIED WITH  

<table>
<thead>
<tr>
<th>Satisfaction Level</th>
<th>Mention</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Satisfied</td>
<td>1</td>
</tr>
<tr>
<td>Satisfied</td>
<td>2</td>
</tr>
<tr>
<td>Neither Satisfied nor Dissatisfied</td>
<td>3</td>
</tr>
<tr>
<td>Dissatisfied</td>
<td>4</td>
</tr>
<tr>
<td>Very Dissatisfied</td>
<td>5</td>
</tr>
<tr>
<td>Don’t Know</td>
<td>8</td>
</tr>
<tr>
<td>Refused</td>
<td>9</td>
</tr>
</tbody>
</table>

**SR54.** Overall did the professional help you a lot, somewhat, a little, or not at all?  

<table>
<thead>
<tr>
<th>Help Level</th>
<th>Mention</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Lot</td>
<td>1</td>
</tr>
<tr>
<td>Some</td>
<td>2</td>
</tr>
<tr>
<td>A Little</td>
<td>3</td>
</tr>
<tr>
<td>Not at All</td>
<td>4</td>
</tr>
<tr>
<td>Don’t Know</td>
<td>8</td>
</tr>
<tr>
<td>Refused</td>
<td>9</td>
</tr>
</tbody>
</table>
*SR55. Have you stopped seeing that professional or are you still being treated?

STOPPED ................................................................................................... 1
(IF VOL) STOPPED SEEING ONE PROFESSIONAL AND
BEING TREATED BY ANOTHER ......................................................... 2 GO TO *SR56
STILL BEING TREATED .................................................................. 3 GO TO *SR56
DON’T KNOW ................................................................................... 8 GO TO *SR56
REFUSED .............................................................................................. 9 GO TO *SR56

*SR55a. Did you complete the full recommended course of treatment? Or did you stop seeing the professional before they wanted you to stop?

COMPLETED TREATMENT .......... 1
STOPPED ..................................................... 5
DON’T KNOW ........................................... 8
REFUSED ..................................................... 9

*SR56. INTERVIEWER CHECKPOINT: (SEE *SR17)

*SR17 EQUALS ‘6’ ................................. 1
*SR17 EQUALS ‘7’ ................................. 2 GO TO *SR66
*SR17 EQUALS ‘8’ ................................. 3 GO TO *SR74
*SR17 EQUALS ‘9’ ................................. 4 GO TO *SR87
*SR17 EQUALS ‘10’ ............................ 5 GO TO *SR100
ALL OTHERS ................................. 6 GO TO *SR109

*SR57. How old were you the first time you talked to a counsellor about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

_______ YEARS OLD
DON’T KNOW .......................... 998
REFUSED .................................. 999

*SR58. When was the last time?

Was it:
- during the past month?
- more than a month to six months ago?
- more than six months to twelve months ago?
- or more than twelve months ago?

PAST MONTH ......................................................... 1 GO TO *SR60
MORE THAN A MONTH TO SIX MONTHS AGO .... 2 GO TO *SR60
MORE THAN SIX TO TWELVE MONTHS AGO ...... 3 GO TO *SR60
MORE THAN 12 MONTHS AGO ......................... 4
DON’T KNOW ................................................. 8 GO TO *SR65
REFUSED ......................................................... 9 GO TO *SR65

*SR59. How old were you the last time [you talked to a counsellor about your emotions (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use)]?

_______ YEARS OLD
DON’T KNOW .......................... 998
REFUSED .................................. 999

GO TO *SR65
*SR60. During the past 12 months, how many visits did you make to a counsellor?

_________ VISIT(S)

DON’T KNOW ............................................. 98  GO TO *SR61
REFUSED .................................................. 99  GO TO *SR61

*SR60a. How many minutes did (this visit last/ these visits last on average)?

_________ MINUTES

DON’T KNOW ............................................. 998
REFUSED .................................................. 999

*SR61. (Showcard 22) In which of these locations did you see the counsellor?

RECORD ALL MENTIONS

A. HOSPITAL EMERGENCY DEPARTMENT................................................................. 1
B. PSYCHIATRIC OUTPATIENT CLINIC, SECTOR BASE OR COMMUNITY MENTAL HEALTH SERVICE ................................................................................. 2
C. DRUG OR ALCOHOL OUTPATIENT CLINIC ................................................................................................................................. 3
D. PRIVATE ROOMS ...................................................................................................... 4
E. SOCIAL SERVICE AGENCY OR DEPARTMENT ................................................................. 5
F. PROGRAMME IN JAIL OR PRISON ............................................................................. 6
H. DROP-IN CENTRE OR PROGRAMME FOR PEOPLE WITH EMOTIONAL PROBLEMS WITH ALCOHOL OR DRUGS ......................................................................................... 7
I. CHURCH OR OTHER RELIGIOUS BUILDING ....................................................................... 8
I. OTHER (SPECIFY) ......................................................................................................... 9

DON’T KNOW ............................................. 98
REFUSED .................................................. 99

*SR62. In general, how satisfied are you with the treatments and services you received from the counsellor in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

INTERVIEWER: IF MORE THAN ONE COUNSELOR SEEN: ASK ABOUT THE ONE R WAS MOST SATISFIED WITH

VERY SATISFIED .................................................. 1
SATISFIED ........................................................................ 2
NEITHER SATISFIED NOR DISSATISFIED ......................... 3
DISSATISFIED ..................................................................... 4
VERY DISSATISFIED .................................................. 5
DON’T KNOW .................................................. 8
REFUSED .................................................. 9

*SR63. Did the counsellor help you a lot, some, a little, or not at all?

A LOT ........................................................................ 1
SOME ........................................................................... 2
A LITTLE ....................................................................... 3
NOT AT ALL ..................................................................... 4
DON’T KNOW .................................................. 8
REFUSED .................................................. 9
*SR64. Have you stopped seeing a counsellor or are you still being treated?

STOPPED.................................................................................................. 1
(IF VOL) STOPPED SEEING ONE COUNSELOR AND BEING TREATED BY ANOTHER........................................ 2 GO TO *SR65
STILL BEING TREATED........................................................................ 3 GO TO *SR65
DON’T KNOW ......................................................................................... 8 GO TO *SR65
REFUSED ................................................................................................. 9 GO TO *SR65

*SR64a. Did you complete the full recommended course of treatment? Or did you stop before the counsellor wanted you to stop?

COMPLETED TREATMENT .................... 1
STOPPED ............................................. 5
DON’T KNOW ........................................ 8
REFUSED ............................................. 9

*SR65. INTERVIEWER CHECKPOINT (SEE *SR17)

*SR17 EQUALS ‘7’................................. 1
*SR17 EQUALS ‘8’................................. 2 GO TO *SR74
*SR17 EQUALS ‘9’................................. 3 GO TO *SR87
*SR17 EQUALS ‘10’.............................. 4 GO TO *SR100
ALL OTHERS ................................. 5 GO TO *SR109

*SR66. How old were you the first time you talked to (IF *SR17 EQUALS ‘1’ OR ‘4’ OR ‘5’ OR ‘6’: any other type of mental health professional, like a psychotherapist or psychiatric nurse/ ALL OTHERS: a mental health professional) about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

_______ YEARS OLD
DON’T KNOW ..................... 998
REFUSED ......................... 999

*SR67. When was the last time? Was it:
during the past month?
much less than twelve months ago?
much more than six months to twelve months ago?
or more than twelve months ago?

PAST MONTH ................................................. 1 GO TO *SR69
MORE THAN A MONTH TO SIX MONTHS AGO.............................. 2 GO TO *SR69
MORE THAN SIX MONTHS TO TWELVE MONTHS AGO......................... 3 GO TO *SR69
MORE THAN 12 MONTHS AGO.......................................................... 4
DON’T KNOW ......................................................................................... 8 GO TO *SR73
REFUSED ................................................................................................. 9 GO TO *SR73

*SR68. How old were you the last time?

_______ YEARS OLD
DON’T KNOW ..................... 998
REFUSED ......................... 999

GO TO *SR73
*SR69. During the past 12 months, how many visits did you make to this professional?

________ VISIT(S)

DON’T KNOW ...........................................98  GO TO *SR70
REFUSED ..................................................99  GO TO *SR70

*SR69a. How many minutes did (this visit last/ these visits last on average)?

________ MINUTES

DON’T KNOW ........................................998
REFUSED ...............................................999

*SR70. In general, how satisfied are you with the treatments and services you received from this professional in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

INTERVIEWER: IF MORE THAN ONE PROFESSIONAL SEEN: ASK ABOUT THE ONE R WAS MOST SATISFIED WITH

VERY SATISFIED .........................................1
SATISFIED ...............................................2
NEITHER SATISFIED OR DISSATISFIED ....3
DISSATISFIED ...........................................4
VERY DISSATISFIED ....................................5
DON’T KNOW ..........................................8
REFUSED ...............................................9

*SR71. Did this professional help you a lot, some, a little, or not at all?

A LOT ..................................................1
SOME ....................................................2
A LITTLE..................................................3
NOT AT ALL............................................4
DON’T KNOW ........................................8
REFUSED ...............................................9

*SR72. Have you stopped seeing this mental health professional or are you still being treated?

STOPPED ..................................................1
(IF VOL) STOPPED SEEING ONE MENTAL HEALTH PROFESSIONAL AND BEING TREATED BY
ANOTHER ....................................................2  GO TO *SR73
STILL BEING TREATED .....................................3  GO TO *SR73
DON’T KNOW ...........................................8  GO TO *SR73
REFUSED ................................................9  GO TO *SR73

*SR72a. Did you complete the full recommended course of treatment? Or did you stop before the mental health professional wanted you to stop?

COMPLETED TREATMENT .............................1
STOPPED ..................................................5
DON’T KNOW ..........................................8
REFUSED ...............................................9
**SR73. INTERVIEWER CHECKPOINT: (SEE *SR17)**

*SR17 EQUALS ‘8’ ............................................. 1
*SR17 EQUALS ‘9’ ............................................. 2  GO TO *SR87
*SR17 EQUALS ‘10’ .......................................... 3  GO TO *SR100
ALL OTHERS .................................................. 4  GO TO *SR109

**SR74.** How old were you the first time you talked to one of those professionals listed in category H on showcard 21, occupational therapist, or other non-MD health professional about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

______ YEARS OLD
DON’T KNOW ...................... 998
REFUSED .......................... 999

**SR75.** When was the last time?
Was it:
during the past month?
more than a month to six months ago?
more than six months to twelve months ago?
or more than twelve months ago?

PAST MONTH ...................................................... 1  GO TO *SR77
MORE THAN A MONTH TO SIX MONTHS AGO .......... 2  GO TO *SR77
MORE THAN SIX MONTHS TO TWELVE MONTHS AGO .. 3  GO TO *SR77
MORE THAN 12 MONTHS AGO ................................... 4  GO TO *SR77
DON’T KNOW .................................................... 8  GO TO *SR86
REFUSED .......................................................... 9  GO TO *SR86

**SR76.** How old were you the last time you talked to one of those health professionals about your emotions, nerves or mental health?

______ YEARS OLD
DON’T KNOW ...................... 998
REFUSED .......................... 999

**SR77.** (Showcard 21) Did a health professional such as those listed in category H, ever recommend that you go to a mental health specialist, clinic or programme?

YES ......................................................... 1
NO ......................................................... 5  GO TO *SR81
DON’T KNOW ............................................. 8  GO TO *SR81
REFUSED ..................................................... 9  GO TO *SR81

**SR78.** How old were you the first time one of those health professionals ever recommended that you go to a mental health specialist, clinic or programme)?

______ YEARS OLD
DON’T KNOW ...................... 998
REFUSED .......................... 999
*SR79. INTERVIEWER CHECKPOINT: (SEE *SR75)

*SR75 EQUALS ‘1’ – ‘3’........................................................1
ALL OTHERS.................................................................2   GO TO *SR86

*SR80. Did one of those professionals recommend that you go to a mental health specialist, clinic, or programme in the past 12 months?

YES ................................................................. 1
NO ..................................................................... 5
DON’T KNOW ................................................. 8
REFUSED ......................................................... 9

GO TO *SR82

*SR81. INTERVIEWER CHECKPOINT: (SEE *SR75)

*SR75 EQUALS ‘1’ – ‘3’........................................................1
ALL OTHERS.................................................................2   GO TO *SR86

*SR82. (Showcard 21) During the past 12 months, how many visits did you make to a health professional such as those listed in category H where you talked about your emotions, nerves or mental health?

_________ VISIT(S)

DON’T KNOW ................................................. 98  GO TO *SR83
REFUSED ......................................................... 99  GO TO *SR83

*SR82a. How many minutes did (this visit last/ these visits last on average)?

_________ MINUTES

DON’T KNOW ................................................. 98
REFUSED ......................................................... 99

*SR83. In general, how satisfied are you with the treatments and services you received from this professional in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

INTERVIEWER: IF MORE THAN ONE PROFESSIONAL SEEN: ASK ABOUT THE ONE R WAS MOST SATISFIED WITH

VERY SATISFIED ......................................................... 1
SATISFIED ............................................................... 2
NEITHER SATISFIED NOR DISSATISFIED ............... 3
DISSATISFIED ............................................................ 4
VERY DISSATISFIED ............................................... 5
DON’T KNOW ........................................................... 8
REFUSED ............................................................... 9

*SR84. Did this professional help you a lot, some, a little, or not at all?

A LOT ................................................................. 1
SOME ................................................................. 2
A LITTLE ............................................................... 3
NOT AT ALL ............................................................ 4
DON’T KNOW ........................................................... 8
REFUSED ............................................................... 9
*SR85. Have you stopped seeing this professional or are you still being treated?

STOPPED ................................................................. 1
(IF VOL) STOPPED SEEING ONE NON-MD HEALTH
PROFESSIONAL AND BEING TREATED BY ANOTHER ....... 2 GO TO *SR86
STILL BEING TREATED ............................................... 3 GO TO *SR86
DON’T KNOW ............................................................ 8 GO TO *SR86
REFUSED ........................................................................ 9 GO TO *SR86

*SR85a. Did you complete the full recommended course of treatment? Or did you stop before the health professional wanted you to stop?

COMPLETED TREATMENT ............................ 1
STOPPED ............................................................ 5
DON’T KNOW ..................................................... 8
REFUSED ............................................................. 9

*SR86. INTERVIEWER CHECKPOINT: (SEE *SR17)

*SR17 EQUALS ‘9’.................................................... 1
*SR17 EQUALS ‘10’................................................ 2 GO TO *SR100
ALL OTHERS ....................................................... 3 GO TO *SR109

*SR87. How old were you the first time you talked to a religious or spiritual advisor about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

_______ YEARS OLD
DON’T KNOW ........................................................ 998
REFUSED .............................................................. 999

*SR88. When was the last time?

Was it:
during the past month?
more than a month to six months ago?
more than six months to twelve months ago?
or more than twelve months ago?

PAST MONTH ........................................................... 1 GO TO *SR90
MORE THAN A MONTH TO SIX MONTHS AGO ............ 2 GO TO *SR90
MORE THAN SIX MONTHS TO TWELVE MONTHS AGO .. 3 GO TO *SR90
MORE THAN TWELVE MONTHS AGO ......................... 4
DON’T KNOW ........................................................ 8 GO TO *SR99
REFUSED .............................................................. 9 GO TO *SR99

*SR89. How old were you the last time [you talked to a religious advisor about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use)]?

_______ YEARS OLD
DON’T KNOW ........................................................ 998
REFUSED .............................................................. 999
*SR90. Did a religious advisor ever recommend that you go to a mental health specialist, clinic or programme?

YES ..............................................1
NO ...............................................5  GO TO *SR94
DON’T KNOW ..........................8  GO TO *SR94
REFUSED .................................9  GO TO *SR94

*SR91. How old were you the first time (a religious advisor ever referred you to a mental health specialist, clinic or programme)?

______ YEARS OLD
DON’T KNOW ...........................998
REFUSED .................................999

*SR92. INTERVIEWER CHECKPOINT: (SEE *SR88)

*SR88 EQUALS ‘1’ – ‘3’ .....................................................................1
ALL OTHERS ...............................................................................2  GO TO *SR99

*SR93. Did a religious advisor recommend that you go to a mental health specialist, clinic, or programme in the past 12 months?

YES .................................................................1
NO .................................................................5
DON’T KNOW .................................................8
REFUSED .........................................................9

GO TO *SR9

*SR94. INTERVIEWER CHECKPOINT: (SEE *SR88)

*SR88 EQUALS ‘1’ – ‘3’ .....................................................................1
ALL OTHERS ...............................................................................2  GO TO *SR99

*SR95. During the past 12 months, how many times have you seen a religious advisor about your emotions, nerves or mental health?

______ VISIT(S)
DON’T KNOW .................................98  GO TO *SR96
REFUSED .................................................99  GO TO *SR96

*SR95a. How many minutes did (this visit last/ these visits last on average)?

______ MINUTES
DON’T KNOW .................................998
REFUSED .................................................999
*SR96. In general, how satisfied are you with the treatments and services you received from the religious advisor in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

INTERVIEWER: IF MORE THAN ONE RELIGIOUS ADVISOR SEEN: ASK ABOUT THE ONE WAS MOST SATISFIED WITH

VERY SATISFIED ............................................................... 1
SATISFIED ................................................................. 2
NEITHER SATISFIED NOR DISSATISFIED ..................... 3
DISSATISFIED ............................................................. 4
VERY DISSATISFIED ......................................................... 5
DON’T KNOW ............................................................. 8
REFUSED ......................................................................... 9

*SR97. Did the religious advisor help you a lot, some, a little, or not at all?

A LOT ................................................................. 1
SOME .............................................................. 2
A LITTLE .......................................................... 3
NOT AT ALL .................................................. 4
DON’T KNOW .................................................... 8
REFUSED ............................................................ 9

*SR98. Have you stopped seeing the religious advisor or are you being treated?

STOPPED ........................................................................ 1
(IF VOL) STOPPED SEEING ONE RELIGIOUS ADVISOR
AND BEING TREATED BY ANOTHER ......................... 2 GO TO *SR99
STILL BEING TREATED ........................................ 3 GO TO *SR99
DON’T KNOW ............................................................ 8 GO TO *SR99
REFUSED ........................................................................ 9 GO TO *SR99

*SR98a. Did you complete the full recommended course of treatment? Or did you stop before the religious advisor wanted you to stop?

COMPLETED TREATMENT ........................................... 1
STOPPED ................................................................. 5
DON’T KNOW ............................................................ 8
REFUSED ........................................................................ 9

*SR99. INTERVIEWER CHECKPOINT: (SEE *SR17)

*SR17 EQUALS ‘10’ ................................................................. 1
ALL OTHERS ........................................................................ 2 GO TO *SR109

*SR100. (Showcard 21) How old were you the first time you talked to a healer – such as those listed in category J on showcard 21 – about your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

_______ YEARS OLD
DON’T KNOW .................. 998
REFUSED ......................... 999
*SR101. When was the last time?  
Was it:  
during the past month?  
more than a month to six months ago?  
more than six months to twelve months ago?  
or more than twelve months ago?  
PAST MONTH.................................................................1  GO TO *SR103  
MORE THAN A MONTH TO SIX MONTHS AGO..............2  GO TO *SR103  
MORE THAN SIX MONTHS TO TWELVE MONTHS AGO......3  GO TO *SR103  
MORE THAN TWELVE MONTHS AGO............................4  
DON’T KNOW ..........................................................8  GO TO *SR109  
REFUSED .................................................................9  GO TO *SR109  

*SR102. How old were you the last time you talked to one of those healers about your emotions, nerves or mental health?  

______ YEARS OLD  
DON’T KNOW ............... 998  
REFUSED ..................... 999  

GO TO *SR109  

*SR103. (Showcard 21) During the past 12 months, how many visits did you make to a healer, such as those listed in category J about your emotions, nerves or mental health?  

______ VISIT(S)  
DON’T KNOW ......................98  GO TO *SR105  
REFUSED .........................99  GO TO *SR105  

*SR104. How many minutes did (this visit last/ these visits last on average)?  

_______ MINUTES  
DON’T KNOW .................998  
REFUSED .....................999
*SR105. What kind of healer did you see?

(PROBE: Any others?)

RECORD ALL MENTIONS

ACUPUNCTURIST .......................................................... 1
BIOFEEDBACK SPECIALIST ........................................... 2
CHIROPRACTOR .......................................................... 3
ENERGY HEALING SPECIALIST .................................. 4
EXERCISE OR MOVEMENT THERAPIST ....................... 5
HERBALIST ................................................................. 6
HOMEOPATH OR NATUROPATH .................................... 7
HYPNOTIST ................................................................. 8
GUIDED IMAGERY SPECIALIST ................................. 9
MASSEUSE THERAPIST ............................................... 10
SPIRITUALIST OR PSYCHIC ....................................... 11
YOGA, RELAXATION OR MEDITATION EXPERT .......... 12
DIETICIAN ................................................................. 13
OTHER (SPECIFY) ..................................................... 14

DON'T KNOW ................................................................ 98
REFUSED ....................................................................... 99

*SR106. In general, how satisfied are you with the treatments and services you received from the [TYPE OF HEALER(s)/healer(s)] in the past 12 months – very satisfied, satisfied, neither satisfied nor dissatisfied, dissatisfied, or very dissatisfied?

INTERVIEWER: IF MORE THAN ONE HEALER SEEN: ASK ABOUT THE ONE R WAS MOST SATISFIED WITH

VERY SATISFIED .................................................. 1
SATISFIED .......................................................... 2
NEITHER SATISFIED NOR DISSATISFIED ............ 3
DISSATISFIED .................................................. 4
VERY DISSATISFIED ........................................ 5
DON'T KNOW ................................................... 8
REFUSED ......................................................... 9

*SR107. Did the [TYPE OF HEALER(s)/healer(s)] help you a lot, some, a little, or not at all?

A LOT ................................................................. 1
SOME ............................................................. 2
A LITTLE .......................................................... 3
NOT AT ALL .................................................. 4
DON'T KNOW ................................................ 8
REFUSED ......................................................... 9

*SR108. Have you stopped seeing the [TYPE OF HEALER(s)/healer(s)] or are you still being treated?

STOPPED ..................................................................... 1
(IF VOL) STOPPED SEEING ONE HEALER
AND BEING TREATED BY ANOTHER ....................... 2
STILL BEING TREATED .......................................... 3
DON'T KNOW ................................................... 8
REFUSED .......................................................... 9

GO TO *SR110
*SR108a. Did you complete the full recommended course of treatment? Or did you stop before the [TYPE OF HEALER(s)/healer(s)] wanted you to stop?

COMPLETED TREATMENT.........................1
STOPPED....................................................5
DON’T KNOW..............................................8
REFUSED.....................................................9

GO TO *SR110


*SR5a EQUALS ‘1’–‘3’ OR *SR8 EQUALS ‘1’ OR *SR20 EQUALS ‘1’ – ‘3’ OR
*SR28 EQUALS ‘1’ – ‘3’ OR *SR41 EQUALS ‘1’ – ‘3’ OR *SR49 EQUALS ‘1’ – ‘3’
OR *SR58 EQUALS ‘1’ – ‘3’ OR *SR67 EQUALS ‘1’ – ‘3’ OR *SR75 EQUALS ‘1’ – ‘3’
OR *SR88 EQUALS ‘1’ – ‘3’ OR *SR101 EQUALS ‘1’ – ‘3’........................................... 1
ALL OTHERS................................................................. 2

GO TO *SR122

*SR110. The next question is about the money you spent over the past 12 months on treatment of problems with your emotions (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use). This includes all the money you and your family members paid “out-of-pocket” for visits, medications, tests, and services associated with your treatment. Not including any costs that were paid back to you, or will be paid back to you by your insurance, about how much money have you (and your family) spent on treatment of emotional (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance) problems in the past 12 months?

(CODE “NONE” AS ZERO DOLLARS)

_____________ DOLLARS

DON’T KNOW .......... 998
REFUSED ............... 999

*SR111. When you went to see a professional about your emotions (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use) in the past year, was this something you wanted to do, or did you go only because someone else was putting pressure on you?

R WANTED TO DO IT................................................................. 1
SOMEONE ELSE PUTTING PRESSURE ON R................................ 2
(IF VOL) BOTH........................................................................ 3
DON’T KNOW................................................................. 8
REFUSED................................................................. 9

GO TO *SR113

GO TO *SR114

GO TO *SR119

GO TO *SR119
*NZRSR112. ................................................................................................................... (Showcard 23) Which of these four statements best describes why you didn’t want to see a professional:

I didn’t have a problem. I didn’t think I had a problem. I had a problem, but I thought I could handle it on my own? I thought that I needed help, but didn’t believe professional treatment would be helpful?

R DIDN’T HAVE A PROBLEM ................................................................. 1
R DIDN’T THINK HE/SHE HAD A PROBLEM ....................................... 2
R HAD A PROBLEM, BUT THOUGHT HE/SHE COULD HANDLE IT ON HIS/HER OWN ................................................................. 3
R THOUGHT THAT HE/SHE NEEDED HELP BUT DIDN’T BELIEVE PROFESSIONAL TREATMENT WOULD BE HELPFUL ................................. 4
OTHER (SPECIFY) ................................................................................. 5

DON’T KNOW ....................................................................................... 8
REFUSED ............................................................................................... 9

GO TO *SR119

*SR113. Did anyone encourage you or put pressure on you to see a professional about your emotions (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or substance use)?

YES..........................................................1
NO ......................................................5
DON’T KNOW .........................8
REFUSED .........................................9

*SR114. How long had you been thinking that you needed to see a professional before you started treatment?

__________ DURATION NUMBER

CIRCLE UNIT OF TIME:

DAYS ....1  WEEKS .... 2  MONTHS....3  YEARS .... 4

DON’T KNOW .........................998
REFUSED ...................................999

*SR115. INTERVIEWER CHECKPOINT: (SEE *SR114)

*SR114 EQUALS AT LEAST FOUR WEEKS ............................................. 1
ALL OTHERS................................................................. 2  GO TO *SR118
I’m going to read a list of reasons why people delay seeking help and ask you to say “yes” or “no” for whether each one was a reason for why you didn’t get professional help more quickly than you did?

<table>
<thead>
<tr>
<th>Reason</th>
<th>YES (1)</th>
<th>NO (5)</th>
<th>DK (8)</th>
<th>RF (9)</th>
</tr>
</thead>
<tbody>
<tr>
<td>SR116a. I did not have health insurance to cover this type of treatment.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116b. I thought the problem would get better by itself.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116c. The problem didn’t bother me very much at first.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116d. I wanted to handle the problem on my own.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116e. I didn’t think treatment would work.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116f. I received treatment before and it didn’t work.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116g. I was concerned about how much money it would cost.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116h. I was concerned about what people would think if they found out I was being treated.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116i. I had problems with things such as transport, arranging time off work, childcare or other commitments that made it hard to get to treatment.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116j. I was unsure about where to go or who to see.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116k. I thought it would take too much time or be inconvenient.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116l. I could not get an appointment.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116m. I was scared about being put in a hospital against my will.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>SR116n. I was not satisfied with available services.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>NZSR116o I thought I would be treated unfairly because of my ethnicity.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>
*SR117. Were there any other important reasons for your delay that I didn’t ask about?

YES .......................... 1  
NO .......................... 5  GO TO *SR118
DON’T KNOW .............. 8  GO TO *SR118
REFUSED .................... 9  GO TO *SR118

*SR117a. (IF NEC: Briefly, what were they?)

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

*SR118. (Showcard 24) Here is a list of things people often say they hope to get from treatment. Which of these were the main things you were hoping to get from treatment when you saw a professional in the past 12 months? (You can just give me the letters.)

(PROBE: Any other important reasons that are not on the list?)

PROBE UNTIL NONPRODUCTIVE

A. TO HELP WITH YOUR EMOTIONS (e.g., SADNESS, ANGER).......................................................... 1
B. TO CONTROL PROBLEM BEHAVIORS (e.g., DRINKING PROBLEMS, GAMBLING)............... 2
C. TO DEAL WITH A GENERAL BODY COMPLAINTS (e.g., TIREDNESS, HEADACHES).............. 3
D. TO HELP MAKE A LIFE DECISION (e.g., TO GET MARRIED OR CHANGE JOBS)....................... 4
E. TO COPE WITH ONGOING STRESS (e.g., JOB STRESS, MARITAL PROBLEMS).......................... 5
F. TO COPE WITH RECENT STRESSFUL EVENTS (e.g., DIVORCE, DEATH OF A LOVED ONE)... 6
G. TO COME TO TERMS WITH YOUR PAST (e.g., FEELINGS ABOUT YOUR CHILDHOOD)......... 7
H. OTHER REASONS (PLEASE DESCRIBE) ......................................................................................... 8

_______________________________________________________________________________
_______________________________________________________________________________
_______________________________________________________________________________

DON’T KNOW ................................................................. 98
REFUSED ................................................................................. 99


*SR25a EQUALS ‘5’ OR *SR38a EQUALS ‘5’ OR *SR46b EQUALS ‘5’ OR
*SR55a EQUALS ‘5’ OR *SR64a EQUALS ‘5’ OR *SR72a EQUALS ‘5’ OR
*SR85a EQUALS ‘5’ OR *SR98a EQUALS ‘5’ OR *SR108a EQUALS ‘5’...................... 1
ALL OTHERS.................................................................................. 2  GO TO *SR128
**SR120.** You mentioned stopping your treatment before you had finished. I’m going to read a list of reasons and would like you to say “yes” or “no” for whether each one was a reason you stopped.

<table>
<thead>
<tr>
<th>Reason</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SR120a. You got better.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>
| *SR120b. You didn’t need help anymore.                                 |     | 1  | 5  | 8  | 9  | (IF NEC: Was this one of your reasons for stopping?)
| *SR120c. You were not getting better.                                  | 1   | 5  | 8  | 9  |
| *SR120d. You wanted to handle the problem on your own.                 | 1   | 5  | 8  | 9  |
| *SR120e. You had bad experiences with the treatment providers.         | 1   | 5  | 8  | 9  |
| *SR120f. You were concerned about what people would think if they found out you were being treated. | 1   | 5  | 8  | 9  |
| *SR120g. You were treated badly or unfairly.                          | 1   | 5  | 8  | 9  |
| *SR120h. The therapist or counsellor left or moved away.               | 1   | 5  | 8  | 9  |
| *SR120i. You felt out of place.                                        | 1   | 5  | 8  | 9  |
| *SR120j. The policies were a hassle.                                   | 1   | 5  | 8  | 9  |
| *SR120k. There were problems with lack of time, changes to appointments or lack of transport. | 1   | 5  | 8  | 9  |
| *SR120l. You moved.                                                    | 1   | 5  | 8  | 9  |
| *SR120m. Treatment was too expensive.                                 | 1   | 5  | 8  | 9  |
| *SR120n. Your health insurance would not pay for more treatment.       | 1   | 5  | 8  | 9  |
| *SR120o. Your family wanted you to stop.                               | 1   | 5  | 8  | 9  |
| *NZSR120p You were treated unfairly because of your ethnicity         | 1   | 5  | 8  | 9  |
**SR121.** Were there any other important reasons for stopping that I didn’t ask about?

YES .................................. 1
NO........................................ 5  GO TO *SR128
DON’T KNOW .................. 8  GO TO *SR128
REFUSED.......................... 9  GO TO *SR128

*SR121a. (IF NEC: Briefly, what were they?)

______________________________
______________________________
______________________________

______________________________

GO TO *SR128

**SR122.** Was there ever a time during the past 12 months when you felt that you might need to see a professional because of problems with your emotions, nerves or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’
OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

YES .................................. 1
NO........................................ 5  GO TO *NZRSR123
DON’T KNOW .................. 8  GO TO *NZRSR123
REFUSED.......................... 9  GO TO *NZRSR123

*SR122a. How many months or years have you been thinking that you might need professional help?

IF VOL: “ONLY OCCASIONALLY,” PROBE: How long has it been that you had this thought from time to time?
IF VOL: “ONLY ONCE,” CODE “1 DAY.”

___________ DURATION NUMBER

CIRCLE UNIT OF TIME: DAYS .... 1 WEEKS .... 2 MONTHS .... 3 YEARS .... 4

DON’T KNOW .................... 998
REFUSED .......................... 999

GO TO *SR124
*NZRSR123. ................................................................................................................... (Showcard 23) Which of these four statements best describes why you didn’t want to see a professional:

I didn’t have a problem. I didn’t think I had a problem. I had a problem, but I thought I could handle it on my own. I thought that I needed help but didn’t believe professional treatment would be helpful

R DIDN’T HAVE A PROBLEM .......... 0

R DIDN’T THINK HE/SHE HAD A PROBLEM ......................................................... 1

R HAD A PROBLEM, BUT THOUGHT HE/SHE COULD HANDLE IT ON HIS/HER OWN ........................................................................................................ 2

R THOUGHT THAT HE/SHE NEEDED HELP BUT DIDN’T BELIEVE PROFESSIONAL TREATMENT WOULD BE HELPFUL................................. 3

OTHER (SPECIFY) ............................................................ 4

DON’T KNOW ............................................................................................ 8

REFUSED .................................................................................................. 9

*SR124. Was there ever a time in the past 12 months when someone encouraged you or put pressure on you to see a professional about your emotions, nerves or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

YES.................................................1

NO...................................................5

DON’T KNOW_______________ 8

REFUSED________________________ 9

*SR125. INTERVIEWER CHECKPOINT (SEE *SR122a)

*SR122a EQUALS AT LEAST ‘4’ WEEKS ..........1

ALL OTHERS............................................................2   GO TO *SR128
Here are some reasons people have for not seeking help even when they think they might need it. Please tell me “yes” or “no” whether each statement is a reason as to why you did not see a professional.

<table>
<thead>
<tr>
<th>Reason</th>
<th>YES</th>
<th>NO</th>
<th>DK</th>
<th>RF</th>
</tr>
</thead>
<tbody>
<tr>
<td>*SR126a. I did not have health insurance to cover this type of treatment.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126b. The problem went away by itself, and I did not really need help.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126c. I thought the problem would get better by itself</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126d. I was concerned about how much money it would cost.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126e. I was unsure about where to go or who to see.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126f. I didn’t think treatment would work.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126g. I was concerned about what others might think if they found out I was being treated.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126h. I thought it would take too much time or be inconvenient.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126i. I wanted to handle the problem on my own.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126j. I could not get an appointment.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126k. I was scared about being put into a hospital against my will.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126l. I was not satisfied with available services.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126m. I received treatment before and it did not work.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126n. The problem didn’t bother me very much.</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>*SR126o. I had problems with things such as transport, arranging time off work, childcare or other commitments that made it hard to get to treatment</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>NZRSR126 I thought I would be treated unfairly because of my ethnicity</td>
<td>1</td>
<td>5</td>
<td>8</td>
<td>9</td>
</tr>
</tbody>
</table>

Are there any other important reasons why you didn’t seek professional help?

YES ..............................1
NO...............................5   GO TO *SR128
DON’T KNOW ............8   GO TO *SR128
REFUSED .................9   GO TO *SR128
**SR127a.** (IF NEC: Briefly, what were they?)

_______________________________________________________________________________

_______________________________________________________________________________

_______________________________________________________________________________

**SR128.** (Showcard 25) The list on showcard 25 describes commonly used alternative therapies. Did you use any of these therapies in the past 12 months for problems with your emotions or nerves (IF *SC26.2* EQUALS ‘1’ OR *SC26.3* EQUALS ‘1’ OR *SC26.4* EQUALS ‘1’: or your use of alcohol or drugs)?

YES .................................
NO............................... 5  GO TO *SR131
DON’T KNOW .......... 8  GO TO *SR131
REFUSED ................. 9  GO TO *SR131

**SR128a:** Which ones did you use?

(PROBE: Any others?)

RECORD ALL MENTIONS

ACUPUNCTURE............................................................................................................ 1
BIOFEEDBACK ............................................................................................................. 2
CHIROPRACTIC CARE ............................................................................................... 3
ENERGY HEALING .....................................................................................................4
EXERCISE OR MOVEMENT THERAPY ....................................................................5
HERBAL THERAPY (e.g., ST. JOHN’S WORT, CHAMOMILE) and/or Maori Rongoā
......................................................................................................................................... 6
HIGH DOSE MEGA-VITAMINS .................................................................................. 7
HOMEOPATHY .............................................................................................................. 8
HYPNOSIS ..................................................................................................................... 9
IMAGERY TECHNIQUES ........................................................................................... 10
MASSAGE THERAPY .................................................................................................. 11
PRAYER OR OTHER SPIRITUAL PRACTICES ......................................................... 12
RELAXATION OR MEDITATION TECHNIQUES ....................................................... 13
SPECIAL DIETS ......................................................................................................... 14
SPIRITUAL HEALING BY OTHERS ........................................................................... 15
ANY OTHER
ALTERNATIVE THERAPIES OR REMEDIES............................................................ 16

_________________________________________________________________________

_________________________________________________________________________

**SR129.** INTERVIEWER CHECKPOINT: (SEE **SR128a**)

**SR128a** EQUALS ‘6’ ........................................................ 1
ALL OTHERS................................................................. 2  GO TO *SR131
*SR130. (Showcard 26) What types of herbal medicines did you use for your emotions or nerves or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’: or your use of alcohol or drugs)?

(PROBE: Any other?)

RECORD ALL MENTIONS

CHAMOMILE ..........................1
KAVA ......................................2
LAVENDER ............................3
ST. JOHN’S WORT ..................4
VALERIAN .............................5
CHASTEBERRY .......................6
BLACK COHOSH .....................7
OTHER (including Rongoa) (SPECIFY) 8

_______________________________________________________________________________

_______________________________________________________________________________

DON’T KNOW .........................998
REFUSED ...............................999

*SR130a. About how many days out of 365 in the past 12 months did you use (HERBAL MED/any of these herbal medicines)?

___________ DAYS

DON’T KNOW ...... 998
REFUSED .......... 999

*SR130b. Did a professional advise you to use (HERBAL MED/any of these herbal medicines)?

YES .........................................1
NO .........................................5  GO TO *SR131
DON’T KNOW .......................8  GO TO *SR131
REFUSED .............................9  GO TO *SR131
**SR130c. What kind of professional?**

**RECORD ALL MENTIONS**

<table>
<thead>
<tr>
<th>Professional Type</th>
<th>Mention Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>PSYCHIATRIST</td>
<td>1</td>
</tr>
<tr>
<td>FAMILY DOCTOR (e.g., CARDIOLOGIST, GYNECOLOGIST)</td>
<td>2</td>
</tr>
<tr>
<td>OTHER MEDICAL DOCTOR (e.g., CARDIOLOGIST, GYNECOLOGIST)</td>
<td>3</td>
</tr>
<tr>
<td>PSYCHOLOGIST</td>
<td>4</td>
</tr>
<tr>
<td>SOCIAL WORKER, YOUTH AID WORKER, CHILD WELFARE OFFICER, SCHOOL COUNSELLOR, TEACHER</td>
<td>5</td>
</tr>
<tr>
<td>COUNSELLOR (OTHER THAN SCHOOL COUNSELLOR)</td>
<td>6</td>
</tr>
<tr>
<td>OTHER MENTAL HEALTH PROFESSION (e.g., PSYCHIATRIC NURSE)</td>
<td>7</td>
</tr>
<tr>
<td>PSYCHOTHERAPIST</td>
<td>8</td>
</tr>
<tr>
<td>OTHER HEALTH PROFESSION (e.g., GENERAL NURSE)</td>
<td>9</td>
</tr>
<tr>
<td>RELIGIOUS OR SPIRITUAL ADVISOR (e.g., MINISTER, PRIEST, TOHUNGA)</td>
<td>10</td>
</tr>
<tr>
<td>HERBALIST, HOMEOPATH OR NATUROPATH</td>
<td>11</td>
</tr>
<tr>
<td>OTHER ALTERNATIVE PROVIDER (e.g., SPIRITUALIST, TRADITIONAL HEALER, ENERGY HEALER)</td>
<td>12</td>
</tr>
<tr>
<td>OTHER (SPECIFY)</td>
<td></td>
</tr>
</tbody>
</table>

**DON'T KNOW** ........................................................................................................... 98

**REFUSED** .................................................................................................................... 99

---

**SR131. During the past 12 months, did you talk to a telephone psychic at any time?**

<table>
<thead>
<tr>
<th>Response</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>YES</td>
<td>1</td>
</tr>
<tr>
<td>NO</td>
<td>5</td>
</tr>
<tr>
<td>DON'T KNOW</td>
<td>8</td>
</tr>
<tr>
<td>REFUSED</td>
<td>9</td>
</tr>
</tbody>
</table>

**GO TO **SR132

**SR131a. About how many times (did you talk to a telephone psychic in the past 12 months)?**

<table>
<thead>
<tr>
<th>Times</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW</td>
<td>998</td>
</tr>
<tr>
<td>REFUSED</td>
<td>999</td>
</tr>
</tbody>
</table>

**SR131b. About how long did (this call last/ these calls last on average)?**

<table>
<thead>
<tr>
<th>Minutes</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>DON’T KNOW</td>
<td>998</td>
</tr>
<tr>
<td>REFUSED</td>
<td>999</td>
</tr>
</tbody>
</table>
*SR131c. What were the main things you talked about during (this call/ these calls)?

**RECORD ALL MENTIONS**

- LOVE LIFE ........................................................................................................ 1
- FINANCES ........................................................................................................ 2
- OTHER STRESS ................................................................................................. 3
- R’S MENTAL HEALTH ..................................................................................... 4
- OTHER (SPECIFY) ............................................................................................ 5

---

DON’T KNOW ...................................................................................................... 8
REFUSED ............................................................................................................... 9

---

*SR132. INTERVIEWER CHECKPOINT: (SEE *SR10b*)

- *SR10b EQUALS ‘1’ – ‘3’ ........................................................................... 1
- ALL OTHERS ................................................................................................. 2
  GO TO *, NZMSR1 NEXT SECTION

---

*SR133. (Showcard 27) You mentioned going to a self-group in the past 12 months. What kind of self-help group did you go to? You can just give me the letter. (PROBE: Any other?)

**CIRCLE ALL MENTIONS**

A. GROUPS FOR PEOPLE WITH SUBSTANCE PROBLEMS (SUCH AS ALCOHOLICS ANONYMOUS, RATIONAL RECOVERY OR NARCOTICS ANONYMOUS) ......................................................... 1
B. GROUPS FOR PEOPLE WITH EMOTIONAL PROBLEMS (SUCH AS GROW, THE MANIC DEPRESSIVE SOCIETY, OR AN ANXIETY DISORDER SUPPORT GROUP) ............................................. 2
C. GROUPS FOR PEOPLE WITH EATING PROBLEMS ............................................................................. 3
D. GROUPS FOR DEALING WITH THE DEATH OF A LOVED ONE (SUCH AS THE COMPASSIONATE FRIENDS, BEREAVED PARENTS OR BEREAVED BY SUICIDE)................................................................. 5
E. GROUPS FOR PEOPLE MAKING OTHER LIFE TRANSITIONS (SUCH AS PARENTING ALONE, NEW MOTHERS SUPPORT GROUPS, SEPARATED AND DIVORCED SUPPORT GROUPS)....................................................................................................................................................... 8
F. GROUPS FOR SURVIVORS (SUCH AS ADULT CHILDREN OF ALCOHOLICS OR SURVIVORS OF CHILDHOOD SEXUAL ABUSE) [ ]
G. GROUPS FOR PEOPLE WITH PHYSICAL DISABILITIES OR ILLNESSES (SUCH AS CANCER SUPPORT GROUPS OR GROUPS FOR CHRONIC CONDITIONS LIKE ARTHRITIS OR AIDS)
H. PARENT SUPPORT GROUPS (SUCH AS TOUGHLOVE OR PARENT TO PARENT)........................................ 8
I. GROUPS FOR THE FAMILIES OF PEOPLE WITH A PHYSICAL ILLNESS (SUCH AS THE CHILD CANCER FOUNDATION)
J. GROUPS FOR THE FAMILIES OF PEOPLE WITH EMOTIONAL OR SUBSTANCE PROBLEMS SUCH AS A SCHIZOPHRENIA FELLOWSHIP SUPPORT GROUP OR AL ANON....................................................... 10
K. ANY OTHER SELF-HELP GROUP, MUTUAL HELP GROUP, OR SUPPORT GROUP [SPECIFY]... 11

---

DON’T KNOW ...................................................................................................... 98
REFUSED ............................................................................................................... 99
*SR134. INTERVIEWER CHECKPOINT: (SEE *SR20a - *SR20g)

**IF SR10b EQUALS 1-3 AND (*SR20 EQUALS ‘1’ – ‘3’ OR *SR28 EQUALS ‘1’ – ‘3’ OR *SR41 EQUALS ‘1’ – ‘3’ OR *SR49 EQUALS ‘1’ – ‘3’ OR *SR58 EQUALS ‘1’ – ‘3’ OR *SR67 EQUALS ‘1’ – ‘3’ OR *SR75 EQUALS ‘1’ – ‘3’ OR *SR88 EQUALS ‘1’ – ‘3’ OR *SR101 EQUALS ‘1’ – ‘3’) .................................1

ALL OTHERS..................................................................................................................2

GO TO * NZMSR1, NEXT SECTION

*SR135. (Showcard 28) Which of the following statements best describes the relationship between your participation in the self-help group and your seeing a professional about problems with your emotions, nerves, or mental health (IF *SC26.2 EQUALS ‘1’ OR *SC26.3 EQUALS ‘1’ OR *SC26.4 EQUALS ‘1’; or substance use)? Just give me the number.

A PROFESSIONAL RAN THE GROUP ............................................................................................................ 1

A PROFESSIONAL ASKED YOU TO ATTEND THE GROUP AS PART OF YOUR TREATMENT, BUT THE GROUP WAS NOT RUN BY A PROFESSIONAL .................................................................................. 2

YOU ATTENDED THE SELF-HELP GROUP AT THE SAME TIME YOU SAW A PROFESSIONAL, BUT THE TWO WERE NOT RELATED........................................................................................................ 3

YOU ATTENDED THE SELF-HELP GROUP AT A DIFFERENT TIME THAN WHEN YOU SAW A PROFESSIONAL ................................................................................................................................................. 4

OTHER (SPECIFY)........................................................................................................................................ 5

DON’T KNOW................................................................................................................................................ 8

REFUSED..................................................................................................................................................... 9

GO TO * NZMSR1, NEXT SECTION