

**ADOLESCENT REINFORCEMENT SURVEY SCHEDULE – CANNABIS USE  
VERSION (ARSS – CUV)**

**Web-based Administration Version 1.0**

*Notes for administration are in italics.*

**PART I: ENGAGEMENT IN ACTIVITIES**

The following is a list of activities, events, and experiences. For the time frame of the last 30 days, please indicate if you have or have not engaged in the listed activity by selecting ‘Yes’ or ‘No.’

	Yes	No
1. go places with dates or romantic partners (e.g., boyfriend/girlfriend, spouse)		
2. talk with dates or romantic partners (e.g., boyfriend/girlfriend, spouse)		
3. go out to eat with dates or romantic partners (e.g., boyfriend/girlfriend, spouse)		
4. flirt with dates or romantic partners (e.g., boyfriend/girlfriend, spouse)		
5. go on dates		
6. kiss dates or romantic partners		
7. exercise (walking, yoga, weightlifting, etc.)		
8. participate in sports		
9. listening to music		
10. watching TV, movies, or YouTube		
11. engaging in arts and crafts		
12. scrolling through social media		
13. playing video games		
14. go out to eat with friends		
15. talk with friends		
16. go places with friends		
17. go for walk with friends		
18. talk on phone with friends		
19. go to house parties with friends		

20. go to bars or nightclubs with friends		
21. talk with friends about day's activities		
22. meet new people my age		
23. go hang out where friends meet		
24. interact with people of own age		
25. email, text message, or engage on social media with friends		
26. go places with siblings or family members		
27. talk with siblings or family members		
28. go out to eat with siblings or family members		
29. sexual intercourse with a date/romantic partner (this includes oral sex and penetrative sex)		
30. going to school or class		
31. studying		
32. doing chores or errands at home (e.g., laundry, cleaning, organizing)		
33. doing chores or errands outside of home (e.g., grocery shopping, going to the bank)		
34. cooking		
35. engage in paid employment		

*Activities that are responded as 'No,' will be scored as a 0 for both cannabis use and cannabis-free measures. Participants will not be asked frequency or enjoyment questions if they did not engage in the activity.*

## **PART II: WITH CANNABIS**

### *FREQUENCY:*

For the list of activities, please indicate how often you have engaged in each activity **when you were** using cannabis.

### *ENJOYMENT:*

For the list of activities, please indicate how much you enjoyed each activity **when you were** using cannabis.

If you have experienced an activity more than once in the past month, try to rate how enjoyable it was on the average.

*Note for administration: the table below shows the individual drop box options.*

<b>Numerical Score for Calculations</b>	<b>Frequency Options</b>	<b>Enjoyment Options</b>
0	Not engaged ('no' to Part I)	Unpleasant or neutral
1	Once a week or less	Mildly pleasant
2	2-4 times per week	Moderately pleasant
3	About once a day	Very pleasant
4	More than once a day	Extremely pleasant

*Example item for Part II, frequency.*

For the list of activities, please indicate how often you have engaged in each activity **when you were** using cannabis.

	Column Options ▾
	Frequency
Activity 1	<input checked="" type="checkbox"/> Once a week or less
Activity 2	<input type="checkbox"/> 2-4 times per week
Activity 3	<input type="checkbox"/> About once a day
	<input type="checkbox"/> More than once a day

*Example item for Part II, enjoyment.*

For the list of activities, please indicate how much you enjoyed each activity **when you were using** cannabis.

If you have experienced an activity more than once in the past month, try to rate how enjoyable it was on the average.

	Column Options ▾
	Enjoyment
Activity 1	<input checked="" type="checkbox"/> Unpleasant or neutral
Activity 2	<input type="checkbox"/> Mildly pleasant
Activity 3	<input type="checkbox"/> Moderately pleasant
	<input type="checkbox"/> Very pleasant
	<input type="checkbox"/> Extremely pleasant

### **PART III: WITHOUT CANNABIS**

#### *FREQUENCY:*

For the list of activities, please indicate how often you have engaged in each activity **when you were not** using cannabis.

#### *ENJOYMENT:*

For the list of activities, please indicate how much you enjoyed each activity **when you were not** using cannabis.

If you have experienced an activity more than once in the past month, try to rate how enjoyable it was on the average.

*Note for administration: the table below shows the individual drop box options.*

<b>Numerical Score for Calculations</b>	<b>Frequency Options</b>	<b>Enjoyment Options</b>
0	Not engaged ('no' to Part I)	Unpleasant or neutral
1	Once a week or less	Mildly pleasant
2	2-4 times per week	Moderately pleasant
3	About once a day	Very pleasant
4	More than once a day	Extremely pleasant