MEDICATION DISPOSAL SURVEY

Final Report

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Foreword

Prescription sales reached 286.5 billion in 2007.[i] Despite high yearly prescription sales, many of these prescriptions will go unused for various reasons such as improved patient condition, the inability to tolerate adverse effects of the drug, changes in dosage or medication regimen, death, or medication expiration. Improperly disposed-of expired or unused medications pose a potential risk to the population. Often, these unwanted or expired medications are just stored in the home indefinitely or disposed of via the sink, flushed down the toilet, or tossed in the garbage[ii].

The storage or disposal of unwanted or expired medications in this way poses a serious health risk. Children and pets may be exposed to these medications if kept in the home or thrown in the garbage resulting in accidental exposure and toxic effects. Also, medications found in the garbage also have the potential to be abused, especially narcotic pain relievers, sleep aides, etc.

There is growing concern about the safety of the national water supply, with regards to pharmaceuticals, due to recent reports of the detection of antibiotics, antidepressants and hormone replacement medications in waterways nationwide[iii]. Trace amounts of pharmaceuticals and their metabolites have also been identified in some drinking water supplies[ivv]. This results from pharmaceuticals passing through water treatment facilities and domestic sewage systems that are not specifically designed to remove them from circulation. Additionally, medication waste dumped at landfills may also make its way to the groundwater supply. Although using the toilet or sink prevents someone from accidentally taking the medications, disposing of them in this way causes inadvertent contamination which is believed to have caused adverse effects on many aquatic species. Moreover, there is the concern and potential for humans to be affected by this inadvertent environmental contamination by these pharmaceuticals. For example, the release of antibiotics in the environment may foster the spread of antibiotic resistance among microorganisms present in the waterways[vviviviii].

In a survey about patient habits and beliefs regarding medication disposal, Seehusen and colleagues found that 54% of patients have stored unused or expired medications in the home, 35% of patients have rinsed them down the sink, and 54% of patients have flushed them down a toilet[ix]. Interestingly, only 15%, 21%, and 35% of patients respectively, feel these are appropriate disposal methods. In this same study, only 23% of patients report returning medications to a pharmacy whereas 67% feel this is an acceptable way to dispose of unwanted or expired medications. Unfortunately, many local pharmacies refuse to accept returned medications because they do not have the means to adequately destroy these medications and more importantly, it is against the law in some states[x].

As documented in the literature, most patients are not only unaware of who provides medication disposal programs but they are also unsure of how to properly dispose of medications. Also, there is a lack of consistency in who provides drug disposal programs in the United States. The study was conducted to address the following objectives:

Primary Objective:

To determine how patients use, store, and dispose of expired or unused medications.

Secondary Objective:

To determine patients' beliefs about the disposal of expired or unused medications.

The presence of medications in drinking water as a result of contaminated groundwater, rivers, and lakes is a problem that will continue to grow as the population ages and medication use continues to grow. The health risk to humans and animals because of all these medications in the environment is not completely understood as of yet. In the meantime it seems sensible to minimize the contamination of these water sources as much as possible. It would seem that the disposal of unwanted or expired medications is one specific area where an impact could be made with appropriate interventions. Ideally, education of the population may be of value; however this study showed that only 19.1% of respondents reported ever having received any information about how to safely dispose of medications.

The results of this study clearly indicate that there is a role for patient education regarding the proper disposal of unwanted or expired medications.

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REFERENCES

[1] IMS Health Reports. Available at http://www.imshealth.com/ims/portal/front/articleC/0.2777.6599_3665_83470499.00html. Accessed on 4/7/08.

[1] Kuspis DA, Drenzelok EP. What Happens to Expired Medications? A Survey of Community Medicine Disposal. *Vet Human Toxical* 1996; 38: 48-9.

[1] Kolpin DW, Furlong ET, Meyer MT, *et al*. Pharmaceuticals, Hormones, and Other Organic Wastewater Contaminants in U.S. Streams, 1999-2000: A National Reconnaissance, *Environ Sci Technol* 2002;36:1202-11.

[1] Smith, CA. Managing Pharmaceutical Waste: What Pharmacists Should Know. *J Pharm Society Wisconsin* 2002;Nov/Dec:17-22.

[1] Stackelberg PE, Furlong ET, Meyer MT, *et al*. Persistence of Pharmaceutical Compounds and Other Organic Wastewater Contaminants in a Conventional Drinking Water Treatment Plant. *Sci Total Eviron* 2004:329-99-113.

[1] Heberer T. Occurrence, Fate, and Removal Residues in the Aquatic Environment: A Review of Recent Research Data. Toxical Lett 2002;131:5-17.

[1] Jones OA, Voulvoulis N, Lester JN. Potential Impact of Pharmaceuticals on Environmental Health. Bull World Health Organ 2003;81:768-9.

[1] Webb S, Temes T, Gilbert M, *et al*. Indirect Human Exposure to Pharmaceuticals Via Drinking Water. Toxical Lett 2003;142:157-67.

[1] Seehusen DA, Edwards J. Patient Practices and Beliefs Concerning Disposal of Medications. JABFM 2006;19:542-7.

[1] Boehringer SK. What's the Best Way to Dispose of Medications? Pharmacist's Letter 2004;20.

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INTRODUCTION

The Survey Research Laboratory (SRL) at the University of Illinois at Chicago (UIC) conducted a random-digit-dial telephone survey of 445 Cook County residents in Illinois on behalf of Dr. Larry Danziger in the UIC Department of Pharmacy Practice; the study was funded by the Metropolitan Water Reclamation District of Greater Chicago. The purpose was to study the ways in which adult residents of Cook County dispose of their prescription and nonprescription medicines once they are done with them. This report describes the findings from the study.

The study involved both pretest and main study data collection. The phone interviews for the pretest were conducted from June 17, 2009, to July 2, 2009. We achieved 9 completed interviews out of a total sample of 136 cases, for a response rate of 12.1%. Phone interviewing for the main study began on August 6, 2009, and ended on November 6, 2009, for a total data collection period of approximately 13 weeks. We completed 445 interviews out of a starting sample of 3,954 cases, for a response rate of 18.9%. Additional details regarding the study's methodology are provided in a separate methodological report.

The questionnaire used for this study (see Appendix A) contained several types of questions. Among the closed-ended questions were those with yes/no responses and those with multiple response options. The multiple response option questions generally included multiple scale points (e.g., a five-point scale ranging from very willing to very unwilling) and asked respondents to choose the option that best represented how they feel.

In addition to the closed-ended questions, the questionnaire included many open-ended questions and many other-specify options. Open-ended questions do not include any precoded response options but instead let respondents answer in their own words. An example of such a question is "What is the best way to properly dispose of unwanted prescription or nonprescription medications?" Other-specify questions are generally the last option in a multiple response option question and provide respondents with the opportunity to answer a question with a response not listed in the set of precoded responses. For example, question 9 asked the respondents about 15 specific medications or supplements and whether the respondent has those medications in his or her household. In addition to those 15, it also asked if there are any other medications and asked the respondent to name those.

Throughout the report, the results of the yes/no and multiple response option questions are presented as tables or figures. The responses are given in percents, and the percentages sum to 100. "Don't know" responses and refusals are not included in the analysis. Thus, the *n*'s reported in some of the tables are less than the total sample size.

Because open-ended and other-specify questions do not include response options, they must be handled differently. For each open-ended or other specify question, we read through all of the responses and grouped them into common themes. Classifying the responses is not always straightforward, as responses can include several different themes. Generally, we classified them according to the first theme mentioned. In the body of the report, we present the themes and the number of times that particular theme was mentioned by any respondent. The complete set of verbatim responses to all open-ended and other-specify questions is included in Appendix B.

The questionnaire included several split-ballot questions as well. For these, we created two slightly different versions of one question and randomly assigned half of the respondents to each version. For the sake of reporting, the two versions are combined, and the frequencies are presented as responses to a single question.

We also present the results of several cross tabulations in this report, all of which display the distribution of responses to an item on the questionnaire by categories of another item. For example, responses to a question about the disposal of household medications are presented by respondent age categories. Although we ran cross tabulations for several relevant combinations of variables, in this report we present only those resulting in a chi-square test significant at the $p < .05$ level or better, that are substantively meaningful, and that have large enough sample size per cell to warrant drawing a conclusion.

As discussed in the separate methodological report, we calculated poststratification weights for age, race, and gender. All of the substantive tables and figures presented in the report are based on the weighted data. However, the demographic data presented at the end of the report are unweighted. This allows the reader to see the actual composition of the sample without it being adjusted to match the population it represents.

A. USE OF MEDICATIONS

The vast majority of respondents have both prescription and nonprescription medications stored at home—80.5% and 92.4%, respectively (Table A1). On average, respondents have 4.4 different prescription medications and 5.5 different nonprescription medications in their homes or in their possession (Table A2). The higher number of nonprescription medications is also evident in the percent reporting having eight or more (23.3% vs. 12.8% having eight or more *prescription* medications).

With respect to using medications not prescribed for oneself or sharing medications with others, only 18.6% of respondents said they have used medication prescribed to someone else. A slightly higher percentage (23.6%) indicated sharing with others medicine prescribed to them, as Table A1 shows.

Evident from Table A3 is that respondents regularly take fewer medicines than they have in their possession. The mean number of different prescription medications taken on a regular basis is 2.9, while the number of nonprescription medications taken is lower (1.8). In addition, although all of the respondents have some type of medication in their possession, a sizeable percentage say they do not take medications on a regular basis—29.7% of respondents take zero prescription medications, while 32.7% take zero nonprescription medications. However, only 12.8% take neither (data not shown).

Table A1. Use of Prescription & Nonprescription Medications

	%
Prescription medications stored at home? (*n* = 444)	80.5
Nonprescription medications stored at home? (*n* = 445)	92.4
Ever used medication that the doctor prescribed for someone other than you? (*n* = 437)	18.6
Ever given anyone else your prescription medication? (*n* =437)	23.6

Table A2. Number of Medications Respondent's Household Members Have

	TYPE OF MEDICATION	
Number	Prescription (*n* = 353)	Nonprescription (*n* = 403)
1	17.1%	11.7%
2	19.3%	13.0%
3	16.6%	15.6%
4	13.2%	12.6%
5–7	21.1%	23.8%
8+	12.8%	23.3%
Minimum	1	1
Maximum	30	20
Mean	4.4	5.5
Std. Dev	3.8	4.4

Table A3. Number of Medications Respondent & Respondent's Household Members Take on a Regular Basis

	TYPE OF MEDICATION	
Number	Prescription (*n* = 445)	Nonprescription (*n* = 441)
0	29.7%	32.7%
1	17.3%	26.2%
2	11.8%	14.8%
3	11.1%	10.6%
4–5	13.4%	9.0%
6+	16.8%	6.6%
Minimum	0	0
Maximum	20	20
Mean	2.9	1.8
Std. Dev.	3.4	2.3

B. STORAGE OF MEDICATIONS

Respondents who said they do not currently have prescription medications in their possession were asked when they last had them. Their responses are provided in Table B1, column 2. Similarly, those who stated they do not currently have nonprescription medications were asked when they last had them. Their responses are in column 3. Because so many respondents have some type of medication in their possession, few respondents were asked these questions; 84 were asked about prescription medications and 28 were asked about nonprescription medications. Among those asked, the highest percentage said they last had medications in their possession more than one month ago but less than six months ago (24.9% for prescription medications, 32.3% for nonprescription medications).

Table B1. When Respondent Last Stored Medications

	TYPE OF MEDICATION	
Last stored…	**Prescription (*n* = 84)**	**Nonprescription (*n* = 28)**
< 1 month ago	10.7%	24.0%
More than 1 month but less than 6 months ago	24.9%	32.3%
More than 6 months but less than 1 year ago	18.3%	13.0%
1 year to less than 2 years ago	12.5%	4.5%
2 years to less than 5 years ago	20.4%	15.3%
5+ years ago	13.3%	10.9%

LOCATION OF MEDICATIONS

Respondents were asked a series of yes/no questions about specific locations where they might store either prescription or nonprescription medications. Their responses are provided in Table B2. The majority of respondents (58%) store their medications in the bathroom medicine cabinet or in the kitchen. The next most common places are the respondent's purse or briefcase (33.7%) and the bedroom (30.5%). Respondents are least likely to store medications in their cars (4.9%).

Table B2. Where Medications Are Stored

Medications are stored…	**%**
In a bathroom medicine cabinet (*n* = 445)	58.3
In a bathroom closet (*n* = 445)	18.3
In the kitchen (*n* = 442)	58.8
In the bedroom (*n* = 444)	30.5
In the car (*n* = 445)	4.9
In a purse or briefcase (*n* = 444)	33.7
At office or workplace (*n* = 445)	13.1
At any other place (*n* = 445)	19.1

Table B3. Security of Select Storage Locations

	%
Bathroom medicine cabinet is locked (*n* = 257)	7.5
Bathroom closet is locked (*n* = 81)	9.9
Kitchen cabinet is locked (*n* = 255)	6.8

Respondents also were asked to specify other locations where they keep medications. The location mentioned most frequently (*n* = 18) was the linen closet or hall closet, followed by the refrigerator (*n* = 17). Eleven respondents mentioned a place in the bathroom other than the medicine cabinet. For a complete list of responses to this question, see Appendix B.

For three of the locations mentioned in Table B2, respondents who said they stored their medications there were asked about the security of the locations (Table B3). Regardless of location (medicine cabinet, bathroom closet, or kitchen cabinet), very few respondents indicated that these places are locked.

TYPES OF MEDICATIONS

In addition to asking respondents where they store medications, the questionnaire included questions about specific medications they currently have in their possession. Table B4 lists all of these medications and the percent of the respondents who said they have them. The list includes both prescription and nonprescription drugs. The majority of respondents said they have over-the-counter pain medications (82.5%); vitamins (76.9%); and cold, cough, or flu medications (70.3%). The medications currently possessed by the fewest number of respondents are anti-seizure medications (4.5%) and hormone replacement medications (5.4%). When asked about other medications not listed, the most common response was allergy medications (23 mentions), followed by antidepressants (20 mentions) and antibacterial creams (18 mentions). See Appendix B for a complete list of responses.

Table B4. Types of Medications Currently in Respondent's Possession

Type of Medication	%
Over-the-counter pain medications (*n* = 444)	82.5
Vitamins (*n* = 444)	76.9
Cold, cough, or flu medications (*n* = 443)	70.3
Antacids (*n* = 441)	48.6
Prescription pain medications (*n* = 444)	39.2
Blood pressure medications (*n* = 442)	36.4
Antibiotics (*n* = 441)	30.6
Herbal remedies (*n* = 443)	28.5
Cholesterol lowering medications (*n* = 441)	27.9
Diabetes medications (*n* = 443)	16.1
Diuretics (*n* = 441)	12.2
Oral contraceptives (*n* = 444)	9.5
Blood thinners (*n* = 441)	9.4
Hormone replacements (*n* = 441)	5.4
Anti-seizure medications (*n* = 443)	4.5
Any other medications (*n* = 443)	26.3

When asked about leftover medications and expired medications, about 23% of respondents said they still have prescription medications that have expired, while 28.6% said they have nonprescription medications that have expired (Table B5). A larger percentage (37.3%) said they have medications left over from a previous illness that have not yet expired. Only 3.9% said they have medications that were prescribed to someone else who no longer lives in the household.

Table B5. Types of Expired & Unused Medications Currently in Respondent's Possession

Respondent has any…	%
Prescription medications past their expiration date (*n* = 439)	22.9
Nonprescription medications past their expiration date (*n* = 435)	28.6
Medications from a prior illness that have not yet expired (*n* = 443)	37.3
Medications prescribed to someone no longer living in household (*n* = 443)	3.9

Further, respondents were asked how many expired or unused medications they have. Their responses are summarized in Table B6. With respect to expired prescription medications, roughly equal numbers of respondents said they have one, two, or three different medications (23.8%, 25.9%, and 23.7%, respectively). On average, respondents have three different expired medications. Respondents have slightly fewer nonprescription medications—2.7 on average. In addition, a larger percentage said they have one (36.2%) or two (29.2%) compared to prescription medications. Similar to expired prescription medications, respondents

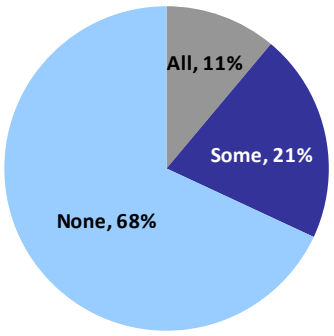
Table B6. Number of Expired or Unused Medications Currently in Respondent's Possession, by Type

NUMBER	Expired Prescription Medications (n = 100)	Expired Nonprescription Medications (n = 123)	Leftover, Unexpired Prescription Medications (n = 164)
1	23.8%	36.2%	27.0%
2	25.9%	29.2%	31.5%
3	23.7%	13.2%	18.6%
4	8.1%	7.5%	6.1%
5+	18.5%	13.9%	16.6%
Minimum	1	1	1
Maximum	10	20	20
Mean	3.0	2.7	3.2
Std. Dev.	2.0	2.4	3.3

have, on average, 3.2 prescription medications left over from a prior illness. Of the 164 who have leftover medications, 27% said they have one, 31.5% said they have two, and 18.6% said they have three. When asked why they did not use the full prescription, the most common answer given was that the directions were to take as needed and the medication was no longer needed (*n* = 67). Another 40 respondents said they quit taking them because they felt better. For a complete list of responses to this question, see Appendix B.

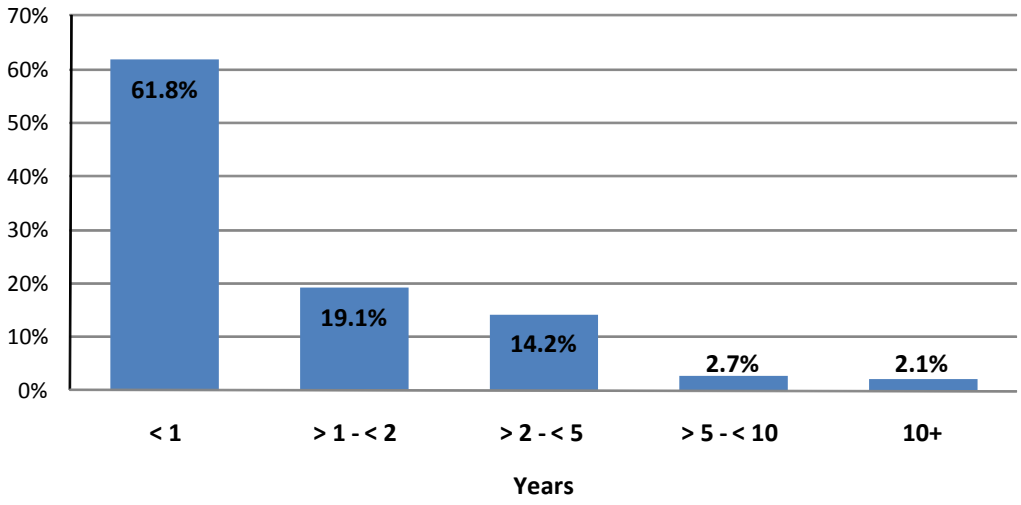
Respondents were asked how many of their current prescription medications they expected to be left over six months from the time of the survey. Their responses are shown in Figure B1. The majority (67.8%) expect none of their medications to be left over, while 10.8% said all and 21.4% said some.

Figure B1. Prescription Medications Respondent Expects to Be Left over in Six Months (*n* = 436)



Regarding the longest amount of time respondents have ever stored expired medication, the majority (61.8%) said less than one year (Figure B2). Another 19.1% said more than one year but less than two, while 14.2% said more than two but less than five years.

Figure B2. Longest Time Respondent Has Stored Expired Medications (*n* = 394)



C. DISPOSAL OF MEDICATIONS

INFORMATION ABOUT DISPOSAL OF MEDICATIONS

Only 19.1% of respondents reported ever having received information about how to safely dispose of medications; 80.9% reported never having received such information.

Those who reported having received such information were asked a follow-up question to ascertain the source of the information. Table C1 presents the categories under which the responses were classified and the corresponding count of the number of responses per category. Details of verbatim responses under each category heading are in Appendix B. As Table C1 indicates, TV and other media were reported most often as the source of such information.

All respondents were then asked about sources they could go to if they needed additional information about medication disposal. Table C2 presents the categories under which the responses were classified and the corresponding count of the number of responses per category. Responses were classified under categories based on the first source mentioned; e.g., if a respondent said, "The pharmacist or my doctor, "the response was classified under *The pharmacist/pharmacy* category, as it is the first source mentioned. Pharmacists/pharmacies, the Internet, and doctors/hospitals/clinics are the most popular sources for additional information about disposal of medications.

Table C1. Source of Respondent's Information about Medication Disposal

	# mentions
TV & other media	25
Doctor/Hospital/Clinic	10
City/Village/government agency	9
Pharmacy	8
Came with prescription	7
Friends/family	3
At work	3
Internet	2
Other	16

Table C2. Source Respondent Would Consult If Needing Additional Information about Medication Disposal

	# mentions
The pharmacist/pharmacy	148
The Internet	123
Hospital/clinic/doctor/health care professional	87
City/village/government agency	20
Should come with medication	6
Media	4
Library	4
Would not look for information/would flush	2
Other	10

METHOD OF DISPOSAL

Another question presented to all respondents addressed their behaviors with respect to disposal of prescription and nonprescription medications. This section describes respondents' current behaviors with respect to disposal.

The interviewer read a list of ways to dispose of medications, giving the respondent an opportunity to respond whether he or she used that method to dispose of his or her medications. Table C3 summarizes the responses to each of the listed methods. The most used method of disposal is to throw away medications with household garbage (59% of respondents said that they used this method), followed by flushing medications down the toilet or sink (31.3% reported doing so). While 10.7% of respondents reported taking their unused/expired medications to a pharmacy to get rid of them, less than 6% reported taking expired or unused medications to a physician for that purpose. Approximately 17.1% reported that they never dispose of unused or expired medications, and 5.4% reported a disposal method not included on the list read to them.

Those who reported disposing the medications in some other way were asked to specify the way in which they did so. The categories pertaining to this open-ended question, along with the number of mentions for each, are listed in Table C4. Details of verbatim responses under each category heading are in Appendix B.

Respondents' disposal behavior is influenced by whether they reported receiving information about the safe disposal of medications, as indicated by cross tabulations of these two items (see Table C5). As Table C5 shows, 49.4% of those who received information about the safe disposal of medications throw away unused or expired medications in household garbage, while 50.6% do not. Of those who never received information about the disposal of medications, 61.6% do and 38.4% do not throw away medications in household garbage. Thus, compared to those who never receive information on safe disposal practices, a smaller percentage of those who receive this information throw away medications with household garbage.

Also, a higher percentage of respondents who received medication disposal information reported taking the medications to a hazardous waste collection facility and to a pharmacy (24.1% and 28.6%, respectively), as compared to those who never got such information (5.1% and 6.8%, respectively).

Table C3. Methods Used by Respondent to Dispose of Prescription & Nonprescription Medications

	%
Throw away unused or expired meds in household garbage (*n* = 444)	59.0
Flush unused or expired medications down the toilet or sink (*n* = 443)	31.3
Take unused or expired medications to a hazardous waste collection facility or collection event (*n* = 443)	8.4
Give unused or expired medications to someone else who would use them (*n* = 444)	5.8
Return unused or expired medications to a pharmacy (*n* = 444)	10.7
Return unused or expired medications to a physician (*n* = 444)	5.1
Never dispose of unused or expired medications (*n* = 444)	17.1
Dispose of unused or expired medications in some other way (*n* = 444)	5.4

Table C4. Other Methods Used by Respondent to Dispose of Medications

	# mentions
Give them away	7
Throw away in garbage (using proper disposal method)	7
Used all medications (no need to dispose)	3
Throw away outside (on the ground, in the alley, etc.)	2
Use garbage disposal	2
Burn medications	2
Flush them down toilet	1
Other	2

Table C5. Cross-Tabulation of Disposal Method Used by Whether Respondent Ever Received Information about Safe Disposal of Medications

	RESPONDENTS WHO REPORTED…	
Throw away unused or expired meds in household garbage	**Ever received information (*n* = 83)**	**Never received information (*n* = 354)**
Yes (*n* = 259)	49.4%	61.6%
No (*n* = 178)	50.6%	38.4%
Take unused or expired medications to a hazardous waste collection facility or collection event	**Ever received information (*n* = 83)**	**Never received information (*n* = 355)**
Yes (*n* = 38)	24.1%	5.1%
No (*n* = 400)	75.9%	94.9%
Return unused or expired medications to a pharmacy	**Ever received information (*n* = 84)**	**Never received information (*n* = 355)**
Yes (*n* = 48)	28.6%	6.8%
No (*n* = 391)	71.4%	93.2%

Disposal behavior also is influenced by whether the household primarily uses tap or bottled water for drinking use, as indicated by cross tabulations of these two items (Table C6). This cross tabulation yielded a significant chi-square test, at the $p < .05$ level. A higher percentage (42.1%) of respondents whose households primarily used bottled water for drinking reported flushing medications down the sink or toilet than those who primarily use other types of water (27.9%, 25.6%, and 31.0%, for those using unfiltered tap water, filtered tap water, and more than one type of water, respectively).

Additionally, respondents' disposal behavior differs by the age and gender of the respondent (see Tables C7 and C8, respectively). The percentage of respondents who report throwing away medications in household garbage decreases as age increases ($p < .01$). With regard to gender, more females than males report flushing medications down the toilet or sink, but more males than females report never disposing of expired or unused medications ($p < .05$ for both).

Table C6. Cross-Tabulation of Disposal Method Used by the Type of Water Household Primarily Uses for Drinking

Flush unused or expired medications down the toilet or sink	TYPE OF WATER			
	Bottled (*n* = 107)	Unfiltered tap (*n* = 136)	Filtered tap (*n* = 156)	More than one (*n* = 29)
Yes (*n* = 132)	42.1%	27.9%	25.6%	31.0%
No (*n* = 296)	57.9%	72.1%	74.4%	69.0%

Table C7. Cross-Tabulation of Disposal Method Used by Respondent Age

Throw away unused or expired meds in household garbage	RESPONDENT AGE (IN YEARS)			
	18–44 (*n* = 220)	45–54 (*n* = 82)	55–64 (*n* = 60)	65+ (*n* = 67
Yes (*n* = 254)	66.8%	54.9%	51.7%	46.3%
No (*n* = 175)	33.2%	45.1%	48.3%	53.7%

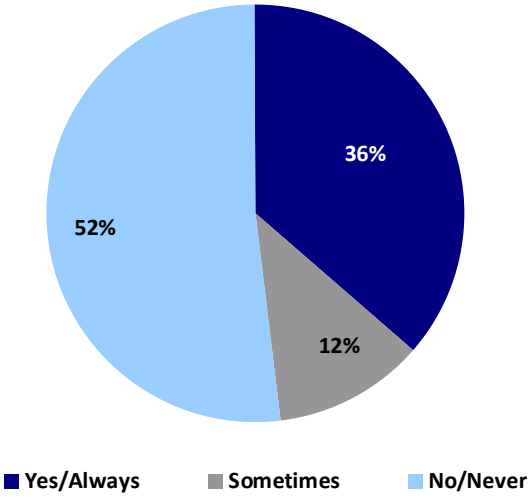
Table C8. Cross-Tabulation of Disposal Method Used by Respondent Gender

	GENDER	
Flush unused or expired medications down the toilet or sink	**Male (*n* = 208)**	**Female (*n* = 226)**
Yes (*n* = 134)	22.6%	38.5%
No (*n* = 300)	77.4%	61.5%
Never dispose of unused or expired medications	**Male (*n* = 209)**	**Female (*n* = 227)**
Yes (*n* = 76)	21.5%	13.7%
No (*n* = 360)	78.5%	86.3%

D. ATTITUDES TOWARD DISPOSAL OF MEDICATIONS

In the section of the questionnaire regarding attitudes toward the disposal of medications, respondents were first asked if they think prescription medications should be disposed of differently than nonprescription medications. Responses to that question are presented in Figure D1.

Figure D1. Should Prescription & Nonprescription Medications Be Disposed of Differently (*n* = 401)?



Respondents who said prescription and nonprescription medications should be disposed of differently then were asked the best way to dispose of medications. These follow-up questions did not include pre-coded response options, but simply asked the respondent to name a disposal method. Table D1 shows the common disposal methods named by the respondents and the number of respondents who specified that method for prescription and nonprescription drugs.

Table D1. Best Disposal Method: Treat Prescription & Nonprescription Medications Differently

	# mentions	
DISPOSAL METHOD	**Prescription**	**Nonprescription**
Take them back to the pharmacy	42	19
Take them to a designated disposal center	36	10
Flush down the toilet or sink	23	23
Throw in the garbage/landfill	22	59
Take them back to the doctor	9	5
Hazardous waste facility	0	10
Not specified/same as prescription	0	8
Recycle	0	3
Other	12	1

Respondents who answered "maybe" when asked if prescription and nonprescription drugs should be disposed of differently were asked why. Their responses are summarized in Table D2. Many of the respondents replied that prescription drugs are stronger than over-the-counter drugs. In addition, many cited safety concerns, such as if children got a hold of them, prescription medications would do more damage.

Table D2. Reason(s) Prescription Medications Should be Disposed of Differently than Nonprescription Medications

REASON	**# mentions**
Prescription drugs are stronger than nonprescription or over-the-counter drugs	19
Safety reasons	14
Environmental reasons	1
Other	5

Respondents who said that prescription and nonprescription medications should be disposed of the same way were asked the best method of disposal. Their responses are similar to those listed in Table D1 and are provided in Table D3.

All respondents were asked if people should flush unwanted medications down the toilet or sink. Of the 445 respondents, 415 provided an answer (the remainder refused or said "don't know"). A quarter of respondents said medications should be flushed down the toilet, while the other 75% said they should not. Respondents who said medications should not be flushed down the toilet or sink (*n* = 311) were asked why. The majority (*n* = 220)

said because the medications get into the water supply. Another 41 respondents mentioned that it was generally bad for the environment. Six respondents specifically mentioned the sewage system, while 43 gave some other reason. Many of those 43 responses were vague, such as, "it clogs things up" or "better to throw it in the garbage."

Respondents were asked directly if they had read, heard, or seen any news stories about pharmaceuticals being detected in the water. Fifty four percent of the respondents said they had. Respondents aware of this issue were substantially more likely to state that people should not flush unwanted medications down the toilet or sink—89.2% compared to 57.2% of people who are not aware that pharmaceuticals have been found in the water supply (Table D4).

Respondents were then asked what might be the consequences of keeping unused or expired medication in the home. Of the 418 respondents who answered the question, 20.8% said there would be no consequences. The remaining 79.2% named specific consequences. Their responses are summarized in Table D5.

The greatest number of mentions referred to the diminished potency or unexpected effects of expired medications. In other words, someone may take the medication according to the original directions, but because the medications are expired, they may no longer have the same effect as when they were dispensed. Other consequences include children accidentally taking them (n = 87) or other household members either taking them accidentally or using them recreationally (n = 68).

Table D3. Best Disposal Method: Treat Prescription & Non-prescription Medications the Same

Method of Disposal	# mentions
Throw in garbage/landfill	69
Flush down toilet or sink	66
Pharmacy	37
Designated disposal center	27
Hazardous waste facility/event	22
Doctor/hospital/clinic	18
Not sure	11
Recycle	3
Incinerator	3
Dispose properly (mix with coffee grounds or kitty litter & throw in trash)	3
Other	10

Table D4. Cross-Tabulation of Whether Medications Should be Flushed by Exposure to News Stories about Pharmaceuticals in the Water Supply

Should people flush unwanted meds down toilet or sink or not?	Read, heard, or seen news stories about pharmaceuticals detected in water? Yes (n = 231)	No (n = 180)
Yes, should (n = 102)	10.8%	42.8%
No, should not (n = 309)	89.2%	57.2%

$p < .000$.

Table D5. Potential Negative Consequences of Keeping Expired or Unused Medication

CONSEQUENCE	# mentions
Accidental use or misuse by someone else in the household	68
Children could take them	87
Diminished or unpredictable effects	131
Storage space/clutter	11
Other	23

The questionnaire included six questions about specific methods of disposal and asked respondents how confident they are that the method is safe. The response options ranged from 1 to 5, with 1 meaning not at all confident and 5 meaning extremely confident. The distribution of responses, along with the mean rating on each question, is presented in Table D6. Respondents are most confident about lockboxes. Whether the boxes are located in pharmacies or doctors' offices is not important; the mean scores are 3.6 for both. Respondents are least confident in mail back programs, with 41.2% saying they are not at all confident in that method.

In addition to the specific methods mentioned, respondents were asked if there is any other method they are confident is safe; 49 respondents said yes. The methods they mentioned are listed in Table D7.

Table D6. Respondent's Confidence in Various Disposal Methods

R'S DEGREE OF CONFIDENCE THAT…	Not at all confident	Slightly confident	Moderately confident	Very confident	Extremely confident	Mean	Std. Dev
A secure lockbox behind pharmacy is a safe way to dispose of meds (*n* = 433)	6.0%	12.2%	17.2%	42.9%	21.7%	3.6	1.1
A secure lockbox transported by law officer is a safe way to dispose of meds (*n* = 434)	13.4%	13.6%	21.9%	36.5%	14.5%	3.3	1.2
A secure lockbox in doctor's office is a safe way to dispose of meds (*n* = 438)	7.7%	10.2%	16.8%	42.7%	22.7%	3.6	1.2
A mail-back program is safe way to dispose of meds (*n* = 429)	41.3%	21.4%	24.1%	11.1%	2.0%	2.1	1.1
A lockbox dropped off at doctor's office or pharmacy is a safe way to dispose of meds (*n* = 429)	5.6%	11.4%	26.1%	42.8%	14.1%	3.5	1.0
Neighborhood collection by EPA is a safe way to dispose of meds (*n* = 433)	10.9%	17.3%	26.1%	33.6%	12.2%	3.2	1.2

Table D7. Other Safe Methods of Medication Disposal

Method	# mentions
Returning to the doctor/pharmacy/hospital	8
Grinding/mixing medications with dirt, etc.	6
Burn	5
Throw away in garbage	4
Flushing down sink/toilet	4
Hazardous waste site/Other licensed site	4
Bury	2
Fire station/police	2
Finish the medication	2
Other	12

Table D8. Party Believed by Respondent to Be Responsible for Safe Medication Disposal

RESPONSIBILITY OF…	%
The pharmaceutical companies (*n* = 422)	80.6
The pharmacies that dispense (*n* = 426)	71.7
The doctors and other health care (*n* = 429)	47.7
Water or wastewater treatment agencies (*n* = 418)	25.0
The Environmental Protection Agency (*n* = 421)	63.0
The Department of Public Health (*n* = 423)	74.3
The police or sheriff's department (*n* = 432)	8.1
The respondent (*n* = 434)	95.0

Table D9. Other Parties Believed by Respondent to be Responsible for Safe Medication Disposal

It is the responsibility of…	# mentions
All/everyone/each individual	22
City/village/government agency	17
Person who takes the medication	9
Those involved with manufacturing/dispensing medications	7
Caregivers for people who take medications	6
Other	17

The final set of questions in this section of the questionnaire asked respondents who is responsible for providing safe ways for people to dispose of unused or expired medications. Table D8 shows the responses to those questions. Nearly all of the respondents (95%) feel it is their responsibility to find a safe way to dispose of medications. In addition, sizeable majorities also feel it is the responsibility of the pharmaceutical companies (80.6%), Public Health Departments (74.3%), and the pharmacies that dispense medications (71.7%) to safely dispose of medications.

In addition to the specific people or institutions mentioned in these questions, respondents were also asked if there is someone else who is responsible—18.4% (*n* = 78) of respondents said yes. Their responses are provided in Table D9.

E. INTENTIONS FOR DISPOSAL

One section of the questionnaire included items about the respondent's willingness to dispose of medications in specific places or to pay a disposal fee. Table E1 shows the responses to the question of how willing respondents would be to drop off unused medications in a convenient location. The majority of respondents (70.4%) said they would be very willing, with another 19% saying they would be somewhat willing. Those respondents who said they are very or somewhat unwilling (*n* = 12) were asked why. Three people said they would rather throw it away, three said it would be a hassle, two said they are afraid others would use the medication, and three gave some other reason (see Appendix B for the exact responses).

Table E1. Respondent's Degree of Willingness to Drop off Unused Medications at a Convenient Location (*n* = 440)

	%
Very willing	70.4
Somewhat willing	19.0
Neither willing nor unwilling	1.4
Somewhat unwilling	1.4
Very unwilling	1.3
Not sure	6.6

Following the question on willingness to drop medications off at an unspecified location, the questionnaire included a question about four specific locations and whether or not respondents would be willing to drop their unused medications at these locations. Their responses are provided in Table E2. The vast majority of respondents would be willing to take their medications to the nearest pharmacy. More than half would take them to a doctor's office/clinic/hospital (58.1%) or a sheriff's office/police station (54%). Only 43.1% would take them to a hazardous waste facility.

In addition to specific locations, respondents were asked if there is someplace else they might take unused medications; 106 respondents said yes and named a location. We categorized their responses and tallied the number of mentions of each location. The summary of responses is displayed in Table E3. The complete list of responses is provided in Appendix B.

Table E2. Respondent's Willingness to Take Unwanted Medication to Specific Locations

Willing to take unwanted meds to…	%
The nearest pharmacy (*n* = 410)	93.8
A doctor's office, clinic, or hospital (*n* = 410)	58.1
A drop-off box located inside a police station or sheriff's office (*n* = 407)	54.0
A household hazardous waste collection facility in Chicago (*n* = 405)	43.1

Table E3. Other Place(s) Respondent Would Drop off Unwanted Medications (*n* = 106)

LOCATION	# mentions
Any place convenient	34
City facility/village	11
Hazardous waste site not in Chicago/collection facility/disposal center	11
Nowhere specific/anywhere	11
Supermarket/store	8
Fire department	7
Library	6
Recycling facility/service/bin	5
In garbage/trash	2
Public Health Department	2
Other	9

Although many respondents expressed a willingness to return unused medications to a specific or convenient location, far fewer of them are willing to pay extra money per prescription to ensure they are disposed of safely. When asked to name a specific amount they would pay, 176 of the 399 respondents who answered said "zero," "no amount," or "nothing" (Table E4). Among those who specified an amount, some responded with dollar amounts, while others answered in percentages. The majority of respondents who named an amount said either less than one dollar (*n* = 54) or one dollar (*n* = 67).

The last questions in this section of the questionnaire asked respondents if there are any reasons why they might not want to take unused medications back to a pharmacy. If they responded yes, the questionnaire skipped to a question that included five specific response options. In addition to those response options, respondents were also given the opportunity to name reasons not listed on the question. Of the 438 respondents who answered, only 20.2% said yes. The pre-coded responses are listed in Table E5. The other reasons specified by the respondents are listed in Table E6.

Among the precoded categories, 20% of respondents mentioned potential misuse by others. Another 16% expressed concern that the pharmacy would resell them. The majority of respondents (66.2%) did not pick one of the precoded reasons, but specified a reason not listed. The most common reason specified by respondents is that returning the medications is a bother (*n* = 18). Eight people said they don't trust the pharmacy to dispose of them correctly, while seven said they don't have time to return them. Reasons in the other category include believing the pharmacists won't take them, the possibility they might be needed later, and the belief that taking them back just isn't important.

Table E4. Amount Respondent Would Pay for Safe Medication Disposal (*n* = 399)

Amount	# mentions
0	176
< $1.00	54
$1.00	67
$1.00–$2.00	13
$2.00	16
$3.00	6
$2.00–$3.00	4
$5.00	18
$10.00	11
$20.00	1
1–2%	4
3–5%	3
9–10%	4
Other	23

Table E5. Reason(s) Respondent Might Not Want to Return Unwanted Medications to the Pharmacy (*n* = 89)

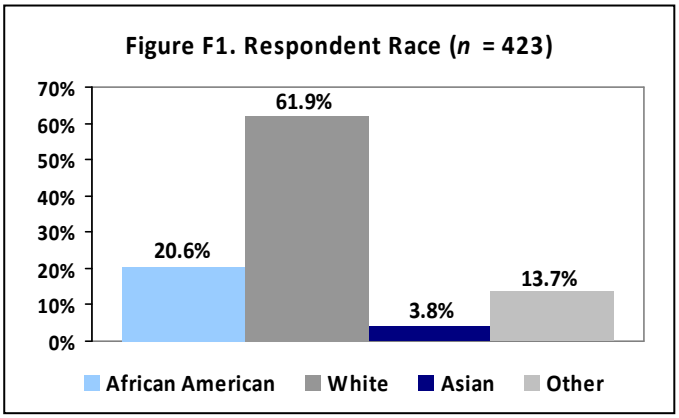
REASON	%
Privacy breach	6.5
Potential re-use by others	19.9
Resale by pharmacy	15.9
Do not have specific reasons	3.7
Not sure	3.9
Other	66.2

Table E6. Reason(s) for Not Returning Unused Medications

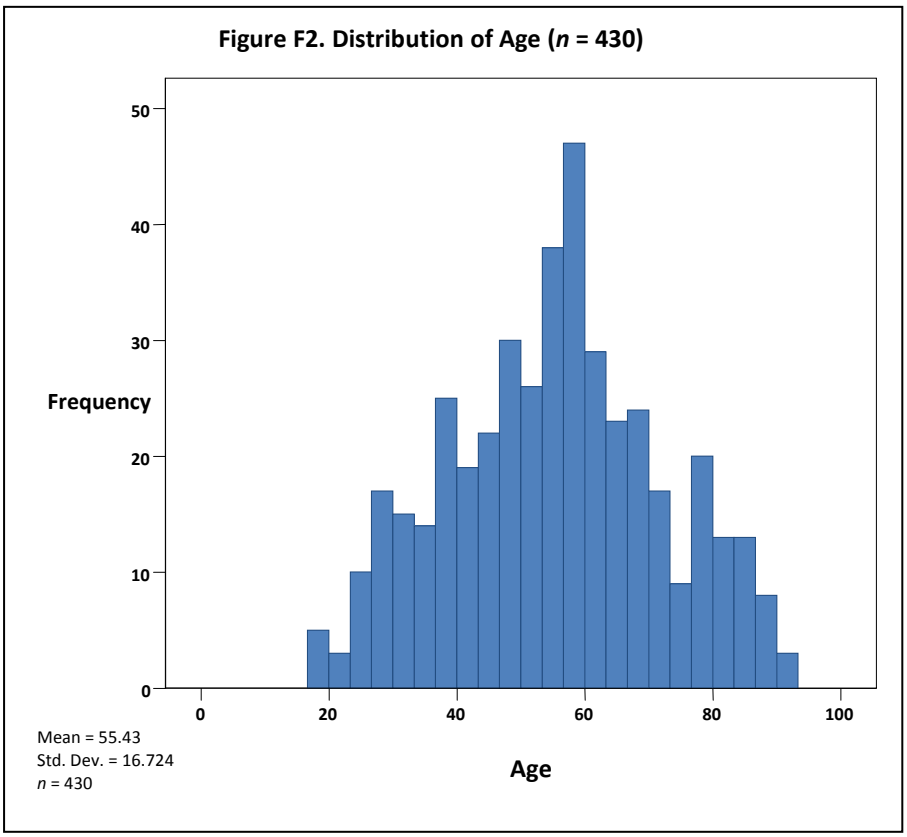
REASON	# mentions
Not convenient/a bother	18
Issues of trust	8
If payment is involved	3
Not able to	3
Availability of time	7
Location	2
Other	14

F. DEMOGRAPHICS

Of the 437 respondents who answered the question about gender, 278 (63.6%) are women. The majority of respondents are White (61.9%); another 20.6% identify as African American (Figure F1). The remaining 13.7% are either Native American, multiracial, or other. When those who identify as "other" were asked to specify their race, the majority (37 out of 44) said Hispanic/Latino, even though the questionnaire included a question asking specifically about Hispanic, Spanish, or Latino origin. The remaining six said they were either Asian, Middle Eastern, or other (there were two responses in each of these three categories).When asked specifically if they are of Hispanic, Spanish, or Latino origin, 13% (56/432) of respondents said yes.

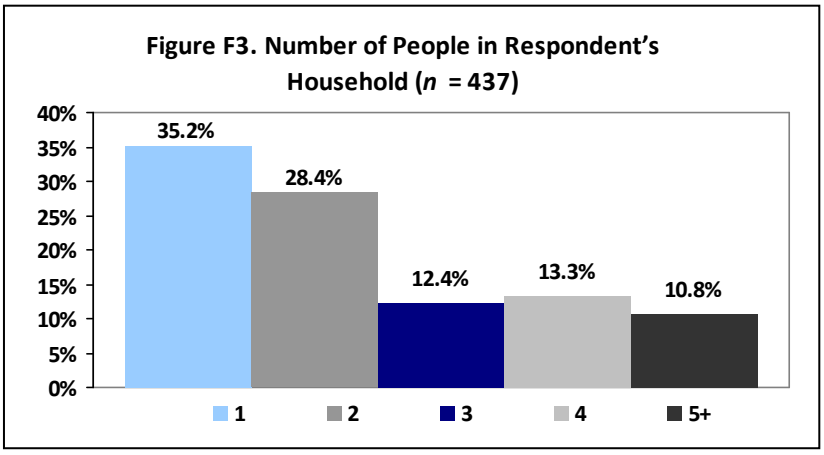


The youngest respondent in the sample is age 19; the oldest is 92. The mean age is 55.4. The distribution of the respondents' age is presented in Figure F2.



The last few demographic questions focused on household composition. The average household size (including the respondent) is 2.4. The distribution of household size is presented in Figure F3. Just over one-third of households have one member; 28.4% have two. The remaining 36.4% are fairly evenly spread over the remaining categories.

The majority of respondents (70.5%) said there are no children under the age of 18 living in their household (Figure F4). An additional 12.6% have one, while 10.8% have two. Only 6.2% have three or more children in the household.



Respondents who reported one child in the household were asked if he or she is responsible for providing care for that child—95% of the 55 respondents said yes. The 74 respondents with two or more children in the household were asked for how many children under the age of 18 they provide care. Their responses are shown in Figure F5.

When asked about the number of adults 65 and older living in the household, 64.5% of respondents said none. One quarter of respondents said one, while the remaining 9.6% said 2 or 3 (Figure F6).

Respondents in households with at least two adults and with one adult aged 65 or older were asked if they provided care for the older adult. Only 23 respondents received this question. Of those, six said yes and 17 said no. In households with 2 or more people aged 65 or older, respondents were asked for how many adults aged 65 or older they provided care; 33 respondents received this question. Their responses are shown in Figure F7.

Figure F4. Number of Children under Age 18 Living in Respondent's Household (*n* = 437)

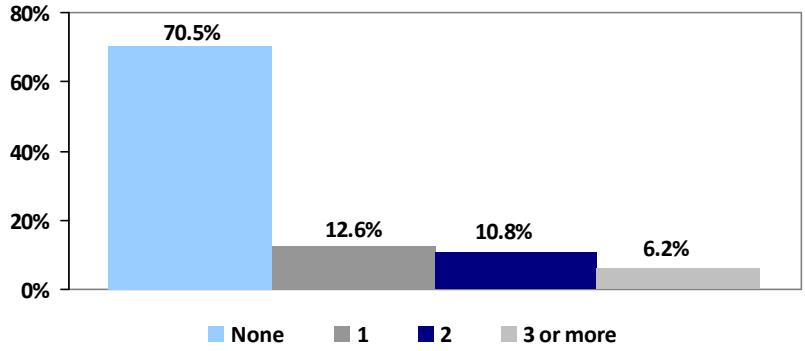


Figure F5. Number of Children under Age 18 for Which Respondent Provides Care (*n* = 74)

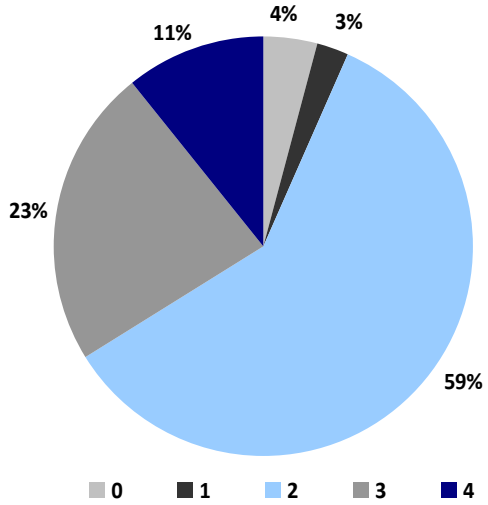


Figure F6. Number of Adults Age 65+ in Household (*n* = 433)

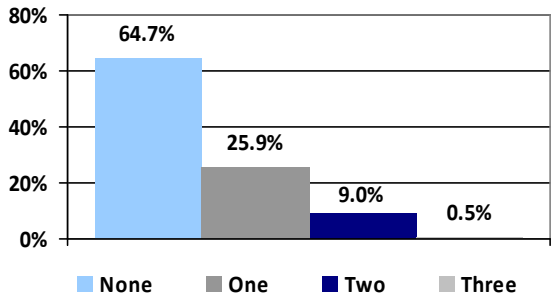
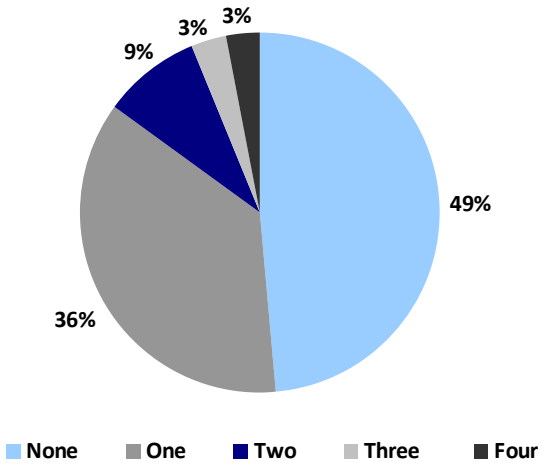


Figure F7. Number of Adults Age 65+ for Whom Respondent Provides Care (*n* = 23)



G. SUMMARY

The Survey Research Laboratory (SRL) at the University of Illinois at Chicago (UIC) conducted a random-digit-dial telephone survey of 445 Cook County residents in Illinois under the direction of Dr. Larry Danziger in the UIC Department of Pharmacy Practice; the study was funded by the Metropolitan Water Reclamation District of Greater Chicago. The purpose was to study the ways in which adult residents of Cook County dispose of their prescription and nonprescription medicines once they are done with them. This report describes the findings from the study.

The study involved both pretest and main study data collection. The phone interviews for the pretest were conducted from June 17, 2009, to July 2, 2009. We achieved 9 completed interviews out of a total sample of 136 cases, for a response rate of 12.1%. Phone interviewing for the main study began on August 6, 2009, and ended on November 6, 2009, for a total data collection period of approximately 13 weeks. We completed 445 interviews out of a starting sample of 3,954 cases, for a response rate of 18.9%.

The survey determined that 80.5 and 92.4% of respondents had prescription and non-prescription medications stored in their homes. On average, respondents have 4.4 different prescription medications and 5.5 different nonprescription medications in their homes or in their possession. Approximately 20% of respondents in this survey had between five and seven prescription and non-prescription medications in their household. The mean number of different prescription medications taken on a regular basis is 2.9, while the number of nonprescription medications taken is 1.8. The majority of respondents, over 58%, store their medications in the bathroom medicine cabinet or in the kitchen. The next most common places are the respondent's purse or briefcase (33.7%) and the bedroom (30.5%).

The most commonly reported medications that respondents had in their possession were over-the-counter pain medications (82.5%), vitamins (76.9%), and cold, cough or flu medications (70.3%). Other medications that were found to be in the possession of at least 25% of respondents included: antacids, prescription pain medications, blood pressure medications, antibiotics, herbal remedies, and cholesterol lowering medications. When asked about leftover medications and expired medications, about 23% of respondents said they still have prescription medications that have expired, while 28.6% said they have nonprescription medications that have expired, and 37.3% of respondents said they have medications left-over from a previous illness that had not yet expired. On average respondents had 3.2 unexpired prescription medications left over from a prior illness, 3.0 expired prescription medications, and 2.7 expired nonprescription drugs.

Only 19.1% of respondents reported ever having received any information about how to safely dispose of medications. Of those respondents who did report having received information on medication disposal, television and other media was cited most often as the source of the information followed by health professionals, local government, or pharmacies. The method of disposal most reported to be used by respondents was to throw it away in the household garbage (59%), followed by flushing the medication down the toilet or pouring it down the sink (31.3%). Respondents also reported taking their unused medications to pharmacies (10.7%) and physicians (6%) , while 17.1% reported never disposing of unused or expired medications. A higher percentage of respondents who received medication disposal information reported taking the medications to a hazardous waste collection facility and to a pharmacy (24.1% and 28.6%, respectively), as compared to those who never got such information (5.1% and 6.8%, respectively).

In terms of willingness to drop off unused medications at a convenient location, 70.4% of respondents indicated that they were very willing, while 19% indicated that they were somewhat willing. In terms of the most desired locations for dropping off unused medications the nearest pharmacy was the most preferable followed by a medical facility, a police station, and a household hazardous waste collection facility.

APPENDIX A. SURVEY QUESTIONNAIRE

Medication Disposal Survey

>intro<
We would like to start by asking you about prescription medicines used by you personally, or by someone in your household for whom you are the caregiver, such as a child or an elderly person. To remind you, we are asking about medications available in any form such as tablet, capsule, cream, or liquid.

>Q1_rand<
[if Q1_rand eq <1> go to Q1_1]
[if Q1_rand eq <2> go to Q1_2]

>Q1_1<
Do you currently have any medications, stored at home or at any other place, that were **prescribed by a doctor**?

(To remind you, for all questions in which we ask about medications you have, please include medications used by you personally, or by someone in your household for whom you provide care.)

<1> Yes [go to Q1b]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q1_2<
Do you currently have any medications, stored at home or at any other place, that were **prescribed by a doctor**, or do you not have any?

(To remind you, for all questions in which we ask about medications you have, please include medications used by you personally, or by someone in your household for whom you provide care.)

<1> Have prescription medications
<2> Do not have any prescription medications [go to Q1c]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q1b<
How many different prescription medications do you currently have?

Please count the total number of different medications, not the total number of doses in the medications.

<1-30> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED
[go to Q7]

>Q1c<
When did you last have any prescription medications stored at home or at any other place?

<1> Less than 1 month ago
<2> Between 1 month to less than 6 months ago
<3> Between 6 months to less than 1 year ago
<4> Between 1 year to less than 2 years ago
<5> Between 2 years to less than 5 years ago
<6> 5 years or more
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)

<98> DON'T KNOW
<99> REFUSED

>Q7<
Currently, how many different types of prescription medications do you, plus anyone in your household for whom you provide care, **take** on a regular basis, such as daily or weekly?

<0-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q4_rand<
[if Q1_rand eq <1> go to Q4_1]
[if Q1_rand eq <2> go to Q4_2]

>Q4_1<
Do you have any prescription medications that are past their expiration date stored in your home or in any other place?

<1> Yes [go to Q4a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q10]

>Q4_2<
Do you have any prescription medications that are past their expiration date stored in your home or in any other place, or do you not have any?

<1> Have
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q10]

>Q4a<
How many different prescription medications do you have that have expired?

<1-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q10<
Of all the different prescription medications you now have in your home or somewhere else, how many do you estimate will be leftover six months from now?

<1> All
<2> Some
<3> None
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q2_intro<
Next, we would like to ask you about **non-prescription** medicines used by you personally, or by someone in your household for whom you are the caregiver, such as a child or an elderly person. This includes medicines purchased over-the-counter in a drug store, such as cold or cough, or pain medications. It also includes herbal remedies and vitamins. To remind you, we are asking about non-prescription medications available in any form such as tablet, capsule, cream, or liquid.

>Q2_rand<
[if Q1_rand eq <1> go to Q2_1]
[if Q1_rand eq <2> go to Q2_2]

>Q2_1<
Do you currently have any **non-prescription medications**, stored at home or at any other place, including those purchased over-the-counter in a drug store, such as medications for cold or cough, or pain medications?

<1> Yes [go to Q2b]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q2c]

>Q2_2<
Do you currently have any **non-prescription medications** stored at home or at any other place, including those purchased over-the-counter in a drug store, such as medications for cold or cough, or pain medications, or do you not have any?

<1> Have non-prescription medications [goto Q2b]
<2> Do not have any non-prescription medications
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q2c]

>Q2b<
About how many different types of over-the-counter or non-prescription medications do you currently have, stored at home or at any other place?

Please count the total number of different medications, not the total number of doses in all the medications.

<1> Medication
<2-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED
[go to Q8]

>Q2c<
When did you last have any over-the-counter or non-prescription medications stored at home or at any other place?

<1> Less than 1 month ago
<2> Between 1 month to less than 6 months ago
<3> Between 6 months to less than 1 year ago
<4> Between 1 year to less than 2 years ago
<5> Between 2 years to less than 5 years ago
<6> 5 years or more
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q8<
Currently, how many different types of non-prescription medications do you, plus anyone in your household for whom you provide care, **take** on a regular basis, such as daily or weekly? To remind you, 'medications' also includes herbal remedies and vitamins.

<0-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q5_rand<
[if Q1_rand eq <1> go to Q5_1]
[if Q1_rand eq <2> go to Q5_2]

>Q5_1<
Do you have any non-prescription or over-the-counter medications that you think are past their expiration date stored in your home or in any other place?

<1> Yes [go to Q5a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Qy_intro]

>Q5_2<
Do you have any non-prescription or over-the-counter medications that you think are past their expiration date stored in your home or in any other place, or do you not have any?

<1> Have [go to Q5a]
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Qy_intro]

>Q5a<
How many different non-prescription medications do you have that have expired?

<1-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Qy_intro<
The next questions that I will be asking are about all medications—prescription and non-prescription—used by you personally, or by someone in your household for whom you are the caregiver, such as a child or an elderly person. To remind you, we are asking about medications available in any form such as tablet, capsule, cream, or liquid.

>Q3intro<
I am going to read a list of places where people might store medications. Please tell me where you store your medications, including prescription and non-prescription ones.

>Q3a<
Do you store your medications, including those prescribed by a doctor and non-prescription ones, in a bathroom medicine cabinet?

<1> Yes [go to Q3a1]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q3b]

>Q3a1<
Is the bathroom medicine cabinet locked?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q3b<
Do you store your medications, including those prescribed by a doctor and non-prescription ones, in a bathroom closet?

<1> Yes [go to Q3b1]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q3c]

>Q3b1<
Is the bathroom closet locked?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q3c<
Do you store your medications, including those prescribed by a doctor and non-prescription ones, in the kitchen?

<1> Yes [go to Q3c1]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q3d]

>Q3c1<
Is that kitchen cabinet locked?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q3d<
Do you store your medications, including those prescribed by a doctor and non-prescription ones, in the bedroom?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q3e<
(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

In the car?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)

<8> DON'T KNOW
<9> REFUSED

>Q3f<
(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

In a purse or briefcase?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q3g<
(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

At your office or workplace?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q3h<
Do you store your medications, including those prescribed by a doctor and non-prescription ones, at any other place?

<1> Yes (SPECIFY)
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q6_rand<
[if Q1_rand eq <1> go to Q6_1]
[if Q1_rand eq <2> go to Q6_2]

>Q6_1<
Do you have any prescription or non-prescription medications that have not yet expired left over from a prior illness?

(IF NECESSARY): We are asking about prescription or non-prescription medications that have not yet expired but are no longer being taken.

<1> Yes [go to Q6a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED
[go to Q9]

>Q6_2<
Do you have any prescription or non-prescription medications that have not yet expired left over from a prior illness or do you not have any?

<1> Have [go to Q6a]
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q9]

>Q6a<
How many different medications do you have?

Please count the total number of different medications, not the total number of doses in the medications.

<1-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q6b< [allow 50]
Why were they not taken or not finished?

>Q9<
I am going to read to you a list of medications that people may have. Which of these prescription or non-prescription medications do you currently have stored in your house or in any other place?

(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

1 Antibiotics
2 Blood pressure medications other than water pills
3 Cholesterol lowering medications
4 Blood thinners
5 Diuretics
6 Diabetes medications
7 Hormone replacements
8 Oral contraceptives
9 Prescription pain medications
10 Anti-seizure medications
11 Cold, cough, or flu medications
12 Over-the-counter pain medications
13 Antacids
14 Vitamins
15 Herbal remedies
16 Any other medications? (SPECIFY)

>Q11_rand<
[if Q1_rand eq <1> go to Q11_1]
[if Q1_rand eq <2> go to Q11_2]

>Q11_1<
Do you have any prescription or non-prescription medications in the house or somewhere else from someone no longer living in your household?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q15]

>Q11_2<
Do you have any prescription or non-prescription medications in the house or somewhere else from someone no longer living in your household, or do you not have any?

<1> Have
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q15<
What would you estimate is the longest time a container of prescription or non-prescription medication has been stored in your home or some other place past its expiration date?

<1> Less than 1 year
<2> Between 1 year to less than 2 years
<3> Between 2 years to less than 5 years
<4> Between 5 years to less than 10 years
<5> 10 years or more
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q16_intro<
We are interested in knowing how people get rid of or dispose of medications, and these next questions are about disposal.

>Q16<
I am going to read a list of ways to get rid of or dispose of unused or expired medications. Please tell me whether or not you or someone else in your house disposes of unused or expired medications in that way. Do you or does someone in your house...
(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

1 Throw away unused or expired medications in household garbage?
2 Flush unused or expired medications down the toilet or sink?
3 Take unused or expired medications to a hazardous waste collection facility or collection event?
4 Give unused or expired medications to someone else who would use them?
5 Return unused or expired medications to a pharmacy?
6 Return unused or expired medications to a physician?
7 Never dispose of unused or expired medications?
8 Dispose of unused or expired medications in some other way? (please specify in what way is that?)
9 DON'T KNOW WHAT TO DO WITH SUCH MEDICATIONS
10 DON'T KNOW HOW WE DISPOSE OF SUCH MEDICATIONS

>Q17_rand<
[if Q1_rand eq <1> go to Q17_1]
[if Q1_rand eq <2> go to Q17_2]

>Q17_1<
Do you think prescription medication should be disposed of differently than over-the-counter or non-prescription medication?

<1> Yes [go to Q18]
<2> No [go to Q20]
<3> Sometimes [go to Q20a]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

@ [go to Q20]

>Q17_2<
Do you think prescription medication should always, sometimes, or never be disposed of in a different way than non-prescription medication?

<1> Always [go to Q18]
<2> Sometimes [go to Q20a]
<3> Never [go to Q20]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

@ [go to Q20]

>Q18<
In your opinion, what is the best way to properly dispose of unwanted prescription medications?

<1> Specify
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q19<
In your opinion, what is the best way to properly dispose of unwanted non-prescription or over-the-counter medications?

<1> Specify
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q20a]

>Q20<
In your opinion, what is the best way to properly dispose of unwanted prescription or non-prescription medications?

<1> Specify
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q20a<
Do you think that people should or should not flush unwanted prescription or non-prescription medications down the toilet or the sink?

<1> Yes, should
<2> No, should not [go to Q20a_1a]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED
[if 17_1 = 3 or 17_2 = 2, go to 20b, else go to q21_rand]

>Q20a_1a<
Why do you say that people should not flush unwanted medications?

<1> Specify
<8> DON'T KNOW
<9> REFUSED

[if 17_1 = 3 or 17_2 = 2, go to 20b, else go to q21_rand]

>Q20b<
Why do you think prescription medications should be disposed of differently than over-the-counter or non-prescription medications?

<1> Specify
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q21_rand<
[if Q1_rand eq <1> go to Q21_1]
[if Q1_rand eq <2> go to Q21_2]

>Q21_1<
Have you ever received any information about how to dispose of prescription or non-prescription medication?

<1> Yes [go to Q21a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)

<8> DON'T KNOW
<9> REFUSED
[go to Q22]

>Q21_2<
Have you ever received any information about how to dispose of prescription or non-prescription medication, or have you never received such information?

<1> Received [go to Q21a]
<2> Never received
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q22]

>Q21a<
Where did you receive the information or who provided you with it?

<1> Specify
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q22<
If you were interested in learning more about how to properly dispose of prescription and non-prescription medication, where would you go to get that information?

<1> Specify
<2> NOT INTERESTED
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q23_rand<
[if Q1_rand eq <1> go to Q23_1]
[if Q1_rand eq <2> go to Q23_2]

>Q23_1<
Have you read, heard, or seen any news stories about pharmaceuticals being detected in public water sources or water supplies?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q25]

>Q23_2<
Have you read, heard, or seen any news stories about pharmaceuticals being detected in public water sources or water supplies, or have you never read, heard or seen such news stories?

<1> Read, heard, or seen
<2> Never read, heard, or seen
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q25<
If there was a convenient location where you could drop off unused or expired medications for disposal, how willing would you be to use this method to get rid of such medications?

Would you be...

<1> Very willing,
<2> Somewhat willing,
<3> Neither willing nor unwilling,
<4> Somewhat unwilling, [go to Q25a]
<5> Very unwilling, or [go to Q25a]
<6> Are you not sure? [go to Q27]
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

[go to Q26]

>Q25a<
Why do you say that you are unwilling to do so?

<1> Specify
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q26<
[form template]
[if Q25 eq <1> or Q25 eq <2> or Q25 eq <3>]
From the list I am going to read, please tell me whether or not you would be likely to take your unwanted medications to that location for proper disposal. Would you take them...
[else]
[if Q25 eq <4>]
From the list I am going to read, please tell me whether or not you would be willing to take your unwanted medications to that location for proper disposal. Would you take them...
[else]
[if Q25 eq <5>]
From the list I am going to read, please tell me whether or not you would be willing to take your unwanted medications to that location for proper disposal. Would you take them...
[end if]

(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

1 To the nearest pharmacy?
2 To a doctor's office, clinic or hospital?
3 To a drop-off box located inside a police station or sheriff's office?
4 To a household hazardous waste collection facility in Chicago?
5 To some other place? (SPECIFY)

>Q27<
How much extra money per prescription would you be willing to pay if that money would be used to support a safe system to collect and properly dispose of medications?

<1> Specify
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q28<
What do you think might be the consequences of keeping unused or expired medications in your home?

<1> Specify

<2> NONE / NO CONSEQUENCES
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q29_1<
Are there any reasons why you might not want to take your unused or expired medications back to a pharmacy for proper disposal?

<1> Yes [go to Q29a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q30intro]

>Q29a<
Can you tell me what those reasons are?

(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

1 Privacy breach
2 Potential re-use by others
3 Resale by pharmacy
4 I do not have specific reasons
5 I am not sure
6 Other (SPECIFY)

>Q30intro<
I am going to read a list of methods that could be used to get rid of medications. For each method, please tell me how confident you are that it is a safe way to dispose of unused or expired medications.

>Q30_1<
How confident are you that a secure lockbox with a method to destroy medications located behind a pharmacy counter is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q30_2<
Next, how confident are you that a secure lockbox transported by a law enforcement officer is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q30_3<
How confident are you that a secure lockbox in a doctor's office or hospital is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q30_4<
(How confident are you that)

a mail back program similar to the service provided for ink cartridges?

(is a safe way to dispose of unused or expired medications?)

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q30_5<
(How confident are you that)

a lockbox similar to those for used needles and other medical waste, that can be dropped off at your doctor's office or a pharmacy for disposal?

(is a safe way to dispose of unused or expired medications?)

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q30_6<
How confident are you that a neighborhood collection day overseen by the Environmental Protection Agency is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q30_7<
Is there any other method that you are confident is safe?

<1> Yes (SPECIFY)
<2> No

<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31intro<
Next, please tell me whose responsibility you think it should be to provide a safe way for people to dispose of unused or expired medications.

>Q31_1<
Is it the responsibility of the pharmaceutical companies that manufacture the medications to provide a safe way for people to dispose of unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31_2<
Is it the responsibility of the pharmacies that dispense the medications to provide a safe way for people to dispose of unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31_3<
Is it the responsibility of the doctors and other health care professionals who prescribe the medications to provide a safe way for people to dispose of unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31_4<
Is it the responsibility of water or wastewater treatment agencies?

(to provide a safe way for people to dispose of unused or expired medications?)

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31_5<
Is it the responsibility of the Environmental Protection Agency?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31_6<
Is it the responsibility of the Department of Public Health?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31_7<
Is it the responsibility of the police or sheriff's department?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31_8<
Is it your responsibility to find a safe way to dispose of your unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q31_9<
Is it someone else's responsibility to find a safe way for people to dispose of unused or expired medications?

<1> Yes (SPECIFY)
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>intro2<
This is our last set of questions.

>Q12_rand<
[if Q1_rand eq <1> go to Q12_1]
[if Q1_rand eq <2> go to Q12_2]

>Q12_1<
Have you ever used a medication that a doctor prescribed for someone other than you?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q14_rand]

>Q12_2<
Have you ever used a medication that a doctor prescribed for someone other than you, or have you never used such a medication?

<1> Used
<2> Never used
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q14_rand<
[if Q1_rand eq <1> go to Q14_1]
[if Q1_rand eq <2> go to Q14_2]

>Q14_1<
Have you ever given anyone else your prescription medication to use?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)

<8> DON'T KNOW
<9> REFUSED

[go to Qx][#go to Q15]

>Q14_2<
Have you ever given anyone else your prescription medication to use, or have you never done that?

<1> Given
<2> Never given
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Qx<
Are you currently covered by some form of health insurance or health plan?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to skip5]

>Qy<
[Ask only if response to health insurance question is "yes"]
Is prescription drug coverage included as part of your current health insurance or health plan?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE
<8> DON'T KNOW
<9> REFUSED

[go to Q32]

>Q32<
Do you primarily get your prescription medications. . .

<1> From a local retail pharmacy by going into the store,
<2> From the drive-thru window of a local retail pharmacy,
<3> From a mail order pharmacy,
<4> From a hospital or clinic pharmacy, or
<5> In some other way? (SPECIFY)[SPECIFY]
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q24<
Does your household primarily use bottled water or tap water for drinking?

<1> Bottled [go to Q24a]
<2> Unfiltered tap
<3> Filtered tap
<4> More than one
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q41]

>Q24a<
Why does your household primarily use bottled water for drinking?

<1> Specify

<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q41<
During the last 30 days, how many times did you buy something that helps to protect the environment?

(IF NECESSARY): Products that are environmentally safe or that are made from recycled materials.

<0> Never
<1-30> Times
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q33<
What is your year of birth?

<1900 - 1991>
<9997> NO CODED RESPONSE APPLICABLE (SPECIFY)
<9998> DON'T KNOW
<9999> REFUSED

>Q34<
What is your zip code?

<00000 - 99994>
<99997> NO CODED RESPONSE APPLICABLE (SPECIFY)
<99998> DON'T KNOW
<99999> REFUSED

>Q35<
(ASK ONLY IF NECESSARY)
What is your gender?

<1> Male
<2> Female
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q36<
Are you of Hispanic, Spanish, or Latino origin?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

>Q37<
With what racial group do you most closely identify?
Would you say...

<1> African American or Black,
<2> White,
<3> Asian or Pacific Islander,
<4> Native American or Aleut,
<5> Multiracial or Biracial, or
<6> Some other racial group? (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q38<
Including yourself, how many people are currently living in your household?

<1-20> People
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q39<
How many children less than 18 years old are living in your household?

<0> Children [go to Q40]
<1-20> Children
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

[##ASK IF RESPONSE TO Q39 IS "1"]
>Q39xx<
Are you responsible for providing care for this child less than 18 years old?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to Q40]

[##ASK IF RESPONSE TO Q39 IS BETWEEN 2-20]
>Q39yy<
For how many of these children less than 18 years old do you provide care?

<0-20> Children
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>Q40<
Including yourself, how many adults who are more than 65 years old are living in your household?

<0> People [go to PC1]
<1-20> People
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

[##ASK IF RESPONSE TO Q40 IS "1"]
>Q40xx<
Are you responsible for providing care for this adult living in your household?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to PC1]

[##ASK IF RESPONSE TO Q40 IS BETWEEN 2-20]
>Q40yy<
For how many of these adults living in your household do you provide care? Please do not include yourself.

<0-20> Adults
<97> NO CODED RESPONSE APPLICABLE (SPECIFY)
<98> DON'T KNOW
<99> REFUSED

>PC1<
Thank you very much for sharing your opinions with me today. I really appreciate it. If you have any questions about this interview you may call the project co-ordinator for this study. Would you like her number?

<1> Yes [go to PC2]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to OPRS1]

>PC2< [no data]
Her name is Sowmya Anand and she can be reached at (217)333-2219 during business hours Monday through Friday.

>OPRS1<
If you have any concerns about this study, you may call the University of Illinois at Chicago Office for Protection of Research Subjects. Would you like this number?

<1> Yes [go to OPRS2]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY)
<8> DON'T KNOW
<9> REFUSED

[go to thnks]
>OPRS2< [no data]
That number is 1-866-789-6215 (toll-free).

PRESS 'ENTER' TO CONTINUE.

>thnks<
Those are all of the questions that I have.
Thank you for your participation!

APPENDIX B. OPEN-ENDED RESPONSES

Q3h. Do you store your medications, including those prescribed by a doctor and nonprescription ones, at any other place? (SPECIFY)

REFRIGERATOR (17 mentions)
- Refrigerator *(7 mentions)*
- In the refrigerator *(2 mentions)*
- En el refrigerador como el Pepto-Bismol. [In the refrigerator like Pepto-Bismol.]
- I store some in the refrigerator.
- In the fridge.
- In the refrigerator my husband takes insulin
- Inside the refrigerator or on top the refrigerator.
- Refrigerador. [Refrigerator.]
- Refrigerator, it's insulin
- Refrigerator sometimes.

PLACE IN KITCHEN (2 mentions)
- I store a first aid kit in my kitchen where I put my broom and mop.
- Kitchen table.
- On top of the fridge.

PLACE IN BATHROOM (11 mentions)
- Bathroom drawer. *(3 mentions)*
- Bathroom drawer in bathroom.
- I have another cabinet in the bathroom other then the medicine cabinet but it is not a closet. It is hanging on the wall.
- In a bathroom cabinet that is not a medicine cabinet
- Just in the bathroom.
- On top of the toilet tank.
- The bathroom drawer of the home office
- Under the sink in the bathroom and it is not locked.
- We have a drawer in our bathroom that isn't a medicine cabinet. It's just a drawer in the sink/countertop.

PLACE IN BEDROOM (5 mentions)
- Guest bedroom
- I have children's Tylenol in my child's bedroom.
- If you consider cough drops, I do have those in my bedroom and pockets
- In a drawer in the bedroom.
- In the top drawer in my bedroom

LINEN/HALL (18 mentions)
- Linen closet *(2 mentions)*
- A closet just outside the bathroom.
- A linen closet in a hallway
- A linen closet in the hallway, it is not locked.
- En el closet en un cajon del pasillo. [In the closet in a drawer off the walkway.]

- Hall closet.
- Hallway closet, desk in room
- Hallway linen cabinet that is not locked
- Linen closet in the hallway on the top shelf.
- I keep them in a hall closet on the top shelf. The closet does not lock.
- I store some in a hall closet that is unlocked
- In a hall closet, top shelf and it's locked.
- In a plastic enclosure in my hall closet
- Linen closet that is not in the bathroom.
- New bottles that I haven't opened are in my linen closet.
- The linen closet.
- Yes, in our linen closet in the hall.

PANTRY (1 mention)
- Pantry

LIVING ROOM (TV ROOM/DEN/FAMILY ROOM) (7 mentions)
- A cabinet on the first floor of my house right off the living room in a sunroom.
- En un closet en la sala no esta bajo llavo pero esta en altura. [In a closet in the living room, it is not locked but it is high up.]
- In a basket in the living room.
- In my wheelchair in the living room.
- In the den.
- My TV room
- They are stored in a large purse looking thing, on the floor, in the family room.

DINING ROOM (4 mentions)
- Dining room a storage plastic bin.
- Dining room table.
- In a drawer in my dining room.
- In the dining area and in bathroom drawer.

PURSE/BACKPACK/POCKET (4 mentions)
- In a backpack that I carry with me during the day.
- In my pocket
- My pocket. I carry a pillbox.
- Purse

OTHER (14 mentions)
- A safe.
- Backroom medicine cabinet
- Basement
- En el closet del medio en la tabla mero arriba. [In the media closet on the top shelf.]
- Front door, coat closet.
- Home office cabinet
- I keep some in a suitcase.
- In a room, it's a spare room.
- Laundry room in cabinet because it's cool and some expired ones in the garage.
- My kids keep them at school. The nurse has some stuff

- On the coffee table in the front room.
- Sometimes I carry it in an envelope.
- The porch is my office in the home.
- Un lugar especial para guardar medicamentos asi los ninos no lo toman. [A special place to save medication that way the children do not take them.]

Q6b. Why were they not taken or not finished? (SPECIFY)

SIDE EFFECTS (9 mentions)

- Adverse reactions, and another was a use it as long as you need it type of medication.
- Because they make me sleepy.
- Medical reactions or other things.
- My father developed an allergic reaction to them.
- One made me sick and the other one the dose changed.
- Some were allergic reactions. Some was excessive ordering by the Physician.
- They switched me off of them they made me sick.
- This prescription "killer" pain killer, that I'm kind of allergic, I don't like using the stuff unless I really need to.
- Variety of reasons including disagreeable side effects, illness had run its course, no longer needed.

NOT NECESSARY TO FINISH/TAKE AS NEEDED (67 mentions)

- I didn't need them. *(2 mentions)*
- Not needed. *(2 mentions)*
- They were no longer needed. *(2 mentions)*
- Actually some were antibiotics and I was on my second prescription of them and the pain pills, I filled the prescription but I really didn't need to take them.
- Algunos porque eran en caso de nausia o dolor y otros de la presion alta. [Some because they where in case of nausea or pain and others for high blood pressure.]
- Because I did not need them anymore.
- Because I did not require the pain medication any longer.
- Because it was a pain medicine and it made me woozy and I had to stop taking it and started taking Tylenol.
- Because it was pain medication and I didn't need it.
- Because it was taken only as needed.
- Because they were take as needed for pain and one was for indigestion. My son had like, they call, it's something with their face, it looks like they're freckles but they're white freckles.
- Because we don't need them.
- Because we use them as we need them.
- Dice que la use una semana y le quedo un poco o cuando son solo para dolor. [Told to use it for a week and I was left with a little bit, or only when they are for pain.]
- Didn't need them.
- Didn't need them anymore.
- Didn't need them. They were painkillers.
- Didn't need to finish them.
- Didn't need to use them.
- I didn't need 'em anymore.
- I didn't need it. It was for pain.
- I didn't need them any more.
- I don't know why they weren't taken. They were pain relievers and there was no more pain.
- I guess too much of it. I only needed it for two days. I just remembered I have Heparin in my fridge (pre-drawn) I had DVT—deep vein thrombosis—and then I was told to stop using it after I used one injection.

- I keep it in case I have really bad pain.
- I stopped using them. They either didn't work, stopped using, well that I had them for surgery so I stopped taking them.
- If something happened I'd have it around.
- It came with two tubes and I only needed a little bit.
- It is pain medicine. Didn't need it anymore.
- It said take as needed.
- It was in case of pain, from the dentist, and it was no longer needed. Also medication for acid reflux.
- It was pain medicine and it wasn't painful anymore.
- It was some pain medication that we did not need to use unless needed.
- It's only for pain after surgery.
- It's a pain pill, I never took it in the first place, but I thought
- It's used as needed.
- Just didn't need to finish them.
- Just never took them, never needed them.
- Most of them were for pain. (more?) Rash.
- My son received a prescription for Amoxicillin and it had one refill. I refilled it just in case he would need it again and then I would administer it.
- No need to take them. For pain management with codeine it was not necessary to continue the course of medication.
- One was a pain medication and wasn't needed anymore.
- One was pain medication, didn't need it. One was prescribed by a doctor and i didn't think the diagnosis was correct.
- One was post surgery narcotic/analgesic. The other was a sleeping aid given prior to surgery.
- Only taken as needed for pain.
- Prescribed as need.
- Porque no la necesite era para el dolor pero no la use porque me daba constipacion. [Because I didn't need it, it was for pain, but I did not use it because it gave constipation]
- Porque ya no les necesite. [Because I no longer needed them.]
- The pain stopped and I found alternative remedies for insomnia.
- The pain was relieved before I could finish. I didn't need to take them anymore.
- The quantity purchased was larger than the quantity required.
- They are left over. Only take for a few days.
- They are pain relievers and I didn't need to take them.
- They are pain relievers. We didn't need them anymore.
- They were not needed.
- They were still good at the time and I didn't need them.
- They weren't necessary (prescription pain meds).
- They weren't needed. It was pain medication and not needed.
- They're painkillers and I didn't need them anymore.
- They're painkillers, you took as needed.
- Two are for a specific remedy, it was a no longer needed pain medication.
- Ummm because it wasn't a need for it they were more like a muscle relaxer or pain medication and i didn't need it.
- Well one of them was an antibiotic and I didn't need to finish the whole bottle so I didn't and the other are just over-the-counter cold medicine.
- Were being taken as needed and the need has passed.
- Weren't necessary anymore.

FELT BETTER/QUIT/GOT BETTER (40 mentions)

- I felt better. *(2 mentions)*
- I got better. *(2 mentions)*

- I don't remember. I felt better, maybe.
- After it worked I didn't need it no more.
- Because I felt better.
- Because I got healthy.
- Because the symptoms ceased.
- Felt better.
- Felt better and quit taking them.
- Forgot and probably feeling better.
- Got better.
- I don't know. It was taken for the course, it was for my son. It was taken for the course and there was a little left over.
- I don't take anything any longer than I have too.
- I got cured of the condition and the physician gave me an extra dose that I never used.
- I guess the cold went away.
- I had an eardrum that ruptured, and several of the medications were for dizziness and nausea. When I was done with those symptoms, there was leftover medication.
- I had one for allergies, and when the allergies died down I felt no need to take it. It didn't flare up so I stopped taking it.
- I was no longer experiencing the symptoms.
- Infection has cleared up. No longer needed.
- Just we didn't use them. It just wasn't used during the duration of the illness.
- Me termine un y el otro se quedo sin empezar. [I finished one and the other was left unopened]
- My symptoms went away.
- No se terminaron los tratamientos. [The treatments were not completed.]
- Once I got well, I didn't take them anymore.
- Once you get well there is no reason to take the rest of the medication.
- One of them was a sleeping thing and I don't need it anymore but I still have it.
- Overcame the illness.
- Por que le dieron determinado periodo para tomarlos y sobraron esa medicinas. [Because they gave him a given period of time to take them and this was left over medication.]
- Porque paro la enfermedad. [Because the illness ended.]
- Probably just got better and didn't need to finish them.
- Sometimes we are meant to take them the course of the illness but when I get better sometimes I stop taking them.
- Symptoms relieved.
- The illness was over.
- The symptoms I had disappeared and I didn't have the problem anymore so I didn't have to use it.
- They were for our cats, and they got to a certain point where they didn't need them anymore.
- They were taken for a cold and the symptoms subsided.
- Various reasons. Maybe the prescription was changed after a few days. The condition got better as in pain or allergy so that's why they left over.
- We got better.

DID NOT WORK/INEFFECTIVE (3 mentions)

- I had burns on my legs from Chemo and they tried 3 different types of cream to get rid of it and most of them did not work. So I have a lot of this trial medications left over.
- The prescription was changed, so I didn't finish using the first. This was because the first prescription was ineffective.
- They didn't work for the pain. I had carpal tunnel and it did nothing.

PATIENT PASSED AWAY (3 mentions)

- Because he died.
- My husband died and they were his.

- My mother passed away and they were hers.

MISSED DOSES (2 mentions)
- Some of them I missed a dose, and some because the doctor prescribed and I wasn't sure I wanted to take them.
- Sometimes I missed doses.

PRESCRIPTION OR DOSE CHANGE (12 mentions)
- Because the doctor changed the prescription.
- Because the doctor switched medication.
- Different diagnosis.
- I had an increase in dosage.
- I think because the doctor told me that I don't need to take Rx anymore.
- I was told to stop by doctor.
- One is an antibiotic which was changed. The other is one the doctor said to quit taking, and the third was one I was told to quit taking by the MD.
- The doctor changed me to something else.
- The doctor changed the prescription. I just saved them in case to come back to them.
- They were discontinued.
- They were not finished because the doctor told me to discontinue and gave me something different.
- Um, I believe it was an antibiotic pack that the doctor said wasn't necessary.

NOT APPLICABLE (refers to OTC medications) (12 mentions)
- Allergy type medications, so we always have them on hand.
- Because some of the meds are used only on occasion. I keep things on hand. If there were some reason or another, to keep it, we did. Some don't expire and I keep them because I might need them.
- Buy cough syrup and took it until I wasn't sick anymore. In case I need it again.
- It was like a large package and they never finished and sit in the closet .
- One was cold, so you take as much as you like. And the vaginal I didn't use, I bought it but I never, I was better before I used it.
- Saving them for a good time to use them.
- They were a bulk buy. So the kids would be sick and we'd buy Tylenol and Motrin but they'd only take Tylenol.
- They're for cold and cough.
- They're just cold medications.
- Two of them are cough medicines and the other one is just a muscle relaxer that was for a back injury.
- Usually they are just for headaches. My grandmother keeps her current medicines in her purse.
- Well some are just for colds, some are vitamins sometimes I take them and sometimes I don't. Sample I never used & most are vitamins and cold meds and one sample from the doctor Most of what I have is OTC and the rest are vitamins.

OTHER (4 mentions)
- Do not know belong to my wife.
- I wanted to keep track of what the prescription was.
- Just did not finish them.
- Porque fue durante el embarazo. [Because it was during pregnancy.]

Item Q9@16. I am going to read to you a list of medications that people may have. Which of these prescription or nonprescription medications do you currently have stored in your house or in any other place? (Other medication-specify)

- Asthma [Albuterol, Flovent] (13 mentions)

- Allergy [Epinephrin, Flonase, Zertec, Singular] (23 mentions)
- Anti-depressants/ Mood-altering drugs/ Anxiety reducing drugs [Haloperidol, Lexapro, Xanax, Zoloft, Zolpidem] (20 mentions)
- Supplements [Fish oil, Calcium, Vitamin D, Resveratrol, Glucosamine/Condroitin] (12 mentions)
- Heart medications (beta or theta blocker, not blood pressure meds) (2 mentions)
- OTC anti-bacterial creams/ Topical ointments or creams (18 mentions)
- Constipation/Diarrhea medications (4 mentions)
- Sleeping Pills [Ambien, Zolpidem] (5 mentions)
- Cholesterol Medications [Lipitor, Vytorin] (3 mentions)
- Acid Reflux Medications [Prevacid, Prilosec] (2 mentions)
- Other (15 mentions)
  - Aderol
  - Arimidex
  - Cat medicine
  - Chantix
  - Chloroquine
  - Dopamine
  - Eyedrops (glaucoma)
  - Femera
  - Heparin
  - Humera
  - Licopene
  - Medication for dog
  - Oxybutynin
  - Tomoxicin
  - Valtrex

Item Q21a. Where did you receive the information [about how to dispose of prescription or nonprescription medication] or who provided you with it?

TV/OTHER MEDIA (25 mentions)

- Radio *(2 mentions)*
- Discovery Health Channel (program?). Health news update.
- Heard on the news and recycling news from city.
- Humana Gold and it magazine. It's my insurance. Either that or AARP.
- I just saw it on TV, they said don't flush it.
- I saw articles in the newspaper.
- I saw it on TV.
- I think there was an article in the paper and it just listed the places where you could take them.
- I've read it in articles in magazines and newspapers.
- I've seen it on TV.
- On television.
- On the TV or radio.
- Newspaper, maybe National Geographic.
- Periodico. [Newspaper.]
- Radio program.
- Scientific journal.
- Television, I used to work at the township office and I found out about it there.
- Television news.

- The Chicago Tribune business section.
- The local newspaper.
- The radio.
- Through a medical magazine in a doctors office.
- TV
- Your insurance company newsletter.

DOCTOR/HOSPITAL/CLINIC (10 mentions)

- A hospice care worker.
- From a visiting nurse after my Dad died in Florida.
- From the doctor.
- From the hospital.
- Not sure, I think it might have been from hospitals.
- The doctor.
- The hospital.
- The medical center Hollyview.
- The village.
- Told by a hospice nurse how to get rid of prescription meds.

CITY/VILLAGE/GOVERNMENT AGENCY (9 mentions)

- From the city of Evanston.
- Get a mailer for disposal by village.
- In the town billet in that comes out quarterly. They have prescription disposal day.
- Maine Township gives us information—Park Ridge.
- On the Oak Park website. I'm on the Oak Park Energy Environmental Advisory Committee Board of Trustees. I am responsible of keeping the website up to date.
- One was from the village of Lansing. The other was the forest preserve district of Will County.
- Our village.
- Our village has that.
- The village.

PHARMACY (8 mentions)

- Came from Jewel's when they had a collection event and they gave you pamphlets about how to dispose of medications.
- From the drugstore, the pharmacy.
- From the pharmacy.
- Pharmacy
- Pharmacy gave it to me.
- Probably the pharmacy, the city, and a doctor.
- The pharmacist.
- The pharmacy.

CAME WITH PRESCRIPTION (7 mentions)

- I have with my medication.
- I think it comes with my prescription drugs.
- I think it comes with your prescriptions.
- I'm sure on the prescription packets and whatnot
- It came with the brochure. The pamphlet that comes with the medications. That was because they were needles that were pre-filled. I have never received information for how to dispose of pills or other medications.

- On the back of the label of some medications.
- Probably on the medication that you get on the bill or whatever.

FRIENDS/FAMILY (3 mentions)
- Mi esposa. [My wife]
- My daughter.
- My wife happens to be a physician and she takes care of these things as a rule.

AT WORK (3 mentions)
- At work, pharmaceutical rep.
- I was part of job training at the health department.
- My job.

INTERNET (2 mentions)
- I don't remember. Let's just say the internet. I think it comes with the prescription medication.
- On the internet

OTHER (16 mentions)
- Humana
- I am pretty sure I don't know exactly what it's called, I think it's the insurance thing for our drugs.
- I can't remember.
- I can't remember. I read it.
- I don't think I've seen anything else or had anything given to me.
- I know I have seen various information and received some information in the mail, but I am not sure where.
- It was about taking it to a drug store but I cannot remember the provider.
- I've never received it that I know of. I'm sure I have, but I'm sure I've thrown it away.
- Mail
- My chemistry teacher.
- Pamphlets I cannot recall how I received this information.
- School
- School. Actually it was made by a student, a pamphlet of waste collection sites in the city of Chicago that I have posted in my pharmacy.
- Some of it comes through the mail and sometimes the Boy Scouts send it.
- There was a bulletin post in our lobby about how to dispose of prescription medications.

Item Q22. If you were interested in learning more about how to properly dispose of prescription and nonprescription medication, where would you go to get that information?

THE PHARMACIST/PHARMACY (148 mentions)
- Pharmacy *(13 mentions)*
- Pharmacist *(5 mentions)*
- The pharmacy. *(4 mentions)*
- Ask the pharmacist. *(2 mentions)*
- Drug store. *(2 mentions)*
- From the pharmacy. *(2 mentions)*
- I guess to a pharmacy. *(2 mentions)*
- I would ask the pharmacist. *(2 mentions)*
- My pharmacist. *(2 mentions)*
- My pharmacy. *(2 mentions)*

- Probably a pharmacy. *(2 mentions)*
- Probably the drug store. *(2 mentions)*
- Probably the pharmacy. *(2 mentions)*
- The pharmacist. *(2 mentions)*
- Walgreens *(2 mentions)*
- A alguna farmacia. [To some pharmacy.]
- A la farmacia o algun lugar informativo. [To the pharmacy or an informative place.]
- A la pharmacia Walgreens. [To a Walgreens pharmacy.]
- A las farmacias. [To the pharmacies.]
- A pharmacy.
- A pharmacy or ask my doctor.
- A pharmacy or online or ask a doctor.
- Again I'd have to pharmacist or doctor.
- Ask pharmacist or my doctor.
- Ask the pharmacy technician.
- Call a pharmacy.
- Call the pharmacy or ask them there when I picked it up.
- Contact a pharmacy.
- Farmacia. [Pharmacy]
- From a pharmacist.
- From my job or pharmacy.
- From Walgreens.
- Guess you would probably have to go to your pharmacy or talk to your doctor.
- Hopefully the pharmacy.
- I always ask the pharmacy, if they can use it. So I just ask them how I can throw it away I would look on line.
- I could ask a pharmacy.
- I don't know, the pharmacy maybe? I've never heard that there's a different way to dispose of them.
- I guess at a Walgreens. (other?) I guess your job, through our insurance companies. (*other?*) No, that's all I can think of.
- I guess I would go to the pharmacy.
- I guess my pharmacist or doctor, maybe a state agency. I don't know who to check with maybe the EPA.
- I guess you would probably have to go to your pharmacy or talk to your doctor.
- I guess to a pharmacist or a physician.
- I imagine the drug store.
- I might ask the pharmacist.
- I probably would check with the pharmacist.
- I suppose I'd ask the pharmacist.
- I suppose the druggist or the doctor.
- I suppose the drugstore but funny, I've never asked.
- I think I'd talk to my pharmacist.
- I think Walgreen's should have a commercial on TV.
- I would ask my pharmacist I guess.
- I would ask the pharmacy.
- I would assume a pharmacist.
- I would assume the pharmacy.
- I would call the pharmacist when I go to Walgreens or wherever I buy them.
- I would go to the drug store.
- I would go to the pharmacy.
- I would guess my doctor's office, no actually the pharmacy.

- I would look to read something in the drug store or doctor's office.
- I would probably ask my pharmacist.
- I would probably call a pharmacy.
- I would probably go to the pharmacy or ask my doctor or maybe the hospital.
- I would probably go to Walgreen's.
- I would think the drug store.
- I would think the pharmacy.
- I'd probably ask the pharmacist.
- I'd probably go ask the pharmacist.
- If I really wanted the medications, I would go to the vendor of the pharmacy that dispose of the medications professionally. Stericycle is one and I would look them up on the internet.
- I'll ask in the pharmacy.
- I'm sure if you went to a pharmacist, they could tell you. If they didn't have anything on them I'd probably go to the library and look it up.
- La verdad no se se me occure que a la farmacia. [The truth is that I don't know, it occurs to me to take them to the pharmacy.]
- Maybe a pharmacist.
- Maybe now I would ask my pharmacy.
- Maybe the pharmacist.
- Maybe the pharmacist or my doctor.
- My pharmacy or the Chicago Public Health Web site it gives you information.
- Maybe Walgreens.
- Only place I know is the drugstore.
- Pharmacia [Pharmacy]
- Pharmacies
- Pharmacy first or my doctor and if I had time I would start researching the problem.
- Pharmacy or doctor.
- Pharmacy Web site or ask my doctor.
- Preguntar en la farmacia. [Ask in a pharmacy.]
- Probably a pharmaceutical rep.
- Probably a pharmacist.
- Probably a pharmacist could tell you, I guess.
- Probably a pharmacy. They usually have the most information.
- Probably ask the pharmacy.
- Probably from a pharmacist.
- Probably from the pharmacy where I get the medicine.
- Probably my local pharmacist.
- Probably the drug store. If it came with the medication it would be nice
- Probably the pharmacist.
- Probably the pharmacist (*else?*). Maybe the local village (*all?*) yes.
- Probably the pharmacist, or the doctor.
- Probably the pharmacist or doctor when he is prescribing me a medication. I would ask a pharmacist or doctor because we wouldn't know the proper procedure.
- Probably the pharmacy, maybe the doctor's office.
- Probably to the pharmacy or my doctor.
- Probably the drug store.
- Probably the drug store or pharmacy.
- Probably the local pharmacy.
- Probably when I buy the medication.

- Rely on pharmacy.
- Someone that deals with drugs like the pharmacy or the doctor.
- Talk to my pharmacist.
- Talk to pharmacist.
- The drug store.
- The next time I'm at Walgreens I'm going to ask them. I think a pharmacy would be, they probably know even better than a doctor's office, because doctor's office don't have medications.
- The pharmacist.
- The pharmacy.
- The pharmacy would give us that information.
- To the drug store.
- To the drug store I guess.
- To the pharmacist.
- Walgreens is where I would go.
- Where you get the prescriptions filled.

THE INTERNET (123 mentions)

- Internet *(30 mentions)*
- The internet. *(25 mentions)*
- Online *(9 mentions)*
- Google *(2 mentions)*
- I would go online. *(2 mentions)*
- Probably the internet. *(2 mentions)*
- Search online. *(2 mentions)*
- The internet or ask my doctor. *(2 mentions)*
- A website.
- Also the internet and also the bottom of the supplements.
- Check the CDC website of the FDA or talk to a pharmacist or physician.
- Discoveryhealth.com or webmd.com (else?) Doctor or pharmacy.
- Either the pharmacist or the doctor. Actually, the first thing I would do is hit Google. Then I would talk to my doctor or pharmacist if I had an appointment.
- Go online.
- Google it.
- I could look it up on the internet.
- I guess I should look on the internet that's what I will do.
- I guess I'd ask my daughter to go online for me, I don't know, or maybe the library, or maybe the drug store, maybe.
- I guess you could Google it on the computer.
- I probably would look on the internet or call Walgreens and ask to speak with the pharmacy department.
- I suppose I could ask one of my kids and they could look it up on the computer. I don't happen to have one.
- I suppose I'd go online.
- I think I would Google it.
- I would go to the internet.
- I would probably check the internet. I would expect to be informed by the manufacturer or the dealer of those medications, right away I would ask someone knowledgeable a family friend nurse or doctor.
- I would probably look on the internet.
- I would probably look on the internet, at the library or ask a pharmacist.
- I would probably look on the Web.
- I would search for it online.
- I'd probably go on the dept of water Web site.

- I'd probably go to the internet first and depending on what I read on the internet and the source, then I would check with my doctor. Or maybe a pharmacist.
- I'd probably just Google it.
- Internet and/or my physician.
- Internet (*any other?*) pharmacy (*all?*) Yes.
- Internet I guess.
- Internet or the village newspaper.
- Online. Ask doctor.
- Online. Ask a physician.
- Online, Google.
- Probably Google it on the internet or something like that. Maybe ask at the pharmacy.
- Probably on the internet or ask my daughter who is a nurse.
- Probably on the internet or I would just ask somebody. Between those two.
- Probably on the web.
- Probably online. (*Specific place?*) I'd probably just Google something along the lines of drug disposal or safe drug disposal.
- Probably online on the internet.
- Probably online or my physician. Probably do a Google search like we did recently for cell phone batteries, computers, etc.
- Probably the computer, the internet.
- Probably the internet like WebMD or md consult.
- Probably try the internet.
- Search the internet.
- Start on recycling pamphlets that I have saved and Google it.
- The internet, I suppose.
- The internet or ask a pharmacist.
- The internet or pharmacist.
- Web site - university or gov.
- Well as soon as I hang up with you, I'm going to go to the internet and find out.
- You probably can go on the internet, or ask a physician.

HOSPITAL/CLINIC/DOCTOR/HEALTH CARE PROFESSIONAL (87 mentions)

- Doctor *(4 mentions)*
- Ask my doctor. *(3 mentions)*
- Con mi docotor. [With my doctor.] *(3 mentions)*
- Al doctor. [To the doctor] *(2 mentions)*
- The hospital. *(2 mentions)*
- A family doctor.
- Ask a doctor.
- Ask a nurse.
- Asked the doctor or web site or library.
- Cook County Hospital (*any other?*) hospital at UIC.
- Doctor or pharmacy.
- Doctor's office.
- Either my doctor or the pharmacy.
- Either to the doctor or to the drug store.
- From my doctor.
- From my doctor or pharmacist.
- From my wife who is a doctor as I told you.

- From the doctor or something or pharmacy.
- From the doctor who gives it because they get it from the pharmaceutical companies.
- From the hospital.
- Go to my doctor.
- Go to your doctor.
- Hospital
- Hospital or pharmacy.
- Hospitals
- I would go to my doctor and talk to him.
- The doctor.
- On the internet.
- Probably from my doctor.
- Probably go to my doctor or the pharmacist, pharmacist first.
- Probably go to the hospital or somewhere to find out.
- Probably my doctor, or I don't know, the EPA.
- Probably to a doctor, internet, or pharmacist.
- Probably the doctor.
- I don't know, I'd probably ask my physician at the VA.
- I guess I could ask someone at a health facility.
- I would ask my granddaughter who works at Northwestern.
- I would go to the hospital and ask them.
- I would probably ask my doctor or call the village.
- I would probably ask my doctor or look on the internet.
- I would probably ask the physician's assistant.
- I would probably go to a doctor's office or a drug store.
- I would talk to my doctor.
- I don't know…maybe from the doctor or druggist.
- I guess I would ask my doctor.
- I work in a hospital I would ask someone at work.
- I would ask my daughter's doctor.
- I would ask my doctor.
- I would go to my doctor's office or ask a pharmacist.
- I would probably ask my doctor.
- I would think a doctor, pharmacy or the internet.
- I'd call the hospital, I do things differently, I'd call the emergency room.
- Just ask my doctor.
- La clinica donde cuidan a mis hijos. [The clinic where they care for my children.]
- Maybe a doctor's office or pharmacy.
- My doctor.
- My doctor.
- My doctor or pharmacist.
- My doctor or the hospital.
- My doctor, pharmacy possible.
- My job I work at a clinic.
- My physician.
- Our physician.
- Pienso que el la clinica me podrian orientar. [I think they can guide me at the clinic.]
- Preguntar al doctor. [Ask a doctor.]
- Primary care physician.

- Probably call the doctor's office.
- Probably from my doctor.
- Probably my doctor.
- Probably to my doctor.
- The doctor.
- The doctor.
- The doctor tells you what to do, that's what you pay him for.
- To a doctor.
- To my physician, I would go to my doctor and ask.
- Try to call my doctor.
- Well I would probably go to my physician or to my pharmacist or good ol' online.
- You imagine your doctor would tell you.

CITY/VILLAGE/GOVERNMENT AGENCY (20 mentions)

- A la cuidad o al municipio. [To the city or municipality.]
- City of Chicago website.
- City hall or else my doctor.
- I do not have the slightest idea, maybe the police station or fire department because they have the paramedic unit and then I'd go to a hospital. I don't really know because I haven't had to take any, just the two and I took them to the doctor and the pharmacy.
- I suppose I could call the Village Hall.
- I would call the village hall.
- I would call the village of Lansing. They have a hotline number and they will refer you.
- I would call the village or check with the pharmacy.
- I would hope maybe the village hall or a hospital or a pharmacy.
- I would probably call my village, I think they would have all the information.
- I would probably call the city health department.
- Probably some sort of government agency. I'd probably look online.
- Probably the Environmental Protection Agency or the Food and Drug Administration.
- That's why I'm going, when it expires, to the city hall when it (epi pen) expires, that's what she (Walgreens employee) suggested that I do.
- The city health department.
- The health department, the environmental part.
- Township or village.
- Village hall.
- Well, I would think it would come from the AMA or the Village Officials or insurance company.
- When I go to Maine Township I get all the information I want.

SHOULD COME WITH MEDICATION (6 mentions)

- First I think it should come with the material that you buy either through the prescription paperwork or through the store bought package next through the public domain like the internet or newspaper (first is point a purchase).
- I think it should be when you get a prescription there should be something attached to it.
- I think maybe it should be when you purchase the medication it should be attached to the bag or the instructions.
- I would have thought that it would have been provided wherever you get your medication.
- Probably the container.
- Should be on the bottle of medicine.

MEDIA (4 mentions)

- In the mail. From heath magazines and the pharmacy. TV and internet.
- Reading things, pamphlets at hospitals or libraries. Any reading material in a clinic or even a store.

- The media.
- To tell you the truth, I don't know. Find it in a book somewhere, but I've never really been that interested.

LIBRARY (4)
- Library (2 mentions)
- Library or internet.
- Probably the library or your township, maybe hospitals.

WOULD NOT LOOK FOR INFORMATION/WOULD FLUSH (2 mentions)
- I wouldn't go anywhere I would flush down the toilet.
- Nowhere because I'm just going to put it down the toilet.

OTHER (10 mentions)
- By mail.
- Drug companies.
- I don't know unless you make a call to some health authority.
- I just assume someone would mail it to me.
- I would try to get it in the mail.
- I would read something sent to me.
- I would wait for it to come in the mail. Or go on google.
- I'll have my wife do that.
- La verdad no se adonde iria pero uno aprende de otras personas. [The truth is I don't know where to go but one learns from other people.]
- Manufacturer's website.

Q16@8. I am going to read a list of ways to get rid of or dispose of unused or expired medications. Please tell me whether or not you or someone else in your house disposes of unused or expired medications in that way. (Dispose of unused or expired medications in some other way?)

FLUSH THEM DOWN TOLIET (1 mention)
- I take boiling water and put in a gallon jug and let them dissolve. I will flush them down the toilet or put it down the sink.

GIVE THEM AWAY (7 mentions)
- Dispose in a biohazard box at a doctor's office.
- I don't throw them away. I take them to the hospital and they take care of them.
- I give to my friend who is a nurse and she takes them for disposal
- I take them to the health department. We have biohazard pickup.
- Retirement home takes us on a bus to go dispose of them
- Take them to the village of Wilmette
- Wife works for a dermatologist and takes them to be disposed of there.

THROW AWAY OUTSIDE (ON THE GROUND, IN THE ALLEY, ETC.) (2 mentions)
- Liquids put in the ground.
- Pounded them into a powder, put them into a can, put water into the can, threw the residue in the alley.

THROW AWAY IN GARBAGE (7 mentions)
- Chop up unused medications and put in garbage.
- I grind them up and throw it in the garbage and they don't know what it is. I mix it in with the coffee grounds.

- I smash them and mix them with sand and then I throw them out.
- I would chop it up and make it unrecognizable & then throw it away in trash
- I break them up, put them in water and throw them away.
- I mix them in with coffee grounds and throw them out in the garbage way.
- In coffee grounds or a used diaper.

GARBAGE DISPOSAL (2 mentions)
- Garbage disposal. (2 mentions)

BURN (2 mentions)
- Threw in a bonfire (2 mentions)

USED ALL (NO NEED TO DISPOSE) (3 mentions)
- I've taken expired medications
- Most of the medication I get I use.
- We buy the small bottles so we use them up. When we have prescription medications we always use it until it's gone so we never have to dispose of it.

OTHER (2 mentions)
- Fed to plants.
- My husband is attempting to get rid of some way to get rid of my attempt in to get rid of my used shot things in some way so if he finds some place then he will take some other things there too. It's just hard to find a good way to get rid of used things

Q18. In your opinion, what is the best way to properly dispose of unwanted prescription medications?

OTHER DESIGNATED DISPOSAL CENTER (36 mentions)
- Bring them to a site. *(2 mentions)*
- I know it is taking it to a recycle center. *(2 mentions)*
- A disposal place if you can find one.
- Either a hazardous waste collection or return to the pharmacy.
- Hazardous Collection.
- Hypothetically the best way would be to have a drop off place.
- I guess take it to a recycle place or something (explain?) like a electronic place where they take electronics. They need to have a place like that.
- I guess the best way is to take them to a facility.
- I really hadn't thought about it, (some way?) take them to a facility where you take hazardous materials.
- I think it should be something like a hazardous material collection.
- I think you should take it to a hazardous waste site or a physician's office.
- I would imagine by taking it to a facility where they would dispose of it properly.
- If there was a facility I would take them there
- In my opinion? Like you mentioned the disposable center, that would probably be best like syringes so that they get disposed of properly.
- It would be nice if there was a facility near my home. I would take them to any pharmacy
- Now that I know better I will take to hazardous waste site
- Probably there should be a central place where they can be brought where they can be properly disposed of by the EPA.
- Probably take them to a hazardous waste facility.
- Probably to take them to some sort of facility.

- Return to waste hazard place.
- Sometimes I guess you could take it to one of the disposable things and let the city dispose it, or give it back to your physician, the pharmacist.
- Take it to a facility that knows what to do with it.
- Taking it to hazardous waste dump.
- Take it to the village, a place in our neighborhood where you can take your medication for them to dispose of them.
- The village tells us to dispose of unwanted medication at the collection spot.
- They should have a recycling bin for them but I don't know how they would do that. Like for hazardous waste.
- To take them to a possible hazardous waste.
- Now that I have listened to your questions, probably take them to a hazardous waste place
- Probably a collection site but I never hear of any.
- Return it to a drop-off.
- Take it to recycling collection place.
- Take medication to a hazmat or recycling center.
- Take them somewhere like you do with electronic equipment.

PHARMACY (42 mentions)

- Return to pharmacy. *(2 mentions)*
- Return to the pharmacy *(2 mentions)*
- At a pharmacy.
- Back to the pharmacy. All pharmacies should be required by federal law to dispose of medications.
- Bring it to the pharmacy.
- Bring it to Walgreens and let them take care of it
- Give them back to the pharmacy. I know they also have a disposal program but I have never gone there to dispose of them.
- Give them back to the vendor.
- Give them to a pharmacist
- Guess take it back to the pharmacy but I don't know if they allow it though
- I probably would return them to the pharmacy.
- I take them to a pharmacy
- I think it would be best to return it to a pharmacy or a doctor.
- I think it would be good if we cold take them back to the pharmacy.
- I think the best way is to take them to the pharmacy.
- I think we should be able to take them back to the drug store where you got them.
- I wish I could take it back to the pharmacy.
- I would call the pharmacy and ask what you should do for that particular item, if there was a whole bottle I would ask or it was a specific type that I think could be hazardous but if it is one pill I would just throw out
- I would think to give it back to the pharmacist.
- Ideally if there were, the pharmacy, that would be the best, I didn't know that was an option.
- If pharmacies would take them back that would be terrific but I wouldn't want them reselling them
- It should be to bring them to a collection place in the pharmacy.
- It should go back to the pharmacist or the doctor. That would be the safest way probably.
- Levarlo a la farmacia. [Take it to a pharmacy]
- Maybe back to the pharmacy. It would depend on the medication. What its prescribed for I guess. If it was a painkiller I would go back to the pharmacy and if it was just antibiotic probably not.
- Probably a pharmacy.
- Probably would be best to return it to the pharmacy
- Right now no method sounds good. I just started hearing about taking them back to a drug store
- Separately, probably take it back to the pharmacy for a refund or something like that.

- Take back to the pharmacy.
- Take it back to a pharmacy
- Take it back to the pharmacy.
- Take them back to the drugstore.
- Take them to your pharmacy sometimes Chicago has a medicine collection system area wise that have certain dates
- Taking it back to pharmacy
- That's a tough question. I've never had any unwanted medications. I take all of it. If I did, I would take it to the pharmacy
- The best thing if they're expired, you should give them to a druggist, and he would get rid of them, but I take my medication so I don't have to worry about that.
- Until you asked me now, I'd never thought about it. Now, I think I should ask my pharmacist.
- Well I didn't know if you could bring them back to a pharmacy or a place you can take them.
- What you just said, take it to a pharmacist.

FLUSH DOWN TOLIET/SINK (23 mentions)

- Flush it down the toilet. *(3 mentions)*
- Depends on what it is; flush it down the toilet
- Disposal down the waste or toilet.
- Flush away or either put in a garbage bag tie in a knot ant throw in the garbage.
- Flush down the toilet
- Flush down the toilet or turn it back in.
- Flush it down the bowl.
- Flush it down the drain.
- Flush them.
- Flushing down toilet. Bringing back to pharmacy.
- For me I flush it down the toilet
- I think the best way is to flush it down
- I always thought the toilet but i heard that is not good. I would almost think it should be taken to a pharmacy or some collection place.
- I thought the toilet, but I don't know, I thought you should take it to a center somewhere but I don't know where those centers are
- I used to say flushing them, now I would try to return them to a drug store.
- I would put them in the garbage disposal or flush.
- If it is safe to flush it down the toilet do that. Put it in the garbage disposal or the garbage so nobody will use it.
- More than likely I think it would be to flush them or just destroy them, so they can't be used.
- The toilet and the sink.
- There isn't really a safe way. Down the toilet or in the garbage, same thing.
- Toilet
- We just flush it or something

THROW IN GARBAGE/LANDFILL (22 mentions)

- A landfill.
- As of until now, I've always most of the time dumped them in the trash outside of the bottle so they kind of disintegrate and no one would be tempted to eat them.
- By crushing or emptying a capsule and disposing it in the garbage
- En la basura. [In the garbage.]
- Garbage or a local facility that takes stuff.
- I believe what we do is seal them up in a container that is unrecognizable and then put it in our regular garbage
- I throw it in the garbage.

- I would say in the trash or in the toilet
- I would say throw them in the garbage with the cap on it and take off the address sticker. The cap will help if it does get into a landfill, a bird won't choke on it or something.
- Just put it in the trash
- Mine is garbage that goes through a crusher. (*best?*) To what I have available, yes.
- Put it in the garbage.
- Putting it in the garbage and not flushing it.
- Secure plastic bag and put in the garbage
- The best, convenient way is throwing it away but that's not really destroying it.
- The best way is, we would put it out with our garbage.
- Throw them in the garbage.
- Throw away in trash, but I don't know what the best way is.
- Throw in the garbage.
- Throw it out.
- Throw them away in the hazardous waste garbage.
- Throwing it in the garbage.

DOCTOR (9 mentions)

- Bring them back to a doctor or pharmacist
- Give it back to your physician for disposal at his office with a biobox or return it to a pharmacy so they can dispose of it
- I can't state the best way, I would either take it back to the doctor, I would take it to the medical building pharmacy, or I would take it a pharmacist like CVS or Walgreens
- I think in the future I will take them to my physician to dispose of.
- If I had to do it, return it to the doctor that prescribed it.
- If there was a way you could take them to a clinic or pharmacy drop off.
- Return it to the doctor.
- Return to the doctor
- Take them to the doctor

OTHER (12 mentions)

- Depends what it is.
- Dissolving them in water.
- Drug companies should accept them.
- Enterarlos en la tierra. [Bury them in the ground.]
- I always thought the toilet but i heard that is not good. I would almost think it should be taken to a pharmacy or some collection place.
- I think, you know, you can't throw gas down a sewer, you can't throw medicine down the sink.
- I would like to see them recycled so that others could get them cheaper or at no cost
- I'm not sure if there's a place to return them, but if there were I think I would as opposed to throwing them in the garbage.
- NO NOTE LEFT.
- Porque la recetada es solo para uno y le puede hacer mal a alguien que lo pueda tomar.[Because the prescription is only for myself and it could cause harm if someone else takes it.]
- Probably incineration but that's not available to me (only one?) that's the best way bc flushing down toilet causes problems
- To dilute it in boiling water.

Q19. In your opinion, what is the best way to properly dispose of unwanted nonprescription or over-the-counter medications?

HAZARDOUS WASTE FACILITY/EVENT (10 mentions)

- Also take it to the hazmat or recycling center.
- Hazardous Collection.
- Same. Return to waste hazard place.
- Something other than the garbage can. It's chemicals. I guess take them back to the pharmacy or hazardous waste.
- Take it to hazardous waste.
- Take them to a hazardous waste facility
- Take to a hazardous waste facility or back to the drug store.
- Takes to collection place once a year
- The same way. A recycling bin like for hazardous waste
- To protect the environment and the water a biohazard container.

OTHER DESIGNATED DISPOSAL CENTER (10 mentions)

- Bring them to a site
- I would guess the same way. Taking it to a facility where they would dispose of it properly
- I would say the same way. It should be some kind of collection box where you can come and drop them off.
- I would say the same way, take them to the village.
- I would take them to a safe facility.
- Nowadays I would probably take it somewhere.
- Same as for prescription: the best way would be to have a drop off place
- Same way as prescription medication. Same as prescription medication a disposal place.
- Same way. Return it to a drop-off.
- To take them to some sort of facility

PHARMACY(19 mentions)

- Bring it Walgreens
- Give them back to the pharmacy. Let somebody else figure it out.
- I could take it back to the pharmacy too.
- I don't know. *(Take a second to think.)* I think I'd call my pharmacy. For example, over-the-counter antihistamines, I would have to inquire about the safest way to dispose of them, I hadn't thought about it before.
- I wish the pharmacy would take them back. If they won't, grind them up and throw them out
- I would do the same thing, consider taking it to the pharmacy or drug store.
- If pharmacies would take that too it would be nice.
- Pharmacy
- Probably take it back to the pharmacy or drug store.
- Probably the pharmacy, too. I try not to buy things in huge quantities
- Return to pharmacy
- Return to the pharmacy.
- Same way, at the pharmacy.
- Take back to pharmacy
- Take it to the pharmacy too. I used to throw it in the garbage.
- Take them to a pharmacist or doctor.
- Take them to a pharmacy or clinic for disposal
- Take to drug store
- The pharmacy could get rid of them.

FLUSH DOWN TOILET/SINK (23 mentions)

- Flush down the toilet.
- Flush down toilet
- Flush it away.
- Flush it down, pour it out.
- Flush it down the toilet.
- Flush it down the toilet. That's the way I would do it.
- Flush them.
- Flushing it.
- Flushing them down the toilet
- I always say flush in the toilet, I don't know. It's better because if you put it in the garbage the children will get it.
- I guess it depends, if it's a syrup I would pour it down the sink and throw the bottle in the garbage. If it's pills, I guess I should flush the pills and put the bottles in the recycling bins, but I've never really thought about it before.
- I guess it depends on how dangerous it is, you know, from the stand- point, that maybe if it's a sleeping aid, I don't know if I would necessarily throw it in the trash, I might flush it. Most of the stuff, honestly I throw away, I do throw in the trash
- If they can flush down the toilet put them down the toilet then.
- In a drain or sewer.
- Same way. The toilet and the sink.
- Same way. Flush it down the drain.
- The same way, except liquids, I usually pour them in the toilet. The same way, most of the time dumped them in the trash outside the bottle so they disintegrate, except liquids, I usually pour them in the toilet.
- Toilet
- The same way you would do prescription. You can throw medicine down the sink
- Throw them down the toilet or in the garbage.
- Throw them in the toilet.
- Tirarlos en el lavamanos. [Throw them in the sink]
- To flush if it is liquid if not in the garbage.

THROW IN GARBAGE/LANDFILL (59 mentions)

- Throw them in the garbage. *(6 mentions)*
- Garbage *(5 mentions)*
- Put in the garbage. *(2 mentions)*
- Throw in the garbage. *(2 mentions)*
- Throw it away *(2 mentions)*
- Throw it in the garbage. *(2 mentions)*
- Again, convenience. Throw it away.
- Destroy it
- Don't have the same reservation of throwing it away.
- Either garbage or down the waste or toilet.
- Either to throw it or flush it down the toilet (throw?) away.
- En la basura (tirar). [In the garbage (throw).]
- Garbage I guess
- I just put it in the trash
- I just throw them out. In the normal trash.
- I still think throw them in the garbage.
- I would just throw them away
- I would say garbage, you know that's what I do maybe it's not the best way but I know no other alternative.
- I would throw them in the garbage.

- I'd say just garbage (*All?*) yes.
- If they're non-prescribed, I usually wrap it up in a tight bag and throw it in the garbage.
- In a secure plastic bag and put in garbage away from children or pets.
- In the garbage.
- In the garbage, I don't know.
- Just throw it in the garbage. take it out of the bottle and dump it in.
- Just throw them away.
- Landfill I think, that's probably where I'd get rid of it.
- Landfill would be the best way or household garbage.
- Regular garbage.
- Same way (garbage or toilet).
- Same way. In the garbage.
- That we just put into our general garbage without disguising it
- The same way. Garbage that goes through a crusher.
- Throw away in the garbage
- Throw in the garbage or...
- Throw it away.
- Throw it away in garbage.
- Throw it out.
- Throw in garbage and bag tied up.
- Throw them away.
- Throw them in the family trash.
- Throw them out.
- Throwing it in the garbage.
- Toss them in the garbage.
- Trash (else?) possibly a pharmacist
- Yo los tiro a la busura los liquidos los tiro por el inodoro pero los. los remedios que vienen en forma liquida. [I throw them to the trash, the liquids I throw them down the toilet but only remedies that come in liquid form.]

DOCTOR'S OFFICE (5 mentions)

- I return prescriptions to the doctor
- I would take them to a physician.
- Same. I would either take it back to the doctor or I would take it to a pharmacist like CVS or Walgreens.
- Same thing take it back or to the clinic they usually have places to dispose these items at.
- Same way. Dispose in a biohazard box at a doctor's office. Give it back to your physician for disposal at his office with a biobox or return it to a pharmacy so they can dispose of it

NOT SPECIFIED/SAME AS PRESCRIPTION (8 mentions)

- Descharlos en algun lugar. [Dispose of them in any place.]
- Do the same thing (boil them down).
- I don't know the best way. Probably not good to dissolve them.
- I think they should go to the same place you would take a prescription.
- Probably same as the prescription medications.
- Same thing.
- Same way as the others, take them somewhere like you do with electronic equipment.
- The same as prescription meds.

RECYCLE (3 mentions)

- Recycle them or give to a friend.
- Same way through a recycling facility.

- Take them to the recycling center or the doctor's.

OTHER (1 mention)
- Bury them in the ground

Q20. In your opinion, what is the best way to properly dispose of unwanted prescription or nonprescription medications?

FLUSH DOWN TOLIET/SINK (66 mentions)
- Flush it down the toilet *(7 mentions)*
- Down the toilet *(5 mentions)*
- Flush them down the toilet. *(3 mentions)*
- Flush down the toilet. *(2 mentions)*
- Flush it. *(2 mentions)*
- Probably flush them down the toilet *(2 mentions)*
- Break them up and put them in the
- Down the toilet.
- Down the toilet is the best way.
- Down the toilet is the best way although i usually take all my medication.
- Dump them in the toilet.
- Flush
- Flush it down the sink with hot water.
- Flush it down the "stool."
- Flush it down the toilet?
- Flush it down the toilet
- Flush it down the toilet, or give it back to the pharmacist or doctor who prescribed it.
- Flush it down toilet
- Flush it in the toilet.
- Flush it or take it back to the pharmacy.
- Flushed them down the toilet.
- Flushing
- Flushing down the toilet.
- Flushing it down the toilet.
- Flushing it would be the best way.
- Flushing the toilet.
- Flushing them down the toilet.
- I don't know, I guess flush them down the toilet would be good.
- I guess flush it down the toilet or throw it away. If you give medicine back to a doctor that's expired, he or she might give it to someone else.
- I guess it would be the toilet
- I would say the toilet right? (else?) I think that's all. I would like to retract my last answer and say just throw them in the trash bin.
- If it is liquid I run it down the drain, and if it's solid it goes in the trash.
- If it was liquid it would go down the sink and if it was pills it would go down the garbage
- I'm a toilet flusher.
- Just dispose it in the way that no one can use it. I think if it didn't mess up the toilet, the best way is to empty it in the toilet.
- Just flush them down the toilet
- Maybe, I guess if it's liquid it should go down the sink/toilet. Pills should be thrown away.

- Por el drain o regresar al lufar donde lo compro. [By the drain or return it to the place where you bought it.]
- Pour the liquid in the drain and put the pills in the garbage disposal.
- Probably, if I were to dispose of them in the bathroom.
- Put it in the toilet and flush it. that way you don't have to worry about nobody getting into it. Put it in the toilet and flush it. That way you don't have to worry about nobody getting In to it
- Tirar en el bano inodoro. [Throw it in the toilet.]
- To my knowledge, if I know it's medication that I'm not going to use, I just flush it down the toilet.
- Toilet
- Um, I flush it down the toilet (best?) It's the only way I know, so yeah.
- We use everything up, but occasionally put OTC meds in toilet.
- Well normally I've been flushing them down the drain, but I think that's wrong too. I'm going to start taking them to the center because I've been reading that it goes into the water supply.
- We've always just put it down the disposal flushing it with water
- Well as I say, prior to me hearing about flushing them down the toilet, I thought that was good safe way, but apparently it's not. (best?) I think the best way would probably to take them to a pharmacy if they know how to dispose of them. I've been putting them in garbage but I suppose it's going into the landfill and that's not good either.
- Whatever they do, they throw it down the toilet if it expires
- Years ago I used to throw them down the toilet (now?) somebody told me to take them to the pharmacy.

THROW IN GARBAGE/LANDFILL (69 mentions)

- In the garbage. (3 mentions)
- Throw them in the garbage. (2 mentions)
- As of now, the trash
- Garbage
- Household garbage.
- I always thought the best thing to do was keep it in the bottle and throw it in the garbage. suppose if there was some place you can take it that would be, I just don't know of any place.
- I don't know about the best way, but the easiest way is to throw them out.
- I guess just throwing them in the garbage because I was told never because it gets in the water supply, to flush them down the toilet.
- I have always thrown it away
- I just throw them away.
- I put it in the bag and tie it up and throw in garbage and I remove the label so people won't see it and try to use it
- I suppose the garbage is the best.
- I think disposing them in the garbage can is fine.
- I think the garbage
- I would put it in the garbage.
- Nobody ever told me so I just throw it in the garbage.
- Now in the garbage, but tied up and secured.
- Put it in the trash or the garbage disposal
- Throw 'em away
- Throw in the garbage
- Throw in trash where it goes to a landfill.
- Throw it in the garbage.
- Throw it in the garbage. Probably not.
- Throw it in the trash
- Throw them out in the garbage.
- Throw them away.
- Throwing it out.

- Throwing them in the garbage, but not sure.
- To put it in the garbage.
- To throw it in the garbage.
- Toss them in the garbage.
- Trash.
- Unless somebody tells me otherwise, I just throw them in the garbage
- Well I don't know. I throw mine away so I don't know what the proper procedure is.
- Throw in the trash.
- There's probably a better way, but I just throw mine in the garbage and throw coffee grounds on top.
- Well I always thought I should throw it in the garbage first before flushing it.
- The way I do it is down the garbage disposal and grind it up. That's probably not the right way. That's probably going in the water system, isn't it?
- Put it in the wastebasket.
- Wrap it up in some newspaper or tissue and put it deep down in the garbage can.
- I just throw in the garbage.
- I would say putting them in the garbage.
- I have no idea, probably the garbage or the toilet.
- I think just throwing it in the garbage.
- I think I would throw it in the trash.
- I put in a bag and tie it up and put in the garbage.
- just put them in a paper sack and put them in the garbage.
- Make sure there's a seal on the container and it's in the bottom of the garbage bin.
- It could be garbage but it depends on the medication.
- Well, I don't really know..I think just put them in the garbage.
- Throw them in the garbage to keep them out of the water system if I knew that pharmacies would take them back then I would do that.
- I guess just to dispose of in garbage
- I just put them in the garbage.
- I throw them in the garbage
- I would take mine and put them in the garbage.
- There are some containers where you can throw something that is disposable, but around here the only way I throw something away is in the blue boxes for garbage, the one we have outside. This is the one where I throw something, they can re-use it. But this is the place where I throw it.
- Actually to take them out of the container and put them in the trash and cover them with spaghetti sauce
- Is to perhaps put it in some type of bag, a special type of bag to dispose of it. At (where?) put the bag in the garbage. A specific place to throw it away, like recycling or the boxes in the hospital. The bags that say are hazardous to your health. Something to separate them. (else?) or if a person is given prescription medications you are given all the time you can give them back to the doctor because they have the facilities. Give people the bags, next doctor's appointment have them give you these bags.
- I don't know. I just kind of mash them up and throw them in the garbage and I don't know what other way to do it. Unless you can take them back to the pharmacy.
- We put it in the garbage.
- Throw it away in the trash.
- OTC meds I throw in the garbage, and Rx type of prescription I usually down the toilet
- I throw it away
- Yo pienso que por la basura. [I think that by the trash.]
- A la basura. [To the trash.}
- En la basura. [In the trash.]

PHARMACY (37 mentions)

- Give it back to the pharmacy. *(2 mentions)*
- Take them back to the pharmacy. *(2 mentions)*
- Bring it to a pharmacy
- Either take them back to the pharmacy or take them to a collection event.
- Either take them to a pharmacy or a drop off site.
- Envase original y regresar a la farmacia y que no esten vencidos.
- Go to pharmacy.
- I don't know of any disposable waste locations, I never of any. (best opinion?) I guess the best place would a pharmacy.
- I guess I haven't researched it 100% but I have heard that taking back to the pharmacy & maybe hazardous waste site.
- I never really thought about it until you asked me, my guess is give it back to the pharmacy or physician.
- I think the best way would be to take it back to the pharmacy so they can do something correctly with it.
- I think returning it to a pharmacy is probably a good idea.(any other?). No.
- I would return it to the pharmacy or I would drop it off at my doctor's office and they probably know a lot better than I do what to do with them.
- I would say probably through a pharmacy or a doctor.
- I'm hip to not putting it in the water supply thing I would like a special disposal method outside of landfilling it. Bringing it back to the pharmacy is a good idea. Throwing it away is not a perfect way, it is better than putting it in the water supply.
- In my opinion they should be disposed of at the pharmacy or a doctor's office.
- It probably best should be returned to pharmacy or medical professional.
- Just bring them back to the pharmacy.
- Probably be to return it to the pharmacy.
- Probably return them to a pharmacy or a doctor or the hazardous waste facility.
- Probably return to the pharmacy.
- Probably take it back to the pharmacy.
- Probably the best way would be taking them back to the pharmacist, if they take it. I don't even know if that happens.
- Probably to take it to a pharmacy. It's a good idea.
- Return to pharmacy or disposal site.
- Return to the pharmacy.
- Se pueden llevar a la farmacia y por general por la basura. [You can take them to the pharmacy and generally in the garbage.]
- Si nos informaran podriamos regresarlos a la farmacia o al doctor. [If they would inform us we could return them to the pharmacy or the doctor.]
- Taking back to the pharmacist.
- Take it back to the pharmacy.
- Take it back to the pharmacy or doctor.
- Take it to the pharmacy.
- Take them back to the pharmacy or to a college, hospital or a center.
- There should be someplace to take them, I never thought of it, but I would probably take it to the pharmacy.
- To take them to the pharmacy

DOCTOR/HOSPITAL/CLINIC (18 mentions)

- Either giving them to a physician or through a government organized program. But it should be easy to do. Or if they had it at Walgreens or a local politicians offices.
- Give it back to the doctor.
- Hopefully give it to the doctor or if they have a collection.

- I have not figured that one out. I'm going to try giving them to my doctor. If I could find someone that used the same medication I would give it to them.
- I think the doctor or the pharmacy are the best
- I think the doctor's office is the best way or the hospital.
- I would say to take it back to the doctors, but people just don't have time to do that.
- I would take it back to the doctor.
- If I had any, I would tell my doctor.
- Letting the doctor decide, taking them to a doctor or hospital and letting them decide.
- Llevarlos a un centro de salud. [Take them to a medical center.]
- Some type of licensed medical facility
- Sometimes, with me it's very easy because I take them to the hospital and they take care of them.
- Take it back to the Doctor, let them flush it.
- Take it back to the doctor or pharmacy (any other way?) Flush it down the toilet (else?) no.
- Take them back to your doctor of pharmacist.
- Take them to doctor's office.
- Take them to the doctor or the pharmacist because they are professionals and they know what to do with the stuff.

HAZARDOUS WASTE FACILITY/EVENT (22 mentions)

- Take it to a hazardous waste facility *(2 mentions)*
- Best to treat as hazardous waste.
- Either hazardous waste facility or giving them back to the doctor.
- Hazardous waste facility.
- I guess a hazardous waste center.
- I guess it would be take it to a hazardous place or take it back to a pharmacy
- I think that hazardous waste disposal facility or some kind of collection place to drop it off to go to the waste facility
- I would say either hazardous waste facility or take them back to the pharmacy
- I'm guessing the best thing is to take them to hazardous waste.
- No me he encontrado en esa situacion nunca pero si me occure algun lugar donde se pueda desechar material peligroso. [I have not found myself in that situation ever, but I can think of a place where to dispose of hazardous material]
- Probably I would think if there's some hazardous waste center for medications.
- Probably taking them to a hazardous waste facility.
- Probably the hazardous waste facility.
- Take them to the hazardous thing.
- Take them to a hazardous waste disposal site or collection event.
- Take them to the hazardous waste center.
- Take to hazardous waste facility
- The hazardous waste sites. That's where it should go.
- They should go to a reliable hazardous waste site. A very proven, established correct way.
- The best way is to take it to a site for hazardous waste.
- When they have the collection day.

DESIGNATED DISPOSAL CENTER (27 mentions)

- A controlled site where they can control the levels that get into drinking water. Have some sort of professional group handle it.
- A facility that is equipped to handle it.
- Devemos devolverlos a algun lugar como las pilas que las llevamos a la librewria pero no se en realidad donde llevarlos. [We should return them to a place like when we take batteries to a library but in reality I don't know where to take them.]

- Drop off points a police station.
- Give it back to people who can do it properly probably a disposal.
- Have someone that is authorized receive them
- I would assume take it back to some place that collects it and disposes of it properly.
- I would personally ask if there was a facility to drop these off at, but I haven't
- I would say bringing it to someplace that will handle it.
- Llevarlos a algun establecimiento permitido. [Take them to an allowed establishment.]
- Llevarlos a algun lugar doonde sepan como desecharlos. [Taken them to place where they know how to dispose of them]
- Lo mejor es llevarlos a un lugar seguro que autorizen como las pilas que se llevan a la bibloteca. [The best thing is to take them to a safe place that authorizes them like batteries that are taken to the library.]
- Something the would collect all the medicines and then dispose of them properly
- Sometimes the town has a day where you can bring in the unused medication. I think that is a good way
- Sometimes, with me it's very easy because I take them to the hospital and they take care of them.
- Take it some place where they would do the right thing with it.
- Take it to a site that collects it.
- Take to a place that handles that.
- Take them to a site somewhere, I don't know.
- Take them to church to the person that collects them. I'm sure he disposes of them in a proper manner.
- Taking them to a facility just for the disposal of medications
- The best way would be if one way or shape or form we would have a place to throw them away with a group that will sort it out and take care of it the way it should be.
- There should be a center to dispose of them.
- There should be a collection site.
- There should be a facility, maybe public libraries, any kind of government facility besides the pharmacy. Or drop boxes on the streets that would be monitored by a camera.
- Thru a duly recognized organization.
- To have a professional take care of the disposal.

RECYCLE (3 mentions)
- Put them in recycling
- Take them to some recycling place that can dispose of them appropriately
- Take it to some place where it could be recycled.

INCINERATOR (3 mentions)
- Furnace you could burn them up that would be the best
- I guess, what do they do, burn it? I guess it would be the best was, incinerate it. I can't see putting it into the landfill, everything leaks out of there someway. They always seem to come back and haunt you later on.
- The only way I know of is I kind of burn them, I figure they're gone then.

NOT SURE (11 mentions)
- Don't know because I don't think flush is good
- I don't have that much of a worry because all my medicines from the doctor are a pill a day for 30 days, and when I'm on the last pill I get it refilled. I don't know, really
- I don't know but I wouldn't throw them down the garbage.
- I don't know of a good way. I don't like throwing it in the garbage. I wish there was a way to return them to the drug-store but I've never heard of them doing that.
- I don't know the best way, that's why it is around. I don't know what to do with it.
- I don't know the right way and I know it's bad for the water so I chop it up and throw in garbage

- I never usually have that, but if something was to expire.
- I wish I knew.
- I wish someone could tell me, but I don't really know. I told you the way I do it. If there is another way, fine. If someone can tell me another way. I didn't know you can take it back to the pharmacy, I can ask next time I get a refill
- No se. [I don't know.]
- Well it depends. If it was something serious, there are better ways to dispose of them, but I've never needed to.

DISPOSE PROPERLY (mix with coffee grounds or kitty litter and throw in trash) (3 mentions)

- Coffee grounds in a bag in the garbage.
- Mix them in with coffee grounds."
- Put them in a dirty baby diaper or used coffee grounds.

OTHER (10 mentions)

- Burying it in the ground.
- Darlos a alguna persona que los puede necesitar siempre y cuando no esten vencidos. [Give them to a person that could need them only when and if they are not expired.]
- Dump them down the sewer and let the EPA handle it. I mean, they charge us enough
- Los pongo en una bolsita aparate de toda la basura. [I put them in a separate bag from the trash.]
- Que hubiera un lugar para llevarlo para que los quemen. [That there be a place to take them and burn them.]
- Regresarlos seria lo mejor. [Return them would be the best.]
- Sealed container.
- Through the sewer system.
- To be honest we made the medication so we need to find a way to unmake them or deactivate them and then figure out a safe way to dispose of them
- Whatever people can do to prevent them from getting in the hands of other people.

Q20b. Why do you think prescription medications should be disposed of differently than over-the-counter or nonprescription medications?

PRESCRIPTION DRUGS STRONGER/MORE DANGEROUS THAN OTC/NONPRESCRIPTION (19 mentions)

- Because both the intended effects and side effects are greater for prescription medication.
- Because of their potency and all, I don't know.
- Because it can be more toxic than the nonprescription medication. It has stronger ingredients
- Because prescription medications are usually more dangerous, the side effects are greater. Prescribed for a particular illness and nonprescription are general and not as strong.
- Because prescription medications probably should not be exposed to the general public whereas over the counter meds since everybody can buy it is not as dangerous.
- Because some Rx's are more dangerous.
- Because they're more hazardous there more addictive to people and stronger.
- I think prescription drugs are stronger and a little more dangerous.
- I think that because prescription is usually a stronger dosage and it's usually pretty much made for one particular person.
- It depends on what it is. (why?) If it's vitamin C you can throw it away, but if it's codeine, you should take it to a pharmacy.
- Its potency.
- Los que son con receta son mas fuertes (fuertes) hacen mas da¤o o venenosas para ortra persona. [The ones with prescription are stronger (stronger) they cause more damage or are poisonous other people.]

- Partly, in some cases it's the form of them, and some of the medicines are so potent. A vitamin to me is different than some of the chemical drugs he had seems that you should dispose of them in a different way to protect the people and the environment.
- Prescription medication can be more harmful to some people.
- Some have more side affects than nonprescription meds.
- They tend to be stronger and more dangerous.
- Well I think prescription because its higher potency you have to be more careful with it but they should both be disposed of in a safe way.
- Well the only ones that would be over the counter you might be ok with throwing down a regular thing is if its a really super natural thing and a slight amount wouldn't do much or cause any problems.
- Well they have medical properties that may be different and effect humans differently than nonprescription drugs.

SAFETY REASONS (14 mentions)

- Because of the effect it has on different people.
- Because of the extra strength that they have and it was prescribed for one person alone.
- Because prescription the doctor prescribed that to you someone might get a hold of it and if it is not prescribed to them, their body is not used to that. (nonprescription?) I would do it the same way to, flush it down the toilet.
- Because some of that stuff is really bad for prescriptions, there's a lot of pain medication, and you know.
- Because you don't want these to get in babies or children's hands.
- Different prescription medications can affect people in different ways, so if you're flushing it down the toilet, a baby can be drinking water and it can affect the baby.
- For safety reasons.
- If someone goes thru your trash, it's better not to have prescription meds.
- It could be toxic to some people.
- Maybe because of someone taking it who shouldn't.
- Prescription medication needs to be disposed of safer.
- Prevent from someone else from taking them or poisoning the environment
- They are more restricted puts them in a different league of something more harmful if misused or gotten in the wrong hands accidentally.
- Well only if it's a dangerous item.

ENVIRONMENTAL REASONS (1 mention)

- No they all cause problems for animals

OTHER (5 mentions)

- If it were a controlled substance it would need to be destroyed
- It depends on what it is. (*why?*) If it's vitamin C you can throw it away, but if it's codeine, you should take it to a pharmacy.
- It depends on what the medication is. Narcotics should go back to the pharmacy.
- Siempre y cuando no sean daninos para la gente. [Whenever they are not harmful to people.]
- They can all be disposed in the garbage.

Q20a 1a. Why do you say that people should not flush unwanted medications?

GETS INTO WATER SUPPLY (220 mentions)

- Because it goes into our water system. *(2 mentions)*
- Anything that goes into the water comes back to us somehow
- Because a lot of the water, I don't know if it's that way in Chicago, but a lot of the water they've been testing has found various drugs in it.

- Because from articles I've read where they've found certain substances in water that has been filtered or cleaned that there are traces, because people dump them in the toilet or the sink.
- Because eventually it would get into the water system and it would be problematic if everyone did that.
- Because I did hear a report that they did a test of the water and they were starting to see some prescription medication showing up.
- Because I don't have faith in the current filtration of the water system and I would hate to see that this is slowly building up in the lake and maybe hurting the fish or creating new strains that are immune to the medicine.
- Because, I don't know that it totally dissolves and what effects it has on our water, or what effect it has on animals, and we drink from that water and they filter that water, I'm not sure. The thought of drinking residue from medications, it doesn't sound too good.
- Because I don't want it in my water supply. I don't feel like drinking prozac.
- Because I don't want that in the water supply.
- Because I have heard that it gets in our water supply and it's not safe & we have more than trace amounts in our water supply and it's horrible that it can have horrible side effect of and the effects on children & for sick and elderly folks
- Because I have read that for some reason flushing it down does go into the water supply.
- Because I hear all that goes back to the water system and they can't filter it all out and I wind up drinking someone's hard medicines. I also think that only fluids should be flushed down the toilet. Toilets weren't made for medicines and things like that.
- Because I know from watching the news that it does eventually end up in our drinking water.
- Because I read once that it goes in the water and the people get some of that.
- Because I think it eventually gets into our water source.
- Because I think it goes through a water filtration system and I don't think they can get that out of the water if too many people dispose of their medication in that way.
- Because I think something is in the water and everyone is getting sick, and the medications may be responsible for that.
- Because I think the water is recycled and we get it back.
- Because I think they contaminate the water supply and the groundwater
- Because I understand that prescription medications are showing up in our drinking water.
- Because I will come in contact with our water.
- Because I'm concerned that over time with the quantities that build up will be in the water supply.
- Because I'm going to drink it back.
- Because, I'm gonna cite recent studies about the quality of Chicago drinking water and the traces of a variety of medications in water samples.
- Because it adds more to the water. It adds more to the problem with drinking water. I've never flushed it down the toilet, but I don't know how to best dispose of them.
- Because I've been reading about traces of the chemicals showing up in drinking water.
- Because I've heard that the water has hormones and stuff in it that's what we drink and it could get into the fish and other aquatic life I think that's a very bad thing.
- Because it affects the water supply.
- Because it affects the water system
- Because it all goes into our water supply and a congestion of those meds in our water supply is a bad thing.
- Because it can get in our water supply
- Because it can get in the water system.
- Because it can get into the water supply
- Because it can get into our water system
- Because it can go into the lake and then it goes into the water.
- Because it can poison the water system
- Because it contaminates the water

- Because it could get into the water supply and put potentially toxic things in something that could be hazardous to people in some, it can't get out of the water system.
- Because it eventually goes back into the earth back into the water system which causes more money to clean up.
- Because it gets in our water supply.
- Because it gets in the water, that's what I heard. Is that true
- Because it gets into our drinking water stream
- Because it gets into the water system.
- Because it gets into the water system and the water is treated and released and someone is going to drink all that stuff
- Because it goes down into the water system, the sewage system and then eventually the water system. Not necessarily the sewage and it gets filtrated back into the water that is coming back to us. This is putting poison into the water like the chemicals in the air. It goes down our sinks and it comes back to us and it could have the medicine in it.
- Because it goes in the water and everyone drinks the water.
- Because it goes into the water supply
- Because it goes into the water system.
- Because it goes into the water system and all, and I just think we have enough pollutants.
- Because it goes into the water and then there are worse things they have to go through.
- Because it goes into the water supply.
- Because it goes into the water systems.
- Because it goes to the water and contaminate the waterways.
- Because it is tainting and tampering with the water supply
- Because it may contaminate the water
- Because it may get into our food and drinking water.
- Because it might affect the water, environment.
- Because it might put all this weird stuff in the water and poison the water supplies, and potentially make someone else sick
- Because it should not be mixed with the water supply
- Because it will get in the water. I heard about stuff being in the water a long time ago
- Because it will get into the water supply
- Because it would affect our water and our environment. I think that's what's happening to Lake Michigan.
- Because it would get into the sewer system and contaminate the water supply.
- Because it'll wind up in the water supply
- Because it's contaminating the water supply
- Because it's like if my family does it so do all the other families do it will end up back into the drinking water.
- Because it's putting it back into our water supply.
- Because I've heard it has gotten into the water supply and streams. In the rivers and lakes and they're being detected
- Because maybe some medications have some hazardous ingredients in them that might not be good to go in the water.
- Because of contamination of the water
- Because of our water system.
- Because so much residue is turning up in drinking water and such
- Because sometimes it gets mixed up in the water supply
- Because that *expletive* finds it way into the water supply, and we drink that stuff.
- Because that goes into the water.
- Because that water is reused.
- Because the environmental people tell you not to do that. Because it'll dissolve and contaminate the water.
- Because the meds have been turning up in the water we drink.
- Because they can get into the system, especially the water system, seep into the ground, the soil.
- Because they contaminate our water supply

- Because they could taint the water and the environment.
- Because they go in the water
- Because they go into the general public water supply in some form and could be dangerous when consumed
- Because they say it's ending up in the water.
- Because they've had that on TV for years that they get into the water system and everything else once they dissolve.
- Because water when it goes it does get recycled, it can't filter every microparticle out
- Because we all know the water goes to the recycle thing
- Because what I heard in the news about it going into waterways.
- Because you're putting all that into our water system.
- Can't get out of water supply, we end up contaminating our drinking water.
- Cause I know it can harm the water supply
- Cause it ends up in the water supply.
- Cause it gets into the water…more likely to taint the water that ultimately we drink or the ground water table or something like that.
- Cause it goes into our water system.
- Contaminate water supply
- Gets into the water supply
- Gets into the water system.
- Goes into the water.
- I read in the paper it can contaminate the drinking water. not safe.
- I think it would damage the water supply.
- I would think that it would get into the water system and become a pollutant
- I think it gets into the water system
- I think some of these places it may get back in to the drinking water.
- I thought I heard that they don't always go down and they might get into the water or something. I just never found out.
- I was told that it is not filtered when it goes back to the water supply. I mean think about it, you're flushing lots of stuff down the toilet, and they're filtering that out, but I heard somewhere that it happens, so I never do it.
- It could get back into the water system.
- It depends, cause if you do that and it gets in the drainage or whatever it can cause a lot of problems.
- It does something to the water
- It ends up in the drinking water
- It ends up in the sewers and the water and the lake and anywhere else and comes back into the system.
- It enters the water supply, groundwater
- It enters the water system.
- It gets in the water.
- It might get in the water.
- It's affecting our water and animals.
- Porque el agua se contamina ma. [Because it causes more water contamination.]
- So it doesn't go into the water supply
- That contaminates the water supply
- Water gets refiltered and it could get back into our water system
- Well because I've seen or heard on the news that it can end up in the water system.
- Well it gets into the water supply
- I don't want that water to get filtered back and me drink it.
- Porque contaminamos el agua y el ambiente. [Because we contaminate the water and environment]
- Maybe there is damage of contamination someplace along the water line.
- The only thing that I could conceivably think would be the possibility of it getting into the water supply and staying in the water after being treated

- I've seen news reports that somehow that prescription medications are finding their way into the water supply. When they test the tap water it has prescription drugs in it so that's probably not a good idea.
- I don't good for water.
- I don't know, but I've heard that they have found traces in water supply.
- I don't think it's the greatest idea because it can get back into the groundwater and the water system.
- I have heard that it gets into the water system and that's not good.
- I think it's putting it back into our water system.
- I was told years ago that it might into the water system
- It could get into the water supply, even sewage.
- It ends up back in the drinking water.
- It gets into our water system and our soil
- It goes into the water supply and it's hard to break down.
- It is a waste and after a while you would contaminate the water system.
- It probably contaminates water somewhere.
- It I think there is too much in the water system
- I've recently become aware that these medications are showing up in drinking water.
- would contaminate the water.
- It would maybe remain in the water somewhere
- Porque se contamina el agua como lo vi por la television. [Because the water is contaminated just like what I saw on television.]
- Tainting the water supply
- That can contaminate the water supply.
- That goes into our water system and it gets recycled and it comes back into our water, and we might drink water that we think is safe, but that has some sort of prescription medication in it.
- The difficulty in getting it out in the water treatment.
- The water supply is contaminated, and it goes to the treatment facility
- There must be residue and the water must go somewhere and it can't be healthy to do that.
- They could get into the water supply
- Well they say that it, I've heard that it gets into the water and different...you know.
- Well I don't know it'll get in my water system or something.
- Vi por las noticias que el agua esta siendo contaminada por cause de tirar los medicamentos. [I saw on the news that the water is being contaminated due to throwing medications].
- It will get into the water.
- Gets into the water source.
- It gets into the water supply.
- They are chemicals that can be run through the public water systems.
- It contaminates the water supply.
- Seen news reports that it ends up in the water supply.
- It would be hazardous for drinking water.
- It gets into the water system and contaminates the water
- Well, I understand that some of that accumulates in the landfills or it doesn't get filtered out of the water when you put it in the toilet. (*other?*) No, that's the only reason.
- They get in the water, you know. I don't have that much to flush, or I haven't done it. show up in the water. Along the lines of hormones and things like that. And if you're getting really, I don't think the levels are really dangerous, but if you think about the fact that your body stores them over time in your fat cells, then they would build up in your body, they're not necessarily building up in the water supply.
- The medication get into the water supply
- They say it's polluting the water supply.
- Recent reports of traces in the water system.

- It gets into the water system
- I've read articles that some of those are showing up in the water supply.
- It gets in the system, going into the water and it by the time it comes through the process it could contaminate the water supply
- It gets into the water supply
- It could be harmful in the water supply.
- It ends up in our water
- I read an article that medications can become poison and can get into the water system
- Well, one, if they flush them and they get into the water system, then you might be exposed to a lot of medications that you wouldn't think of just by drinking water. I know it's supposed to be different water systems, but sometimes it's just treated and not separated.
- It goes into our water systems.
- It gets into the water system.
- I'm hearing that its getting back into the water
- From what I read it gets into the waste treatment centers and into the water system.
- For the environment, it goes into the drinking water and affects the quality of the water we drink.
- I think it winds up back in the water supply.
- Recent studies of what's in the water system
- Well it goes into the water system
- You don't want it to go into the water stream.
- It can get into our ground water and then we would be drinking it. They can't pull all the chemicals out of the water system.
- It contaminates the water table.
- That water is being reused and that medication may not be able to be removed. This will contaminate the water supply and animal habitat.
- It is causing an effect in the water system, on human life, on plants, on animals. The children are getting sicker, autism, girls getting their menstrual cycles earlier.
- I heard about the city of Chicago testing the water, and finding all kinds of traces of drugs. If you flush the medications, all that water will go back to the lake, so some form of those drugs will be dissolved in the water and that recycled to our tap water.
- It always goes back to water treatment plant, and that water recycles back into the water use system. (*other?*) Not that I know of.
- It stays in the water system and it stays in the water.
- I imagine that it goes into the waterways, doesn't it. It makes our water unsafe. (*other?*) No.
- We drink that eventually, don't we? (*other?*) Not healthy for the environment.
- They will eventually end up in the water supply.
- Might get into the water supply.
- Contaminates the water supply.
- It might pollute the water so it would get to the drinking water.
- Porque si son muy fuertes contaminan el agua y batallan mas para purificar el agua. [Because they are very strong they contaminate the water and it takes more effort to purify the water.]
- Contaminan la tierra y agua. [Contaminate the land and water.]
- Water system comes back around i don't think our systems are designed to clean out chemicals, not targeted to remove those compounds.
- I am worried about what goes into the water supply. It could taint the water somehow.
- Could be harming the water
- I think it has something to do with contaminating the water.
- Probably it effects the water, it's probably hazardous to the water supply
- Well they are toxic and get into our water systems.
- It gets in our water

- It gets to where it's not supposed to be—the water.
- Well eventually the water comes back and it's a continuous flow (mean by that?). who knows what drug properties can be in the water. (Saying can get in the water?) yes.
- Cause it gets in the water.
- It gets in the water supply eventually. I don't know if there is a safe way to get rid of them unless it is incinerated.
- I think it would be hard to remove from water sources It would be a contaminant.
- After hearing that some of the water has some trace of medicines in there, I think it is a bad idea even though it is filtered.
- I say this because it gets in the water.
- Chemicals and stuff going in the water.
- They're saying that all goes into our waterways now and when it dissolves it gets back into the filtration and some of it gets back to the water that we're using.
- Now I know that it gets into our water system and stuff.
- Medicines dissolving in the water supply
- It may hurt the water supply
- It could contaminate the water.

ENVIRONMENTAL REASONS/POLLUTION (41 mentions)

- Because I don't know exactly where it goes.
- I don't know if it's any good for the environment, I don't think so.
- Just doesn't seem right. Seems like we could be polluting something.
- Porque mi esposo trabaja para el desague y el dice que todo eso va al agua publica la que consumimos. [Because my husband works for the Water dept and he says that all of that goes to the public water that we consume.]
- Because it does get into your water system which i did not realize so the purification does not take the drug out of the water
- Because I'm an environmental chemist and I know better. The problem is that the chemicals that they are finding in the excrements in the water are something that you cannot stop.
- I think that it is bad for the environment
- Cause it's toxic
- I don't know. My thought is it doesn't matter. Probably because it's not good for the environment.
- I would think eventually it would get into the soil or something.
- It would go into the sewage.
- Cause it can get back into the system somehow. Harmful to our environment.
- Because I don't think it gets cleaned out in the water system and I think that's why we have three-eyed fish
- They get in the water system, fish, all kinds of stuff, in the lake, through the sewer system
- Cuz it goes back into the environment through water filtration system.
- From what I've heard and told because it ends up in the landfills or back into our water.
- Could contaminate the water.
- Because it may in a small amount recycle to the water system
- I just heard that it is a bad deal and we don't want all that out in the water
- Because of the toxicity of it. It can cause problems
- Just depending on where the water goes (mean?) It could be hazardous to the environment in some way.
- I think it pollutes the environment.
- Because it pollutes and hurts the environment including people fish, the environment, and it causes even bigger problems.
- Because I really don't know where it is going or how it will affect the ecology.
- Because the reports say that it's getting into long-term water supply affecting the animals.
- I worry about pollution
- Because of our ecosystem and contamination of our water system.

- It gets in the food chain (fish)
- It gets into the food chain
- Because I've heard that it's bad for the environment and I believe it can make it back into the water supply
- It affects animals through the water.
- That can contaminate something, it is unsafe
- I don't know. I don't think it could be good for the environment or the water. I think I heard or read somewhere that it was affecting the water because people were flushing things down the toilet. I just don't throw anything into the water that I don't have to.
- It could end up killing the fish in the water (else?) I think we end up drinking the water or somehow it gets in our bodies or we eat the fish in the water
- I don't want to pollute. I don't dump chemicals in the water.
- I don't think it's a good idea. It contributes to pollution in the water and so forth.
- It's polluting the water, nothing really is gotten rid of, all it does it becomes a condition. It should be properly disposed of.
- Por la contaminacion. [Because of contamination.]
- They say it's bad for the environment and goes back into the water.
- Pues puede danar el medio ambiente. [Well they can cause damage to the environment.]
- Porque los componinetes quimicos pueden alterar el medio ambiente. [Because the chemical components could alter the enviroment.]

AFFECTS SEWAGE SYSTEM (6 mentions)

- Because I think it's putting stuff in our sewer system.
- It goes in the sewer and it can travel in different places where it can affect people.
- It gets in our sewage system. If it doesn't get to the people, it gets to the animals.
- Porque van al desagua. [They go to the sewer.]
- Porque van a las aguas residuales. [Because they go to the sewer.]
- Porque eso va al desague y puede producer muchas enfermedades. [Because that goes to the sewer and that can cause a lot of illness.]

OTHER (43 mentions)

- Because now I know the hazards of that
- Because I hear that all the time from public interest agencies, that you shouldn't flush them.
- Because now the germs when we get antibiotics won't fight them.
- Because everything is toxic to something
- Because of the health hazards involved
- Because they going to clog up the toilet.
- Because I think it could contaminate the system.
- For me, the best is throw it in the garbage.
- I don't see any point in getting rid of it that way, it's still contamination.
- Yo estuve viendo una vez que se van con el agua y se quedan alli Todavia [I saw one time that they flush out away with water and they stay there anyway]
- It should go to someone authorized to get rid of it.
- Water soluble and not the thing expected at the Stigney plant.
- I have no reason other than I really have no reason as to why I think that.
- Well probably clogged things up. It's a practical thing.
- Porque esa agua va a los rios. [Because that water goes to the river.]
- It seems to me the garbage is best.
- If it's not hazardous I don't see why not, but if it is then they should not. It should be in a special disposal.
- I think it is though on the system to dispose of them.

- Doesn't know what kind of chemicals in it would react.
- I don't think it's the proper way, that water I don't know where it goes. It's not a habit, I don't do it, that's it.
- I figure it's enough stuff underground and it doesn't need to be there.
- We don't know what will happen with that. When the medication mixes with water it could create problems.
- My brother works for the water reclamation district and he told me not to do that.
- We don't know where it's going to know off hand.
- I know it dissolves. Wouldn't the medications do something to the plumbing and stuff?
- Sometimes the medicine doesn't go down the toilet
- From what I saw on TV.
- There should be a proper way so it doesn't go to waterways or land fields.
- Later it's going to be needed
- It blocks the waterway.
- I don't really know where it's going.
- It takes more than one flush and that is wasting water.
- Just as a precaution.
- It's I don't know.
- It doesn't sound like a good idea...it would go into the sewer system.
- I wouldn't want the pipes of my house to have the residue of Rx in them.
- You can clog up your toilet
- Se tapa la tuberia. [The pipes clog.]
- Se tapan los inodoros. [The toilets become clogged.]
- Porque se puede atorar y es un problema para el agua. [Because it can clog and it is a problem for the water.]
- They tell you not to, I don't know. When you're listening to the radio or TV. They say it's poisoning.
- They can't clean it enough.
- No se pienso que por alli no a lo mejor es mas mejor por alli o que? [I dont know, I think maybe not by here, or it might be better over here, or what?]

Q25a. Why do you say that you are unwilling to do so? [Drop off unused or expired medications for disposal if there was a convenient location]

WOULD RATHER THROW IT AWAY (3 mentions)

- I think throwing it out should be good enough.
- Because I rather to throw it away so they don't reuse.
- Because I'm just used to throwing it away and not having to think of somewhere else.

NO TIME/IT'S A HASSLE/NOT CONVENIENT (3 mentions)

- Because I don't have the time.
- I don't drive.
- It's a hassle.

WILL BE REUSED (2 mentions)

- How do you know the people there wouldn't keep it?
- Because I don't know who I'd be giving them to and I don't want them to give them to somebody and hurt any

OTHER (3 mentions)

- Because I would take it to my doctor.
- That person may not have the same thing I have
- I don't want something that other people will not respond to. I don't want it to be set up just for me.

Item Q26@5. From the list I am going to read, please tell me whether or not you would be willing to take your unwanted medications to that location for proper disposal. Would you take them... (To some other place?-specify)

RECYCLING FACILITY/SERVICE/BIN (5 mentions)

- Any place that's set up to collect stuff. Like a recycling bin or something.
- If there was a bin for pharmaceuticals in my neighborhood I was.
- If there was a community drop off because we have all these recycling places. That would work.
- If we could put it in our recycling that would be great.
- In a container outside my home like they have for recycling.

IN GARBAGE/TRASH, (2 mentions)

- Garbage can.
- Probably the toilet.

CITY FACILITY/VILLAGE (11 mentions)

- A city building where you go to get your city services (city hall).
- A city facility. I don't live in Chicago.
- An alderman's office. A local official's office.
- Any public facility.
- city hall, a place designated by city hall.
- Depending upon where yes, Like the village.
- If our village hall had a drop off box.
- Maine Township
- My village has a place.
- The alderman's office. A public school.
- Wilmette

SUPERMARKET/STORE (8 mentions)

- A grocery store, some place I visit very often.
- Grocery store with a pharmacy in it. Someplace you would go to every week.
- If they had a secure box outside of supermarkets. Or what about the post office. There's lots of them.
- Maybe the supermarket.
- My supermarket.
- Some place that's close like a grocery store or something.
- Supermarket, something that easy to get to.
- The only other place I can think of that you go to a lot is the grocery store.

LIBRARY (6 mentions)

- A library.
- Library has boxes for batteries and gym shoes, so maybe the library and if locked and secure it might work but it would have to very secure.
- Maybe the library. I'm always there. That would be cool.
- Public library or school.
- The library.
- Yea, like a library, batteries.

PUBLIC HEALTH DEPARTMENT (2 mentions)

- The health department.

- Chicago public health department has a collection site.

FIRE DEPARTMENT, Mentions: 7
- Fire department. *(3 mentions)*
- A fire station.
- Fire department or library.
- Fire station, where it is safe.
- The fire department or the Public Works Department.

ANY PLACE CONVENIENT (34 mentions)
- A convenient place, I wouldn't have to go far. I live in the suburbs.
- Any place as long as it convenient. Location is key.
- Any place that is convenient to my home.
- Anything close, like the pharmacies or the grocery stores. Some place you go often.
- Anything close to my house that would be convenient.
- Anything closer to home; the fire department or any public secure access.
- Anywhere they'd want me to take that is not too inconvenient.
- As long as it's convenient.
- I would hold it until there was a convenient place to take it. I do not see myself making a special trip for disposal.
- I would just want to find the closest, most convenient.
- If it's somewhere on my way, definitely.
- If it is convenient than yes (what would be convenient?) within a mile or so of where I live.
- If it was close I would do anything.
- If it was convenient (*any other drop off box convenient for you?*), yes.
- If it was convenient, yes. (*where?*) It would have to be local right in our city (*example?*) local grocery store collection box.
- If it was designated as a prescription drop-off place. The main factor is if it's close to the house or easy to get to.
- If it was near my home.
- If it were within reasonable distance.
- If there was a place that was convenient and secure.
- If there was one close to the house.
- In the suburbs (*where?*) like a fire station or some place. Something close to my house.
- It wouldn't matter as long as it was convenient.
- Only if was convenient.
- Probably another place more convenient.
- Probably some place convenient.
- Some place closer to where I live.
- Something in the newspaper or something that's convenient.
- Somewhere around my neighborhood (where?) I guess near a Walgreens.
- Whatever is convenient and close easy.
- Whatever would be closest and more convenient.
- Yeah, if it was close by.
- Yes, if it was close.
- Something that is convenient that has some accountability to make it safe and confidential, needs to be meaningful and real effort that is accountable.
- Sure, just depends on location. Pharmacy is the easiest because they're everywhere in Chicago.

HAZARDOUS WASTE SITE NOT IN CHICAGO/COLLECTION FACILITY/DISPOSAL CENTER (11 mentions)

- If there was a hazardous waste place that was close, I would also take it another law enforcement facility besides police or sheriff's.
- A more frequent hazardous waste pick-up. There is only one in my location.
- Hazardous waste site not too far away and good hours of operation.
- Hazardous waste facility in Evanston.
- A collection facility near my home, but I won't drive to Chicago.
- If there was a hazardous waste center in the village I would use that.
- I would take them to household hazardous waste facility but not in Chicago.
- If not too far I would be happy to take to waste site.
- Every property community would have a disposal center.
- A certified, licensed disposal system.
- Something in my building. Some kind of hazardous materials can.

NOWHERE SPECIFIC/ANYWHERE (11 mentions)
- Anywhere that they would be collecting it.
- Anywhere. I think it's really important, I would be willing to go anywhere.
- As long as it's safe, anyplace.
- Any place that I thought I could get rid of them.
- Wherever they tell you is safe, sure.
- In the suburbs.
- Al cook county. [To Cook County.]
- Donde quiera escuela iglesia donde sea pues. [Anywhere, school, church where ever.]
- I would definitely try to dispose of it properly. We don't need more chemicals in our garbage or water..
- If another one came up that made sense, I'd put it there.
- If it was authorized, sure. (*specific?*) No, not really.

OTHER (Mentions: 9)
- A church.
- A collection event that would give them to the proper people.
- A drive to collect old prescriptions like at a public facility or a church.
- If there was another place available. (*specify?*) Probably if you take it, before they had the drug centers to take in prescription drugs.
- It can be done by mail like if you want to put it in a secure envelope that goes to the dump site, that would probably be best.
- My workplace.
- Only if I could find someone who could use it.
- Salvation Army might do it.
- Some designated place and it has to be a medical facility.

- Backcode
- Walgreens, the drug store.
- We don't drive, we take bus everywhere.

Q27. How much extra money per prescription would you be willing to pay if that money would be used to support a safe system to collect and properly dispose of medications?

$0, ZERO, NOTHING (176 mentions)
- 0 *(126 mentions)*
- $0.00 *(2 mentions)*

- No I wouldn't get involved in that.
- 0, If I had the money I would. But I don't think that I would be able to pay any
- Nothing because I think drug manufacturers make big money. They can take care of it.
- That's a tough one because I'm a retiree and I'm on a fixed income. I can hardly pay for my medications. I would say zero. It's not because I don't want to.
- I take too much medicine to have any left over, 0.
- Not willing to pay.
- I would like pharmacy manufacturer to front that expense, therefore none
- Someone in charge should provide a machine. The lady at the church she tells me that they are 6 or 7 places that properly dispose of them. I think it's a good idea to have people come and educate church folks. The people in pharmaceuticals make so much money why not take it from the people making all the money off of the medication and he's the last person that should be taking it. I don't think we have to pay for it. I really don't.
- I wouldn't want to pay any extra money. So, zero.
- I would have to find out more, so right now I would say zero.
- None. Zero. They make enough money to pay for their own disposal.
- I don't think I should have to pay extra I'm already paying too much for medication. I think it should be paid for by the government and your taxes. So none.
- I don't want to pay any money
- None because I think they're too expensive as it is when you can get the same drugs in Canada for $2 here. Not that I'm for socialized medicine but there's something wrong with the world here. I'm not willing to make the pharmaceuticals companies any richer than they are.
- No I wouldn't pay more.
- At this time none, with the economy being so messed up I don't see myself you know.
- I wouldn't pay nothing.
- That would be the city's responsibility. I'm retired and any amount would be too much $0.00.
- I think there is enough money in the prescription Medication business, 0.
- None. pharmaceutical companies should pay for it.
- Absolutely nothing i pay enough for medication it's expensive enough as it is.
- No he wouldn't.
- No
- Nothing right now.
- 0, bills are already too high.
- Not much don't wanna pay anymore 0
- I resent the cost of medications and I would not pay another penny toward it. I think they're way overpriced, 0.
- $0.00 The pharmaceutical companies that make the money should take it out of their profits.
- No money at all.
- I wouldn't want to pay anything extra.
- I would pay $0.00.
- 0 don't consider that an issue
- There should be no extra cost.
- Not willing to pay, $0.00
- I don't think I would be willing to pay anything
- I'm on a fixed income so I wouldn't be able to pay anything.
- "Nothing more than I currently pay."
- "I wouldn't pay anything extra for that because I think drugs are too expensive to begin with."
- I don't spend money on RX. I have drug coverage. So I would spend nothing.
- I'm on social security and with all the pills I'm taking I can't afford nothing.
- We pay a lot of taxes, so I wouldn't pay more
- No more than what I am paying right now.

- I'm not willing to pay any additional money.
- I probably wouldn't because the prices are so over the top for drugs.
- I'm not paying no money to dispose of medication.
- Nada no tengo dinero.
- No sabria decirle ya que la economia no etsa buena en este momento
- I were able I would but I really don't have any money.

ANSWERS IN PERCENTAGE: 1%–2% (4 mentions)
- 1%
- 1% or 2% of the cost of the meds.
- One or two percent of the cost.
- 2%

ANSWERS IN PERCENTAGE: 3%–5% (3 mentions)
- I would say 5% would be reasonable
- 5% of those
- I don't know...5%?

ANSWERS IN PERCENTAGE: 9%–10% (4 mentions)
- 10% *(2 mentions)*
- 10% extra.
- An extra 10%.

ANSWERS IN EXACT DOLLAR AMOUNT: $1 (67 mentions)
- $1.00 *(45 mentions)*
- $1.00 per prescription. *(2 mentions)*
- $1.00 more per prescription. *(3 mentions)*
- $1.00. I would not pay a lot more.
- $1.00 more but nothing more.
- I don't know, maybe a dollar per prescription extra.
- $1.00?
- Maybe a dollar.
- A dollar per prescription.
- If I did have prescriptions I'd say like a dollar.
- I guess one dollar.
- $1.00 per bottle .
- Probably a dollar per.
- About $1.00
- Maybe $1.00.
- I would say probably $1.00.
- Pay another $1.00.
- $ 1.00 more
- $1.00 maybe
- I think that the pharmaceutical companies should be thinking of this. That's really hard for me because my husband's been doing all the bills. I'll just say a dollar.
- I don't know—my first thought is to give money for something. Drug companies make a great deal of money. $1.00

ANSWERS IN EXACT DOLLAR AMOUNT: $2 (16 mentions)
- $2.00 *(13 mentions)*

- Maybe $2.00.
- $2.00 per prescription, that's it.
- Maybe 2 dollars or something.

ANSWERS IN EXACT DOLLAR AMOUNT: $3 (6 mentions)
- $3.00 *(5 mentions)*
- $3.00 extra

ANSWERS IN EXACT DOLLAR AMOUNT: $5 (18 mentions)
- $5.00 *(14 mentions)*
- Probably five dollars, no more than that.
- Let's say $5.00
- $5.00 more.
- Hast $5.00

ANSWERS IN EXACT DOLLAR AMOUNT: $10 (11 mentions)
- $10.00 *(7 mentions)*
- Maybe $10.00 *(2 mentions)*
- $10 more.
- It depends. (*range?*) $10.00.

ANSWERS IN EXACT DOLLAR AMOUNTS: $20 (1 mention)
- $20.00

ANSWERS IN RANGES OF DOLLAR AMOUNTS: Less than a dollar (54 mentions)
- $0.50 *(9 mentions)*
- $0.25 *(7 mentions)*
- $0.05 *(4 mentions)*
- $0.10 *(2 mentions)*
- $0.50 cents or $1.00. *(2 mentions)*
- $0.50 to $1.00. (*2 mentions)*
- Not too much, between $0.25 and $0.50.
- I guess I'd be willing to pay $0.50.
- A few cents 1–5 cents per prescription.
- $.001 or less.
- $0.75–$1.00
- Say $0.50.
- $0.75
- I'd be willing to pay 50 cents to a dollar.
- Not much...maybe 5 or 10 cents.
- $0.25 to$0.50.
- $0.50–1.00
- $0.20
- I would pay 50 cents. Put me down for a dollar.
- There are many ways to fund public things—so I guess I would do it—a nickel per Rx.
- 25 cents per Rx.
- An extra 15 or 25 cents.
- 0 to $0.25
- An extra 1 cent per pill. Less than a dollar per prescription.

- Less than a dollar.
- $0.05, but if I got educated and find out that flushing it down the toilet, I might pay twenty cents, and if reasonable health care bill was passed, maybe I'd pay a dollar
- 0.50 per prescription.
- A penny.
- I would pay 10 cents
- Minimal, $0.50
- I would pay another 50 cents or a dollar.
- $0.25 a prescription
- Up to $0.25 per prescriptions.
- I would pay $0.25. It doesn't pertain to me that much.

ANSWERS IN RANGES OF DOLLAR AMOUNTS: $1–$2 (13 mentions)

- $1.00 or $2.00. *(3 mentions)*
- $1.00–2.00 *(3 mentions)*
- $1.50
- It's hard to answer because we only pay $3.00 per prescription. Maybe $1.00 -2.00.
- $1–$2
- $1.00 or more at the most.
- I would pay and extra dollar or two
- $1.00 or maybe $2.00 would be enough.
- It depends...I would want to. Maybe up to a $1.00 or a $1.50.

OTHER: $2–$3 (4 mentions)

- I think even a two or three-dollar surcharge or fee is reasonable. Given the amount of prescriptions we write in this country, it would pay for itself.
- I suppose a couple of dollars, $2.00 or $3.00
- $2.00–3.00
- $2.00 or $3.00.

OTHER (23 mentions)

- I would pay 5% to 8% more.
- I don't know...a couple dollars.
- Not much.
- 10 to 20%.
- A couple of extra dollars
- Like $5.00 or $10.00.
- I have no idea...I don't know a couple of dollars
- For people that have 2 prescriptions that wouldn't be a lot but if someone people had a lot that would be really expensive. And is that every time you pick it up? Would you pay it every three months? I don't know if it would have to be prorated. I think a blanket fee has merit but it would have to be figured out further before I could answer that.
- A few dollars
- With the cost of drugs it's like a double-edged sword. If it was a reasonable amount I would.
- 1/2 of a percent.
- It'd have to be cents. (*range?*) No I think that should come right out of the profits they're already making, I don't see why we should pay extra for that.
- Maybe 5 or 10 dollars more if I had to.
- Some modest amount.

- Up to $5.00.
- It doesn't seem like it would be worth no more than a couple dollars.
- 5%–10% or even tacking on another dollar.
- If I had it I would pay at least $15.00
- Less than five dollars more.
- I would be willing to pay something but I think the pharmaceutical companies could afford it. I would be willing to give 5 or 10 dollars but not for each prescription.
- 0.5 % to $1.00
- 1 to 3%
- A few dollars at most.

Item Q28. What do you think might be the consequences of keeping unused or expired medications in your home?

COULD TAKE THEM ACCIDENTALLY/ON PURPOSE (68 mentions)

- It's possible someone else might get to them. I might use an expired medication.
- Someone taking them by mistake.
- Being accidently taken.
- Someone might use them.
- Maybe somebody accidentally taking them.
- Someone may take them and die.
- Someone might accidentally take them.
- Somebody could take it by accident.
- People might actually take it by mistake.
- You might take them by accident I guess.
- Someone taking them by mistake.
- Someone could accidentally take them and become ill.
- If they got into the wrong hands.
- Someone may come in and pick it up if it's out in the open.
- Someone else could get a hold of them.
- Somebody takes them by mistake, overdoses or steals them.
- Take something by mistake.
- Sooner or later somebody might take it.
- I don't keep them. You could take them by mistake.
- Accidental use.
- If people who weren't supposed to got a hold of it and used it.
- Someone might take it.
- The chance that someone, even though we don't have children anymore, that someone could a hold of something and take something that they shouldn't.
- Somebody might take them.
- If they are accidentally used.
- Somebody could take them by accident.
- Accidently taking them someone else taking them.
- Potentially getting in the wrong hands, being taken by someone who shouldn't take them.
- Someone maybe taking it by accident and not reading the expiration date.
- Someone might take it.
- Potential improper use.
- You could accidentally take them or someone else could get a hold of them.
- Someone could get into it.

- People can steal addictive things, children can get into them.
- Accidently take them.
- You might take them.
- You might accidentally use them.
- You could take it by accident, it gets into the wrong hands.
- Get into the hands of somebody that it shouldn't.
- By mistake we might take it.
- In mine nothing, in others, if others have access to it then it could be a problem.
- Taken accidentally.
- Someone might take it.
- Could accidently take them.
- Someone could come in and take them.
- They could get in the hands of the wrong person.
- Accidental use.
- Somebody else gets them.
- Just the disposal factor really. Risk of somebody who shouldn't have access to them.
- Someone who shouldn't get into them could have access to them.
- You might mistakenly give that to someone.
- Taking it by mistake.
- I might make the mistake and take it by mistake so it need to be get rid of.
- Somebody might get it that shouldn't.
- I may take some accidentally.
- Somebody could accidently take them.
- Someone getting a hold of it that shouldn't use it.
- Getting into the wrong hands.
- Somebody accidentally would take them.
- Somebody who shouldn't take it would.
- Mistakenly taken expired medications (by me or by my wife).
- If someone else took it.
- Someone's going to get a hold of them that shouldn't.
- Someone might get it who isn't supposed.
- Worst is that someone takes them.
- Que se puede uno equivocar y tomarselos. [That one can take them by mistake.]
- Otra persona o ni¤o los puede usar. [Another person or child can use them.]
- Que alguna vez uno se lo tome por equivocacion. [That it can sometimes be taken by error.]

CHILDREN COULD TAKE THEM (87 mentions)

- Children's safety, taking unsafe medication.
- Kids reach into it.
- Maybe if you have children that would be a safety hazard, but I don't have any little children.
- Somebody, a child or a teenager, could take them and it would not be good for them.
- Children could get it.
- In the future it can be harmful if you have kids.
- Being a danger because of somebody taking them. We have grandchildren here once and while, and poor thing if they get involved with them.
- Accidental use. You know, kids.
- I don't know other than I would be afraid one of the grandkids could get into it.
- Someone could get poisoned or overdose or children could get a hold of it. Anything is possible.

- It depends if you have kids in the house they could get a hold of them, but if you are there by yourself then I don't see any.
- In my opinion, a little kid may come and visit and take it. It could cause harm. Many things could happen.
- Children in home, but we don't have them.
- Child could ingest it.
- If I had kids around it could be dangerous.
- Maybe accidental overdose, or maybe a children. Would get a hold of them, something like that.
- It could be devastating into the hands of the wrong people. I have 10 grandchildren and 4 great grandchildren. it's a silly question.
- Well it could fall into the wrong hands, children, pets.
- I have a son who is 14 now and I don't want to keep anything I don't need.
- Children tampering with and accidentally taking expired medicine.
- Little kids could get at it they are not put away properly.
- If there were children I would be a little concerned, but with adults I don't think the risk would be as great.
- I would say, because I have children, a danger to the children to have those kinds of things around.
- I have a little one so I try not to because I wouldn't want her to get a hold of things and drink something or eat tablets.
- Maybe there would be, but right now at this point in time because they are older and they don't like taking medicine.
- Kids might take it.
- A child may get it.
- Well it can be dangerous if people don't store it properly, especially if they have children around.
- Well, I think for children wise, there are no children in my home, we're all adults. I think it's a hazard all around if there are children in your home, or visiting children.
- Could be like a child could take them.
- If they are expired you don't know if they will be effective if you have teenagers they may get into the wrong hands and of course if you have children or grandchildren.
- If my daughter got into them. A child getting into them.
- If a child got into it. Or if I was sick and could not determine which were expired.
- Well I don't have any little children, but that would be a concern if there were young children in the family.
- Could end up as a disaster if someone takes it without knowing, kids or something, get into it.
- Dangerous if I had children or animals.
- If I had small children it is possible they could get in touch with
- them and use them inappropriately.
- Accidental use especially by children.
- Danger to the household members, children especially, animal, and pollution.
- Small children have accidental overdose.
- Might be dangerous to children.
- If you have little children, they could get into it. Or you could take the wrong pill and get sicker.
- If you have small children they could get into them.
- If there are kids they could get into it.
- A child could get a hold of it.
- Safety of children and the safety of the dosage if it's beyond its expiration date. You can get confused which medication you should take. It's tempting for people to take.
- I don't want my grandkids to get a hold of them.
- They would be accessible to a teenager or child. There would be dire consequences if someone had access to your medications; I'm sure some medications out there could cause death.
- Somebody, one of my kids might get a hold of it.
- Children taking them, drug parties, accidental ingestion.
- Well I have a baby so I try not to keep any extra or unneeded medications around for her safety.

- Well, based on the product I'm about ready to launch, the consequences are huge, the statistics are huge, 1 of 5 teenage kids are abusing their parents' medications without their knowledge, they have pill parties, 2-3 pills at a time. And when you have guests in your home, they have access to your medicine cabinet. The partnership for a drug free America says you should always secure and monitor your medicines, so that's my answer.
- Child getting a hold of them.
- Children can get a hold of them.
- Safety to children or someone accidently taking a prescription that has expired.
- Serious consequences if there where children in HH but there are not any.
- I have a four year old, but I keep everything on the top shelf. I guess my 4 year might get it in some weird scenario.
- Nothing in my home because I don't have children, but the risk would be there if children were present.
- I would not want my kid to get into it.
- One of my grandchildren could get at them.
- People that shouldn't have them might get a hold of them, like kids.
- Children can get to it or you can get sick from it.
- Having children get at them.
- It's not good for the children.
- Kids could get into it.
- If there are children they might take it.
- Dangers especially if you have young kids around you and dangers for you because you got elderly people around you.
- Someone could use them children or other an adult that does not know.
- If you have a child it is possible maybe they could possibly get into it or you could take it without looking expiration date thinking that it is updated.
- Children could get a hold of them.
- Somebody could get it--one of the children could harm themselves.
- There could be if a kid got a hold of them like in the medicine cabinet.
- My biggest concern would be a little one getting at it. A kid could get into it.
- With me there's no danger because I'm smart enough not to take it. But I think if there were children who couldn't read the labels, there would be a danger. But for me, there's no danger.
- Kids can get to them.
- Children could get to them, it wouldn't be good for you to take if you accidentally take it.
- Children. Also sort of worry, also, if somebody's taking expired medications, I'm not sure if it's useless or it's going to hurt someone. But if it is hurtful, it could be worse than before.
- If kids are around I don't think it's a good idea because they might run across it and try to take it or experiment with it, and something bad happens.
- I live by myself but if children were around they might get their hands on it.
- Seria un riesgo por los ninos se pueden enfermar. [It would be a serious risk because the children can become ill.]
- Peligroso para los ninos se pueden envenenar o intoxicar. [Dangerous for children they can intoxicate or poison themselves.]
- Peligroso por los ninos. [Dangerous because of the children.]
- Es peligroso para los ninos y para uno mismo se pueden contaminar. [It is dangerous for the children and for one-self because it can cause contamination.]
- Le haga dano a un nino, lo envenena. [Causes damage to a child, or it poisons them]
- Es muy peligroso por los ninos que se pueden drogar. [It is very dangerous because the children can drug them-selves.
- Deja al alcanze de los ni¤os se los pueden tomar. [Leave them within the reach of children they can take them.]

NEGATIVE OR NO EFFECT OF MEDICATION IF TAKEN ACCIDENTALLY OR OTHERWISE (131 mentions)

- A lo mejor no harian el mismo effecto la misma cura para la enfermedad seria como tomar nada. [Maybe it would not have the same effect or cure for the illness, it would be like taking nothing]
- Accidental poisoning, taking it beyond its life and causing life threatening situations, further complications to health.

- Accidentally taking them, causing damage, particularly when I'm rushing to take my medications.
- Anybody could get a hold of them and they can be harmful.
- Bad Reactions to expired medication.
- Could be a health hazard.
- Could be harmful to one's health overall.
- Could be illness from somebody who takes it.
- Danger that someone taking something that made them ill.
- Dangerous...just like any poison.
- Either they're not going to be very effective or they can get someone sicker.
- Fear of someone taking it when the medication is no longer good. Wouldn't know if it was poisonous. Do the residual effects get worse after the medications expire, I don't know. The fear of the unknown would make me nervous.
- Hazard because once it's expired you don't know what it can do.
- I don't know if there would be any consequences. If I died somebody would have to get rid of them. I'm sure they lose their potency or something after awhile.
- I guess they lose their potency
- I have kept it and used it and then it had no effect on me because they strength had gone out of it because it had been there a long time. Or there might be a side effect because it is expired.
- I see what happens with some of my relatives that they take the medications and they get sick and they don't know if it's a real health problem or it's the expired medicine. But we don't do that because of my husband's condition.
- I think it's a safety hazard, someone might take them.
- I think someone could accidentally take it.
- I would use it and maybe get sick.
- If another person took it by mistake and you think it still works, but it doesn't.
- If I had little kids, obviously it would be dangerous, but as I don't, I think lowered potency is the concern. Someone would take it inadvertently.
- If I don't take them properly, you get sick or overdose if they don't know what they're doing. It depends on what the drug is.
- If medication degraded or went bad might make it harmful.
- If somebody gets it and they overdose on it and they think they're no good, or if you take medications and they're no good and don't do nothing because it's past the expiration date. And I don't think the bathroom is a proper place to store your medication, either.
- If someone were to take them, they might experience different side effects. That's about it.
- If they are expired they won't be affective.
- If you take it you may have health consequences.
- If you take them they may not work or they could end up in the wrong hands.
- Ineffective.
- Ineffective medications when you need them.
- Ineffective meds, if there are children, possible contamination to the children.
- Ineffectiveness
- It could affect someone that might take it without looking to see if it is expired.
- It could be bad, you could take them by mistake.
- It could be dangerous for somebody to take them.
- It degrades and it wouldn't work.
- It gets weaker because the strength diminishes particularly in vitamins and antibiotics.
- It may not work properly, number one.
- It might be harmful. Any risks of someone taking it if they are not supposed to whether it is not meant for them or it is expired.
- It would be dangerous. Somebody would try to take it.

- Just in case you may take that expire medication that could be a hazard to your health.
- Liver damage.
- Lose its potency and it's of no value (Meds).
- Loss of the potency of the medication.
- Maybe someone will take it past its expiration date and get sick from it. It's like old food or something.
- Might take something that is not effective or harmful.
- Misuse of the medicine or if they are expired then someone using it could cause them more harm then good.
- No es bueno porque se puede enfermar. [It is not good because you can get sick.]
- No longer effective, or has different side effects as the prescription is no longer needed.
- One of the consequences might be using it and having an adverse reaction. Or someone else attempting to use it and not knowing it's expired.
- Other than the fact that they would aged and wouldn't be any good anymore, none.
- People get sick.
- Pienso que en un descuido uno se lo puede tomar y luego me puede ser mal. [I think that by being careless one can take it by mistake and it could harm me.]
- Possible that someone would ingest them and cause harm to themselves.
- Probably a poison issue.
- Probably lose potency.
- Probably taking some expired medication that probably won't do anything for you after some time. I can't think of another one.
- Puede ser veneno ya que esta caducado. [It could be poison since it is stale.]
- Que alguien la vaya a tomar y le haga un efecto malo. [That someone might take it and it renders a bad effect]
- Que es un riesgo para la salud. [That it is a risk to ones health.]
- Seria terrible porque uno se puede intoxicar. [It would be terrible because one can get intoxicated.]
- Somebody could accidently take them and they could poison you.
- Somebody could be harmed if they take them.
- Somebody could get a hold of it and have a bad reaction.
- Somebody could get into them and think they're something else. They might get poisoned on it.
- somebody getting injured or dealing with life threatening situation
- Somebody might use them and they may not help.
- Somebody might use them and wind up getting sick.
- Someone could take an expired medication by accident and get sick.
- Someone could take them and it could be very harmful.
- Someone else could take it and possibly get sick off of it.
- Someone may get a hold of it a use it even if they don't need it.
- Someone may take them and may not know how harmful they are.
- Someone might end up taking them when they are no longer of value, poor quality.
- Someone may get into it for a drug high.
- Someone taking the medication and not realizing it's expired and it could be either more potent or do absolutely nothing, or a child could get a hold of it.
- Someone who does this is taking a chance on taking it later when it doesn't work.
- Someone would get sick.
- Something could be wrong with them and somebody could take them.
- Take them and they might have a negative effect.
- Taken accidentally and could get sick.
- That somebody didn't know it's expired and it didn't work or get sick or even die.
- That someone could take and get sick.
- That they could be toxic. Or they're no good anymore, but they could be harmful.
- That they would have a harmful effect if someone took them.

- That you could accidently take them and not be sure of the effects.
- The biggest danger to our home is the drugs will chemically alter and hurt you. They could degrade.
- The medicine could lose its efficacy or it could become toxic.
- There is no clear benefit. They deteriorate over time.
- They are dangerous.
- They are not as effective, so if I did take them they might not work.
- They become impotent so not sure if you could dump them then. If someone got a hold of them could cause them to get on the streets.
- They can be deadly.
- They could be harmful or reactive and could cause damage if taken.
- They could make you sick.
- They go bad.
- They may not be effective.
- They might go bad.
- They probably wouldn't be as effective.
- They would be used improperly, resulting in sickness.
- They'd be ineffective. A child could possible get into them. They could make you sick.
- They're not good anymore so they wouldn't work.
- Tomar algo que no sirve o intoxicar a algun nino. [Take something that is no longer good or intoxicate a child.]
- Toxicos y peligrosos. [Toxic and dangerous]
- Using them and they don't work. It would be different if there were little children here, but there's not.
- When you need them they don't work if they're too expired. If it's something you need, you don't want it to not work or react badly with something you're already taking.
- Well a person could become ill from them and if your taking them and they are outdated they may not be as strong as they used to be.
- Well, first of all they're probably not necessary if you haven't used them. And if they're just sitting around the potency has probably diminished and there's just no reason to keep them around. And there's always the risk of small children but we don't have any around.
- Well for one, it depends if someone thinks they're going to use them again or if you have a child or an adult that isn't completely cognizant. It's an unwise practice any way you look at it. And it might not do the job it's supposed to and backfire.
- Well, if they still had potency and the wrong person would take it and didn't have a condition it was prescribed for might be dangerous. Over-the-counter stuff tells what it's for. If it's past the due date, you might think that it's helping you and it's not.
- Well if you took them you could get sick and die.
- Well in the first place they are out of date so they may not be effect. It's not really good to take expired medication.
- Well that they wouldn't work.
- Well the medicine wouldn't be as potent as it should be.
- Well, they disintegrate as they get older, somebody might take one, I don't know.
- Well they would be less effective. I don't know if they'd do you any harm. I'm somewhat biased on that because I take all these medications all the time and I'm probably going to have to take them till I die.
- Well you could think that they were good and they're not good.
- You can get deathly ill from taking them.
- You could accidentally take it and it would be bad for you.
- You could get sick or not fix whatever is wrong with me because it doesn't work.
- You could get very sick using expired medications.
- You could poison someone or make someone very ill.
- You could take it and get sick.
- You could take it by accident or someone else could take it. It would be dangerous.

- You maybe get intoxicated.
- You might accidentally take something and it will have a bad effect. Someone else might take it and have a bad effect.
- You might get sick with expired medication.
- You might forget they expired and take them, and then they'll do damage to your body and poisoning yourself.
- You might take it and won't get the full benefit. It could also be dangerous if it is expire.
- You or another person could ingest them. Either purposefully or accidentally. You could take the medicine expecting a certain result and not get it or someone could take them and get some sort of ill consequence.

STORAGE SPACE/CLUTTER (11 mentions)

- Clutter *(2 mentions)*
- It will pile up.
- For me it's just clutter.
- In my home, it adds to the clutter.
- Just taking up extra space.
- More clutter.
- That would not be a good idea, I would throw them away. They're just taking up room.
- They just take up space and they are hazardous for children.
- They take up space. In my home since I'm the only here.
- Well, if it's out of date it's not going to do anything so it's just taking up space.

NO CONSEQUENCES (17 mentions)

- At least if they're here they're not out in the world causing problems I don't have any children so I don't worry about anyone getting to it.
- I don't think it would do any harm in my home.
- I don't think there's much risk of taking an expired medication here, I'm the only one. I'd check the date and throw it out.
- I'm hoping nothing.
- In my case nothing would happen I have nobody here I have no children or animals who would eat it.
- In my current situation I can't see any reason why they would cause problems, because I don't have any little ones around. Any place with there's children, it unsafe, definitely, and if there's someone very old with poor vision that could also be unsafe.
- It depends on the home. I have no kids and the storage of prescription drugs is not an issue. I am aware of compatibility issues. The danger is very little.
- It takes up space. I don't think anyone would find them because they are hard to find. I can't think of any.
- None right now, but there are no little children.
- No consequences in our home. in general if some kids would get a hold of them or someone using your bathroom they could get in your cabinet and take them
- No consequences right now.
- None, we don't have any small kids to worry about.
- Not a whole lot.
- Nothing really.
- Nothing too severe. If small children got after them.
- Very few consequences if any.
- Well, I don't see any problem with my home, I don't have any kids or anything here. Accidental use by somebody I suppose.

OTHER (23 mentions)

- Anything that's dated I would imagine there's some people that if you go into their refrigerator you wanna puke. I don't think medication is any different. It depends on the people, it depends on the individual. I don't think you should regulate how people should do things or live their life. If you came home drunk one day and you want to take medication because whatever you took that medication for in the past, and you took the medication, I think there might be a problem there. Or if you're not in your right thinking.
- Casi siempre la botamos porque las consequencias no las sabemos. [Almost always we throw them out because we don't know the consequences.]
- Honestly, I don't know. I don't know if you can use expired medication but I would just not take the chance.
- I don't have kids around so I don't worry about that. I don't think there is any risk for me, but I do deal with sick parents, but generally the stuff I use all the time is OK and it wouldn't be as effective if expired.
- I don't think they should be in the house. Take them to a hospital emergency room.
- I think it's a personal judgment. I don't think anyone in their right mind will keep expired medication. If they give it to someone knowingly, they should be punished.
- I wouldn't take it, so I might as well get rid of it.
- If I died and these prescriptions were in my house, I would hope somebody would know what to do with it, otherwise it is unlikely anything would happen.
- If I had a medication for a specific use, I would take it.
- If I'm not going to take them, I wouldn't keep them in the house. There's no sense to keep something in the house that you don't need. It's only common sense.
- If they are there for a long time they could dissolve into the air. Or a young person could get a hold of them and they could get sick or die.
- It really is no use to keep it if it's outdated.
- Never have expired meds at home.
- Normally this doesn't happen in my home there isn't much medicine in my house.
- That it would be not good.
- That wouldn't be a good idea. I just would get rid of them.
- There's no point in keeping something past it's expiration date, so I would probably dispose of it the same way I dispose of any other.
- They could explode. It could be taken by a child or a drug addict.
- They tell you time and time again, when your medicine reaches a year, throw it away or dispose of it someway. I don't know.
- We don't have anybody here that would take anything.
- Well, it could start by causing bad odors and bad stuff like that get in your eyes and stuff. I could finish by being a problem for my grandchildren who visit me. Some of them might cause burning tiles on the floor.
- You know I don't have idea of any danger with that. Because I have ideas that they simply have less strength over time, but it is not worthwhile to consume it over time. But I don't have idea of the danger of storing it.
- Ya no se pueden usar medicamentos sin usar. [You cannot use medications without use.]

Item Q29a@6. [If respondent said there are reasons he or she might not want to take unused/expired medications to a pharmacy for proper disposal:] Can you tell me what those reasons are? (Other-specify)

NOT CONVENIENT/A BOTHER (18 mentions)

- Inconvenience *(4 mentions)*
- Convenience *(2 mentions)*
- Inconvenient *(2 mentions)*
- Convenience, laziness.
- Inconvenient. If I don't get a lot of prescriptions the pharmacy could be out of my way.
- If it's inconvenient.

- It's a hassle.
- Just convenience really.
- Just laziness.
- Laziness
- Not convenient.
- Only the inconvenience...lack of transport.
- The inconvenience of it.

ISSUES OF TRUST (8 mentions)
- Because I feel like they will re use it and I paid for it.
- Depending what they did with it. It has my name attached to it.
- For all I know, they could throw into a landfill.
- I wouldn't know exactly how they get rid of them.
- Not appropriate training in disposal.
- The pharmaceutical companies are wasteful and I wouldn't return anything.
- The trust is the first one. I want to be sure of where they end up. I would support a local organization that I know well that's environmentally correct. I would take it to them first.
- They wouldn't dispose of them.

AVAILABILITY OF TIME (7 mentions)
- Don't have time or don't know where to take it.
- I'd be too busy.
- If I didn't have the time.
- It's my time, I don't have time to go to the pharmacy.
- Out of the way lots to do.
- Time
- We may not have time to do so.

LOCATION (2 mentions)
- Esta retirado de donde vive. [It is far from where I live]
- If it's too far away.

IF PAYMENT IS INVOLVED (3 mentions)
- Because I already paid for it.
- If I had to pay to have them disposed of.
- If they make me pay a fee when I am on a limited income.

NOT ABLE TO (3 mentions)
- I'm disabled so it would be very difficult for me to get there.
- In a wheelchair, unable.
- Que no manejo y no podria ir. [That I don't drive and I wouldn't be able to go.]

OTHER (14 mentions)
- Because my doctor would know I didn't take them.
- Because what happens if there's a war and you can't get access to medication.
- I didn't know you could take it back to a pharmacy.
- I don't think that they will take it.
- I don't think the pharmacist would take them.
- I like to put them in the wastebasket in my house.
- I might want to take the medication later.

- I think it's unimportant and unnecessary.
- I don't think it's necessary, I don't see it that way.
- I'm not going to take three expired aspirin back to the pharmacy.
- It wouldn't be any good.
- It's easier to throw away.
- They are busy enough.
- You're mixing up two jobs there. I think the first job of the pharmacy is to take care of people who have questions about meds, etc. not dispose of them. If I was picking up medicine for my husband and someone was taking time to dispose, I would probably mind that.

Item Q30_7. Is there any other method that you are confident is safe? (Yes-specify)

THROW AWAY IN GARBAGE (4 mentions)
- I think safe disposal in tight containers and put it in a garbage dumpster.
- Put in garbage bin.
- The garbage.
- Throwing them out seems safe to me.

BURN (5 mentions)
- Burning
- If they let us burn trash, we could burn it.
- Incineration
- Incineration would be the best way, drop it off and they dispose of it in that way.
- Yo pienso que la mejor forma es quemarla. [I think the best method is to burn it.]

BURY (2 mentions)
- Bury it.
- I guess you could bury it.

GRINDING/MIXING MEDICATIONS WITH DIRT, ETC. (6 mentions)
- Don't just dispose of your pills in a box. Take them out and grind them up before you put it in a drop box or lockbox.
- Grinding the medicine with soil or sand.
- If it could ground up immediately.
- If it is a pill, just pulverize it.
- Smash pills up and throw them out or pour the liquid in the garbage can.
- Yeah, if I take the time to smash up the pills and put them in the garbage.

FLUSHING DOWN SINK/TOILET (4 mentions)
- Flush down the toilet.
- Flush it down the toilet.
- Flushing down the toilet.
- Well I think flushing it down the toilet is best if it's not going to impact the environment.

DOCTOR/PHARMACY/HOSPITAL (8 mentions)
- I put it in his hand (doctor's) and I get his signature.
- If there is a way to drop them off in a container in a pharmacy or doctor's office they'll know how to discard them. If they will accept them.
- I'm only comfortable if you are going to a hospital and dispose of there or if you do it yourself in your trash.
- Just the doctor when I can see him.
- Llevarlos directamente en una caja para un hospital. [Take them directly in a box to the hospital.]

- Lo mas seguro es en el mismo consultorio medico o una farmacia mas cercana esas son las mejores maneras en mi opinion. [The safest is the doctor office or nearest pharmacy, these are the best options in my opinion.]
- Que hubiera un programa para reciclar los medicamentos como los hospitales y farmacias. [That there would be a program to recycle medications like in the hospitals and pharmacies.]
- Strictly hand to hand with medical or pharmacy personnel.

FIRE STATION/POLICE (2 mentions)
- Maybe at a fire station too.
- Well if you, you know if they had the police taking needles too and they were taking it to a drug center, where they picked up the drugs, where they put these needles, I don't know. I had that problem, my husband took insulin, and he took his needles to the doctor. More people don't want to bother with it.

HAZARDOUS WASTE SITE/OTHER LICENSED SITE (4 mentions)
- Hazardous waste site is fine. Especially if they co-mingled waste. Then you wouldn't have to worry about anyone going in after it.
- Is some type of licensed facility for disposal.
- There is a community service our Public Works dept. has you can dispose of them there.
- Turning it to a hazardous waste facility is safe.

FINISH THE MEDICATION (2 mentions)
- Get the amount you are supposed to get.
- Take your medication, then you don't have any left over.

OTHER (12 mentions)
- Do a medicine drive...that would be good.
- En las escuelas. [In the schools.]
- Have a buy back program to sell unused drugs.
- I think a good method is to take the drugs we have and there should be a machine that would destroy the medications and that way we can get rid of it there.
- I throw away my insulin syringes -after I bend them and put the cap back on in the garbage.
- Inform people more.
- Only if they had a place that you could visually see that it is destroyed.
- Library pick-up day like with batteries.
- Recycling center that has a lockbox.
- Someone from the family could take care of it.
- Somewhere where it is being watched.
- The way I do it.

Item Q31_9. Is it someone else's responsibility to find a safe way for people to dispose of unused or expired medications? (Yes-specify)

ALL/EVERYONE/EACH INDIVIDUAL (22 mentions)
- All people should be aware of the proper way.
- De cada persona. [Of each person.]
- De toda la gente. [From all the people]
- De todos. [From everyone.]
- Each individual is responsible.
- Es responsabilidad de todos. [It is the responsibility of everyone.]
- Everybody's responsibility.
- Everyone

- Everyone needs to be responsible or we will all suffer if we don't.
- Everyone's
- Everyone should be responsible.
- Everyone should work together to make it happen.
- I would just say society in general.
- It is all of us.
- It is the responsibility of everybody because if it gets into the water it makes no difference in I do my part and someone else doesn't.
- It's everyone's.
- My fellow citizens not a particular organization, other human beings.
- Si de toda la gente como un trabajo en equipo. [Yes, from all the people like teamwork.]
- we all should get involved. It is my responsibility as well as that of the corporations
- We should help each other, it's just as much my responsibility as someone else's.
- Well everyone else.
- Well, I wouldn't say no to a generic someone else it's everyone's responsibility

CITY/VILLAGE/GOVERNMENT AGENCY (17 mentions)

- I think it's the responsibility of the city management.
- I think that should be a city program like recycling.
- I think the government has to educate people about it and let them know what the options are.
- I'm confused because I think that the government should have a proper way of doing this.
- Maybe the local government.
- Maybe there should be a governmental national program, like wearing a seat belt.
- Possibly the federal and or state government.
- Probably a public official.
- The CDC is responsible the public health department and the local pharmacies because they are making money too.
- The federal government.
- The government.
- The public health department and the Environmental Activist groups.
- The same administration that administer to collect the garbage.
- The government. Even the President should make it so that information is given to the public.
- The government.
- Village in which you live - they should inform people.
- Yes, but I don't know who because it's not my academic background, I would point a finger at the federal government and the AMA, I would have to find out who was concerned about it and who it was really affecting.

THOSE INVOLVED WITH MANUFACTURING OR DISPENSING MEDICATIONS (7 mentions)

- A la gente que tiene la informacion de como desechar a la farmacia al docotor o donde sea. [For the people that have the information on how to dispose at the pharmacy, doctor or anywhere else.]
- Anybody that is in the business end of it. Anyone that dispense or makes drugs. Pharmacies and pharm companies.
- First people would be pharmacists, then the EPA.
- I think the pharmacist as well as myself need to find a way to dispose of medication.
- Include the pharmacists, doctor's, and police and pharmacies. More doctors and pharmacists responsibilities. I wouldn't send my expired meds to a pharmaceutical co.
- Overall healthcare workers like nurses and others.
- The sales people who get the doctors to prescribe the drugs should be involved.

PERSON WHO TAKES THE MEDICATION (9 mentions)

- Anybody that has or uses medication.
- Everyone who takes medicine.

- Everyone's responsibility who takes meds.
- I think it's the person who buys it's responsibility to dispose of it.
- It's the person who buys the medication's responsibility.
- Person that is taking the medicine.
- The person that has it.
- To all the people that have medication.
- Well the person that should be responsible should be the person who has it should find out where it should go.

CAREGIVERS FOR PEOPLE WHO TAKE MEDICATIONS (6 mentions)

- If you're not able to, then someone else should do it for you.
- If the person is not capable then it is up to someone else.
- No, unless you're homebound and need someone else to do it for you.
- Parents responsibility for a child.
- Por ejemplo la gente el adulto que le da los remedios a los ninos. [For example: the people (the adult) that give remedies to the children.]
- Whoever is in charge of the person who needs the medication.

OTHER (17 mentions)

- Family and friends.
- I think it's somebody's responsibility to get the word out to the public about how to dispose of their medications. (*who?*) Anyone who has the information.
- I think lawmakers. I think the standard needs to be set via law, and then carried out by manufacturers, the doctors, the distributors and the users. And then enforcement, maybe that's the EPA or whatever, or the Department of Health, whatever the relevant ones are.
- If there was someone out there that could let people know of safe ways.
- It's someone else's responsibility to make sure that I am aware of programs but it is my responsibility to actually do it.
- Let them do it.
- Otra gente. [Other people.]
- Otras personas. [Other people.]
- Our school system should be accepting things to tell the children about so that the children can pass on the information to their parents.
- Schools
- The media to let us know where the places are to dispose of medication properly.
- The people that we pay. The public and society of people. That's what they're supposed to do.
- There should be a community effort, but I don't trust the police to manage that.
- To resolve the problem, yes.
- Waste disposal can make people more aware that facilities exist.
- Yes, but I can't think of anyone.

APPENDIX C. METHODOLOGICAL REPORT

MEDICATION DISPOSAL SURVEY

Final Methodological Report

Prepared by
Dr. Linda Owens
Dr. Sowmya Anand

SRL Study 1060

December 2009

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OVERVIEW

The Survey Research Laboratory (SRL) at the University of Illinois at Chicago (UIC) conducted a random-digit-dial (RDD) telephone survey of 445 Cook County residents in Illinois on behalf of Dr. Larry Danziger in the UIC Department of Pharmacy Practice. The study was funded by the Metropolitan Water Reclamation District of Greater Chicago. The purpose was to study the ways in which adult residents of Cook County dispose of their prescription and nonprescription medicines once they are done with them. This report describes the study methodology.

Dr. Sarah M. Wieczorkiewicz, Clinical Assistant Professor in the Department of Pharmacy Practice, coordinated with SRL on all activities during the study. Dr. Sowmya Anand at SRL managed project coordination and questionnaire development, and Dr. Linda Owens had primary responsibility for sampling design and statistical analysis of the data.

The study protocol was originally submitted to UIC's Institutional Review Board and approved in 2008, prior to SRL's involvement in the study (IRB protocol #2008-0568). Two amendments to the original protocol were subsequently approved by IRB.[1]

III.

IV. Questionnaire Development

The draft of the substantive questionnaire was provided to SRL by the client toward the end of January 2009. Subsequently, SRL conducted its internal review of the questionnaire to provide comments and suggestions on the wording and format of questions. SRL also developed the phone screener instrument to randomly select one adult per household who could respond to the questionnaire and who was eligible to participate in the survey. Any English- or Spanish-speaking adult (18 years or older) who confirmed that they have ever had prescription or nonprescription medications at home, used by them personally or by someone in the household for whom they provide care, was eligible to participate in the study. The main study telephone screener is included as Appendix A, while the questionnaire used during main study data collection is included as Appendix B.

QUESTIONNAIRE REVIEW COMMITTEE

Both the pretest and the main study English instruments were reviewed and approved by SRL's Questionnaire Review Committee (QRC). The committee is composed of SRL staff members appointed by the Director to ensure that all questionnaires administered by SRL follow ethical practices and basic principles of questionnaire construc-

[1] IRB Amendment #1 (approved June 15, 2009) = revisions to the questionnaire and to the recruitment and consent script based on comments from the Questionnaire Review Committee at SRL. The IRB approval of this first amendment took longer than anticipated and led to the postponement of the scheduled pretest; the amendment application was submitted on April 14, 2009, and the approval was received about two months later on June 15, 2009.

IRB Amendment #2 (approved August 3, 2009) = revisions to the questionnaire and to the recruitment and consent script based on conducting the pretest.

tion. No instrument is administered to respondents before approval is obtained from this committee, and several changes to the instrument were suggested by the QRC and incorporated in the final version.

SPLIT-BALLOT EXPERIMENT

V.

VI. WITH THE PERMISSION OF THE CLIENT, WE INCORPORATED A SPLIT-BALLOT EXPERIMENT INTO THE SURVEY QUESTIONNAIRE TO ASSESS THE DIFFERENCE BETWEEN TWO WAYS OF WORDING A QUESTION AND ITS ASSOCIATED RESPONSE OPTIONS. THE EXPERIMENT INVOLVED QUESTIONS THAT USE A YES-NO RESPONSE FORMAT. QUESTIONS WITH YES/NO RESPONSE OPTIONS ARE VERY APPEALING TO USE IN A SURVEY (E.G., DO YOU DRINK BOTTLED WATER? YES/NO). THESE ARE SEEMINGLY EFFICIENT TO USE AND USED OFTEN. FOR EXAMPLE, THE GENERAL SOCIAL SURVEYS HAVE INCLUDED MANY YES/NO ITEMS.[2] HOWEVER, THERE IS A POTENTIAL PROBLEM ATTACHED TO USING SUCH A FORMAT: ACQUIESCENCE. ACQUIESCENCE IS A TENDENCY THAT LEADS RESPONDENTS TO CHOOSE AFFIRMATIVE OR "YES" ANSWERS RATHER THAN "NO" ANSWERS, INDEPENDENT OF THE CONTENT OF THE QUESTION. SOME EXPERTS SUGGEST THAT AN ALTERNATIVE IS TO OFFER A BALANCED QUESTION WORDING WITH FORCED CHOICE RESPONSE OPTIONS (E.G., DO YOU DRINK BOTTLED WATER, OR DO YOU NOT DO THAT? DRINK BOTTLED WATER/DO NOT DRINK BOTTLED WATER).[3]

VII. HOWEVER, FORCED CHOICE QUESTIONS VIOLATE NORMS OF EVERYDAY CONVERSATION AND THEREFORE MAY AFFECT HOW RESPONDENTS REACT TO THEM. ALSO, BECAUSE THEY INVOLVE MORE WORDS, THEY TAKE LONGER TO ADMINISTER, ADDING TO THE OVERALL LENGTH OF THE INTERVIEW. TO ASSESS THE PRESENCE OR ABSENCE OF SUCH EFFECTS, WE PRESENTED A RANDOMLY SELECTED HALF OF THE RESPONDENTS 11 QUESTIONS USING THE YES/NO FORMAT AND THE OTHER HALF WITH THE SAME QUESTIONS IN A BALANCED FORCED CHOICE FORMAT. WE RECORDED THE TOTAL LENGTH OF THE INTERVIEW AND ALSO ASKED INTERVIEWERS TO EVALUATE THE EASE OF ADMINISTRATION AND RESPONDENTS' REACTIONS TO THE SURVEY. THESE MEASURES CAN BE USED TO HELP DETERMINE IF THERE IS A SIGNIFICANT DIFFERENCE IN ADMINISTRATION TIME AND ADMINISTRATION DIFFICULTY BETWEEN RESPONDENTS WHO RECEIVED THE FORCED CHOICE FORMAT VERSUS THOSE WHO RECEIVED THE YES-NO FORMAT.

VIII. **EXAMPLE OF YES-NO FORMAT:**

IX. Q1_1

X. DO YOU CURRENTLY HAVE ANY MEDICATIONS, STORED AT HOME OR AT ANY OTHER PLACE, THAT WERE PRESCRIBED BY A DOCTOR?

XI. 1 YES

XII. 2 NO

XIII. **EXAMPLE OF FORCED CHOICE FORMAT:**

XIV. Q1_2

[2] Davis, J. A., & Smith, T. W. (1996). *General Social Surveys, 1972–1996: Cumulative codebook.* Chicago: National Opinion Research Center.

[3] Krosnick, J. A. (1991). Response strategies for coping with the cognitive demands of attitude measures in surveys. *Applied Cognitive Psychology, 5,* 213–236.

XV. DO YOU CURRENTLY HAVE ANY MEDICATIONS, STORED AT HOME OR AT ANY OTHER PLACE, THAT WERE PRESCRIBED BY A DOCTOR, OR DO YOU NOT HAVE ANY?

XVI. 1 HAVE PRESCRIPTION MEDICATIONS

XVII. 2 DO NOT HAVE ANY PRESCRIPTION MEDICATIONS

The question numbers for the 11 pairs of questions involved in this experiment are as follows: Q1_1- Q1_2; Q2_1-Q2_2; Q4_1- Q4_2; Q5_1- Q5_2; Q6_1- Q6_2; Q11_1- Q11_2; Q12_1- Q12_2; Q14_1- Q14_2; Q17_1- Q17_2; Q21_1- Q21_2; Q23_1, Q23_2.

QUESTIONNAIRE PROGRAMMING

XVIII.

Before being administered to respondents, the survey instrument was programmed by the project coordinator into SRL's Computer-Assisted Telephone Interviewing (CATI) system. SRL utilizes the CASES system developed by the Computer-Assisted Survey Methods Program at the University of California-Berkeley, and this survey was programmed in CASES Version 4.3.7.

As a quality control measure, our field supervisors and coordinators spent a full week testing the programmed instrument before the pretest. After the pretest was over and before we began the main study, our field section spent another week testing the changes made as a result of the pretest.

In addition, on July 2, Ms. Danette Cox, the project person from the Metropolitan Water Reclamation District of Greater Chicago, came to test the programmed instrument using our CATI system and tour SRL's Chicago phone center.

PRETEST

XX.

The main purpose of the pretest was to test the instrument with actual respondents, as well as to get a sense of field conditions that interviewers might encounter. The pretest interviews were conducted in English only.

Pretest sample was purchased from Marketing Systems Genesys on March 12, 2009. The pretest sample was a random sample of residential numbers in Cook County, Illinois, and consisted of 136 cases.

Table 1. Disposition of Sample: Pretest

XIX. CODE	Disposition	#	%
(1)	Completed interview, English	9	6.6
(30)	No answer	18	13.2
(31)	Answering service/machine	21	15.4
(32)	Eligible respondent not available	5	3.7
(33)	Unscreened respondent not available	3	2.2
(40)	Final refusal to screener	28	20.6
(41)	Final refusal interview	5	3.7
(44)	"Do not call" refusal, unscreened	1	0.7
(56)	Never able to interview	4	2.9
(71)	Ineligible, never has meds in HH	2	1.5
(86)	Nonworking	22	16.2
(87)	Nonresidential	15	11.0
(88)	Ineligible foreign language	3	2.2
	TOTAL	**136**	**100%**

Three interviewers were trained to conduct pretest interviews. The survey instrument was pretested for about two weeks—from June 17, 2009, to July 2, 2009. We achieved 9 completed interviews out of a total sample of 136 cases, for a response rate of 12.1%. The pretest interviews averaged 20.2 minutes. The administration time varied slightly based on whether respondents received the yes/no questions or the forced choice questions; the average length for the former was 18.7 minutes; for the latter, it was 20.9 minutes.

Tables 1 and 2 show the disposition of sample and the rates for the pretest, respectively. A description of how the rates are calculated can be found in the section on Final Disposition of Sample and Sample Rates for the main study.

CHANGES MADE AFTER THE PRETEST

After pretest data collection, SRL held a debriefing session on July 7, 2009, which was attended by interviewing staff, other project staff, and Dr. Wieczorkiewicz. Based on feedback from the interviewers and discussions with Dr. Wieczorkiewicz, the following changes were made to the programmed instrument in readiness for main study data collection.

For the pretest, the survey instrument was organized such that each question about the use, storage, or disposal of medications was asked about prescription medications first, followed by the same question for nonprescription medications. Pretest respondents had difficulty keeping track of whether the question was referring to prescription or nonprescription medications.

To make it easier for interviewers to clear up respondent misunderstandings, SRL reordered the questions so that all those pertaining to prescription medications were together in one section, and similarly for questions pertaining to nonprescription medications and questions pertaining to either type of medication.

Questions on whether the respondent had health insurance coverage and prescription drug coverage were added to the questionnaire, as these factors might help explain important differences between respondents' use, storage, and disposal behaviors.

Finally, instructions to respondents, such as which types of nonprescription drugs to be included when providing responses to questions, were revised such that it was clear that they could include medications in ointment or cream form.

A copy of the final version of the questionnaire, incorporating all changes, can be seen in Appendix B.

XXI.

Table 2. Sample Numbers and Rates: Pretest

	#	Rate
Total sample	136	
Nonduplicates	136	100.0%
Working numbers	114	83.8%
Residential numbers	99	86.8%
Contact to screener	60	60.6%
Cooperation to screener	24	40.0%
Eligible	19	79.2%
Contact to final	14	73.7%
Cooperation to final	9	64.3%
Response rate		**12.1%**
Refusal rate		37.5%
Cooperation rate		24.4%

SPANISH TRANSLATION

XXII.

XXIII. AN INITIAL VERSION OF THE ENGLISH-LANGUAGE INSTRUMENT WAS SENT TO AN OUTSIDE TRANSLATOR WHO HAS DONE MANY PREVIOUS TRANSLATIONS FOR SRL. WE THEN USED SRL PERSONNEL WHO ARE NATIVE SPANISH SPEAKERS TO CHECK AND UPDATE THE TRANSLATION IN LIGHT OF THE CHANGES THAT HAD BEEN MADE TO THE ENGLISH-LANGUAGE INSTRUMENT

SINCE IT WAS FIRST SENT TO THE TRANSLATOR, INCLUDING CHANGES MADE AS A RESULT OF THE PRETEST.

XXIV. Main Study

XXV.

DATA COLLECTION DATES

Interviewing began on August 6, 2009. Data collection was originally scheduled to extend 12 weeks but took an extra week and a half (for a total of 13.5 weeks). The main reason for the additional data collection time was the lower-than-expected completion rate, which required fielding additional sample (as described in the "Sample Management" section below).

PERSONNEL

XXVI.

To achieve the desired number of completes in the study timeframe, interviewers from both the Urbana-Champaign and Chicago offices worked on the survey. Between the two locations, 20 interviewers were trained to conduct the main study interviews. This field staff was overseen by two field coordinators: Ms. Marni Basic in Urbana-Champaign and Mr. Douglas Hammer in Chicago.

All interviewers and supervisors received a one-day study-specific training conducted by the SRL project coordinator. The training included a general orientation to the design and purpose of the survey instrument (with instructions on how to record answers and how to probe), as well as practice interviews. All field staff were supplied with an interviewer training manual covering all aspects of the data collection procedures, which was used during the training session and as a reference manual throughout the course of the study. A copy of this training manual can be seen in Appendix C.

FIELD PROCEDURES

Most telephone interviewing was conducted on weekday evenings and weekends to increase the probability of successful contact with survey respondents. Twenty contact attempts were made, at different times of day and on different days of the week, before finalizing a case as noncontact. In the case of most refusals, two callbacks were made at a later time by an interviewer experienced at refusal conversion to increase the probability of cooperation.

Monitoring of approximately 10% of all calls was carried out by both the field supervisors and the field coordinators.

AVERAGE LENGTH OF INTERVIEW

The main study's interviews averaged 21.6 minutes in length (21.7 minutes for interviews using the yes-no format questions and 21.5 minutes for those using the forced choice format questions).

SAMPLE MANAGEMENT

The study was conducted using a random-digit-dial telephone survey methodology, in which each residential telephone number in Cook County was eligible to be selected for the sample. Any adult in the household age 18 or older was eligible to participate. If the household contained more than one adult, the respondent was randomly sampled using the Troldahl-Carter-Bryant method of respondent selection.

Based on initial estimates of response rates, we estimated a starting sample size of 2,727 would be necessary to obtain 400 completed interviews. An initial sample of 3,301 telephone numbers was purchased from Marketing Systems Genesys on March 12, 2009. The sample size was larger than budgeted because many of the telephone numbers were cell phones or dedicated fax lines and had to be eliminated from the sample prior to calling. Midway through the data collection period, it became apparent that cooperation rates were not as high as we anticipated, so we purchased additional telephone numbers. The resulting total sample size was 3,954.

The first batch of sample was released for calling on August 6, 2009. In total, seven replicates were released for calling, with the last one being set up on October 5, 2009. Interviewing began on August 6, 2009, and ended on November 6, 2009.

DATA REDUCTION

XXVII.

One aspect of data reduction was the processing of all text answers to survey items. On items that asked for an open-ended response, interviewers recorded a respondent's answer verbatim. On items with an other-specify response option, interviewers had the option of entering a respondent's answer verbatim if it did not appear as one of the precoded response options. On items *without* an other-specify response option, interviewers had the option of using a "notes" feature to record information that the project coordinator might find useful in interpreting a respondent's answer.

This review of the interviewer-entered text answers revealed occasional interviewer errors (such as entering an other-specify answer instead of a precoded response option that already covered the respondent's answer). Fixes for such interviewer errors were decided upon jointly by the field coordinators and the project coordinator and then implemented by the SRL Data Reduction section in a process we call "back coding."

The Data Reduction section also was responsible for producing an edited text file of all the open-ended and other-specify variables as a deliverable at the end of the study. The editing consisted of regularizing spelling and capitalization, filling out abbreviations, and eliminating CASES-related text, such as the interviewer- and time-stamps added to the text answers.

DATA PROCESSING

The SRL Office of Survey Systems checked and cleaned the data to ensure that any illegal answers were caught and corrected. A final data set and SPSS setup file then were created for the study and sent to the SRL Sampling section for weighting.

Table 3. Final Disposition of Sample

Code	Disposition	*n*	%	Avg. # call attempts
1	Completed interview, English	413	10.4	5.4
2	Completed interview, Spanish	24	0.6	7.5
3	Partial completed interview	8	0.2	13.8
30	No answer	597	15.1	10.1
31	Answering machine/answering service	426	10.8	18.3
32	Eligible R not available	65	1.6	17.4
33	Unscreened R not available	137	3.5	17.6
40	Final refusal before screener completed	755	19.1	10.4
41	Final refused interview, English	250	6.3	10.5
42	Final refused interview, Spanish	9	0.2	8.1
44	"Do not call" refusal, unscreened	20	0.5	6.0
45	"Do not call" refusal, screened English	5	0.1	11.6
47	"Privacy manager" refusal, unscreened	8	0.2	4.9
48	"Privacy manager" refusal, screened English	1	0	3.0
55	Not able to interview during survey period	38	1.0	10.7
56	Never able to interview	51	1.3	3.8
70	Ineligible, no one 18 or older in HH	1	0	4.0
71	Ineligible, never has medications in HH	78	2.0	6.1
86	Nonworking	694	17.6	1.4

FINAL DISPOSITION OF SAMPLE & SAMPLE RATES

The final disposition of sample and the sample rates are provided in Tables 3 and 4.

Table 4. Final Sample Rates

	#	Rate
Total sample	3,954	
Nonduplicates	3,954	100.0%
Working numbers	3,260	82.4%
Residential numbers	2,957	90.7%
Contact to screener	1,934	65.4%
Cooperation to screener	925	47.8%
Eligible	775	83.8%
Contact to final	710	91.6%
Cooperation to final	445	62.7%
Response rate 3		18.9%
Refusal rate		39.2%
Cooperation rate		32.6%

87	Nonresidential		303	7.7	2.9
88	Ineligible foreign language		71	1.8	4.3
		TOTAL	**3,954**		**8.6**

The *response rate* is the proportion of the eligible respondents who completed the interview. The American Association of Public Opinion Research's (AAPOR) *Standard Definitions*[4] includes six different methods for calculating response rates (pp. 36–37). This report describes the calculation of response rate number 3 (RR3) in detail.[5] In RR3, the numerator includes completed interviews, while the denominator includes interviews, refusals, noncontact of eligible respondents, and a proportion of households for which eligibility status is unknown.

In the overall sample, there were 1,435 cases for which a screening questionnaire could not be administered (contact to screener minus cooperation to screener plus answering machines). We assumed that 83.8% of these cases would have been eligible. In another 597 cases, the phone rang continuously at each contact attempt and was never answered. We assumed 82.4% of those were working numbers, 90.7% were household numbers, and 83.8% were eligible. Consequently, the total number of cases with assumed eligibility is estimated as 83.8% of 1,435 (1,203) plus 62.6% of 597 (374 cases). Thus, the response rate is computed as the ratio of 445 completed interviews (from Table 4) to the sum of the cases known to be eligible (775) and the estimated number of eligible cases among the cases of unknown eligibility (1,577). The resulting response rate is 18.9%.

The *refusal rate* is the proportion of eligible respondents who either refused to complete an interview or broke off an interview. AAPOR's *Standard Definitions* includes three different methods for calculating refusal rates. This report uses refusal rate number 2 (p. 39). In this rate, the numerator includes refusals (actual refusals of eligible respondents plus a proportion of refusals of households whose eligibility is unknown); the denominator is the same as that of response rate 3 described above. Therefore, the total number of refusals is those who refused after screening, 265 (dispositions 41, 42, 45, and 48), plus 83.8% of the 783 who refused prior to screening (dispositions 40, 44, and 47), for a total of 921 refusals. The refusal rate is 39.2%.

The *cooperation rate* is the number of completed interviews divided by the number of completed interviews plus the number of refusals. *Standard Definitions* includes four different methods for calculating cooperation rates. This report uses cooperation rate number 4 (p. 38). The cooperation rate is 32.6%.

REFUSAL CONVERSTION & INTERVIEWER MONITORING

XXVIII. SRL MAKES A SUBSTANTIAL EFFORT TO CONTACT RESPONDENTS DURING THE DATA COLLECTION PERIOD. INTERVIEWERS CONTACT MOST TYPES OF CASES A MAXIMUM OF 20 TIMES BEFORE A FINAL DISPOSITION IS ASSIGNED (CASES IN WHICH THE PHONE IS NEVER ANSWERED ARE CALLED A MAXIMUM OF 10 TIMES). IF A HOUSEHOLD REFUSES TO COMPLETE EITHER A SCREENER OR AN INTERVIEW, SUCH CASES ARE CALLED AGAIN BY REFUSAL CONVERTERS WHO HAVE ADDITIONAL TRAINING IN HANDLING SUCH CASES. WE DIVIDE SUCH CASES INTO HARD AND SOFT REFUSALS. HARD REFUSALS, WHICH INCLUDE STATEMENTS

[4] The American Association for Public Opinion Research. (2006). *Standard definitions: Final dispositions of case codes and outcome rates for surveys* (4th ed.) Lenexa, KS: Author.

[5] Response Rates 1 (RR1) and 5 (RR5) are included here to show the variation in what researchers might report as a response rate for this study. RR1 and RR5 have the same numerator as that for RR3—the number of completed interviews. RR1 and RR5 differ from RR3 because they make different assumptions about what is in the denominator of the ratio. RR1 is the most conservative (i.e., lowest) response rate and RR5 is the highest. While RR3 includes a *portion* of the cases for which eligibility is unknown, RR1 includes *all* of the cases for which eligibility is unknown and RR5 includes *none* of the unknown eligible cases. RR1 for this study is 15.9%; RR5 is 57.4%.

LIKE, "TAKE ME OFF YOUR LIST," ARE NOT CALLED BACK; SOFT REFUSALS, WHICH INCLUDE LESS DEFINITIVE STATEMENTS, ARE REWORKED.

XXIX. IN RDD STUDIES, WE MAKE UP TO TWO ATTEMPTS TO CONVERT SOFT REFUSALS. THEY ARE RE-CONTACTED FOLLOWING A SEVEN-DAY WAIT PERIOD AFTER EACH REFUSAL. SUCH CASES ARE FINALIZED WHEN A RECONTACT RESULTS IN A FINAL REFUSAL, A FINAL NONREFUSAL (NOT AVAILABLE OR INELIGIBLE), A COMPLETED INTERVIEW, OR THE MAXIMUM NUMBER OF ATTEMPTS HAS BEEN REACHED.

XXX. FOR THIS STUDY, 1,144 INITIAL REFUSALS WERE REWORKED. TABLE 5 SHOWS THE FINAL DISPOSITION ASSIGNED TO THESE CASES. TWENTY-ONE PERCENT OF INITIAL REFUSALS WERE CONVERTED TO SOMETHING OTHER THAN A FINAL REFUSAL, WITH 11.6% OF INITIAL REFUSALS CONVERTED TO COMPLETED INTERVIEWS.

XXXI. TO ENSURE THE QUALITY OF THE DATA COLLECTED, SRL FIELD SUPERVISORY STAFF MEMBERS MONITOR AT LEAST 10% OF ALL INTERVIEW WORK. MONITORING INVOLVES WATCHING THE INTERVIEWER'S DATA ENTRY FROM A REMOTE SCREEN AS WELL AS LISTENING ON THE PHONE. BOTH CONTACT ATTEMPTS AND INTERVIEWS ARE MONITORED. ALL INTERVIEWERS ARE MONITORED WITHIN THE FIRST WEEK OF THE STUDY TO ENABLE US TO PROVIDE FEEDBACK AND TO CATCH PROBLEMS EARLY. IF AN INTERVIEWER IS HAVING DIFFICULTY, MONITORING IS INCREASED OR THE INTERVIEWER IS REMOVED FROM THE STUDY.

XXXII. Sample Weights

POSTSTRATIFICATION WEIGHTS

In this study, the only weights we calculated are post-stratification weights. These weights are calculated to ensure that the sample matches the population it represents on certain demographic characteristics. Using the 2008 American Community Survey (CPS) as our population data source, we compared the distribution of gender, race, and age in the sample to the population. We used the procedure known as "raking," or iterative proportional fitting, to ensure that the sample matched the population on these three characteristics. In the initial step of this procedure, we compared the gender distribution of the sample to that of the population. The weight is simply the ratio of the percent of the population in each gender category to the percent of the sample in each category. For example, the sample distribution was initially 36.4% male and 63.6% female, compared to population proportions of 48.1% and 51.9%. Thus, the initial gender weight was 1.32 for men and 0.82 for women.

Table 5. Final Disposition of Sample of Initial Refusals

Code	Disposition	#	%
(1), (2), (3)	Completed interview: English, Spanish, or partial	132	11.6%
(32), (33), (55), (56)	Not available	38	3.3%
(71), (87), (88)	Ineligible	70	6.1%
(40), (41), (42), (44), (45)	Final refusal	904	79.0%
	TOTAL	**1,144**	**100.0%**

After weighting the data for gender, we then compared the distribution of race in the sample to that in the population and calculated race weights in the same manner as the gender weights (ratio of population in each category to sample in each category). The resulting weight was the product of the gender weight and population-to-sample race ratios. We then weighted the sample for both gender and race and compared the age distribution in the sample to that the population distribution. We calculated the age weights in the same manner as the gen-

der and race weights. We carried out this procedure until the weighted sample distribution of gender, race, and age was within a percent of the population. This process required two iterations through all three variables before the weights were satisfactory.

SURVEY LIMITATIONS

Four potential sources of error must be considered in any survey, including coverage, nonresponse, measurement, and sampling error. Each of these is briefly discussed below.

COVERAGE ERROR

Coverage error can occur when members of the population of interest are not included in the sampling frame. When this omission is random and those included are no different from those who are excluded, coverage error is not a problem. When those who are omitted differ in ways related to the primary variables of interest, coverage error leads to bias. In this survey, the sample was drawn from a complete listing of all landline telephone numbers in Cook County, Illinois. Thus, only people living in Cook County who have landline telephones are represented by the data. People who use only cell phones had no chance of being included in the sample and thus are not represented. If households that use only cell phones differ in their use and storage of medications from households with landlines, then the results would be biased. For example, if households with only cell phones are younger and use less medication, the results may overestimate medication use.

NONRESPONSE ERROR

Similarly, nonresponse is only a problem when the respondents are different from nonrespondents in ways related to the dependent variables of interest. The overall response rate for this study is 18.9%. If the 81.1% of the sample who did not respond are substantially different with regard to their use, storage, and/or disposal of medications, then the outcome of the survey could be biased. The only way to determine definitely if nonresponse bias exists is to conduct follow-up interviews with those who initially refused. This is generally not feasible for a general population telephone survey. While nonresponse analysis can sometimes be informative, it requires knowledge of some of the characteristics of the nonparticipating members of the sample. However, in this survey, we only have the telephone number of those who did not cooperate. Therefore, we have no information that would distinguish respondents from nonrespondents.

MEASUREMENT ERROR

In addition to coverage and nonresponse bias, numerous sources of measurement error may influence results. For example, question wording, the ordering of questions within the instrument, and the mode of data collection (i.e., telephone vs. face-to-face vs. self-administered) each may affect data quality and should be considered when interpreting survey results. None of these forms of potential measurement error can be definitively eliminated. However, we have attempted to minimize error associated with the design of the survey instrument through careful pretesting and instrument reviews by our Questionnaire Review Committee.

SAMPLING ERROR

Sampling error is a result of calculating a statistic based on a sample of the population rather the entire population. It is not an indicator of flaws in the sample design but is a measure of variation. The sample of 445 residents of Cook County in this study is only one of an astronomical number of samples that could have been drawn from a population of approximately 3,981,131 adults. The sampling error (or standard error) is the amount of variation in the statistic among all potential samples. In its simplest form, it is equal to the sample standard deviation divided by the square root of the sample size.

The standard error varies directly with the sample size—the larger the sample size, the smaller the standard error. In complex sample designs that use clustering or disproportionate stratification, the standard error will increase relative to that of a simple random sample.

Many basic statistical software packages assume simple random sampling when calculating statistics. As a consequence, the estimates of standard errors used in significance tests are too low, resulting in researchers overstating the significance of their results. Analyses of data collected with a complex sample design should be conducted with software packages that can incorporate the sample design into the analysis (e.g., Stata, SUDAAN).

This study utilizes a simple random sample and incorporates only post-stratification weights. Therefore, a basic software package can be used to analyze the data, and the estimates of the standard errors will be accurate.

There is no one single standard error for a survey. It varies from item to item. For example, controlling for sample size and design, a variable measured as a proportion with 50% of the sample answering “yes” and 50% answering “no” will have a different standard error from a variable in which 80% of the sample answers “yes” and 20% answer “no.” Standard errors reported in media polls usually are reported for a proportion with a 50/50 distribution. In this survey, with a sample size of 445, the standard error for such an item would be 4.7%.

XXXIII. APPENDIX A. MAIN STUDY PHONE SCREENER

>adlt<
Hello, I'm calling from the University of Illinois and my name is [fill INAM]. We are conducting an important research study about how people dispose of their unused medications. I have just a few questions to see if anyone in your household is eligible to participate.

>sper<
Including yourself, how many adults 18 years of age or older currently live in your household?

[BE SURE INFORMANT INCLUDES SELF. DO NOT INCLUDE STUDENTS AWAY AT SCHOOL, VISITORS, OR BOARDERS.]

>T203<
How many of those adults are female?

>T212<
According to the computer, I need to speak with the [YOUNGEST MALE/OLDEST MALE/ YOUNGEST FEMALE/OLDEST FEMALE] who is 18 years of age or older in your household. Are you that person or may I speak with that person?

>E1<
(Hello, I'm calling from the University of Illinois and my name is [fill INAM]. We are conducting an important research study about how people dispose of their unused medications and would like to ask you just one question to see if you are eligible to participate.)

Have you ever had any medications in your home for you personally or for someone that you care for, such as a child or an older relative? By 'medications' we mean both those prescribed by a doctor and those you buy yourself in a drug store, whether in tablet, capsule, or liquid form. This also includes herbal remedies and vitamins.

<1> Yes [goto ends] [#eligible]
<2> No
<8> DON'T KNOW
<9> REFUSED

@ [goto Inelig]

>Inelig<
You do not match the eligibility criteria for our survey. Thank you for your time.

>expl<
(You have been randomly selected to participate in this survey.)
You are eligible to participate in the study. This survey will take about 15 minutes to complete. Your participation in the survey is voluntary and you may discontinue the interview at any time. This call may be monitored for quality assurance.

(IF NECESSARY): Monitored means that my supervisor may listen to our conversation to make sure I'm doing my job correctly.

(IF NECESSARY): Your telephone number will not be stored with your responses. Therefore, your responses to the questions will not be linked back to you in order to maintain confidentiality.

APPENDIX B. MAIN STUDY QUESTIONNAIRE

Medication Disposal Survey

>intro<
We would like to start by asking you about prescription medicines used by you personally, or by someone in your household for whom you are the care-giver, such as a child or an elderly person. To remind you, we are asking about medications available in any form such as tablet, capsule, cream, or liquid.

PRESS ENTER TO CONTINUE

>Q1_rand<
[if Q1_rand eq <1> goto Q1_1]
[if Q1_rand eq <2> goto Q1_2]

>Q1_1<
Do you currently have any medications, stored at home or at any other place, that were [bold] **prescribed by a doctor**[n]?

(To remind you, for all questions in which we ask about medications you have, please include medications used by you personally, or by someone in your household for whom you provide care.)

<1> Yes [goto Q1b]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Q1c]

>Q1_2<
Do you currently have any medications, stored at home or at any other place, that were **prescribed by a doctor**, or do you not have any?

(To remind you, for all questions in which we ask about medications you have, please include medications used by you personally, or by someone in your household for whom you provide care.)

<1> Have prescription medications [goto Q1b]
<2> Do not have any prescription medications
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Q1c]

>Q1b<
How many different prescription medications do you currently have?

Please count the total number of different medications, not the total number of doses in the medications.

<1-30> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

@ [goto Q7]

```
>Q1c<
    When did you last have any prescription medications stored at home or at any
    other place?

    <1> Less than 1 month ago
    <2> Between 1 month to less than 6 months ago
    <3> Between 6 months to less than 1 year ago
    <4> Between 1 year to less than 2 years ago
    <5> Between 2 years to less than 5 years ago
    <6> 5 years or more
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED

>Q7<
    Currently, how many different types of prescription medications do you, plus
    anyone in your household for whom you provide care, [bold]take[n] on a regu-
    lar basis, such as daily or weekly?

    <0-20> Medications
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED

>Q4_rand<
    [if Q1_rand eq <1> goto Q4_1]
    [if Q1_rand eq <2> goto Q4_2]

>Q4_1<
    Do you have any prescription medications that are past their expiration date
    stored in your home or in any other place?

    <1> Yes [goto Q4a]
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q10]

>Q4_2<
    Do you have any prescription medications that are past their expiration date
    stored in your home or in any other place, or do you not have any?

    <1> Have [goto Q4a]
    <2> Do not have
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q10]

>Q4a<
    How many different prescription medications do you have that have expired?

    <1-20> Medications
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED
```

>Q10<
Of all the different prescription medications you now have in your home or somewhere else, how many do you estimate will be leftover six months from now?

(INTERVIEWER: READ CATEGORIES IF NECESSARY.)

<1> All
<2> Some
<3> None
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q2_intro<
[no data]
Next, we would like to ask you about **non-prescription** medicines used by you personally, or by someone in your household for whom you are the caregiver, such as a child or an elderly person. This includes medicines purchased over-the-counter in a drug store, such as cold or cough, or pain medications. It also includes herbal remedies and vitamins. To remind you, we are asking about non-prescription medications available in any form such as tablet, capsule, cream, or liquid.

>Q2_rand<
[if Q1_rand eq <1> goto Q2_1]
[if Q1_rand eq <2> goto Q2_2]

>Q2_1<
Do you currently have any **non-prescription medications**, stored at home or at any other place, including those purchased over-the-counter in a drug store, such as medications for cold or cough, or pain medications?

<1> Yes [goto Q2b]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Q2c]

>Q2_2<
Do you currently have any **non-prescription medications** stored at home or at any other place, including those purchased over-the-counter in a drug store, such as medications for cold or cough, or pain medications, or do you not have any?

<1> Have non-prescription medications [goto Q2b]
<2> Do not have any non-prescription medications
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Q2c]

>Q2b<
About how many different types of over-the-counter or non-prescription medications do you currently have, stored at home or at any other place?

Please count the total number of different medications, not the total number of doses in all the medications.

<1> Medication
<2-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

<98> DON'T KNOW
<99> REFUSED
@ [goto Q8]

>Q2c<
When did you last have any over-the-counter or non-prescription medications stored at home or at any other place?

<1> Less than 1 month ago
<2> Between 1 month to less than 6 months ago
<3> Between 6 months to less than 1 year ago
<4> Between 1 year to less than 2 years ago
<5> Between 2 years to less than 5 years ago
<6> 5 years or more
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q8<
Currently, how many different types of non-prescription medications do you, plus anyone in your household for whom you provide care, **take** on a regular basis, such as daily or weekly? To remind you, 'medications' also includes herbal remedies and vitamins.

<0-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

@

>Q5_rand<
[if Q1_rand eq <1> goto Q5_1]
[if Q1_rand eq <2> goto Q5_2]

>Q5_1<
Do you have any non-prescription or over-the-counter medications that you think are past their expiration date stored in your home or in any other place?

<1> Yes [goto Q5a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Qy_intro]

>Q5_2<
Do you have any non-prescription or over-the-counter medications that you think are past their expiration date stored in your home or in any other place, or do you not have any?

<1> Have [goto Q5a]
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Qy_intro]

>Q5a<
How many different non-prescription medications do you have that have expired?

<1-20> Medications

```
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED

    @

>Qy_intro<
    [nodata]
    The next questions that I will be asking are about all medications - pre-
    scription and non-prescription - used by you personally, or by someone in
    your household for whom you are the caregiver, such as a child or an elderly
    person.  To remind you, we are asking about medications available in any
    form such as tablet, capsule, cream, or liquid.

    PRESS ENTER TO CONTINUE

    @

>Q3intro<
    [nodata]
    I am going to read a list of places where people might store medications.
    Please tell me where you store your medications, including prescription and
    non-prescription ones.

    PRESS ENTER TO CONTINUE

    @

>Q3a<
    Do you store your medications, including those prescribed by a doctor and
    non-prescription ones, in a bathroom medicine cabinet?

    <1> Yes [goto Q3a1]
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q3b]

>Q3a1<
    Is the bathroom medicine cabinet locked?

    <1> Yes
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @

>Q3b<
    Do you store your medications, including those prescribed by a doctor and
    non-prescription ones, in a bathroom closet?

    <1> Yes [goto Q3b1]
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q3c]
```

>Q3b1<
Is the bathroom closet locked?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3c<
Do you store your medications, including those prescribed by a doctor and non-prescription ones, in the kitchen?

<1> Yes [goto Q3c1]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Q3d]

>Q3c1<
Is that kitchen cabinet locked?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3d<
Do you store your medications, including those prescribed by a doctor and non-prescription ones, in the bedroom?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3e<
(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

In the car?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3f<
(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

In a purse or briefcase?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

```
>Q3g<
     (Do you store your medications, including those prescribed by a doctor and
     non-prescription ones)

     At your office or workplace?

     <1> Yes
     <2> No
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
     <8> DON'T KNOW
     <9> REFUSED

>Q3h<
     Do you store your medications, including those prescribed by a doctor and
     non-prescription ones, at any other place?

     <1> Yes (SPECIFY) [SPECIFY]
     <2> No
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
     <8> DON'T KNOW
     <9> REFUSED

>Q6_rand<
     [if Q1_rand eq <1> goto Q6_1]
     [if Q1_rand eq <2> goto Q6_2]


>Q6_1<
     Do you have any prescription or non-prescription medications that have not
     yet expired left over from a prior illness?

     (IF NECESSARY): We are asking about prescription or non-prescription medica-
     tions that have not yet expired but are no longer being taken.

     <1> Yes [goto Q6a]
     <2> No
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
     <8> DON'T KNOW
     <9> REFUSED

     @ [goto Q9]

>Q6_2<
     Do you have any prescription or non-prescription medications that have not
     yet expired left over from a prior illness or do you not have any?

     <1> Have     [goto Q6a]
     <2> Do not have
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
     <8> DON'T KNOW
     <9> REFUSED

     @ [goto Q9]

>Q6a<
     How many different medications do you have?
     Please count the total number of different medications, not the total number
     of doses in the medications.

     <1-20> Medications
     <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
     <98> DON'T KNOW
     <99> REFUSED
```

```
>Q6b< [allow 50]
    Why were they not taken or not finished?

    @ [SPECIFY]

>Q9<
    I am going to read to you a list of medications that people may have.  Which
    of these prescription or non-prescription medications do you currently have
    stored in your house or in any other place?

    (1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

    @1 Antibiotics
    @2 Blood pressure medications other than water pills
    @3 Cholesterol lowering medications
    @4 Blood thinners
    @5 Diuretics
    @6 Diabetes medications
    @7 Hormone replacements
    @8 Oral contraceptives
    @9 Prescription pain medications
    @10 Anti-seizure medications
    @11 Cold, cough, or flu medications
    @12 Over-the-counter pain medications
    @13 Antacids
    @14 Vitamins
    @15 Herbal remedies
    @16 Any other medications? (SPECIFY)

>Q11_rand<
    [if Q1_rand eq <1> goto Q11_1]
    [if Q1_rand eq <2> goto Q11_2]

>Q11_1<
    Do you have any prescription or non-prescription medications in the house or
    somewhere else from someone no longer living in your household?

    <1> Yes
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q15]

>Q11_2<
    Do you have any prescription or non-prescription medications in the house or
    somewhere else from someone no longer living in your household, or do you
    not have any?

    <1> Have
    <2> Do not have
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED
```

```
>Q15<
    What would you estimate is the longest time a container of prescription or
    non-prescription medication has been stored in your home or some other place
    past its expiration date?

    <1> Less than 1 year
    <2> Between 1 year to less than 2 years
    <3> Between 2 years to less than 5 years
    <4> Between 5 years to less than 10 years
    <5> 10 years or more
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED

>Q16_intro<
    [nodata]
    We are interested in knowing how people get rid of or dispose of medica-
    tions, and these next questions are about disposal.

>Q16<
    I am going to read a list of ways to get rid of or dispose of unused or ex-
    pired medications.  Please tell me whether or not you or someone else in
    your house disposes of unused or expired medications in that way.  Do you or
    does someone in your house...
    (1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

    @1 Throw away unused or expired medications in household garbage?
    @2 Flush unused or expired medications down the toilet or sink?
    @3 Take unused or expired medications to a hazardous waste
     collection facility or collection event?
    @4 Give unused or expired medications to someone else who would use them?
    @5 Return unused or expired medications to a pharmacy?
    @6 Return unused or expired medications to a physician?
    @7 Never dispose of unused or expired medications?
    @8 Dispose of unused or expired medications in some other way?
     (please specify in what way is that?)
    @9 DON'T KNOW WHAT TO DO WITH SUCH MEDICATIONS
    @10 DON'T KNOW HOW WE DISPOSE OF SUCH MEDICATIONS

>Q17_rand<
    [if Q1_rand eq <1> goto Q17_1]
    [if Q1_rand eq <2> goto Q17_2]

>Q17_1<
    Do you think prescription medication should be disposed of differently than
    over-the-counter or non-prescription medication?

    <1> Yes[goto Q18]
    <2> No
    <3> Sometimes
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q20]
```

```
>Q17_2<
    Do you think prescription medication should always, sometimes, or never be
    disposed of in a different way than non-prescription medication?

    <1> Always   [goto Q18]
    <2> Sometimes
    <3> Never
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q20]

>Q18<
    In your opinion, what is the best way to properly dispose of unwanted pre-
    scription medications?

    <1> Specify [SPECIFY]
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

>Q19<
    In your opinion, what is the best way to properly dispose of unwanted non-
    prescription or over-the-counter medications?

    <1> Specify [SPECIFY]
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q20a]

>Q20<
    In your opinion, what is the best way to properly dispose of unwanted pre-
    scription or non-prescription medications?

    <1> Specify [SPECIFY]
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

>Q20a<
    Do you think that people should or should not flush unwanted prescription or
    non-prescription medications down the toilet or the sink?

    <1> Yes, should [goto skip2a]
    <2> No, should not [goto Q20a_1a]
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto skip2a]

>Q20a_1a<
    Why do you say that people should not flush unwanted medications?

    <1> Specify [specify]
    <8> DON'T KNOW
    <9> REFUSED

    @ [#goto Q21_rand]

>skip2a<
[if Q17_1 eq <3>]
 [goto Q20b]
```

```
[else]
[if Q17_2 eq <2>]
 [goto Q20b]
[else]

 [goto Q21_rand]
[endif]
[endif]

[qtoff until qton]
[if Q17_1 eq <1>]
 [#if Q20a eq <1>]
    [goto Q21_rand]
 [#endif]
 [endif]

[if Q17_1 eq <2>]
 [#if Q20a eq <1>]
    [goto Q21_rand]
 [#endif]
 [endif]

[if Q17_2 eq <1>]
 [#if Q20a eq <1>]
    [goto Q21_rand]
 [#endif]
 [endif]

[if Q17_2 eq <3>]
 [#if Q20a eq <1>]
    [goto Q21_rand]
 [#endif]
 [endif]

[if Q17_1 eq <3>]
 [#if Q20a eq <2>]
    [goto Q20b]
 [#endif]
 [endif]

[if Q17_2 eq <2>]
 [#if Q20a eq <2>]
    [goto Q20b]
 [#endif]
 [endif]

>skip2<
[if Q17_1 eq <3>]
    [goto Q20b]
[if Q17_2 eq <2>]
    [goto Q20b]
[else]
    [goto Q21_rand]
[endif]

>Q20b<
    Why do you think prescription medications should be disposed of differently
    than over-the-counter or non-prescription medications?

    <1> Specify [SPECIFY]
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

>Q21_rand<
```

```
    [if Q1_rand eq <1> goto Q21_1]
    [if Q1_rand eq <2> goto Q21_2]

>Q21_1<
    Have you ever received any information about how to dispose of prescription
    or non-prescription medication?

    <1> Yes[goto Q21a]
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED
    @ [goto Q22]

>Q21_2<
    Have you ever received any information about how to dispose of prescription
    or non-prescription medication, or have you never received such information?

    INTERVIEWER:  CAN PROBE WITH "Information can include media, written materi-
    als, signs, billboards, etc."

    <1> Received [goto Q21a]
    <2> Never received
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q22]

>Q21a<
    Where did you receive the information or who provided you with it?

    <1> Specify [SPECIFY]
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @

>Q22<
    If you were interested in learning more about how to properly dispose of
    prescription and non-prescription medication, where would you go to get that
    information?

    <1> Specify [SPECIFY]
    <2> NOT INTERESTED
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

>Q23_rand<
    [if Q1_rand eq <1> goto Q23_1]
    [if Q1_rand eq <2> goto Q23_2]

>Q23_1<
    Have you read, heard, or seen any news stories about pharmaceuticals being
    detected in public water sources or water supplies?

    <1> Yes
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q25]
```

```
>Q23_2<
    Have you read, heard, or seen any news stories about pharmaceuticals being
    detected in public water sources or water supplies, or have you never read,
    heard or seen such news stories?

    <1> Read, heard, or seen
    <2> Never read, heard, or seen
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @

>Q25<
    If there was a convenient location where you could drop off unused or ex-
    pired medications for disposal, how willing would you be to use this method
    to get rid of such medications?

    Would you be...

    <1> Very willing,
    <2> Somewhat willing,
    <3> Neither willing nor unwilling,
    <4> Somewhat unwilling, [goto Q25a]
    <5> Very unwilling, or [goto Q25a]
    <6> Are you not sure? [goto Q27]
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED

 @ [goto Q26]

>Q25a<
    Why do you say that you are unwilling to do so?

    <1> Specify [SPECIFY]
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

>Q26<
[form template]
[if Q25 eq <1> or Q25 eq <2> or Q25 eq <3>]
    From the list I am going to read, please tell me whether or not you would be
    likely to take your unwanted medications to that location for proper dis-
    posal.
    Would you take them...
[else]
[if Q25 eq <4>]
    From the list I am going to read, please tell me whether or not you would be
    willing to take your unwanted medications to that location for proper dis-
    posal. Would you take them...
[else]
[if Q25 eq <5>]
    From the list I am going to read, please tell me whether or not you would be
    willing to take your unwanted medications to that location for proper dis-
    posal.  Would you take them...
[endif]

    (1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

    @1 To the nearest pharmacy?
    @2 To a doctor's office, clinic or hospital?
    @3 To a drop-off box located inside a police station or sheriff's office?
    @4 To a household hazardous waste collection facility in Chicago?
```

@5 To some other place? (SPECIFY)

>Q27<

How much extra money per prescription would you be willing to pay if that money would be used to support a safe system to collect and properly dispose of medications?

INTERVIEWER: PROBE ANSWERS SUCH AS "a little" FOR SPECIFIC DOLLARS/CENTS AMOUNT OR A RANGE.

<1> Specify [SPECIFY]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q28<

What do you think might be the consequences of keeping unused or expired medications in your home?

<1> Specify [SPECIFY]
<2> NONE / NO CONSEQUENCES
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q29_1<

Are there any reasons why you might not want to take your unused or expired medications back to a pharmacy for proper disposal?

<1> Yes[goto Q29a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Q30intro]

>Q29a<

Can you tell me what those reasons are?

(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

@1 Privacy breech
@2 Potential re-use by others
@3 Resale by pharmacy
@4 I do not have specific reasons
@5 I am not sure
@6 Other (SPECIFY)

>Q30intro<

[no data]
I am going to read a list of methods that could be used to get rid of medications. For each method, please tell me how confident you are that it is a safe way to dispose of unused or expired medications.

PRESS ENTER TO CONTINUE

>Q30_1<
How confident are you that a secure lockbox with a method to destroy medications located behind a pharmacy counter is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_2<
Next, how confident are you that a secure lockbox transported by a law enforcement officer is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_3<
How confident are you that a secure lockbox in a doctor's office or hospital is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_4<
(How confident are you that)

a mail back program similar to the service provided for ink cartridges?

(is a safe way to dispose of unused or expired medications?)

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_5<
(How confident are you that)

a lockbox similar to those for used needles and other medical waste, that can be dropped off at your doctor's office or a pharmacy for disposal?

(is a safe way to dispose of unused or expired medications?)

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_6<
How confident are you that a neighborhood collection day overseen by the Environmental Protection Agency is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_7<
Is there any other method that you are confident is safe?

<1> Yes (SPECIFY) [SPECIFY]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31intro<
[nodata]
Next, please tell me whose responsibility you think it should be to provide a safe way for people to dispose of unused or expired medications.

PRESS ENTER TO CONTINUE

>Q31_1<
Is it the responsibility of the pharmaceutical companies that manufacture the medications to provide a safe way for people to dispose of unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_2<
Is it the responsibility of the pharmacies that dispense the medications to provide a safe way for people to dispose of unused or expired medications?

<1> Yes
<2> No

<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_3<
Is it the responsibility of the doctors and other health care professionals who prescribe the medications to provide a safe way for people to dispose of unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_4<
Is it the responsibility of water or wastewater treatment agencies?

(to provide a safe way for people to dispose of unused or expired medications?)

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_5<
Is it the responsibility of the Environmental Protection Agency?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_6<
Is it the responsibility of the Department of Public Health?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_7<
Is it the responsibility of the police or sheriff's department?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_8<
Is it your responsibility to find a safe way to dispose of your unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_9<

```
    Is it someone else's responsibility to find a safe way for people to dispose
    of unused or expired medications?

    <1> Yes (SPECIFY) [SPECIFY]
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

>intro2<
    [no data]
    This is our last set of questions.

>Q12_rand<
    [if Q1_rand eq <1> goto Q12_1]
    [if Q1_rand eq <2> goto Q12_2]

>Q12_1<
    Have you ever used a medication that a doctor prescribed for someone other
    than you?

    <1> Yes
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q14_rand]

>Q12_2<
    Have you ever used a medication that a doctor prescribed for someone other
    than you, or have you never used such a medication?

    <1> Used
    <2> Never used
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

>Q14_rand<
    [if Q1_rand eq <1> goto Q14_1]
    [if Q1_rand eq <2> goto Q14_2]

>Q14_1<
    Have you ever given anyone else your prescription medication to use?

    <1> Yes
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Qx][#goto Q15]

MACRO Q14_1.2 in 1060span.mac

>Q14_2<
    Have you ever given anyone else your prescription medication to use, or have
    you never done that?

    <1> Given
    <2> Never given
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED
```

>Qx<
Are you currently covered by some form of health insurance or health plan?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto skip5]

>Qy<
[##Ask only if response to health insurance question is "yes"]
Is prescription drug coverage included as part of your current health insurance or health plan?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE
<8> DON'T KNOW
<9> REFUSED

@ [goto Q32]

>Q32<
Do you primarily get your prescription medications. . .

<1> From a local retail pharmacy by going into the store,
<2> From the drive-thru window of a local retail pharmacy,
<3> From a mail order pharmacy,
<4> From a hospital or clinic pharmacy, or
<5> In some other way? (SPECIFY)[SPECIFY]
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q24<
Does your household primarily use bottled water or tap water for drinking?

INTERVIEWER: IF RESPONDENT MENTIONS "tap water", PROBE FOR WHETHER FILTERED OR UNFILTERED. PROBE FOR PRIMARY ONE TIME.

<1> Bottled [goto Q24a]
<2> Unfiltered tap
<3> Filtered tap
<4> More than one
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Q41]

>Q24a<
Why does your household primarily use bottled water for drinking?

<1> Specify [SPECIFY]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q41<
During the last 30 days, how many times did you buy something that helps to protect the environment?

(IF NECESSARY): Products that are environmentally safe or that are made from recycled materials.

<0> Never
<1-30> Times
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q33<
What is your year of birth?

<1900 - 1991>
<9997> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<9998> DON'T KNOW
<9999> REFUSED

>Q34<
What is your zip code?

<00000 - 99994>
<99997> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<99998> DON'T KNOW
<99999> REFUSED

>Q35<
(ASK ONLY IF NECESSARY)
What is your gender?

<1> Male
<2> Female
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q36<
Are you of Hispanic, Spanish, or Latino origin?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q37<
With what racial group do you most closely identify?
Would you say...

<1> African American or Black,
<2> White,
<3> Asian or Pacific Islander,
<4> Native American or Aleut,
<5> Multiracial or Biracial, or
<6> Some other racial group? (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q38<
Including yourself, how many people are currently living in your household?

<1-20> People
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

```
>Q39<
    How many children less than 18 years old are living in your household?

    <0> Children [goto Q40]
    <1-20> Children
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED

>skip3<
    [if Q39 eq <1>]
     [goto Q39xx]
    [else]
    [if Q39 ge <2>]
     [if Q39 le <20>]
     [goto Q39yy]
     [else]
     [goto Q40]
     [endif]
     [endif]
    [endif]

    [##ASK IF RESPONSE TO Q39 IS "1"]

>Q39xx<
    Are you responsible for providing care for this child less than 18 years
     old?

    <1> Yes
    <2> No
    <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <8> DON'T KNOW
    <9> REFUSED

    @ [goto Q40]

    [##ASK IF RESPONSE TO Q39 IS BETWEEN 2-20]

>Q39yy<
    For how many of these children less than 18 years old do you provide care?

    <0-20> Children
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED
>Q40<
    Including yourself, how many adults who are more than 65 years old are liv-
    ing in your household?

    <0> People   [goto PC1]
    <1-20> People
    <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
    <98> DON'T KNOW
    <99> REFUSED

    @

>skip3b<
    [if sper eq <1> and Q40 ONPATH and Q40 eq <1>]
     [goto PC1]
    [else]
    [if sper ge <2> and Q40 ONPATH and Q40 eq <1>] [# fix applied 9/29/09 vp]
     [goto Q40a]
    [else]
     [goto skip4]
```

```
     [endif 2]

>skip4<
     [if Q40 ONPATH and Q40 eq <1>]
      [goto Q40xx]
     [else]
     [if Q40 ONPATH and Q40 ge <2>]
      [if Q40 ONPATH and Q40 le <20>]
      [goto Q40yy]
      [else]
      [goto PC1]
      [endif]
     [endif]
     [endif]
     [##ASK IF RESPONSE TO Q40 IS "1"]

>Q40xx<
     Are you responsible for providing care for this adult living in your house-
      hold?

     <1> Yes
     <2> No
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
     <8> DON'T KNOW
     <9> REFUSED

     @ [goto PC1]

     [##ASK IF RESPONSE TO Q40 IS BETWEEN 2-20]

>Q40yy<
     For how many of these adults living in your household do you provide care?
     Please do not include yourself.

     <0-20> Adults
     <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
     <98> DON'T KNOW
     <99> REFUSED

>PC1<
     Thank you very much for sharing your opinions with me today.  I really ap-
     preciate it.  If you have any questions about this interview you may call
     the project coordinator for this study.  Would you like her number?

     <1> Yes [goto PC2]
     <2> No
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
     <8> DON'T KNOW
     <9> REFUSED

     @ [goto OPRS1]

>PC2< [no data]
     Her name is Ms. Sowmya Anand and she can be reached at 1 (217)333-2219 dur-
     ing business hours Monday through Friday.

>OPRS1<
     If you have any concerns about this study, you may call the University of
     Illinois at Chicago Office for Protection of Research Subjects.  Would you
     like this number?

     <1> Yes [goto OPRS2]
     <2> No
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
```

```
     <8> DON'T KNOW
     <9> REFUSED

     @ [goto thnks]

>OPRS2< [no data]
     That number is 1-866-789-6215 (toll-free).

     PRESS 'ENTER' TO CONTINUE.

>thnks<
     [nodata]
     Those are all of the questions that I have.
     Thank you for your participation!
```

```
>INT1<
     OVERALL, R's COOPERATION WAS:

     <1> Very good
     <2> Good
     <3> Fair
     <4> Poor
     <5> Very poor
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

>INT2<
     OVERALL, HOW GREAT WAS R'S INTEREST IN THE INTERVIEW?

     <1> Very high
     <2> Above average
     <3> Average
     <4> Below average
     <5> Very low

>INT3<
     HOW SINCERE DID R SEEM TO BE IN HIS/HER ANSWERS?

     <1> Completely sincere
     <3> Usually sincere
     <5> Often seemed to be insincere
     <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

>INT4<
     PLEASE CODE BASED ON YOUR IMPRESSIONS OF
     R'S REACTION TO INTERVIEW:
     (ENTER ALL THAT APPLY)

     ENTER A "1" FOR ALL THAT APPLY

     @1 Negative - general
     @2 Positive - general
     @3 Negative comments about length
     @4 Positive comments about length
     @5 Negative - too complicated
     @6 Positive - easy
     @7 Negative - boring/tedious/repetitious
     @8 Positive - fun, thought provoking
     @9 R wanted to stop before interview completed
     @10 R complained and/or interviewer observed that
      R was confused by questions "couldn't understand the questions"
     @11 R became angry at interview CONTENT
     @12 R became concerned about sampling purpose or bias
      (why was I called, where did you get my name, etc.)
     @13 Neutral or no feedback
     @97 NO CODED RESPONSE APPLICABLE (SPECIFY)
```

APPENDIX C. TRAINING MANUAL

Prescription Disposal Survey

(SRL #1060)

XXXIV.

XXXV.INTERVIEWER TRAINING MANUAL

for Main Data Collection

Survey Research Laboratory

University of Illinois at Chicago

August 2009

Project Coordinator: Ms. Sowmya Anand, Ms. Isabel Farrar
Field Coordinator: Ms. Marni Basic

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Overview of the Study

Background and Purpose of the Study

This research is being conducted by Dr. Larry Danziger in the UIC Pharmacy Department. He has received funding from the Metropolitan Water Reclamation District of Greater Chicago to research the way in which adult residents of Cook County dispose of their prescription and non-prescription medicines once they are done with them. To do so we are conducting a Random-Digit-Dial (RDD) telephone survey of adults in Cook County. Households will be screened by telephone for adults who have ever had a prescription and non-prescription medicine in their household.

Sponsorship of the Study

This study is being funded by the Metropolitan Water Reclamation District of Greater Chicago. The Principal Investigator of the study is Dr. Larry Danziger in the UIC Pharmacy Department.

For questions regarding the survey, respondents can be referred to:

Ms. Sowmya Anand
Coordinator of Research Programs
Survey Research Laboratory
University of Illinois
1 (217) 333-2219

XXXVI. SAMPLE DESIGN

Our sample for the main is 2,727 RDD cases from Cook County. Like other RDD studies, you will only have phone numbers for the sample cases (no names, etc). Sample will be released in 2 replicates, Replicate 1 will have 2,000 cases, and Replicate will have 727 cases.

Since city boundaries and telephone prefixes never perfectly correspond, you may find that a very small percentage of households you talk to live outside the Cook County limits. They will still be considered eligible for the study.

Since we are calling Cook County sample, all cases will be in the central time zone. Most calling will be conducted during the evenings and weekends. From the 2,727 cases, our main study goal is to interview 400 households.

XXXVII.

XXXVIII. FIELDWORK DESIGN

The questionnaire for this study is programmed for CATI and is expected to average 18 minutes. The computer will randomly select an adult in the household (oldest male, youngest male, oldest female, youngest female) to be the respondent using the T-Carter respondent selection procedure. We will then screen for adults who have ever had any medications in their home, either for their own use or for someone they care for, such as a child or an older relative. By medications we mean both those prescribed by a doctor and those medications bought in a drug store. Very few will be ineligible for the interview, but if so that household will be dispositioned as a code 71. For the main study, we will be conducting interviews in English and Spanish. We will work refusals with a seven-day wait period.

The telephone screening for the main study is scheduled for 12 weeks, from the Urbana field center. Spanish sample may be called from Chicago. Calling is scheduled from August 6, 2009 to October 28, 2009.

We are doing a split-ballot experiment in this study, where half of the respondents will get a "balanced-wording" version of the yes / no questions. Questions with yes/no response options are seemingly efficient to use and are used quite often (e.g., Do you have any medications that have expired? yes/no). However, there is a potential problem attached to using such a format: acquiescence. Acquiescence is a tendency that leads respondents to choose affirmative or "yes" answers rather than "no" answers, independent of the content of the question. Some experts suggest that an alternative is to offer a balanced question wording with forced-choice response options (e.g., Do you have any medications that have expired, or do you not have any? Have /Do not have).

While offering the balanced-forced choice question might be fine in the context of a self-administered survey, it might not work as well in an interviewer-administered context because it violates the rules of everyday conversation. This is the notion that we are going to assess using the split ballot experiment. We will present a randomly selected half of the respondents with the yes/no format, and present the other half with the same question in a balanced-forced choice format. We will include a few measures of respondents' ratings of liking for the item, and ease of understanding. We will also have the interviewer code how easy it was to administer the question and whether it was awkward to do so. Finally, we will assess differences in respondent and interviewer preferences between the two formats.

In order for the split ballot experiment to work as it is intended to work, you must read all questions exactly as worded. The _1 version is the standard wording of each question and the _2 is balanced wording.

Your demeanor in asking these questions is very important. These questions are understandable and answerable, and you should approach them as such. If Rs feel confused by the wording, it is important that you do not go along with them. And it is especially important that you don't change or shorten the balanced choice wording for Rs who voice opinions about it.

There are a number of open-ended questions in the questionnaire. Respondents may find these vague and say they don't know – please encourage them to give us their best idea or estimate.

Study 1060: Common Respondent Questions, Main

Q. Why did I receive a telephone call about the study?

A. We are inviting you to participate in this large study of Cook County residents. Your telephone number was selected at random from households. We are contacting over 400 households to ask about common ways to dispose of medicines in your household.

Q. How did you get my telephone number?

A. Your telephone number was selected at random from households in Cook County. We are contacting over 400 households for this study. We do not have your name or other identifying information, only your phone number.

Q. What is the study about?

A. This study is about how people dispose of prescription and non-prescription medicines. We will ask you some questions about how many medicines you have in your household, how you usually get rid of them when you are done with them, and what you think are the best disposal practices.

Q. Who is paying for the research?

A. This study is funded by the Metropolitan Water Reclamation District of Greater Chicago. The University of Illinois is conducting the study.

Q. How long will the interview take?

A. The interview will take less than 20 minutes to complete.

Q. How can I be sure that my answers will be kept confidential?

A. We are concerned about confidentiality, too. Your answers to the interview will be matched with a case i.d. number instead of your name. Any identifying information (such as your phone number) is kept in a separate file and destroyed after the end of the study. All reports or presentations based on the findings will present the data only in summary form – they will never identify individuals or households.

Q. How will my answers be used?

A. The researchers are studying how people commonly dispose of prescription and non-prescription medicines in their household. The data will be used to make recommendations on how Cook County can better provide opportunities for and knowledge about medicine disposal.

Q. Do I have to answer all the questions in the phone interview?

A. If there are any questions you don't wish to respond to, simply ask the interviewer to move on to the next question. Also, you may stop participating in the interview at any point.

Q. Why should I participate?

A. We want your views and experiences to be represented! It's also important that we get as many households to participate as possible. Each household represents an important part of the study. The more interviews we complete, the more we will learn about how Cook County can better provide opportunities for and knowledge about medicine disposal.

Q. Can anyone in my household do the survey?

A. No, only one person in your household may be selected for the interview. When we call, we first determine how many eligible adults live in your household. Then one of those will be scientifically selected using a common sampling technique.

Q. How does this study benefit me?

A. While there is no incentive for this study, it will help the Metropolitan Water Reclamation District of Greater Chicago better understand how people dispose of pharmaceuticals. With this information, researchers can develop disposal programs that can benefit Chicago residents.

Q. There is no one in our household who takes medicine.

A. We're interested in any type of medicines that you or household members take. It is not limited only to medicine prescribed by a doctor. It can also be medicine you buy in a drug store, such as aspirin, cough syrup, ointment, vitamins, or herbal remedies.

Q. Who can I talk to if I have questions about the study? / Who can I talk to, to make sure the study is legitimate?

A. You may call the study's project coordinator at the University of Illinois. Her name is Ms. Sowmya Anand and she can be reached at 1 (217) 333-2219 during business hours Monday through Friday.

1060 Main Study Disposition Codes

Code	Disposition	Explanation of Use
(01)	Completed interview (English) (Type 1)	Completed interview in English
(02)	Completed interview (Spanish) (Type 2)	Completed interview in Spanish
(10)	Initial refused screener	This disposition is used only on studies that require screening for eligibility criteria. It represents a refusal at any time before screening has been completed. On studies that have screening, "hang ups" are classified as this disposition.
(11)	Initial refused interview (English)	The eligible respondent refuses to be interviewed or refuses to finish the entire interview- English.
(12)	Initial refused interview (Spanish)	The eligible respondent refuses to be interviewed or refuses to finish the entire interview- Spanish.
(20)	Appointment/partial to complete	This disposition is used for both appointments and partial interviews. Partial interviews in this category are those in which the respondent is willing to complete the interview but was unable to finish it during the first session. It does not include partial interviews that the respondent refused to finish. (These are considered "initial refused interviews.")
(25)	Eligible foreign language	This disposition is used only on those studies for which we are interviewing in a foreign language in addition to English. It is appropriate only if we plan to do interviews in the particular language spoken by an informant or the respondent.
(26)	Temporarily disconnected	This disposition is used when a recording tells you that the phone number you have dialed has been temporarily disconnected. It is standard practice at SRL to retry temporary disconnects after two weeks have passed.

(29)	Initial duplicate	The respondent indicates that he has already been interviewed on the study. Before the case is finalized, the sampling section must confirm that the case appears twice.
(30)	No answer/busy	This disposition is used for telephone numbers that have never answered or that have always been busy. This disposition is not used once someone has answered the telephone or an answering machine or service has been reached. Final after 10 attempts.
(31)	Answering machine/ answering service	If the message on the machine or the manner in which the service answers lead you to believe you have a wrong number, disposition the case accordingly. On RDD studies, an obvious business message should be dispositioned as a business rather than as an answering machine.
(32)	Eligible respondent not available	This disposition is used once the respondent has been screened or for list samples in which no screening is necessary. It connotes that the respondent was not home, was busy or for some other reason could not be interviewed at the time of the contact. No appointment could be made.
(33)	Unscreened respondent not available	This disposition is used when someone answered the telephone but was not available to be screened. Like the above disposition, no appointment could be made.
(40)	Final refused screener	These dispositions are used in the same way as the initial refusal dispositions, except that the case has been finalized through reworking or by supervisory action.
(41)	Final refused to be scheduled for an interview	Final refusal – English
(42)	Final refused to be scheduled for an interview (Spanish)	Final refusal – Spanish
(44)	Final refused screener "Do not call" list	Refusal because registered with the National Do Not Call List, unscreened household
(45)	Final refused interview "Do not call" list	Refusal because registered with the National Do Not Call List, screened household
(47)	Final refused screener, privacy manager, English	Refusal from Privacy Manager, unscreened household, English speaking

(48)	Final refused interview, privacy manager, English	Refusal from Privacy Manager, screened household, English speaking
(49)	Final refused interview, privacy manager, Spanish	Refusal from Privacy Manager, screened household, Spanish speaking
(55)	Not able to schedule an appointment during the available appointment slots	This disposition is used when there is a clear indication that the respondent will be unavailable to participate within the time confines of the survey period. This may be due to hospitalization, being away on vacation, etc.
(56)	Never able to interview	This disposition is used when the eligible respondent is too hard of hearing, is permanently ill, is incapacitated, or for some other reason would never be able to be interviewed. It is not related to the timeframe of the data collection effort.
(60)	Other eligible	This disposition is used when the situation does not seem to be covered by any other category and you think there is a possibility that the case may be eligible. Situations covered by this disposition may include not knowing what language is spoken in a household or feeling that a respondent was under the influence of drugs or alcohol when contacted.
(70)	HH ineligible age	HH is ineligible – no one over 18
(71)	R ineligible (medications)	Ineligible due to never having any medications at home – for self or for someone for whom R is monitoring care
(86)	Nonworking	The telephone number is not in service, is disconnected, is not yet connected, has been changed to a new number, does not ring, rings fast busy or rings in electronic beeps. Telephone numbers that seem to belong to computer modems, FAX machines or beepers have this disposition. Also included are cases in which the phone number dialed connects you to some other number due to a telephone company wiring problem.
(87)	Non-residential (or not primary residential)	The telephone number connects to a business or to group quarters such as a dormitory, barracks, or shelter. Numbers connecting to pay phones, car phones, a summer cottage, a child's phone, or a secondary phone in the household are also included in this disposition.

(88)	Ineligible foreign language	This disposition is used if the respondent speaks a language other than that/those in which we are interviewing. On a study that requires screening, do not use this disposition unless there is no one in the household who speaks an eligible language.
(89)	Final duplicate	Sampling has confirmed that an "initial duplicate" case appears twice in the sample. This disposition is used only by a supervisor or with a supervisor's authorization.
(90)	Other ineligible	This disposition is used when the situation does not seem to be covered by any other category and you think the case is ineligible.

1060 Pharmaceutical Disposal Survey Main Study Screener

>adlt<
Hello, I'm calling from the University of Illinois and my name is [fill INAM]. We are conducting an important research study about how people dispose of their unused medications. I have just a few questions to see if anyone in your household is eligible to participate.

>sper<
Including yourself, how many adults 18 years of age or older currently live in your household?

BE SURE INFORMANT INCLUDES SELF. DO NOT INCLUDE STUDENTS AWAY AT SCHOOL, VISITORS, OR BOARDERS.

>T203<
How many of those adults are female?

>T212<
According to the computer, I need to speak with the [youngest male / oldest male / youngest female / oldest female] who is 18 years of age or older in your household. Are you that person or may I speak with that person?

>E1<
(Hello, I'm calling from the University of Illinois and my name is [fill INAM]. We are conducting an important research study about how people dispose of their unused medications and would like to ask you just one question to see if you are eligible to participate.)

Have you ever had any medications in your home for you personally or for someone that you care for, such as a child or an older relative? By 'medications' we mean both those prescribed by a doctor and those you buy yourself in a drug store, whether in tablet, capsule, or liquid form. This also includes herbal remedies and vitamins.

<1> Yes [goto ends] [#eligible]
<2> No
<8> DON'T KNOW
<9> REFUSED

@ [goto Inelig]

>Inelig<
You do not match the eligibility criteria for our survey.
Thank you for your time.

>expl<
(You have been randomly selected to participate in this survey.)
You are eligible to participate in the study. This survey will take about 15 minutes to complete. Your participation in the survey is voluntary and you may discontinue the interview at any time. This call may be monitored for quality assurance.

(IF NECESSARY): Your telephone number will not be stored with your responses. Therefore, your responses to the questions will not be linked back to you in order to maintain confidentiality.

1060 Pharmaceutical Disposal Survey Main Study Substantive Questionnaire

General points about the survey questions:

- ***The question numbers jump around, but that is by design.***
- ***Medicines include those in any form – tablets, liquids, etc.***
- ***Unless otherwise specified, questions are asking about the respondent and anyone in the household the respondent cares for, such as a child or elderly adult.***
- ***The alternate (balanced) wording is indicated by a text box . Respondents will only get one of the versions (_1 or _2).***

>intro<

We would like to start by asking you about prescription medicines used by you personally, or by someone in your household for whom you are the caregiver, such as a child or an elderly person. To remind you, we are asking about medications available in any form such as tablet, capsule, cream, or liquid.

PRESS ENTER TO CONTINUE

Some of the survey questions (such as Q1) reference "in your home or any other place". By any other place, we are thinking of the respondent's car, work-place, etc.

>Q1_1<

Do you currently have any medications, stored at home or at any other place, that were **prescribed by** a doctor?

(To remind you, for all questions in which we ask about medications you have, please include medications used by you personally, or by someone in your household for whom you provide care.)

<1> Yes [goto Q1b]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto Q1c]

>Q1_2<

Do you currently have any medications, stored at home or at any other place, that were prescribed by a doctor, or do you not have any?

(To remind you, for all questions in which we ask about medications you have, please include medications used by you personally, or by someone in your household for whom you provide care.)

<1> Have prescription medications [goto Q1b]
<2> Do not have any prescription medications
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW

<9> REFUSED
@ [goto Q1c]

Several survey questions, such as Q1b and Q7 are asking about the number of <u>different</u> medications, not the number of doses or one medication taken several times a day for instance.

>Q1b<
How many different prescription medications do you currently have?

Please count the total number of different medications,
not the total number of doses in the medications.

<1-30> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

@ [goto Q7]

>Q1c<
When did you last have any prescription medications
stored at home or at any other place?

<1> Less than 1 month ago
<2> Between 1 month to less than 6 months ago
<3> Between 6 months to less than 1 year ago
<4> Between 1 year to less than 2 years ago
<5> Between 2 years to less than 5 years ago
<6> 5 years or more
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q7<
Currently, how many different types of prescription
medications do you, plus anyone in your household for whom
you provide care, take on a regular basis, such as
daily or weekly?

<0-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

You may get a lot of "don't know" responses to Q4. Please probe these by assuring respondents that their best estimate is fine here.

>Q4_1<
Do you have any prescription medications that are past
their expiration date stored in your home or in any other
place?

<1> Yes [go to Q4a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q10]

>Q4_2<

Do you have any prescription medications that are past their expiration date stored in your home or in any other place, or do you not have any?

<1> Have [go to Q4a]
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q10]

>Q4a<

How many different prescription medications do you have that have expired?

<1-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q10<

How many of all the different prescription medications you now have in your home or somewhere else do you estimate will be leftover six months from now?
(INTERVIEWER: READ CATEGORIES IF NECESSARY.)

<1> All
<2> Some
<3> None
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q2_intro<

[nodata]
Next, we would like to ask you about non-prescription medicines used by you personally, or by someone in your household for whom you are the caregiver, such as a child or an elderly person. This includes medicines purchased over-the-counter in a drug store, such as cold or cough, or pain medications. It also includes herbal remedies and vitamins. To remind you, we are asking about non-prescription medications available in any form such as tablet, capsule, cream, or liquid.

PRESS ENTER TO CONTINUE

>Q2_1<

Do you currently have any non-prescription medications, stored at home or at any other place, including those purchased over-the-counter in a drug store, such as medications for cold or cough, or pain medications?

<1> Yes [go to Q2b]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

<8> DON'T KNOW
<9> REFUSED

@ [go to Q2c]

>Q2_2<

Do you currently have any non-prescription medications stored at home or at any other place, including those purchased over-the-counter in a drug store, such as medications for cold or cough, or pain medications, or do you not have any?

<1> Have non-prescription medications [goto Q2b]
<2> Do not have any non-prescription medications
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q2c]

>Q2b<

About how many different types of over-the-counter or non-prescription medications do you currently have, stored at home or at any other place?

Please count the total number of different medications,
not the total number of doses in all the medications.

<1> Medication
<2-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

@ [go to Q8]

>Q2c<

When did you last have any over-the-counter or non-prescription medications stored at home or at any other place?

<1> Less than 1 month ago
<2> Between 1 month to less than 6 months ago
<3> Between 6 months to less than 1 year ago
<4> Between 1 year to less than 2 years ago
<5> Between 2 years to less than 5 years ago
<6> 5 years or more
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q8<

Currently, how many different types of non-prescription
medications do you, plus anyone in your household for whom

you provide care, take on a regular basis, such as daily
or weekly? To remind you, 'medications' also includes herbal
remedies and vitamins.

<0-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

You may get a lot of "don't know" responses to Q5. Please probe these by assuring respondents that their best estimate is fine here.

>Q5_1<

Do you have any non-prescription or over-the-counter medications that you think are past their expiration date stored in your home, or in any other place?

<1> Yes [go to Q5a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Qy_intro]

>Q5_2<

Do you have any non-prescription or over-the-counter medications that you think are past their expiration date stored in your home, or in any other place, or do you not have any?

<1> Have [go to Q5a]
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Qy_intro]

>Q5a<

How many different non-prescription medications do you have that have expired?

<1-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Qy_intro<

The next questions that I will be asking are about all medications - prescription and non-prescription - used by you personally, or by someone in your household for whom you are the caregiver, such as a child or an elderly person. To remind you, we are asking about medications available in any form such as tablet, capsule, cream,

or liquid.

PRESS ENTER TO CONTINUE

>Q3intro<

I am going to read a list of places where people might store medications. Please tell me where you store your medications, including prescription and non-prescription ones.

PRESS ENTER TO CONTINUE

>Q3a<

Do you store your medications, including those prescribed by a doctor and non-prescription ones, in a bathroom medicine cabinet?

<1> Yes [go to Q3a1]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q3b]

>Q3a1<

Is the bathroom medicine cabinet locked?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3b<

Do you store your medications, including those prescribed by a doctor and non-prescription ones, in a bathroom closet?

<1> Yes [go to Q3b1]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q3c]

>Q3b1<

Is the bathroom closet locked?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3c<

Do you store your medications, including those prescribed by a doctor and non-prescription ones, in the kitchen?

<1> Yes [goto Q3c1]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW

<9> REFUSED

@ [go to Q3d]

>Q3c1<

Is that kitchen cabinet locked?

<1> Yes
<2> No

<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3d<

(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

In the bedroom?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3e<

(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

In the car?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3f<

(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

In a purse or briefcase?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3g<

(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

At your office or workplace?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q3h<

(Do you store your medications, including those prescribed by a doctor and non-prescription ones)

At any other place?

<1> Yes (SPECIFY) [SPECIFY]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q6_1<

Do you have any prescription or non-prescription medications that have not yet expired left over from a prior illness?

(IF NECESSARY): We are asking about prescription or non-prescription medications that have not yet expired but are no longer being taken.

<1> Yes [go to Q6a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q9]

>Q6_2<

Do you have any prescription or non-prescription medications that have not yet expired left over from a prior illness, or do you not have any?

<1> Have [go to Q6a]
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q9]

>Q6a<

How many different medications do you have?
Please count the total number of different medications, not the total number of doses in the medications.

<1-20> Medications
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

Q6b is one of the open-ended questions in the survey. Respondents may find these vague and say they don't know – please encourage them to give us their best idea.

>Q6b<

Why were they not taken or not finished?

@ [SPECIFY]

For Q9@14, probe by saying, "Are there any <u>other</u> prescription or non-prescription medications that you currently have stored in your home or in any other place?"

>Q9<

I am going to read to you a list of medications that people may have.
Which of these prescription or non-prescription medications do you
currently have stored in your house or in any other place?

(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

@1 Antibiotics
@2 Blood pressure medications other than water pills
@3 Cholesterol lowering medications
@4 Blood thinners
@5 Diuretics
@6 Diabetes medications
@7 Hormone replacements
@8 Oral contraceptives
@9 Prescription pain medications
@10 Anti-seizure medications
@11 Cold, cough, or flu medications
@12 Over-the-counter pain medications
@13 Antacids
@14 Vitamins
@15 Herbal remedies
@16 Any other medication? (SPECIFY)

>Q11_1<

Do you have any prescription or non-prescription medications
in the house or somewhere else from someone no longer living
in your household?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q15]

>Q11_2<

Do you have any prescription or non-prescription medications
in the house or somewhere else from someone no longer living
in your household, or do you not have any?

<1> Have
<2> Do not have
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

<8> DON'T KNOW
<9> REFUSED

@

You may get a lot of "don't know" responses to Q15. Please probe these by assuring respondents that their best estimate is fine here.

>Q15<

What would you estimate is the longest time a container of prescription or non-prescription medication has been stored in your home or some other place past its expiration date?

<1> Less than 1 year
<2> Between 1 year to less than 2 years
<3> Between 2 years to less than 5 years
<4> Between 5 years to less than 10 years
<5> 10 years or more
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q16_intro<

We are interested in knowing how people get rid of or dispose of medications, and these next questions are about disposal.

PRESS ENTER TO CONTINUE

At Q16, options 9 and 10 listed in all caps are for respondents who repeatedly tell you that they don't know how they dispose of medications, or don't know what they should do. They should NOT be read to the respondent.

>Q16<

I am going to read a list of ways to get rid of or dispose of unused or expired medications. Please tell me whether or not you or someone else in your house disposes of unused or expired medications in that way. Do you or does someone in your house...
(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

@1 Throw away unused or expired medications in household garbage?
@2 Flush unused or expired medications down the toilet or sink?
@3 Take unused or expired medications to a hazardous waste collection facility or collection event?
@4 Give unused or expired medications to someone else who would use them?
@5 Return unused or expired medications to a pharmacy?
@6 Return unused or expired medications to a physician?
@7 Never dispose of unused or expired medications?
@8 Dispose of unused or expired medications in some other way? (please specify in what way is that?)
@9 DON'T KNOW WHAT TO DO WITH SUCH MEDICATIONS
@10 DON'T KNOW HOW WE DISPOSE OF SUCH MEDICATIONS

>Q17_1<

(DO NOT PROBE "SOMETIMES" or "IN SOME CASES" --- CODE "SOMETIMES"

PROBE "DON'T KNOW" OR "IT DEPENDS" ONE TIME.)

Do you think prescription medication should be disposed of
differently than over-the-counter or non-prescription medication?

<1> Yes [go to Q18]
<2> No
<3> Sometimes
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED
@ [go to Q20]

>Q17_2<
Do you think prescription medication should always, sometimes,
or never be disposed of in a different way than over-the-counter
or non-prescription medication?

<1> Always [go to Q18]
<2> Sometimes
<3> Never
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q20]

Q18, Q19, and Q20 are open-ended questions in the survey. Respondents may find these vague and say they don't know – please encourage them to give us their best idea.

>Q18<
In your opinion, what is the best way to properly dispose
of unwanted prescription medications?

<1> Specify [SPECIFY]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q19<
In your opinion, what is the best way to properly dispose
of unwanted non-prescription or over-the-counter medications?

<1> Specify [SPECIFY]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q20a]

>Q20<
In your opinion, what is the best way to properly dispose of unwanted
prescription or non-prescription medications?

```
      <1> Specify [SPECIFY]
      <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
      <8> DON'T KNOW
      <9> REFUSED
```

>Q20a<

```
      Do you think that people should or should not flush unwanted
      prescription or non-prescription medications down the toilet
      or the sink?

      <1> Yes, should [go to skip2a]
      <2> No, should not [go to Q20a_1a]
      <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
      <8> DON'T KNOW
      <9> REFUSED

      @ [go to skip2a]
```

Q20a_1a are Q20b are open-ended questions in the survey. Respondents may find these vague and say they don't know – please encourage them to give us their best idea.

>Q20a_1a<

```
      Why do you say that people should not flush unwanted medications?

      <1> Specify [specify]
      <8> DON'T KNOW
      <9> REFUSED

      @ [#go to Q21_rand]
```

>Q20b<

```
      Why do you think prescription medications should be disposed
      of differently than over-the-counter or non-prescription
      medications?

      <1> Specify [SPECIFY]
      <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
      <8> DON'T KNOW
      <9> REFUSED
```

>Q21_1<

```
      Have you ever received any information about how to dispose
      of prescription or non-prescription medication?

      INTERVIEWER: CAN PROBE WITH "Information can include media,
                   written materials, signs, billboards, etc."

      <1> Yes      [go to Q21a]
      <2> No
      <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
      <8> DON'T KNOW
      <9> REFUSED
```

@ [go to Q22]

>Q21_2<
Have you ever received any information about how to dispose of prescription or non-prescription medication, or have you never received such information?

INTERVIEWER: CAN PROBE WITH "Information can include media, written materials, signs, billboards, etc."

<1> Received [go to Q21a]
<2> Never received
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q22]

>Q21a<
Where did you receive the information or who provided you with it?

<1> Specify [SPECIFY]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q22<
If you were interested in learning more about how to properly dispose of prescription and non-prescription medication, where would you go to get that information?

<1> Specify [SPECIFY]
<2> NOT INTERESTED
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q23_1<
Have you read, heard, or seen any news stories about pharmaceuticals being detected in public water sources or water supplies?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q25]

>Q23_2<
Have you read, heard, or seen any news stories about pharmaceuticals being detected in public water sources or water supplies, or have you never read, heard or seen such news stories?

```
      <1> Read, heard, or seen
      <2> Never read, heard, or seen
      <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
      <8> DON'T KNOW
      <9> REFUSED

>Q25<
      If there was a convenient location where you could drop off unused or expired
      medications for disposal, how willing would you be to use this method to get rid
      of such medications?

      Would you be...

      <1> Very willing,
      <2> Somewhat willing,
      <3> Neither willing nor unwilling,
      <4> Somewhat unwilling, [go to Q25a]
      <5> Very unwilling, or [go to Q25a]
      <6> Are you not sure?
      <97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
      <98> DON'T KNOW
      <99> REFUSED
        @       [go to Q26]
```

Q25a is another of the open-ended questions in the survey. Respondents may find these vague and say they don't know – please encourage them to give us their best idea.

```
>Q25a<
      Why do you say that you are unwilling to do so?

      <1> Specify [SPECIFY]
      <7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
      <8> DON'T KNOW
      <9> REFUSED

>Q26<
 [if Q25 eq <1> or Q25 eq <2> or Q25 eq <3>]
      From the list I am going to read, please tell me whether
      or not you would be likely to take your unwanted
      medications to that location for proper disposal.
      Would you take them...
[else]
[if Q25 eq <4>]
      From the list I am going to read, please tell me whether or
      not you would be willing to take your unwanted medications
      to that location for proper disposal. Would you take them...
[else]
[if Q25 eq <5>]
      From the list I am going to read, please tell me whether or
      not you would be willing to take your unwanted medications
      to that location for proper disposal. Would you take them...
 [endif]
```

(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

@1 To the nearest pharmacy?
@2 To a doctor's office, clinic or hospital?
@3 To a drop-off box located inside a police station or sheriff's office?
@4 To a household hazardous waste collection facility in Chicago?
@5 To some other place? (SPECIFY)

Q27 is another of the open-ended questions in the survey. Respondents may find these vague and say they don't know – please encourage them to give us their best idea.
Also, a range is fine to accept from respondents here (i.e., $5 to $10).

>Q27<

How much extra money per prescription would you be willing to pay if that money would be used to support a safe system to collect and properly dispose of medications?

INTERVIEWER: PROBE ANSWERS SUCH AS "a little" FOR SPECIFIC DOLLARS/CENTS AMOUNT OR A RANGE.

<1> Specify [SPECIFY]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q28<

What do you think might be the consequences of keeping unused
or expired medications in your home?

<1> Specify [SPECIFY]
<2> NONE / NO CONSEQUENCES
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q29_1<

Are there any reasons why you might not want to take your unused or expired medications back to a pharmacy for proper disposal?

<1> Yes [go to Q29a]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q30intro]

>Q29a<

Can you tell me what those reasons are?

(1 = YES, 2 = NO, 7 = NCRA, 8 = DON'T KNOW, 9 = REFUSED)

@1 Privacy breech
@2 Potential re-use by others
@3 Resale by pharmacy
@4 I do not have specific reasons
@5 I am not sure
@6 Other (SPECIFY)

>Q30intro<

[no data]
I am going to read a list of methods that could be used to get rid of medications. For each method, please tell me how confident you are that it is a safe way to dispose of unused or expired medications.

PRESS ENTER TO CONTINUE

>Q30_1<

How confident are you that a secure lockbox with a method to destroy medications located behind a pharmacy counter is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or

<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_2<

Next, how confident are you that a secure lockbox transported by a law enforcement officer is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_3<

How confident are you that a secure lockbox in a doctor's office or hospital is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_4<

(How confident are you that)

a mail back program similar to the service provided for ink cartridges?

(is a safe way to dispose of unused or expired medications?)

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_5<

(How confident are you that)

a lockbox similar to those for used needles and other medical waste, that can be dropped off at your doctor's office or a pharmacy for disposal?

(is a safe way to dispose of unused or expired medications?)

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_6<

How confident are you that a neighborhood collection day overseen by the Environmental Protection Agency is a safe way to dispose of unused or expired medications?

Are you...

<1> Not at all confident,
<2> Slightly confident,
<3> Moderately confident,
<4> Very confident, or
<5> Extremely confident?
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q30_7<

Is there any other method that you are confident is safe?

<1> Yes (SPECIFY) [SPECIFY]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31intro<

Next, please tell me whose responsibility you think it should be to provide a safe way for people to dispose of unused or expired medications.

PRESS ENTER TO CONTINUE

>Q31_1<

Is it the responsibility of the pharmaceutical companies that manufacture the medications to provide a safe way for people to dispose of unused or expired medications?

<1> Yes

<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_2<
Is it the responsibility of the pharmacies that dispense
the medications to provide a safe way for people to dispose
of unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_3<
Is it the responsibility of the doctors and other health care
professionals who prescribe the medications to provide a
safe way for people to dispose of unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_4<
Is it the responsibility of water or wastewater treatment agencies?

(to provide a safe way for people to dispose of unused or
expired medications?)

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_5<
Is it the responsibility of the Environmental Protection Agency?

(to provide a safe way for people to dispose of unused or
expired medications?)

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_6<
Is it the responsibility of the Department of Public Health?

(to provide a safe way for people to dispose of unused or expired medications?)

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_7<
Is it the responsibility of the police or sheriff's department?

(to provide a safe way for people to dispose of unused or expired medications?)

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_8<
Is it your responsibility to find a safe way to dispose of your unused or expired medications?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q31_9<
Is it someone else's responsibility to find a safe way for people to dispose of unused or expired medications?

<1> Yes (SPECIFY) [SPECIFY]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>intro2<
This is our last set of questions.

PRESS ENTER TO CONTINUE

>Q12_1<
Have you ever used a medication that a doctor prescribed for someone other than you?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

<8> DON'T KNOW
<9> REFUSED

@ [go to Q14_rand]

>Q12_2<
Have you ever used a medication that a doctor prescribed for someone other than you, or have you never used such a medication?

<1> Used
<2> Never used
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q14_1<

Have you ever given anyone else your prescription medication to use?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Qx][#go to Q15]

>Q14_2<

Have you ever given anyone else your prescription medication to use, or have you never done that?

<1> Given
<2> Never given
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Qx<

Are you currently covered by some form of health insurance or health plan?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [goto skip5]

>Qy<

[##Ask only if response to health insurance question is "yes"]
Is prescription drug coverage included as part of your current health insurance or health plan?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE
<8> DON'T KNOW
<9> REFUSED

@ [goto Q32]

>Q32<

Do you primarily get your prescription medications. . .

<1> From a local retail pharmacy by going into the store,
<2> From the drive-thru window of a local retail pharmacy,
<3> From a mail order pharmacy,
<4> From a hospital or clinic pharmacy, or

<5> In some other way? (SPECIFY)[SPECIFY]
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

At Q24, probe "unfiltered or filtered" for responses of "tap water".

>Q24<

Does your household primarily use bottled water or tap water for drinking?

INTERVIEWER: IF RESPONDENT MENTIONS "tap water", PROBE FOR

WHETHER FILTERED OR UNFILTERED.

<1> Bottled [go to Q24a]
<2> Unfiltered tap
<3> Filtered tap
<4> More than one
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to Q41]

>Q24a<

Why does your household primarily use bottled water for drinking?

<1> Specify [SPECIFY]
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q41<

During the last 30 days, how many times did you buy something that helps to protect the environment?

(IF NECESSARY): Products that are environmentally safe or that are made from recycled materials.

<0> Never
<1-30> Times
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q33<

What is your year of birth?

<1900 - 1991>
<9997> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<9998> DON'T KNOW

<9999> REFUSED

>Q34<

What is your zip code?

<00000 - 99994>
<99997> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<99998> DON'T KNOW
<99999> REFUSED

>Q35<

(ASK ONLY IF NECESSARY)
What is your gender?

<1> Male
<2> Female
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q36<

Are you of Hispanic, Spanish, or Latino origin?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

>Q37<

With what racial group do you most closely identify? Would you say...

<1> African American or Black,
<2> White,
<3> Asian or Pacific Islander,
<4> Native American or Aleut,
<5> Multiracial or Biracial, or
<6> Some other racial group? (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q38<

Including yourself, how many people are currently living in your household?

<1-20> People
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q39<

How many children less than 18 years old are living in your household?

<0> Children [go to Q40]
<1-20> Children [If "1", go to Q39xx, if >1 go to Q39yy]
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

<98> DON'T KNOW
<99> REFUSED

[##ASK IF RESPONSE TO Q39 IS "1"]
>Q39xx<
Are you responsible for providing care for this child less than 18 years old?

<1> Yes [go to Q40]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

<8> DON'T KNOW
<9> REFUSED

@ [go to Q40]

[##ASK IF RESPONSE TO Q39 IS BETWEEN 2-20]
>Q39yy<
For how many of these children less than 18 years old do you provide care?

<0-20> Children
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>Q40<
Including yourself, how many adults who are more than 65 years old are living in your household?

<0> People [go to thnks]
<1-20> People [If "1", go to Q40xx, if >1 go to Q40yy]
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

[##ASK IF RESPONSE TO Q40 IS "1"]
>Q40xx<
Are you responsible for providing care for this adult living in your household?

<1> Yes
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to thnks]

[##ASK IF RESPONSE TO Q40 IS BETWEEN 2-20]
>Q40yy<

For how many of these adults living in your household do
you provide care?

<0-20> Adults
<97> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<98> DON'T KNOW
<99> REFUSED

>PC1<

Thank you very much for sharing your opinions with me today. I really appreciate it. If you have any questions about this interview you may call the project coordinator for this study. Would you like her number?

<1> Yes [go to PC2]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to OPRS1]

>PC2<

Her name is Ms. Sowmya Anand and she can be reached at
1 (217) 333-2219 during business hours Monday through Friday.

PRESS 'ENTER' TO CONTINUE.

>OPRS1<

If you have any concerns about this study, you may call the University of Illinois at Chicago Office for Protection of Research Subjects. Would you like this number?

<1> Yes [go to OPRS2]
<2> No
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]
<8> DON'T KNOW
<9> REFUSED

@ [go to thnks]

>OPRS2< [no data]

That number is 1-866-789-6215 (toll-free).

PRESS 'ENTER' TO CONTINUE.

>thnks<

Those are all of the questions that I have.
Thank you for your participation!

PRESS ENTER TO CONTINUE

The following interviewer assessment questions will help us determine key outcomes of the experiment.

>INT1<

OVERALL, R's COOPERATION WAS:

<1> Very good
<2> Good
<3> Fair
<4> Poor
<5> Very poor
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

>INT2<

OVERALL, HOW GREAT WAS R'S INTEREST IN THE INTERVIEW?

<1> Very high
<2> Above average
<3> Average
<4> Below average
<5> Very low

>INT3<

HOW SINCERE DID R SEEM TO BE IN HIS/HER ANSWERS?

<1> Completely sincere
<3> Usually sincere
<5> Often seemed to be insincere
<7> NO CODED RESPONSE APPLICABLE (SPECIFY) [SPECIFY]

>INT4<

R'S REACTION TO INTERVIEW:
(ENTER ALL THAT APPLY)

ENTER A "1" FOR ALL THAT APPLY

@1 Negative - general
@2 Positive - general
@3 Negative comments about length
@4 Positive comments about length
@5 Negative - too complicated
@6 Positive - easy
@7 Negative - boring/tedious/repetitious
@8 Positive - fun, thought provoking
@9 R wanted to stop before interview completed
@10 R complained and/or interviewer observed that
R was confused by questions "couldn't understand
the questions"
@11 R became angry at interview CONTENT
@12 R became concerned about sampling purpose or bias
(why was I called, where did you get my name, etc.)
@13 Neutral or no feedback
@97 NO CODED RESPONSE APPLICABLE (SPECIFY)

APPENDIX D. DISPOSITION CODES

Code	Disposition	Explanation of Use
(01)	Completed interview (English) (Type 1)	Completed interview in English
(02)	Completed interview (Spanish) (Type 2)	Completed interview in Spanish
(10)	Initial refused screener	This disposition is used only on studies that require screening for eligibility criteria. It represents a refusal at any time before screening has been completed. On studies that have screening, "hang ups" are classified as this disposition.
(11)	Initial refused interview (English)	The eligible respondent refuses to be interviewed or refuses to finish the entire interview- English.
(12)	Initial refused interview (Spanish)	The eligible respondent refuses to be interviewed or refuses to finish the entire interview- Spanish.
(20)	Appointment/partial to complete	This disposition is used for both appointments and partial interviews. Partial interviews in this category are those in which the respondent is willing to complete the interview but was unable to finish it during the first session. It does not include partial interviews that the respondent refused to finish. (These are considered "initial refused interviews.")
(25)	Eligible foreign language	This disposition is used only on those studies for which we are interviewing in a foreign language in addition to English. It is appropriate only if we plan to do interviews in the particular language spoken by an informant or the respondent.
(26)	Temporarily disconnected	Used when a recording tells you that the phone number you have dialed has been temporarily disconnected. It is standard practice at SRL to retry temporary disconnects after two weeks have passed.
(29)	Initial duplicate	The respondent indicates that he has already been interviewed on the study. Before the case is finalized, the sampling section must confirm that the case appears twice.
(30)	No answer/busy	Used for telephone numbers that have never answered or that have always been busy. This disposition is not used once someone has answered the telephone or an answering machine or service has been reached. Final after 10 attempts.

(31)	Answering machine/answering service	If the message on the machine or the manner in which the service answers lead you to believe you have a wrong number, disposition the case accordingly. On RDD studies, an obvious business message should be dispositioned as a business rather than as an answering machine.
(32)	Eligible respondent not available	Used once the respondent has been screened or for list samples in which no screening is necessary. It connotes that the respondent was not home, was busy, or for some other reason could not be interviewed at the time of the contact. No appointment could be made.
(33)	Unscreened respondent not available	Used when someone answered the telephone but was not available to be screened. Like the above disposition, no appointment could be made.
(40)	Final refused screener	These dispositions are used in the same way as the initial refusal dispositions, except that the case has been finalized through reworking or by supervisory action.
(41)	Final refused to be scheduled for an interview	Final refusal – English
(42)	Final refused to be scheduled for an interview (Spanish)	Final refusal – Spanish
(44)	Final refused screener "Do not call" list	Refusal because registered with the National Do Not Call List, unscreened household
(45)	Final refused interview "Do not call" list	Refusal because registered with the National Do Not Call List, screened household
(47)	Final refused screener, privacy manager, English	Refusal from Privacy Manager, unscreened household, English speaking
(48)	Final refused interview, privacy manager, English	Refusal from Privacy Manager, screened household, English speaking
(49)	Final refused interview, privacy manager, Spanish	Refusal from Privacy Manager, screened household, Spanish speaking
(55)	Not able to schedule an appointment during the available appointment slots	Used when there is a clear indication that the respondent will be unavailable to participate within the time confines of the survey period. This may be due to hospitalization, being away on vacation, etc.
(56)	Never able to interview	Used when the eligible respondent is too hard of hearing, is permanently ill, is incapacitated, or for some other reason would never be able to be interviewed. It is not related to the timeframe of the data collection effort.

(60)	Other eligible	Used when the situation does not seem to be covered by any other category and you think there is a possibility that the case may be eligible. Situations covered by this disposition may include not knowing what language is spoken in a household or feeling that a respondent was under the influence of drugs or alcohol when contacted.
(70)	HH ineligible age	HH is ineligible – no one over 18
(71)	R ineligible (medications)	Ineligible due to never having any medications at home – for self or for someone for whom R is monitoring care.
(86)	Nonworking	The telephone number is not in service, is disconnected, is not yet connected, has been changed to a new number, does not ring, rings fast busy or rings in electronic beeps. Telephone numbers that seem to belong to computer modems, FAX machines, or beepers have this disposition. Also included are cases in which the phone number dialed connects to some other number due to a telephone company wiring problem.
(87)	Nonresidential (or not primary residential)	The telephone number connects to a business or to group quarters such as a dormitory, barracks, or shelter. Numbers connecting to pay phones, car phones, a summer cottage, a child's phone, or a secondary phone in the household also are included in this disposition.
(88)	Ineligible foreign language	This disposition is used if the respondent speaks a language other than that/those in which we are interviewing. On a study that requires screening, do not use this disposition unless there is no one in the household who speaks an eligible language.
(89)	Final duplicate	Sampling has confirmed that an "initial duplicate" case appears twice in the sample. This disposition is used only by a supervisor or with a supervisor's authorization.
(90)	Other ineligible	Used when the situation does not seem to be covered by any other category and you think the case is ineligible.

[i] IMS Health Reports. Available at http://www.imshealth.com/ims/portal/front/articleC/0.2777.6599_3665_83470499.00html. Accessed on 4/7/08.
[ii] Kuspis DA, Drenzelok EP. What Happens to Expired Medications? A Survey of Community Medicine Disposal. *Vet Human Toxical* 1996; 38: 48-9.
[iii] Kolpin DW, Furlong ET, Meyer MT, *et al*. Pharmaceuticals, Hormones, and Other Organic Wastewater Contaminants in U.S. Streams, 1999-2000: A National Reconnaissance, *Environ Sci Technol* 2002;36:1202-11.
[iv] Smith, CA. Managing Pharmaceutical Waste: What Pharmacists Should Know. *J Pharm Society Wisconsin* 2002;Nov/Dec:17-22.
[v] Stackelberg PE, Furlong ET, Meyer MT, *et al*. Persistence of Pharmaceutical Compounds and Other Organic Wastewater Contaminants in a Conventional Drinking Water Treatment Plant. *Sci Total Eviron* 2004:329-99-113.

[vi] Heberer T. Occurrence, Fate, and Removal Residues in the Aquatic Environment: A Review of Recent Research Data. Toxical Lett 2002;131:5-17.
[vii] Jones OA, Voulvoulis N, Lester JN. Potential Impact of Pharmaceuticals on Environmental Health. Bull World Health Organ 2003;81:768-9.
[viii] Webb S, Temes T, Gilbert M, *et al*. Indirect Human Exposure to Pharmaceuticals Via Drinking Water. Toxical Lett 2003;142:157-67.
[ix] Seehusen DA, Edwards J. Patient Practices and Beliefs Concerning Disposal of Medications. JABFM 2006;19:542-7.
[x] Boehringer SK. What's the Best Way to Dispose of Medications? Pharmacist's Letter 2004;20.