

correlation coefficients of drug test results and the two outcome measures (i.e., absenteeism and involuntary turnover) ranged from 0.18 to 0.52.

PERSONAL AND JOB CHARACTERISTICS OF DRUG USE IN THE WORKPLACE. Michael D. Newcomb. University of Southern California, Los Angeles, CA.

Two perspectives have been taken to explain the use of drugs on the job. The first perspective suggests that various aspects of the job lead to using drugs while at work. A second viewpoint posits that the job characteristics are less important than the personal qualities or traits of the individual and that certain types of people will tend to use drugs on the job regardless of variations in specific job characteristics. Data is reported from a longitudinal study of young adults covering a four-year period. Latent variable analyses are used to separate a general tendency to use all types of drugs in the workplace from use of specific types of drugs while at work during the previous six months. This is the predicted or dependent variable in the model which was assessed at Time 2. The same disruptive drug use measures were gathered at Time 1, which provide the essential baseline assessments to control for stability over time. Three other latent constructs are also included in the model at both time points: Social Conformity (reflected by measures of law abidance, liberalism, and religiosity), Job Stability (frequencies of being fired and collecting unemployment insurance), and Job Satisfaction (reflected in measures of happiness and dissatisfaction with their current working conditions). Social Conformity was selected to reflect personal characteristics, since it has proven to be one of the best predictors of drug involvement. Final models are developed which assess the relative influence of prior disruptive drug use, personal qualities (Social Conformity), work history (Job Instability), and work characteristics (Job Satisfaction) on predicting later use of drugs in the workplace. Both standard and nonstandard effects are considered, which permit a richer and more complete description of what specific factors influence which specific outcomes. Such results provide valuable information about etiological factors for drug use in the workplace, and suggest strategies for both intervention and prevention efforts.

IMPACT OF MODERATE ALCOHOL CONSUMPTION ON BUSINESS DECISION MAKING. Sarah M. Jobs, Chad T. Lewis and Fred E. Fiedler. University of Washington, Seattle, WA.

This study investigates the effects of moderate alcohol consumption on the learning of and execution of a business decision-making task. Decision making was evaluated within the framework of Steele and Southwick's inhibitory response conflict model. Subjects were randomly assigned to one of four experimental conditions in a balanced placebo design; they expected and received an alcoholic beverage; they expected and received tonic only; they expected alcohol but received tonic; or they expected only tonic but received alcohol. Within these conditions, subjects were trained to participate in a business decision-making game and then made three successive ordering and pricing decisions. The results showed that although those who consumed a moderate amount of alcohol scored significantly more poorly on a short test of recall, alcohol did not uniformly affect decision-making outcomes. When subjects experienced high inhibitory response conflict (IRC) and had expected to consume alcohol (regardless of actual beverage consumed), their decisions tended to be significantly more extreme than for subjects who experienced high IRC

but had expected to consume only tonic. The expectation of consuming alcohol rather than alcohol consumption itself led subjects to overcorrect for previously poor decisions to a significantly greater extent under conditions of high IRC. This result contradicts the Steele and Southwick's model; theoretical and practical implications of these findings are discussed.

DRUGS AND PERFORMANCE: IMPLICATIONS OF LABORATORY RESEARCH FOR ON-SITE ASSESSMENT. Jack Henningfield, Phillip P. Woodson and Stephen J. Heishman. National Institute on Drug Abuse Addiction Research Center, Baltimore, MD.

Part of the rational basis for on-site assessment of biologic specimens for the presence of drugs of abuse is that such evidence of use may indicate impairment of performance. However, performance impairment cannot be reliably inferred on the basis of such data, except, possibly, when quantitative analyses reveal high levels of drug exposure. Objective and reliable methods of performance assessment are available, and, in principle, some could be implemented for on-site evaluations. Such performance assessment might be constrained by the same kinds of issues of sensitivity, accuracy, reliability, and validity that confront urine testing programs. The main purpose of this paper is to review some of the determinants of drug-induced impairment that should be considered in efforts to develop on-site performance assessment batteries. In brief, drugs may directly impair performance by impairment of sensory and perceptual capacities, and by impairment of motor abilities. Drugs may indirectly impair performance by altering the motivation to perform well, by setting the occasion for inappropriate behavior, by directly eliciting incapacitating responses, or by impairment of performance of tasks learned in a nondrug state. Development of performance batteries should consider the following issues: 1) Performance decrements can arise from drug abstinence as well as from drug administration; 2) abstinence related effects may differ in accordance with the history of the drug user, e.g., mild "hangover" decrements may accompany acute drug exposure, whereas physically-dependent users may suffer incapacitating decrements and only function at normal levels when taking their drug; 3) a wide range of performance batteries are available for the evaluation of different kinds of performance, e.g., grip strength, balancing tests, finger tapping, critical flicker fusion, psychomotor speed and accuracy tests, complex verbal behavior and memory tasks, and logical reasoning and complex decision making tasks are available; 4) the validity of the battery is related to its relevance to the work performance, e.g., a complex logical reasoning task may be irrelevant for a materials handler, whereas a finger tapping task may be irrelevant to the performance of a communications operator; 5) the contingencies for behavioral performance testing, themselves, can affect the outcome of the test results. Various issues discussed in this paper have arisen from laboratory research on performance effects of drugs. Although these issues complicate on-site performance evaluations, their consideration may enhance efforts to develop test batteries that are objective, reliable and valid.

SUNDAY P.M.

POSTER SESSION

Cultural and Environmental Determinants of Behavior

DEPRESSION AND DRUG USE IN MEXICAN-AMERICAN YOUTH. Stephanie S. Smith, D. Dwayne Simpson and Donald Woods. Texas A&M University, College Station, TX.

This study focused on depression in 110 Mexican-American youth who entered the Youth Advocacy Program (YAP), a drug prevention program in southeast Austin, between March 1981 and December 1985. Seventy-eight of their mothers were also interviewed at follow-up. Descriptive data about the clients and their mothers are reported. Forty-four percent of the clients and 35% of the mothers interviewed were depressed. The relation of depression and drug use is discussed.

THE DRINKING STYLES QUESTIONNAIRE: ADOLESCENT DRINKING SELF-REPORT. Gregory T. Smith. Wayne State University, Detroit, MI; Mark S. Goldman. University of South Florida, Tampa, FL; and Bruce A. Christiansen. University of Wisconsin, Milwaukee, WI.

Although recent evidence suggests that carefully assessed self-report of alcohol-related behaviors can have reliability and validity, few studies have investigated self-report among adolescents who are typically in the process of initiating drinking behavior. The Drinking Styles Questionnaire, an adolescent self-report instrument that yields two scales: Quantity/Frequency and Problem Drinking, was employed and tested extensively in a 3-year longitudinal study using two large subject cohorts (total $n=471$). Internal consistency and test-retest correlations averaged .89 for each scale. Scores correlated highly (mean .62) with separate reports of alcohol consumed during the preceding 7 days. Reports suggested dramatic increases in alcohol consumption between the 7th and 10th grades, and highlighted the centrality of peer group drinking settings. Results are consistent with our earlier findings pointing to the expectancy for social enhancement from alcohol as a key predictor of adolescent drinking choices. (Supported by a grant from NIAAA.)

DETERMINANTS OF SMOKING STATUS OF BLACK URBAN ADOLESCENTS. Ana Correa Fick and Sarah Moody-Thomas. University of New Orleans, New Orleans, LA.

The relationship between locus of control orientation and adoption of cigarette smoking among Black adolescents was investigated. Measures of locus of control were obtained using Levenson's multidimensional inventory. Significant effects (ANOVA) on smoking status were found for school setting and Internal classification; there were no significant gender, Powerful Others, Chance or interaction effects. A discriminant equation (discriminant analysis) included Internal score, Powerful Others score, school setting, father's and best friend's smoking status, and number of five closest friends that smoke. Results lend support for the continued development of at-risk profiles to identify those individuals most likely to become smokers.

ALCOHOL EXPECTANCIES AS A FUNCTION OF INTOXICATION LEVEL. Vincent J. Adesso. University of Wisconsin-Milwaukee, Milwaukee, WI; Bruce A. Christiansen. Sinai Samaritan Medical Center, Milwaukee, WI; and Toby A. Ansfield. University of Wisconsin-Milwaukee, Milwaukee, WI.

The present study compared the expectations men hold about alcohol in sober and intoxicated states based on the idea of state-dependent learning. Eighteen light and 18 heavy social drinkers received a sufficient quantity of alcohol to produce a blood alcohol level (BAL) of 0.08 mg%. It is hypothesized that expectancies will differ not only in the intoxicated and sober states, but also as a function of intoxication level and as a function

of light and heavy drinking status. Analyses of these data are currently being conducted.

SITUATIONAL VARIATION IN ALCOHOL EXPECTANCIES. Brian T. Levine and Mark S. Goldman. University of South Florida, Tampa, FL.

A 10-year series of studies has demonstrated the utility of the construct of expectancies for the understanding and prediction of alcohol use and alcoholism. There is reason to believe that expectancies may vary with drinking context, but this relationship has not been systematically investigated. This paper describes the development and preliminary validation of the Expectancy/Context Questionnaire (ECQ). Expectancies as measured by the ECQ were found to be sensitive to contextual variation as well as drinking behavior. These results suggest that the instrument will be useful in assessing the development of expectancies.

DETOXIFICATION FEAR EFFECTS ON METHADONE MAINTENANCE OUTCOME: FIVE-YEAR FOLLOW-UP. Joseph E. Schumacher. University of Alabama, Tuscaloosa, AL; Jesse B. Milby and Beth E. Fishman. University of Alabama, Birmingham, AL.

Five-year follow-up was conducted on randomly selected methadone maintenance patients originally assessed for detoxification fear. Results showed 21 remained in treatment, 11 of which had detoxification fear. Fear measures predicted selected outcome variables via canonical correlation and represented 40% shared variance between the two sets of measures. Univariate correlations show fear measures associated with longer treatment and severe fear associated with fewer treatment episodes, attempts to detoxify and successful detoxification attempts. Results support the notion that detoxification fear is a significant variable which impacts on methadone maintenance outcome. Other variables related to outcome and implications of findings for future research are discussed.

PERSONALITY DISORDER CLASSIFICATION AND SYMPTOMS IN COCAINE AND OPIOID ADDICTS. Robert M. Malow, Jeffrey A. West, Jayne L. Williams and Patricia B. Sutker. VA Medical Center, New Orleans, LA.

The extent to which personality disorders and associated symptom criteria were found among cocaine- and opioid-dependent men undergoing inpatient treatment was examined using structured interview methodology. Cocaine and opioid addicts were also compared on measures of anxiety and depression. Drug groups were distinguished by higher prevalences of antisocial and borderline symptomatology than by features associated with other personality disorders. Cocaine users showed lower rates of borderline and adult antisocial features and reported less subjective distress than opioid addicts, and different constellations of target problem features emerged for the two groups. Inconsistent work behavior, identity disturbance, and affective instability were the most significant variables differentiating cocaine and opioid addicts.

CONCURRENT VALIDITY OF THE MOTIVATIONAL STRUCTURE QUESTIONNAIRE FOR ALCOHOLICS. W. Miles Cox. North Chicago VA Medical Center, North Chicago, IL; Eric Klinger. University of Minnesota, Morris, MN; Joseph P. Blount. St. Mary's College, South Bend, IN; and Daniele K.