PROGRAM LEVEL EVALUATION OF ASAP DIAGNOSIS, REFERRAL AND REHABILITATION EFFORTS Volume IV - Development of the Short Term Rehabilitation (STR) Study

Contract No. DOT-HS-191-3-759 September 1976 Final Report

PREPARED FOR:
U.S. DEPARTMENT OF TRANSPORTATION
National Highway Traffic Safety Administration

Washington, D.C. 20590

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Technical Report Documentation Page

1. Report No.	2. Government Accession No.	3. Recipient's Catalog No.
DOT HS 802-045		
4. Title and Subtitle	in a f ACAD Discussion	5. Report Date
	cion of ASAP Diagnosis,	September 1976
Referral and Rehabili		6. Performing Organization Code
Volume IV, Developmer Rehabilitation (STR)		
7. Author's	Study	8. Performing Organization Report No.
Vernon S. Ellingstad		
9. Performing Organization Name and Addre	s s	10. Work Unit No. (TRAIS)
Human Factors Laborat		
Department of Psychol		11. Contract or Grant No.
University of South D		DOT-HS-191-3-759
Vermillion, South Dak	ota 57069	13. Type of Report and Period Covered
12. Sponsoring Agency Name and Address	Dada da	Final
Office of Driver and		July 1973 - June 1976
U.S. Department of Tr		14 5- 4 6-1-
400 Seventh Street, S	14. Sponsoring Agency Code	
Washington, D. C. 2	10390	<u> </u>

16. Abstract

15. Supplementary Notes

The present report discusses the development, implementation, and current status of the Short Term Rehabilitation (STR) Study initiated by the NHTSA in 1974.

Experimental designs employed by each of the 11 ASAP/STR sites for the assignment of mid-range problem drinker drivers to STR treatment or control groups are described. Preliminary efforts to consolidate the individual site designs into a set of program level designs are also discussed.

The STR data system which incorporates initial client intake data as well as 6, 12, and 18 month client follow-up interview and record check data is also described.

Preliminary analyses designed to provide a set of life change criteria for use in assessing the effectiveness of STR rehabilitation modalities are presented. These analyses have been applied to the Life Activities Interview to yield five life status factors including: Alcohol Use, Income/Employment, Socialization/Social Activity, Family/Marital Status, and Physical Health Factors. Scales of the Current Status Questionnaire (CSQ) and Personality Assessment Survey (PAS) instruments are also presented.

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TABLE OF CONTENTS

	Page
BACKGROUND	. 1
DESIGN OF THE STR STUDY	. 5
INDIVIDUAL SITE DESIGNS	. 5
Denver, Colorado	. 5
Fairfax, Virginia	. 5
Kansas City, Missouri	. 11
Hennepin County, Minnesota	. 13
New Orleans, Louisiana	15
Phoenix, Arizona	. 17
San Antonio, Texas	. 19
South Dakota	. 19
New Hampshire	. 22
Oklahoma City, Oklahoma	. 22
Tampa, Florida	. 25
PROGRAM LEVEL DESIGNS	. 27
Taxonomy of STR Treatments	. 28
The STR Client Pool	35
THE STR DATA SYSTEM	37
DATA ONALTTY CONTROL	37
DATA QUALITY CONTROL	. 41
Edit and Update Program and Error	
Report Program	41
Communication	41
60 DAY PROGRESS REPORT	. 42
FOLLOW-UPS	42
Follow-Up Schedule	43
Differences in Handling Procedures .	43
COMMUNICATION WITH STR SITES AND NHTSA	. 44
Telephone and Letter Communication	45
Management Information System	4.5
Reports	45
rollow-up progress Report	45
Modality Status Report	47
Data Collection Quality Report	. 47
CASE VOLUME	. 47 . 47
Case Volume by Time	, 47
Follow-Up Contact Data Loss Due to June 30, 1977, Data Collection	
	. 49
Cutoff	49
DEVELOPMENT AND MAINTENANCE OF THE STR	. 49
DATA BASE	. 51
Current Characteristics of the STR	, 31
~ · ~ ·	. 51
	52
STR System Software	, 52
Scoring Software for Life Change Instruments	64
INSCRUMENCS	. 04

Table of Contents (Continued)

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DEVEL	OPME!	VT OF	REH	ABIL	ITA:	TION	PΕ	RFO	RMA	ANC	E /	AND				
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BASE																65
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	MEASU	JRES	. • _ •	٠.	•	• • _		•			•	•	•	•	•	65
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		SIR	Assi	gnme	nt	٠, ٠	: ,:	:	• •		•	•	•	•	•	65
			fic											•	•	66
•	LIFE		Traf										-	•	•	66 66
	LIFE		Act									-			•	67
		CCU	and	1 V I C	0	1116	erv	iew	,	• •	•	•			•	98
ADDEN	DICES		anu	ras	que:	SCIO							:	•	•	101
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		Stud	y Li	fe A	ctiv	/iti	es	Inv	ent	tor	y :					
			ion										•	•		133
	APPE	NDIX	E -	Resp	ons	e Di	str	ibu	tio	ns	f	or				
			y i dua						s I	[nt	er	vie	W			
	4000) It			•		÷		•			•	•	•	161
	APPE	V 1	F - :	Summ	ary	OT	LAI	ın	τer	^ V]	ew	ra	Cτ	or	•	,
			ysis	on	Dati	a rr	om	rır	St	15	ΠŢ	21	K			191
	ADDEN	Clie		· ·	- ·	• •	· ·	D A C	•.	٠,		т•	•	•	•	191
	APPE	1 E 2 2	e Sc	CONT	ar i	5 U II	n T	ras ni+	iai	ıu ì⇒	nd nd	1				
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	APPEN												ic	'n	•	201
	A L	Stud	y Li	fe A	ctiv	viti	A C	Inv	ent	tor	v :	-		, · · ·		
			ion .									res				211
	APPEN	NDIX	Í - /	ASAP	Sho	ort	Ter	m R	eha	bi	11	tat	10	'n		
		Work	shop	Age	nda	- A	pri	1 2	1 - 2	23.	19	975				233
	APPEN	NDIX	J - 1	ASĂP	Sho	ort	Teri	m R	eha	bi	lii	tat	io			
		Work	shop	Age	nda	- F	ebr	uar,	y 1	. 6 –	20	, 1	97	6		241
REFE	RENCE	. S														249

LIST OF ILLUSTRATIONS

<u>Figure</u>		Page
1	STR Evaluation Design	. 6
2	Denver STR Design	. 7
3	Fairfax STR Design	. 9
4	Kansas City STR Design	. 12
. 5	Hennepin County STR Design	. 14
6	New Orleans STR Design	. 16
7	Phoenix STR Design	. 18
8	San Antonio STR Design	. 20
9	South Dakota STR Design	. 21
10	New Hampshire STR Design	. 23
11	Oklahoma City STR Design	. 24
12	Tampa STR Design	. 26
13	Taxonomy of STR Treatments	. 34
14	Data Flow Diagram	. 38
15	Relationship of Report Generation Date to Initial Interview Date	. 46
16	Case Volume by Time	. 48
17	STR Data System Milestone Chart	. 50
18	Initial, 6 Month, 12 Month, 18 Month Record Layout	. 53
19	Modality Treatment History Record	. 58
20	Traffic Offense Record (This Record is Created with Receipt of the Initial Data Set and Updated on Receipt of 6, 12, and 18 Month Follow-Up)	. 59

List of Illustrations (Continued)

Figure		Page
21	Non-Traffic Offense Record (This Record is Created with Receipt of the Initial Data Set and Updated on Receipt of 6, 12, and 18 Month Follow-Up)	60
22	Motor Vehicle Accident Record (This Record is Created with Receipt of the Initial Data Set and Updated on Receipt of 6, 12, and 18 Month Follow-Up)	61
23	Eigenvalues Plotted by Their Order Based on Principal Components (Unities in Diagonal) Analysis of 57 Item LAI	
	Scale	88

LIST OF TABLES

<u>Table</u>			<u>Page</u>
1	Status of STR Control or Comparison Groups	•	29
2	Summary of STR Treatment Modalities and Modality Combinations	•	31
3	Verimax Factors Produced in Analysis of 753 SD:ASAP Interviews with Pilot Form of the Life Activities Interview	•	69
4	Derived LAI Variables	•	72
5	Means and Standard Deviations of 57 Derived LAI Variables	•	86
6	Summary of LAI Factor I: Alcohol Use .	•	90
7	Summary of LAI Factor II: Income/ Employment	•	91
8	Summary of LAI Factor III: Social-ization/Social Activity	•	92
9	Summary of LAI Factor IV: Family/Marital Status	•	93
10	Summary of LAI Factor V: Physical Health	•	94
11	Intercorrelations Among the Five Promax Factors of the LAI		95

BACKGROUND

Despite the fact that a major objective of the NHTSA's Alcohol Safety Action projects was to provide an empirical test of the effectiveness of alcohol safety countermeasures, several important factors prevented project and program level efforts from performing definitive assessments of the effectiveness of rehabilitation modalities. First, the prerequisite conditions for sound experimental design were not present in most of the ASAP rehabilitation systems, in that adequate no-treatment control groups were not available to provide a basis for tests of treatment effectiveness (the Phoenix, Arizona; and Nassau County, New York, projects were notable exceptions). Secondly, the treatment modalities included as elements of individual projects' rehabilitation systems were ordinarily selected, from among the particular set of alcohol treatment alternatives which existed in the ASAP community, on the basis of the capacity and willingness of treatment agencies to accept ASAP referrals. Little effort was expended in the design or selection of treatment programs to match the requirements of the involuntary court referral system established by ASAP, or even in the detailed description of the characteristics of individual treatment programs which were utilized as referral resources. Finally, the criterion of success used to assess the effectiveness of alternative rehabilitation systems was generally restricted to a measure of rearrest recidivism. this measure is an important effectiveness criterion for a traffic safety program, it is subject to a number of measurement problems which restrict its usefulness as an index of treatment effectiveness (particularly as the sole index of effectiveness).

The presentation of a relatively new alcohol treatment program called Power Motivation Training at the 1972 ASAP Rehabilitation Seminars initiated a series of important changes in the implementation and evaluation of ASAP rehabilitation countermeasures. PMT, which was developed by McBer and Company alcohol treatment researchers, represented an alcohol treatment program based on a distinct set of theoretical principles, and consisting of a well defined and carefully described set of therapeutic procedures. PMT had been the subject of a considerable

amount of research^{1"2} and represented a short term treatment modality which did not depend upon highly trained professional therapists, and which could be readily implemented within ASAP rehabilitation systems.

NHTSA took advantage of the interest in Power Motivation Training as an ASAP treatment countermeasure, and began the development of a model rehabilitation evaluation program which utilized PMT as a principal treatment alternative. During 1973 efforts were made to initiate a large scale experimental design which would have involved five sites using PMT as a treatment alternative, and which would also employ random assignment procedures for the assignment of individuals to either PMT or notreatment control groups. McBer and Company, under a contract to NHTSA, provided training in the use of PMT to four therapists at each of five ASAP sites, but only one of these sites continued the use of PMT. The principal problems which prevented continuing activity in the other four sites appeared to be related to the fact that in some instances the wrong individuals had been trained as PMT instructors, and a general lack of coordination existed between the ASAPs and treatment agency personnel.

During 1974, NHTSA expended considerable effort in the development of a revised experimental design for a large scale "PMT Study" which involved eight ASAP sites including:

Denver, Colorado
Phoenix, Arizona
San Antonio, Texas
South Dakota
New Orleans, Louisiana
Hennepin County, Minnesota
Kansas City, Missouri
Fairfax County, Virginia

McBer and Company, under their contract with NHTSA, trained 60 PMT therapists at these eight sites, in preparation for

¹Boyatzis, R. E. <u>Drinking as a manifestation of power concerns</u>. Paper presented at the Ninth International Congress on Anthropological and Ethnological Sciences, Chicago, August, 1973.

²Cutter, H. S., McClelland, D. C., Boyatzis, R. E., and Blancy, D. D. The effectiveness of power motivation training for rehabilitating alcoholics. McBer and Company, Boston, 1975.

the initiation of the large scale PMT Study in early 1975. (A detailed account of the implementation of PMT may be found in the McBer and Company final report, Boyatzis, 1976.) During the same time period the University of South Dakota, under the present contract, was charged with the responsibility for the development of a system to collect, monitor and process data from the PMT sites, and to develop instruments with which to measure client life change which could be used as indices of treatment effectiveness. The experimental design which was developed for this study provided for the random assignment of midrange problem drinkers at each site to either PMT or a control group (no-treatment condition).

The PMT Study was formally begun during the first one-half During this time period McBer and Company provided PMT training for an additional nine PMT therapists at two ASAP sites and provided supplementary training and consultation to therapists who had been trained previously. The life change measurement instruments (Life Activities Inventory - LAI) developed under the present contract were introduced to interviewers and coordinators of the PMT sites at a special workshop conducted in Denver, Colorado, in April, 1975. This data collection package was to be used at initial assignment of clients to the study, and at follow-up contacts 6, 12, and 18 months after random assignment to treatment or control groups. this point in time the name of the study was changed from the PMT Study to the Short Term Rehabilitation (STR) Study. This change reflected the fact that several treatment alternatives in addition to PMT were included in the experimental designs of several of the original PMT sites, and also reflected the participation in the program level study of the New Hampshire; Oklahoma City; and Tampa, Florida ASAPs. Although these sites do not utilize PMT as a rehabilitation modality, each site does employ a random assignment procedure which provides for the establishment of no-treatment control groups. The total of 11 STR sites had assigned approximately 3,900 clients (most of whom are mid-range problem drinkers) to specific treatment or no-treatment groups by March 31, 1976. Each of these clients was interviewed at the point of assignment, using the LAI instruments, and each is expected to receive 6, 12, and 18 month follow-up interviews.

³Boyatzis, R. E. <u>Implementation of power motivation</u> training as a rehabilitation countermeasure for <u>DWIs</u>.

McBer and Company, Boston, Final Report for Contract DOT-HS-350-3-707, Feb., 1976, Report No. DOT-HS-801-834.

The present volume describes the current status of the Sik effectiveness evaluation effort including discussion of program level experimental designs, development and implementation of the STR data system, and preliminary development of effectiveness criteria.

DESIGN OF THE STR STUDY

The Short Term Rehabilitation Study was developed by NHTSA to provide an empirical demonstration of the effectiveness of short duration, court supervised rehabilitation programs for DUI offenders. Two major criteria were imposed on the ASAP sites selected to participate in this large scale field experiment. First, it was necessary that adequate no treatment comparison groups were included in the experimental design for each site and that true random assignment procedures were employed to select clients for membership in treatment and no-treatment groups. Secondly, it was required that provision be made for the extensive, long-term follow-up of individuals assigned to treatment and no-treatment groups.

Figure 1 presents an idealized illustration of the STR Study design which served as the model for the development of site specific designs at each of the eleven final STR sites. It must be noted that this ideal model does not precisely characterize the actual design for any one STR site, nor the program level design resulting from the amalgamation of individual site designs. Practical constraints involved with the development of operationally feasible experimental arrangements at each of the sites have resulted in substantially more complicated evaluation designs at both project and program levels

INDIVIDUAL SITE DESIGNS

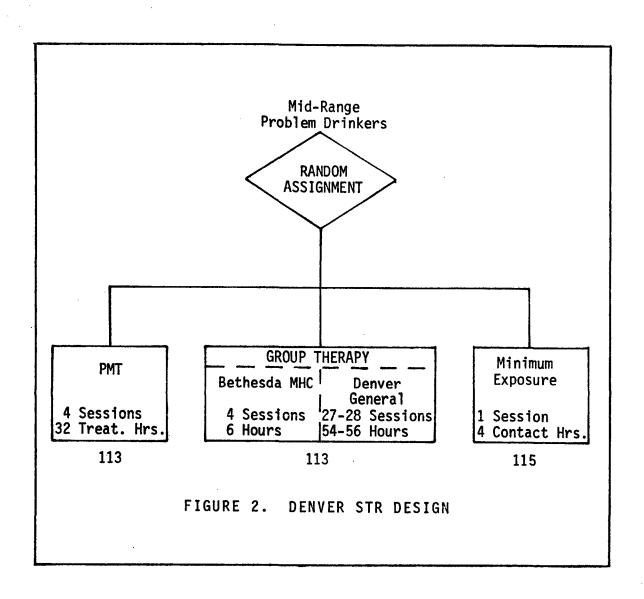
Prior to consideration of program level experimental designs and analyses, it would appear useful to summarize the individual experimental arrangements utilized by each of the participating ASAP sites. The designs presented in this section represent the site designs as of the completion of the initial intake of clients to the STR Study.

Denver, Colorado

Treatment Alternatives. Three STR modalities are included in the Denver STR design shown in Figure 2. The "minimum exposure" group represents the "no-treatment" alternative employed by this site. This modality consists of a single four-hour session attended by an average of 15 clients. The minimum exposure program is a primarily educational program which employs films, lecture and class discussion procedures.

FIGURE 1. STR EVALUATION DESIGN

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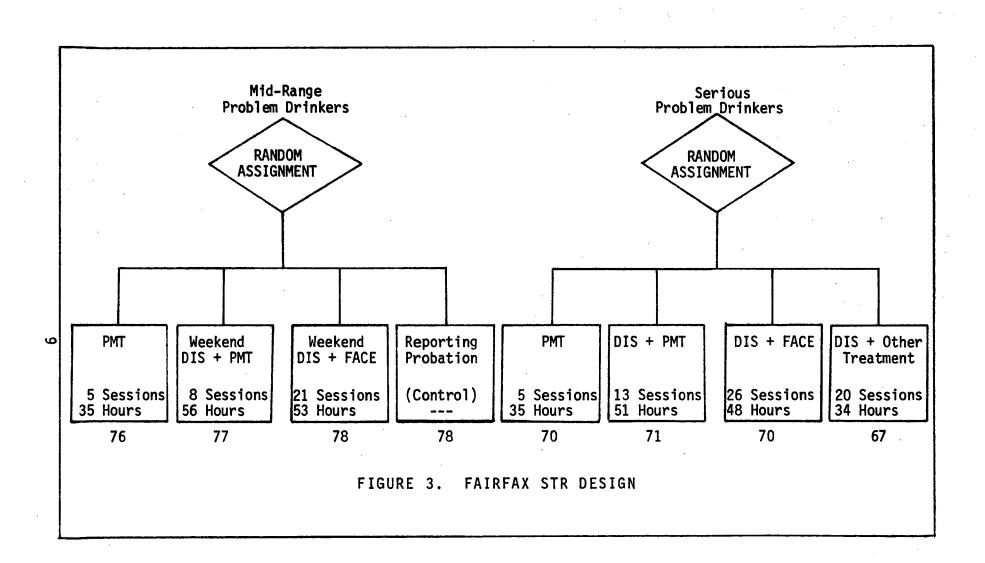
Power Motivation Training (PMT) is employed as an STR modality at the Denver site. PMT is conducted on the weekend model with four eight-hour sessions scheduled in two consecutive weekends. Responsibility for the conduct of the PMT sessions is rotated between the Denver General Hospital and the Bethesda Mental Health Center on a regular basis. PMT groups are made up of an average of 17 clients, and each group is led by three certified PMT instructors.

The third STR modality employed in the Denver design is "traditional treatment." This modality is administered by both Denver General Hospital and the Bethesda Mental Health Center on a rotating basis and in actuality consists of two distinctly different treatment programs. The Denver General Alcohol Education program consists of approximately 28 weekly sessions of approximately two hours duration. An average of six to seven clients per group are led by two counselors. The Bethesda Alcohol Education program, on the other hand, consists of only four weekly sessions of 90 minutes duration. This program serves an average of 12 to 35 clients with a series of lectures which concludes with an Alcoholics Anonymous orientation talk by an AA member.

Assignment Procedures. Mid-range male problem drinkers are considered eligible for STR assignment within the Denver design. Diagnosis is made on the basis of the Mortimer-Filkins Questionnaire, a Drinking History Questionnaire, and a personal interview. Clients categorized as mid-range problem drinkers on the basis of this pre-screening process are sequentially assigned to the three alternative treatment conditions in the order that they are referred from the probation department. Client participation in treatment is a condition of a non-reporting probation term of six months to one year.

Fairfax, Virginia

Treatment Alternatives. The Fairfax STR design is illustrated in Figure 3. STR assignment groups at this site involve a variety of treatment combinations which involve five separate treatment programs. The no-treatment control group within the Fairfax design involves assignment to reporting probation only. Clients assigned to this group report once a month for a brief interview with their probation officer during the six month term of the probation period.



PMT is used as a single modality for both mid-range and serious problem drinkers, and also in combination with the Weekend Driver Improvement School (mid-range problem drinkers) and with Driver Improvement School (serious problem drinkers). PMT is administered in four eight-hour sessions on two consecutive weekends, with a single follow-up session of approximately three hours duration. An average of 16 clients per session are led by two certified PMT instructors. Each client is assessed a fee of \$60 for participation in this treatment modality.

Weekend Driver Improvement School involves a marathon weekend session (9:00 a.m. - 9:00 p.m., Saturday; and 9:00 a.m. - 2:00 p.m., Sunday) plus one follow-up session. Total duration of this treatment amounts to 21 contact hours. An average of 18 clients per session are instructed by two counselors. A \$60 fee is assessed to clients participating in this modality.

Driver Improvement School consists of eight weekly sessions of two hours duration each. An average of 15 clients are served by a single instructor. Clients are charged a \$30 fee for this modality, which is primarily educational in orientation.

FACE is a combination educational/group therapy oriented modality which consists of ten sessions meeting twice weekly for two and one-half hours each session. During the five week program the client will be exposed to 25 contact hours. An average of 15 to 18 clients per program are led by a single alcoholism counselor. The fee for this modality is \$60.

"Other treatment" refers to a variety of alcohol clinics which receive ASAP/STR referrals. The primary referral resources within this category are the Fairfax Division of Alcoholism Services, and the Washington Hospital Center. The Fairfax Division of Alcoholism Services treatment program typically involves weekly one and one-half hour sessions for a minimum of 12 weeks. Treatment is apparently oriented toward group therapy provided by either alcohol counselors or social workers. The Washington Hospital Center treatment program involves approximately six weeks of didactic instructional group meetings, followed by about sixteen weeks of group therapy/counseling sessions. Clients are apparently scheduled for weekly one and one-half hour sessions during the course of their treatment program.

Assignment Procedures. Male Level II (mid-range) and Level III (serious problem drinkers) clients are considered

eligible for assignment within the Fairfax STR design. Diagnosis is accomplished by inspection of criminal and driving records, and through a group intake procedure in which a group of approximately ten clients are interviewed in a group setting by the intake worker. Three drinker classifications are utilized by this project: Level I, Level II, and Level III drinkers. The latter two categories are included within the STR design.

Following diagnosis, Level II and Level III drinkers are randomly assigned to treatment or no-treatment groups by the use of a set of randomly assorted cards, each of which contains one of the four treatment program designations for that particular drinker type. Assignment options for Level II drinkers are: PMT Only, Weekend Driver Improvement School plus PMT, Weekend Driver Improvement School plus FACE, and Probation Only (No-treatment control group). Assignment groups for Level III drinkers are: PMT Only, Driver Improvement School plus PMT, Driver Improvement School plus PMT, Driver Improvement School plus FACE, and Driver Improvement School plus "Other Treatment."

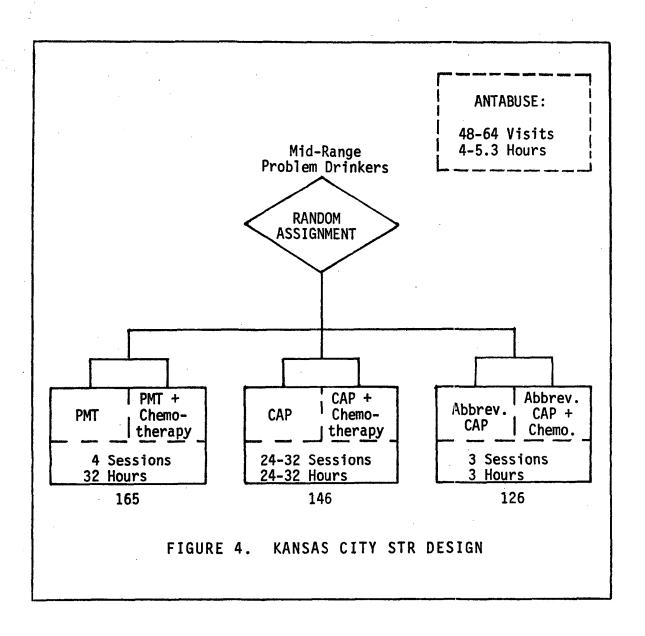
Kansas City, Missouri

Treatment Alternatives. The Kansas City STR design is shown in Figure 4. Three primary treatment alternatives are provided in this design, with each of these three treatment groups further subdivided on the basis of the presence or absence of concurrent referral by the courts to a chemotherapy (disulfiram) program.

Abbreviated CAP (Community Alcohol Programs) is the "minimum exposure" comparison group within the Kansas City design. This modality consists of three one-hour weekly sessions taught by a single instructor. An average of 15 clients are assigned to each of these sessions, and each client is assessed a \$30 fee.

PMT is conducted in two two-day sessions (8 hours per session) on consecutive weeks, with a follow-up session held 30 days later. An average of 15 clients are exposed to this treatment sequence which is conducted by two certified PMT instructors. Clients are assessed a \$60 fee.

CAP Group Counseling consists of from 24 to 32 weekly one-hour sessions spanning a 6 to 8 month period. A single alcoholism counselor directs each group of approximately 15 members. Clients assigned to this modality are charged a \$60 fee.



Chemotherapy is occasionally used in conjunction with each of the three primary treatment modalities. The duration of the chemotherapy program is from six to eight months, during which time clients report twice weekly for disulfiram administration by a registered nurse. Although the initial STR design for Kansas City anticipated approximately 60 clients per primary treatment group to be assigned to disulfiram treatment under court referral, in practice substantially fewer clients have been exposed to this modality.

Assignment Procedures. In Kansas City those individuals convicted of DUI who are identified as problem drinkers are referred by the court to Community Alcohol Programs (CAP) for counseling. Of those clients referred to CAP, all male clients whose ticket number is an odd number are screened by the STR coordinator to determine their eligibility for assignment to the STR Study. Screening criteria include:

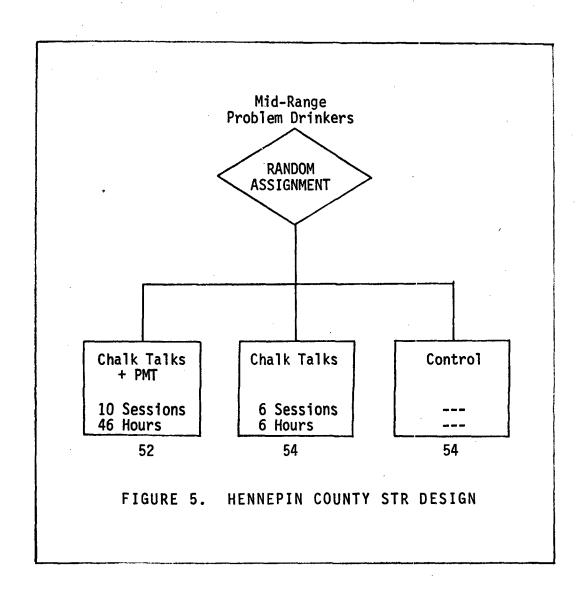
- a. Diagnosis as Level II (mid-range) problem drinker.
- b. Literacy,
- c. Age between 18 and 55,
- d. Physical and psychological capability to participate in treatment programs,
- e. Residence within ASAP jurisdiction, and
- f. Availability for weekend workshops and follow-up interviews.

Eligible clients are randomly assigned to modalities by means of a shuffled deck of cards containing assignments. Kansas City STR clients are all placed on probation for a one to two year period (usually two years).

Hennepin County, Minnesota

Treatment Alternatives. The STR design for Hennepin County is illustrated in Figure 5. Two separate treatment modalities are employed by this site, in addition to a no-treatment control condition. The no-treatment control group is exposed only to follow-up interviews during its 18 month term of probation.

Chalk Talks consist of a total of six one-hour lectures which are scheduled in the 60 day period following referral. Each lecture is the responsibility of a single instructor.



PMT involves four ten-hour sessions conducted by two certified PMT instructors. An average of six clients are assigned to each PMT sequence. PMT is combined with Chalk Talks as an STR assignment condition in the Hennepin County design.

Assignment Procedures. Mid-range problem drinkers are eligible for the STR Study within this project. Clients who meet this criterion are randomly assigned to the three STR groups: Probation Only, Chalk Talks Only, and Chalk Talks plus PMT. Random assignment is by means of sealed envelopes.

New Orleans, Louisiana

Treatment Alternatives. The New Orleans design is shown in Figure 6, and involves six referral groups. Probation only, no-treatment conditions are utilized for both mid-range and serious problem drinkers in this project. During the 18 month probationary term the control group subjects are expected only to be available for follow-up data collection.

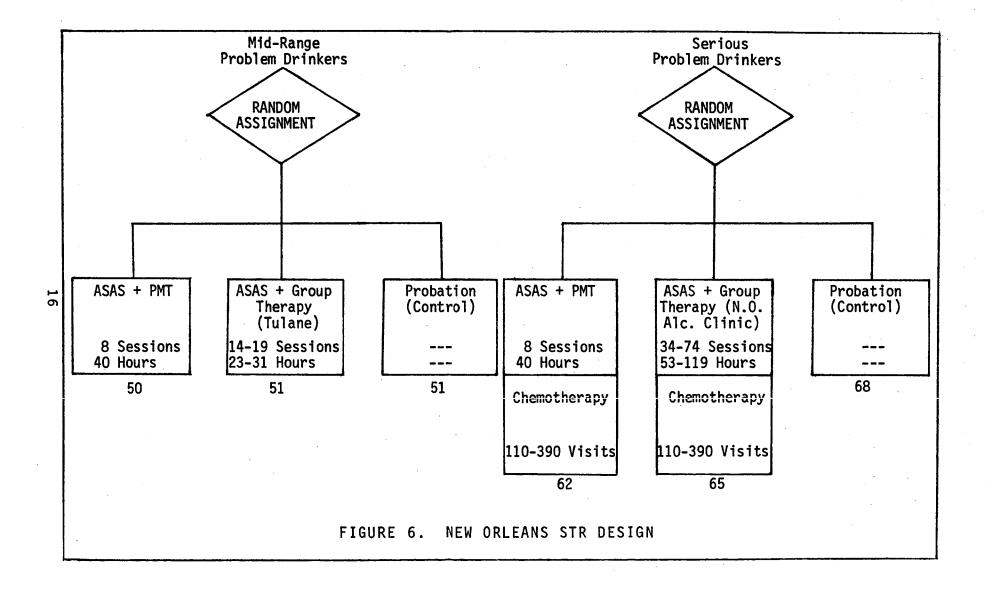
Alcohol Safety Action School is used in conjunction with each of the New Orleans treatment modalities. ASAS is a four session program which meets for two hour sessions two days a week for two weeks. The average session is attended by 40 clients who are led by two instructors.

PMT is used as a treatment modality for both mid-range and serious problem drinkers. PMT is conducted in four eight-hour sessions on two consecutive weekends. An average of eleven clients are led by two certified instructors.

The New Orleans Alcoholism Clinic Group Therapy program is utilized for serious problem drinkers. From 30 to 70 weekly 90-minute sessions are provided during a seven to nine month period subsequent to referral. An average of ten clients per group are led by a single therapist.

The Tulane Group Therapy program is designed for mid-range problem drinkers. Ten to fifteen weekly 90-minute sessions are required during the three month period subsequent to referral. Each group consists of an average of ten clients who are led by two therapists who are graduate students in the Tulane School of Social Work.

Chemotherapy (disulfiram) is utilized as an adjunct to both of the serious problem drinker treatment referral options. This treatment program requires daily visits to a clinic to receive a prescribed dose of disulfiram.



Total duration of treatment ranges from five to eighteen months.

Assignment Procedures. Drinker diagnoses are performed by the probation office. Those male clients diagnosed as mid-range (excessive drinkers) or serious problem drinkers and who are neither illiterate nor emotionally disturbed are eligible for STR assignment. Mid-range problem drinkers are randomly assigned by the use of a sealed envelope procedure to one of the following treatment options: probation only, ASAS + Tulane Group Therapy, or ASAS + PMT. Serious problem drinkers are randomly assigned by the same procedure to: probation only, ASAS + Chemotherapy + Group Therapy, or ASAS + Chemotherapy + PMT.

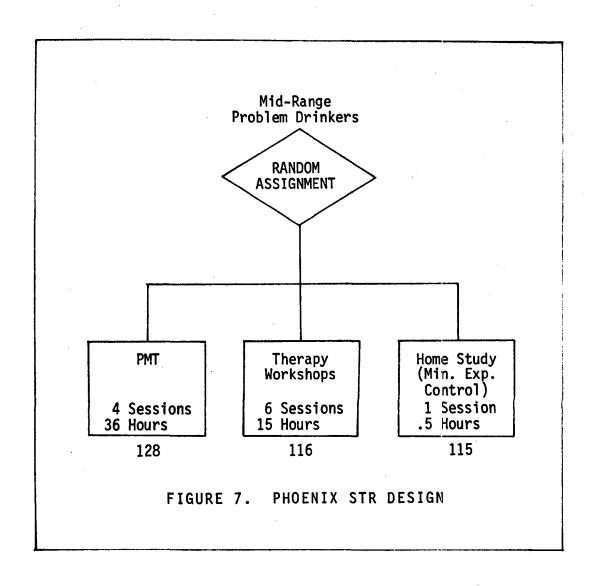
Phoenix, Arizona

Treatment Alternatives. The Phoenix design, which consists of three referral alternatives, is shown in Figure 7. Home Study is the Phoenix "minimum exposure" condition and consists of a single twenty-five minute session during which clients are required to complete a short self-administered questionnaire. Clients are issued a programmed learning guide and a packet of reading materials, and are asked to complete and return by mail, assignments from this packet. No other contact is required of this group.

Therapy Workshops consist of six bi-weekly sessions of two and one-half hours duration each. An average of ten clients per group are directed by a single counselor during this group therapy program.

PMT is conducted in four nine-hour sessions held on two consecutive weekends. An average of 15 clients attend each PMT program led by two certified instructors.

Assignment Procedures. Most DWI defendants in Phoenix are permitted to plead guilty to a lesser charge by entering into a PACT agreement which stipulates referral to ASAP coordinated rehabilitation. Diagnostic screening using records check information, a demographic questionnaire and screening instruments is conducted for each individual participating in the PACT program. On the basis of these results, mid-range problem drinkers (excluding women) are eligible for the STR Study. Clients were then randomly assigned to one of the three STR alternatives: Home Study, Therapy Workshops, or PMT. Random assignment was effected by computer generated tables.



San Antonio, Texas

Treatment Alternatives. The STR design for the San Antonio project is illustrated in Figure 8. The no-treatment control group within this design is exempt from any participation in a treatment program. Control group clients are placed on probation which requires monthly fifteen-minute interviews with the probation officer, in addition to the follow-up interviews in connection with the STR Study.

The Alcoholic Treatment Program (ATP) involves a variety of treatment alternatives from which a specific program is developed for each client. The total duration of treatment is approximately six months. Individual Therapy involving weekly one-hour sessions for eight weeks (eight week renegotiable contracts) are utilized for clients who are not appropriate for group counseling, or who cannot schedule participation in group therapy sessions. The primary alternative used within ATP is Group Counseling which is also administered in eight week modules with weekly sessions of one to two hours duration. Short Term Family Therapy modules are also used for some clients.

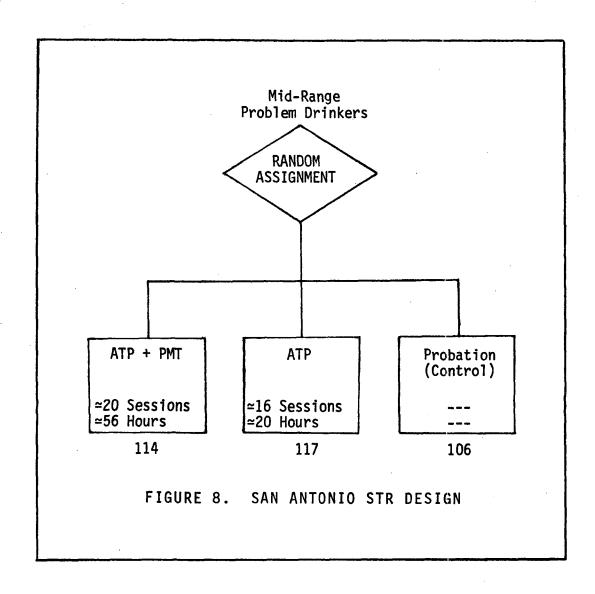
PMT utilizes the weekend model with the four nine-hour sessions scheduled on two consecutive weekends. An average of fifteen clients per PMT session are led by two certified PMT instructors. PMT is always combined with an ATP referral in this project.

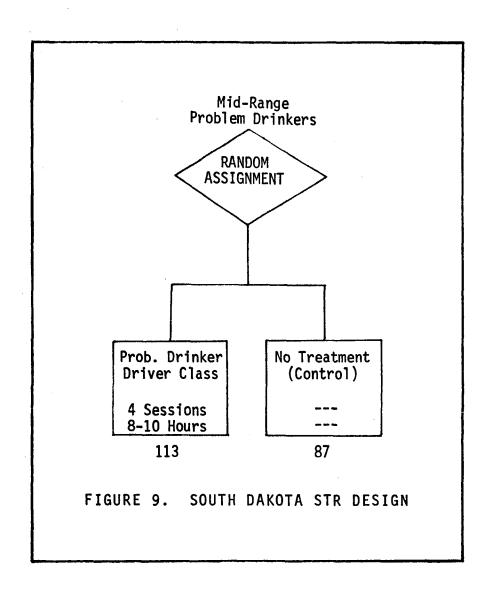
Assignment Procedures. Drinker diagnosis is accomplished by the San Antonio ASAP Problem-Drinker Evaluation Center. Mid-range male problem drinkers who are literate, non-alcoholic, and who are not severely emotionally disturbed are considered eligible for STR assignment. Eligible candidates are asked to volunteer for participation in the study, and volunteers are randomly assigned to one of the three alternatives: Probation Only, ATP, or ATP + PMT. Assignments were made by drawing cards.

South Dakota

Treatment Alternatives. A single treatment alternative is available in the South Dakota design which is illustrated in Figure 9. The control group for this project is exempt from treatment referral and is contacted only for the purpose of follow-up data collection.

Problem Drinker Driver Classes (PDDC) is a four session alcohol safety school which is taught by a single instructor twice weekly during a two week period.





Assignment Procedures. Drinker diagnosis is accomplished by ASAP courtworkers who utilize the Mortimer-Filkins Questionnaire and Interview, records check and personal interviews to classify individuals convicted of DWI as: social drinkers, problem drinkers, serious problem drinkers, or chronic alcoholics. Clients classified as problem drinkers and serious problem drinkers (mid-range problem drinker categories) are considered eligible for assignment to the STR Study. Eligible mid-range problem drinkers were then randomly assigned (using a computer generated assignment designation) to either PDDC or the no-treatment control group.

New Hampshire

<u>Treatment Alternatives</u>. The New Hampshire design is shown in Figure 10. The control group receives no rehabilitation referral and is expected only to be available for follow-up data collection.

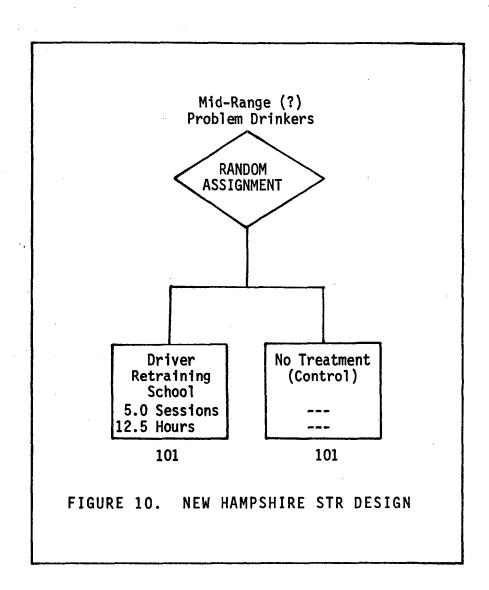
The Driver Retraining School is a five session alcohol safety school which meets weekly for two and one-half hour sessions. An average of 12.5 clients attend each session which is led by one instructor.

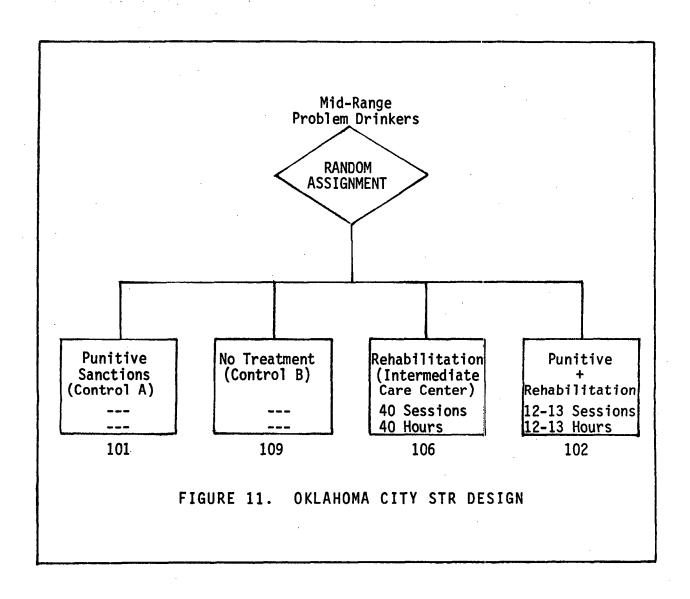
Assignment Procedures. Referrals from the courts to the ASAP Rehabilitation Office were randomly assigned to either the Driver Retraining School or the Control Group until the required sample size for both groups was met. Random assignment was made by means of a random number table.

Oklahoma City, Oklahoma

Treatment Alternatives. The Oklahoma City experimental design is illustrated in Figure 11. This site is unique in that its design provides for two no-treatment groups. The control group receives an assignment to unsupervised probation only, and unlike the other STR sites the individuals assigned to this condition do not receive traditional punitive sanctions on the DWI conviction. In short, clients are actually untreated by either rehabilitation or judicial components of the traffic safety system.

The second no-treatment group receives only the traditional punitive sanctions (jail, fine, etc.) normally imposed by the courts on individuals convicted of DWI and is assigned to unsupervised probation for the 18 month term of the STR follow-up data collection process.





Rehabilitation Only is an extensive alcohol treatment program which involves weekly sessions of an hour's duration for a forty week period. Most clients are assigned to group therapy treatment with an average group size of ten clients, led by either one or two therapists. Individual therapy is provided for those clients not suited for group therapy. Individuals assigned to this treatment condition are not subject to normal punitive sanctions (jail, fine, etc.).

The combination of rehabilitation and punitive sanctions involves a shorter term rehabilitation program which is combined with normal punitive sanctions imposed by the courts. The rehabilitation program consists of twelve to thirteen one-hour weekly sessions. Group therapy is the normal therapeutic approach with an average of ten clients led by one or two professional therapists. Individual therapy is provided for those clients not suited to the group therapy procedures.

Assignment Procedures. Clients are pre-screened for inclusion in the study according to the following criteria:

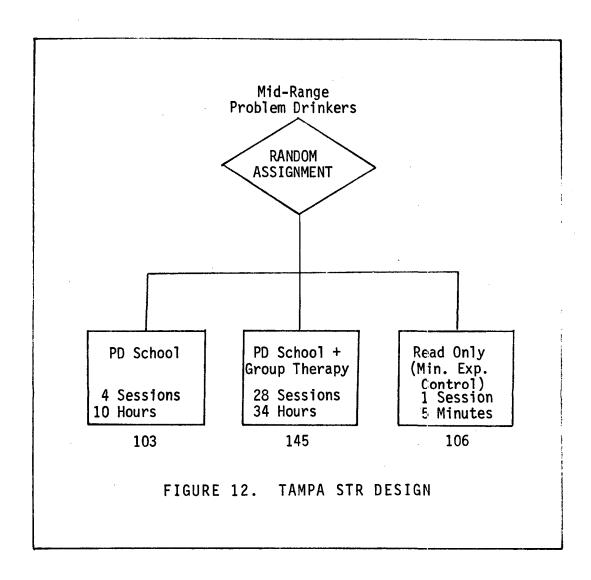
- a. BAC from .15 through .25,
- b. First offender,
- c. 21 Years of age or older,
- d. Resident of Oklahoma City or suburbs,
- e. Non-accident DWI arrest.

The mid-range problem drinkers meeting these criteria are randomly assigned (using dice) to one of the STR assignment conditions: Control, Punitive Only, Rehabilitation Only, and Punitive + Rehabilitation.

Tampa, Florida

Treatment Alternatives. The Tampa STR design is illustrated in Figure 12. The Read Only group is the minimum exposure comparison group for this site, and consists of a brief (five minute) session during which the client completes a brief background data questionnaire and is given a series of handouts and flyers. No further treatment is provided to these clients.

Problem Drinker School is utilized both as a single treatment modality and in combination with group therapy.



The school consists of four weekly sessions of two and one-half hours duration each. An average of twenty clients attend each session and are served by a single instructor.

Group Therapy (used in combination with Problem Drinker School) consists of approximately 24 weekly sessions, each of one hour duration. Approximately 8 to 11 clients compose each group and they are led by a single therapist.

Assignment Procedures. Individuals diagnosed as problem drinkers who have had no previous contact with ASAP rehabilitation programs are considered eligible for STR assignment (mid-range problem drinkers). Diagnosis is based on total Mortimer-Filkins score, prior DWI arrest record and BAC at arrest. Prior to December 17, 1975, assignments to the three STR treatment conditions were made by drawing folded slips of paper indicating group designations from a box. The box contained equal numbers of assignment slips to each group. Subsequent to December 17, 1975, this procedure was replaced by an assignment procedure which utilized computer generated, randomly ordered lists of the treatment/control groups.

PROGRAM LEVEL DESIGNS

The use of no-treatment (or minimum exposure) control groups and appropriate random assignment procedures within each of the eleven site designs satisfies the primary requirements of a "true experiment" (Campbell and Stanley, 1963). This designation does not, however, attach to the consolidation of the eleven separate experimental arrangements into a single program level design. applied to each individual site design can be expected to yield a valid test of the relative effectiveness of a particular set of experimental treatments (including in most cases a no-treatment condition). These results can be expected to generalize to a specific client population (defined by the selection criteria used by each site), and to a specific socio-political setting (defined by geographic, demographic and organizational characteristics of the particular ASAP site). At the program level it is necessary to account for a variety of factors which determine the comparability of the eleven separate

^{*}Campbell, D. T. and Stanley, J. C. <u>Experimental and Quasi-Experimental Designs for Research</u>, Rand McNally, Chicago, 1963.

experimental arrangements in order to configure quasiexperimental designs which provide adequate tests of the efficacy of STR programs across sites. The primary classes of factors whose influence must be either controlled or accounted for in the program level analyses of STR effectiveness include: characteristics of the treatment programs used by the STR sites, characteristics of the client population(s) sampled by each site's design, and characteristics of the sites themselves.

Taxonomy of STR Treatments

Although the original Power Motivation Training (PMT) Study anticipated that each site would employ a single uniform treatment modality and a single no-treatment control group, the current STR Study is substantially more complex. As indicated in the description of individual site designs, a large variety of short term rehabilitation modalities ranging from brief educational programs to long term therapeutic programs are used by the eleven sites.

Control/Comparison Groups. Control groups are nonequivalent between sites due to the political necessity of providing some form of "minimum" treatment for all ASAP clients at a few sites. Table 1 summarizes the status of STR "no-treatment" or "minimum exposure" comparison groups at the eleven sites. Four sites found it necessary to establish minimum exposure, rather than no-treatment, comparison groups. In the case of both the Tampa, Florida, and Phoenix, Arizona designs, these assignment conditions appear to represent simple formalities which attempt little in the way of theraputic intervention. Tampa's Read Only group is required only to report for a brief five minute session during which a variety of pamphlets are distributed to the clients. No further contact is made with these comparison group subjects, and it is certainly doubtful that the treatment of these individuals could be quantitatively or qualitatively distinguished from the attention afforded the no-treatment clients at other sites. The Home Study group within the Phoenix design is exposed to little more in the way of treatment. These clients appear for a single session (25 minutes duration) during which client data forms are completed and reading materials are distributed. Phoenix Home Study clients are, however, expected to complete "home-work" assignments based on the reading materials and to return these completed assignments to project personnel.

TABLE 1. STATUS OF STR CONTROL OR COMPARISON GROUPS

SITE	TYPE GROUP	TREAT		PROBATION
DENVER		10. 363310113		Donouting
DENVER	Minimum Exposure	i	4 hrs.	Reporting
FAIRFAX	No-Treatment (Lev. II)	-	-	Reporting
KANSAS CITY	Minimum Exposure	3	3 hrs.	Non-Reporting
HENNEPIN CO.	No-Treatment	-	-	Non-Reporting
NEW ORLEANS	No-Treatment (Lev. II)	-	-	Non-Reporting
NEW ORLEANS	No-Treatment (Lev. III)	-	-	Non-Reporting
PHOENIX	Minimum Exposure	1	25 min.	Non-Reporting
SAN ANTONIO	No-Treatment	_	-	Reporting
SOUTH DAKOTA	No-Treatment	-	.	None
NEW HAMPSHIRE	No-Treatment	-	•	None
OKLAHOMA CITY	No-Treatment	-	-	Non-Reporting
OKLAHOMA CITY	No-Treatment (Punitive)	· -	•	Non-Reporting
TAMPA	Minimum Exposure	1	5 min.	Non-Reporting

Minimum exposure within the designs of the Denver and Kansas City projects represents a more extensive intervention. In both cases the minimum exposure treatment alternative might be classed as an educational program, similar in many respects to the alcohol safety schools which have been utilized within the ASAPs. Denver's minimum exposure school consists of a single session of four hours duration which is guided by a formal curriculum. The Kansas City Abbreviated CAP minimum exposure alternative is a three session educational program (one hour each) which is oriented toward problem drinking/alcoholism.

Another source of between site variability concerns the manner in which control group (and treatment group) clients are supervised subsequent to assignment to the STR Study. In three sites STR clients are assigned to a formal, reporting probation (Denver, Fairfax, and San Antonio). In six sites a non-reporting probationary term is utilized (Kansas City, Hennepin County, New Orleans--2 comparison groups, Phoenix, Oklahoma City--two groups, and Tampa). In the South Dakota and New Hampshire sites no probation mechanism is used.

Prior to the consolidation of these thirteen control/comparison groups into a single no-treatment group for program level analyses, it will be necessary to perform a number of analyses to insure the appropriateness of pooling these groups. Between site profile comparisons will be conducted to insure the comparability of client samples between projects. In addition, change in effectiveness criteria between initial and follow-up interviews will be compared between actual no-treatment and minimum exposure groups.

Treatment Alternatives. A total of twenty-seven separate STR treatment programs are included within the designs of the eleven sites. These treatment programs are listed, by STR site, in Table 2. The questionnaires shown in Appendix A were completed by each of the eleven sites in order to provide an empirical basis for the program level grouping of these treatment programs. Inspection of the returned questionnaires resulted in a relatively limited set of objective treatment program characteristics which could be employed to determine the similarity of programs across sites. Five indices were selected which were available for each of the twenty-seven treatment programs, and which could be quantified for analysis, these included:

a. Total number of treatment sessions,

TABLE 2. SUMMARY OF STR TREATMENT MODALITIES AND MODALITY COMBINATIONS.

Denver, Colorado

- CO-1 Power Motivation Training Only
- CO-2 Group Therapy, Denver General
- CO-3 Group Therapy, Bethesda

Fairfax, Virginia

- VA-1 Power Motivation Training Only (Levels II & III)
- VA-2 Driver Improvement School + PMT (Level III)
- VA-3 FACE (Group Therapy) + Driver Improvement School (Level III)
- VA-4 Weekend Driver Improvement School + PMT (Level II)
- VA-5 FACE + Weekend Driver Improvement School (Level II)
- VA-6 Driver Improvement School + Other (Group Therapy) Level III)

Kansas City, Missouri

- MO-1 Power Motivation Training Only
- MO-2 Community Alcohol Programs (Group Therapy)
- MO-3 Abbreviated CAP (Minimum Exposure)

Hennepin Co., Minnesota

- MN-1 Chalk Talks
- MN-2 Chalk Talks + PMT

San Antonio, Texas

- TX-1 Alcohol Treatment Program (Group Therapy)
- TX-2 Alcohol Treatment Program + PMT

Phoenix, Arizona

- AR-1 Power Motivation Training Only
- AR-2 Therapy Workshop

TABLE 2. SUMMARY OF STR TREATMENT MODALITIES AND MODALITY COMBINATIONS CON'T.

New Orleans, Louisiana

- LA-1 Alcohol Safety School + PMT (Levels II & III)
- LA-2 Alcohol Safety School + Tulane Group Therapy (Level II)
- LA-3 Alcohol Safety School + Extended Group Therapy (Level III)

South Dakota

SD-1 Problem Drinker Driver Classes

New Hampshire

NH-1 Driver Retraining School

Oklahoma City, Oklahoma

- OK-1 Rehabilitation (Extended Group Therapy)
- OK-2 Punitive Sanctions + Rehabilitation (Group Therapy)

Tampa, Florida

- FL-1 Problem Drinker School
- FL-2 Problem Drinker School + Group Therapy

- b. Total contact hours of client exposure to rehabilitation/re-education activities,
- d. Number of instructors/therapists interacting with each client, and
- e. The number of treatment modalities included within the treatment program.

These five indices were utilized in a hierarchical clustering analysis 5"6 in order to identify similar groups within the twenty-seven treatment programs. The results of this analysis are illustrated in Figure 13. On the basis of this clustering analysis, it would appear that eight separate classes of treatment can be identified on the basis of similarities in extensiveness and type of treatment as reflected in the five measures indicated previously. These groups range from alcohol safety schools on the one extreme to extended group therapy programs on the other.

It should be noted that the present attempt to develop a taxonomy of STR treatment programs is substantially handicapped by the limited number of objective indices of program characteristics which were available from the modality description questionnaires. It will be necessary to the final development of program level STR designs to expand this set of measures in order to more comprehensively describe not only the extent (number of sessions, time in treatment, etc.) of treatment, but also the particular mechanisms employed within each treatment program. The present analysis does point out, however, that a relatively diverse set of treatment programs are employed across the STR sites, and suggests that the nature of the treatment program must be accounted for in analyses of treatment effectiveness.

⁵Ward, J. H., Jr. Hierarchical grouping to optimize an objective function, <u>American Statistical Association</u> <u>Journal</u>, 1963, <u>58</u>, 236-244.

Sciences, Holt, Rinehart and Winston, New York, 1967, 308-317.

		No. Sessions	Total Hours	Treat. Type	No. Inst.
CO-3, MO-3, MN-1, SD-1, NH-1, FL-1	School Only	4.6	8,8	1.1	1.1
CO-1, VA-1, MO-1, AR-1	PMT Only	4.3	33.8	3.0	2.2
VA-4, LA-1	PMT + Other	11.0	38.3	2.0	4.0
VA-2, VA-5, MN-2	PMT + Other	16.0	51.5	2.2	3.0
MO-2, TX-1, OK-2	Group Therapy	19.0	20.3	3.0	1.3
VA-3, VA-6, FL-2	Group Therapy + School	24.7	38.7	2.0	2.0
CO-2	Extended Group Therapy	34.0	48.0	2.5	2.0
LA-3	Extended Group Therapy	50.0	75.0	2.0	3.0
	STRENGTH OF CLUSTERS				
<u>0 ii</u>	Clusters w/1 Cluster E 12 1.308 11 1.604 10 1.744 9 1.778 8 1.959 7 3.155 6 4.968	rror			

FIGURE 13. TAXONOMY OF STR TREATMENTS

The STR Client Pool

In addition to the specification of the particular set of treatments whose effects are to be assessed, it is necessary that the development of program level experimental or quasi-experimental designs consider the population of individuals to which the results of the STR Study are to be generalized. Lags in the receipt of initial contact data from the STR sites have prohibited the conduct of detailed client profile analyses during the present contract period, although data to support these analyses is included in the STR data system. These analyses can be conducted when the initial contact data collection from the sites is completed.

Nominally the STR clients included in the designs of most sites are "mid-range" problem drinkers, as determined by local diagnostic criteria. Exceptions to this rule occur in the Fairfax and New Orleans designs where separate groups of more extreme problem drinkers (Level III drinkers in Fairfax, and Problem Drinkers in New Orleans) are included, in addition to mid-range problem drinkers. Diagnostic criteria are not consistent across sites, however, and it will be necessary to assess the extent to which similar client populations have been sampled by each site's design. The following classes of measures contained in the STR data base are available to support these analyses:

- a. Client demographic characteristics.
- b. Prior arrest/accident records.
- c. Drinking problem severity (standardized diagnostic test results, etc.).
- d. Prior alcohol treatment history.
- e. Personality characteristics.

It is anticipated that the analytic specification of the characteristics of the STR client pool at both project and program levels is likely to involve a more complex typology of clients than has been considered in previous ASAP evaluation efforts. Description of ASAP clients has typically involved attempts to classify clients on a single dimension which is intended to reflect seriousness or severity of the drinking problem. Although this approach has been of some utility in arriving at a manageable set of diagnostic categories (e.g., social vs. excessive vs. problem drinkers), it seems likely that other categories

or dimensions of client characteristics may be capable of influencing the effectiveness of particular alcohol treatment programs. It seems important, therefore, to:

- a. Develop as comprehensive a client typology as possible (within and across sites),
- b. Examine the similarity of client pools between sites, and
- c. Determine which client characteristics influence the outcomes of STR treatment programs.

THE STR DATA SYSTEM

Prerequisite to the accomplishment of any of the research objectives of the STR Study is the maintenance of an error free and readily usable data base. While the actual collection of STR data in face-to-face client interviews is the responsibility of the individual STR sites, the transformation of this data from paper data collection forms to machine readable form, the identification of data collection errors, and the storage of the data in a readily accessible data base has been a major part of activity under the present contract. Relatively minimal changes in the STR data system are anticipated during the the remainder of the STR Study period.

DATA FLOW

The data flow from the initial contact data collection forms are received by the central evaluator to the time error corrected 18 month follow-up contact data are available on the data base is shown in Figure 14. Discussion under the current heading will focus primarily upon initial contact data flow. Procedures employed for handling follow-up data will be discussed under a subsequent heading.

As noted above, responsibility for completion of the data collection forms lies with the individual STR sites. Instruction of STR site personnel in the use of the data collection forms was a primary topic in two ASAP rehabilitation/STR workshops held in Denver, Colorado. (See Appendices I and J for the agenda of these workshops.)

Initial contact data collection form sets, consisting of the four LAI sections, are shipped to the central evaluator by each of the STR sites on a weekly basis. For weeks in which a particular STR site has no cases to be submitted, a "Weekly Data Status Report" is submitted. This form serves as a notice that no data are available from the particular site for a certain week rather than that a shipment of cases has been lost in transit. When cases are received, they are logged in according to the STR site identification number and are assigned a central evaluation number. Included in the central evaluation case ID number are: a site code, an administration code (initial, 6, 12, or 18 month follow-up), and a unique sequence number. Subsequent to the log-in operation,

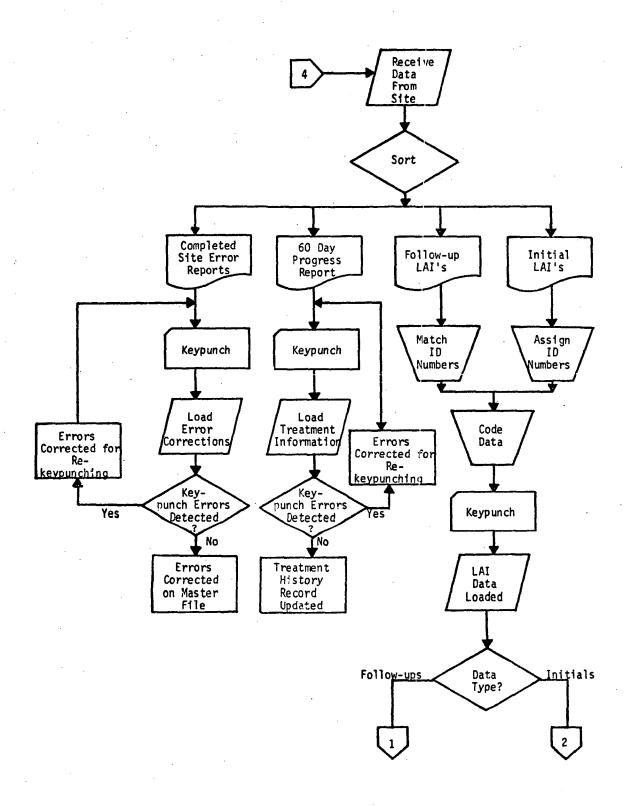
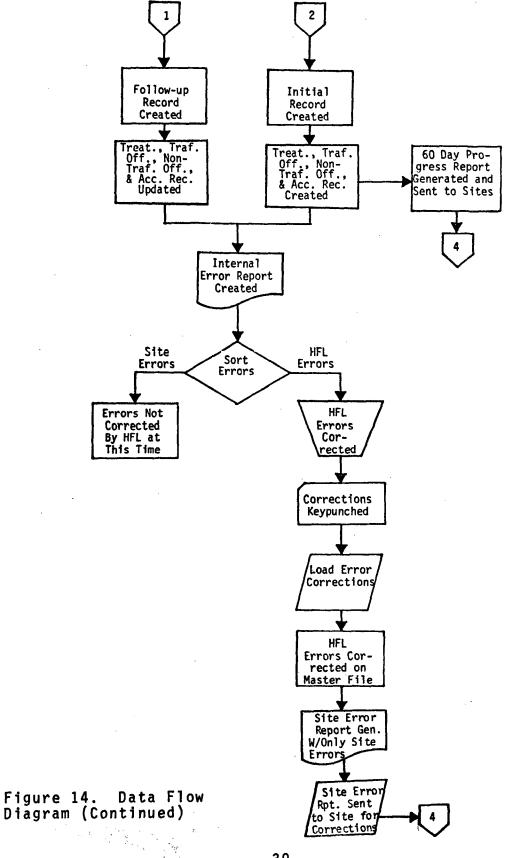


FIGURE 14. DATA FLOW DIAGRAM



a single card is keypunched for each case. The card contains the STR site identification number, the central evaluation identification number, a code indicative of the individual conducting the LAI interview, and the date the case was received. These cards are subsequently used to generate a "Cross Reference List." This list is useful as a cross reference between STR site identification numbers and central evaluation identification numbers and also as an indication of what cases submitted by each STR site have been received.

Subsequent to the logging-in operation and the creation of a cross reference computer card, each case is coded preparatory to keypunching. Keypunching of each case requires a minimum of thirteen punched cards and a maximum of twenty-eight punched cards depending upon the number of occurrences of treatment, traffic offenses, non-traffic offenses, and accidents. Keypunched cases are loaded on the computer data base on a weekly basis. The case loading procedure is accomplished by means of the "Edit and Update program. The edit and update program performs a variety of functions. For each initial contact data set loaded, an initial contact record is created which contains the Mortimer-Filkins questionnaire score from LAI, Section I, all data from LAI, Section II (questionnaires), and all data from LAI, Section III (interview). At the same time, four updatable history records are created: treatment, traffic offenses, non-traffic offenses, and accidents. Concurrent with the creation of these four records. extensive edit checks are performed on the input data. These edits include range checks, cross checks for logical inconsistencies within the data and checks for missing data. It should be noted that many of the edit checks are specific to certain STR sites as a result of unique procedures associated with each STR site. Errors identified by the edit and update program are stored on a separate error file.

A list of errors identified by the edit and update program is generated on a bimonthly basis through the use of the "Error Report." The error report program provides a complete list of all errors identified by the error and update program subsequent to the last running of the error report program. Each of the errors listed by the error report program is inspected carefully to determine whether the error was, (1) caused by the central evaluator as the result of a keypunching or coding error, or (2) the result of an error on the data collection forms as submitted by the STR site. All errors attributable to the central evaluator are corrected by loading file maintenance cards employing the edit and update program. Subsequent to the removal of central evaluation errors, the error report program is again

employed to generate a "Site Error Report." The site error report, which contains only site generated errors, is forwarded to each STR site on a bimonthly basis. Each STR site is responsible for correcting errors listed on the site error report and returning the completed report. When the completed site error report is received by the central evaluator, corrections to the data base are made in much the same manner as they are for central evaluation generated errors. That is, file maintenance cards are loaded by means of the edit and update programs.

DATA QUALITY CONTROL

The usefulness and interpretability of STR analyses are dependent upon the quality of the information included in the STR data base. The minimization of errors and missing information on the data base is of paramount importance. To this end, a variety of data quality control procedures have been instituted.

Edit and Update Program and Error Report Program

As noted above, the edit and update program performs extensive editing functions on each case as that case is Specifically, seven-hundred variables per case are checked for responses within an acceptable range. One-hundred variables are checked for logical consistency within a particular client's data. Two-hundred and fifty variables are checked for illegible responses (special keypunching symbol). Four-hundred variables for which single responses are appropriate are checked for multiple responses. One-hundred fifty variables which may be acceptable when missing are checked to confirm that a missing value is acceptable in a particular instance, e.g., if the response to a work related question is missing for a particular case, a check is made to confirm that the data for that case also indicates the client is unemployed. As was noted in the previous section, the error report program is employed to generate both internal and site error reports. These reports will allow identification and subsequent correction of errors detected by the edit and update program.

Communication

A variety of communication links have been established between the central evaluator and each STR site.

A procedure has been established during the current contract period whereby each STR site receives a scheduled call on a monthly basis in which data collection problems identified by either the central evaluator or the STR site are discussed. Additionally, non-scheduled telephone conversations are conducted between STR sites and the central evaluator when data collection problems requiring immediate attention are identified. When non-site specific data collection problems have been identified, letters describing the problem and specifying actions necessary for solutions have been mailed to all STR sites. Finally, during the current contract period, a management information system report concerning data collection quality has been created and is forwarded to each STR site on a monthly basis.

60 DAY PROGRESS REPORT

A "60 Day Progress Report" is generated for each client by the "General Report" program 60 days after the last day of the month in which he (she) was interviewed. The report lists the client ID number and the STR modalities to which the individual was assigned. Blank spaces are provided in which information concerning the client's status in each of the STR modalities may be provided. The 60 day client progress reports are forwarded to the sites on a monthly basis in order that the modality status information may be provided. It is the responsibility of each STR site to provide the information and return the completed report to the central evaluator for updating of the treatment history records by means of the edit and update program. The 60-day client progress report was created in order to provide timely feedback concerning the status of STR clients in their treatment modalities. Without the 60 day client progress report, no information concerning client status in STR modalities would be available until the 6 month follow-up contact.

FOLLOW-UPS

Procedures for handling follow-up contact data sets are generally similar to those employed for handling initial contact data sets. Coding, keypunching, loading and error correction procedures are identical for initial contact and follow-up contact data. Certain procedures are unique to the treatment of follow-up contact data, however. The following two sections discuss modifications of, and additions to, initial contact data handling procedures appropriate to the follow-up data.

Follow-Up Schedule

In order to facilitate collection of follow-up contact data, a "Follow-Up Scheuule" is generated monthly by means of the general report program. Each month the follow-up schedule lists, by client identification number, those individuals requiring follow-up in the current month, the following month, and in two months' time, e.g., on January 1, an STR site would receive a follow-up schedule listing cases to be followed-up in January, in February, and in The one and two month advance notice of follow-ups is useful to the individual STR sites in planning for future follow-up workloads. The follow-up schedule contains the STR site client identification number, the central evaluation identification number, the initial interview date, an approximate follow-up date, an indication of which follow-up is to be conducted (6, 12, or 18 month) and the name of the last interviewer (i.e., the name of the initial interviewer when a 6 month follow-up is requested, the name of the 6 month follow-up interviewer when a 12 month follow-up is requested, etc.).

Because considerable errors have been experienced in the matching and collating of treatment history and traffic offense history information from initial contact data collection to 6 month follow-up data collection during the present contract period, a modification to the follow-up schedule portion of the general report program has been programmed and implemented during the current contract period. In addition to the information previously provided on the follow-up schedule report, a listing of treatment history and traffic offense history currently recorded on the data base is provided for each client on the month in which the follow-up contact is to be made. This modification should serve both to reduce the amount of record keeping necessary for each individual STR site and to reduce errors in the treatment history and traffic offense history area.

Differences in Handling Procedures

When the follow-up contact data sets are received by the central evaluator, a log-in process similar to that employed for initial contact data sets is initiated. New central evaluation identification numbers are not assigned, however. The follow-up contact central evaluation identification numbers are identical to central evaluation initial contact identification numbers with the exception of the single digit field indicating contact number. This process allows for the identification and elimination

of errors in the assignment of identification numbers. A follow-up contact identification number without a corresponding initial contact identification number or an initial contact identification number without a corresponding follow-up contact identification number is indicative of an error.

Although the methods employed to load follow-up contact data on the data base are essentially identical to those employed to load initial contact data, somewhat different operations are performed by the edit and update program for follow-up contact data. A follow-up contact record is created which contains all data from LAI, Section II (questionnaires) and all data from LAI, Section III (interview). The Mortimer-Filkins questionnaire score from LAI, Section I, is not part of the follow-up contact data set. Treatment history, traffic offenses, non-traffic offenses, and accident records are not, however, created when a follow-up contact data set is loaded; rather these four records, created when the initial contact data set was loaded, are updated with follow-up contact data information.

A variety of edit checks not appropriate to initial contact data are employed when the follow-up contact data is loaded. These additional edit checks relate primarily to consistency between initial contact and follow-up contact data sets.

Procedures are also available within the edit and update program to allow for processing of unavailable follow-up contacts. When a follow-up contact cannot be made, each STR site is responsible for completion of a form indicating that the follow-up contact will not be available and for providing records check information (LAI, Section IV) for the client. In the case of unavailable contacts, the edit and update program creates a "dummy" follow-up contact record and makes updates to the treatment history, traffic offenses, non-traffic offenses, and accident records based on information obtained from the records check section of the LAI.

COMMUNICATION WITH STR SITES AND NHTSA

Because of the geographically dispersed location of the individual STR sites, adequate lines of communication between the individual STR sites and the central evaluator are necessary for the timely and accurate collection of STR data. Frequent communication between the central evaluator and NHTSA is also required to provide data input necessary for the effective management of the STR project. A variety of communication procedures have been established

between the central evaluator, individual sites and NHTSA during the current contract period.

Telephone and Letter Communications

Both scheduled monthly calls and unscheduled calls are made to individual STR sites to discuss data collection problems. In addition to data collection problems, these phone calls are often employed to discuss changes in data collection procedures or to introduce new procedures to the sites. These calls additionally serve to maintain an excellent working relationship between each STR site and central evaluator developed during the current contract period as a result of two rehabilitation workshops and relatively frequent site/central evaluator contact during the start-up phases of the STR project. In addition to telephone communications with individual STR sites, postal communications in the form of memos, letters, instructions, etc., are forwarded to the STR sites on an as needed, but regular, basis.

Management Information System Reports

In addition to the telephone and letter communications described in the previous section, three management information system reports have been created during the current contract period to serve as regularly scheduled, formal lines of communication between the central evaluator and each STR site and between the central evaluator and NHTSA. The following three sections briefly describe each of the management information system reports. The relationship of the initial interview date to report generation date for cases included in these three management information system reports, and for several other reports referenced previously in this proposal, is shown in Figure 15.

Follow-Up Progress Report. The "Follow-Up Progress Report" is generated and forwarded to each of the STR sites and to NHTSA on a monthly basis. The report indicates the number of 6, 12, and 18 month follow-ups due for the month in which the report is generated and for the STR project period to date. Also provided is the number of 6, 12, and 18 month follow-ups completed. The follow-ups due and completed are provided for each STR modality and for each interviewer.

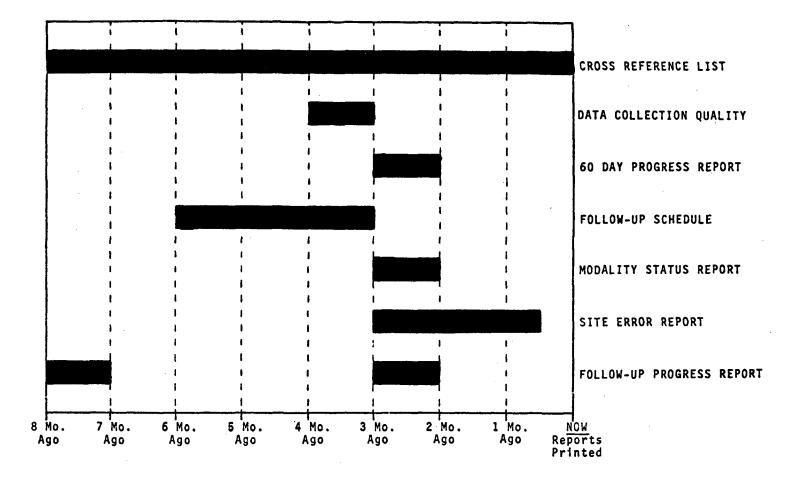


FIGURE 15. RELATIONSHIP OF REPORT GENERATION DATE TO INITIAL INTERVIEW DATE

Modality Status Report. The "Modality Status Report" is generated and forwarded to each STR site and to NHTSA on a monthly basis. Information is provided for the month in which the report is generated and for the STR project period to date. For each STR treatment modality, the number of individuals assigned, the number of individuals completing, the number of no-shows, the number of dropouts, the numbers of persons still enrolled, and the number of persons on which status information is missing is provided.

Data Collection Quality Report. The final management information system report implemented during the current contract period is the "Data Collection Quality Report." The report is generated and forwarded to each STR site and to NHTSA on a monthly basis. The report provides information concerning the number and types of data collection errors made during the month for which the report is generated and for the STR project period to date. The report is generated for each interviewer at each site and across all interviewers for each site. The errors are presented in four categories: those resulting from missing data, those resulting from refused responses, those resulting from conflicting or illogical data, and those resulting from illegible data. Errors are also presented according to the data collection document on which they occurred; that is, LAI, Section II, III, or IV. A variety of information is presented within each document and error type. Total errors for each document, average errors per document, number of error corrections requested, number of error corrections received, and percentage of errors corrected are presented. This report allows for monitoring of the performance of individual interviewers and for the identification of problematic areas for individual interviewers.

CASE VOLUME

The weekly and total case volumes are of obvious importance to the maintenance and management of the STR data collection system. The following two sections discuss estimated weekly data volumes, possible problems relating to data volume, and proposed solutions to these problems.

Case Volume by Time

Figure 16 presents actual and expected case volume by week for the entire 130 week duration of the STR project.

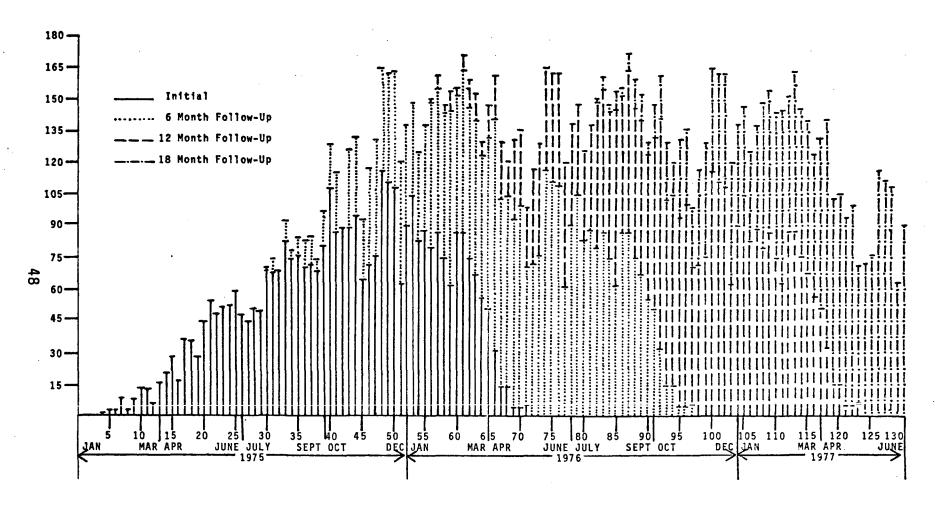


FIGURE 16. CASE VOLUME BY TIME

The data presented is based on actual interview dates supplied on data collection forms rather than date of receipt by the central evaluator. The number of initial interviews shown for weeks one through seventy-two represent the 3,744 cases received as of June 1. The numbers of 6, 12, and 18 month follow-ups shown at each of the time points in the figure are estimates based upon the number of initial contacts for the weeks shown.

Follow-Up Contact Data Loss Due to June 30, 1977, Data Collection Cutoff

It is apparent from Figure 16 that some loss of 18 month follow-up contact data will result from the June 30, 1977, data collection cutoff date. What is not readily apparent from the figure is the magnitude of the 18 month follow-up data loss. Current best estimates of 18 month follow-up loss based on the data reflected in the figure indicate that approximately 1,400 18 month follow-ups will be lost because of the data collection cutoff date. It may also be noted that the error correction procedure will not be applicable to some number of 18 month follow-up contact data sets which will be available. A variety of possible methods for reduction of 18 month contact data loss could be employed. To the extent possible, efforts should be Individual made to implement the following procedures. STR sites may be requested to conduct 18 month follow-up contacts which would normally occur in July, 1977, after the termination of data collection during June, 1977. Staff remaining at individual STR sites subsequent to the data collection cutoff might also be requested to provide records check information (LAI, Section IV) on those clients who cannot be contacted for 18 month follow-up prior to the termination of data collection.

Milestones

Shown in Figure 17 are the significant milestones associated with the STR data collection system from its initiation in February, 1975, through its expected termination date. Milestones shown represent collection, receipt, and entering on the data base of initial, 6, 12, and 18 month contact data. Also shown are the time periods in which various data system related reports discussed previously are being generated. The solid lines in the data related report area represent the actual time period during which the reports have been and will be generated. The broken lines on the right of the figure represent activity

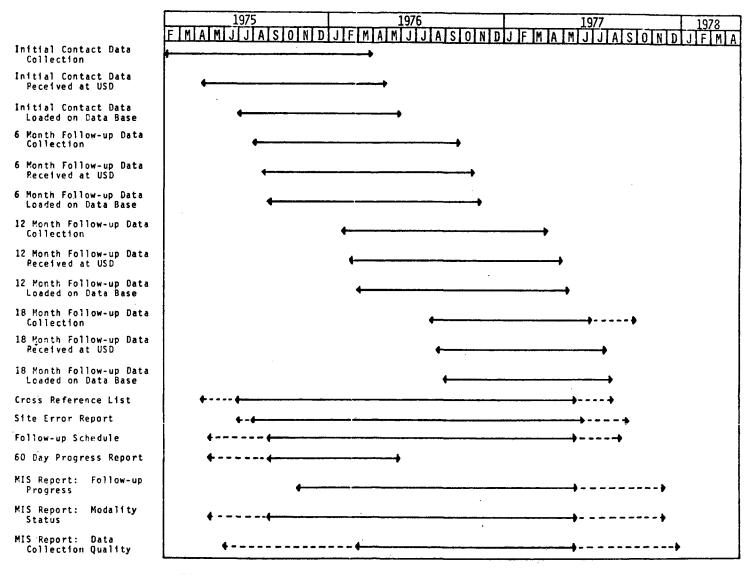


FIGURE 17. STR DATA SYSTEM MILESTONE CHART

that would take place if data collection were not terminated on June 30, 1977.

DEVELOPMENT AND MAINTENANCE OF THE STR DATA BASE

Development and implementation of the STR data system has been a primary focus of attention during the tenure of the present contract.

Current Characteristics of the STR Data System

Physical System Characteristics. The STR data system was developed and is currently implemented on an IBM 370-145 OS-VS2 system. System software is written in ANSI COBOL, and the minimum memory requirement (assuming a similar operating system) is 256k of real core. Additional hardware requirements for the data system include a minimum of three nine-track (1600 bpi) tape drives and a minimum of one disk drive.

STR File Descriptions. The STR data system is maintained on five nine-track magnetic tape files:

- 1. The STR MASTER FILE (sequential, GDG of six generations, tape fixed blocked, record length 1000 bytes, block size 6000 bytes) contains eight records (record layout described below) for each client included in the STR Study. At the completion of client intake to the study approximately 3900 cases will be included in the file.
- 2. The STR MASTER BACKUP FILE (sequential, GDG of two generations, fixed blocked, record length 1000 bytes, block size 6000 bytes) is a duplicate copy of the STR MASTER FILE which is kept at a remote site from the computer center for security purposes.
- 3. The STR CIRCULATING ERROR FILE (sequential, GDG of six generations, fixed blocked, record length 150 bytes, block size 3000 bytes) contains a separate record for each error detected in LAI data loaded onto the STR MASTER FILE. Each error record consists of a key area which contains record identification codes, error type code, and the dates of error detection and correction. The record also contains the card image of the punch card containing the identified error.

- 4. STR CIRCULATING ERROR BACKUP (sequential, GDG of two generations, fixed blocked, record length 150 bytes, block size 3000 bytes) contains a duplicate copy of the STR CIRCULATING ERROR FILE which is kept at a remote site for security purposes.
- 5. STR CARRY FILE (sequential, fixed block, record length 150 bytes, block size 3000 bytes) contains the errors detected during the most recent update of the STR MASTER FILE and is used for re-start purposes in case of hardware failure during execution of the EDIT/UPDATE program.

Record Layouts - STR MASTER FILE. The STR MASTER FILE consists of eight data records per client which contain all of the data collected upon initial entry of the client into the STR Study, at the completion of 60 day progress reports, and at 6, 12, and 18 month follow-up contacts. Data in this file is sequenced according to the central evaluator ID number assigned when cases are received from the sites. The first four records per case (record length 1000 bytes each) contain detailed information obtained from Sections I, II, III, and IV of the LAI instruments, for initial, 6, 12, and 18 month interviews respectively. The record layout for these four records is identical and is shown in Figure 18. Coding keys to accompany these layout forms have been developed and provided to STR site evaluators to facilitate site access to the STR data base. The fifth record contained in the STR MASTER FILE is a Treatment History which is created upon receipt of the initial interview data, and updated upon receipt of 60 day progress reports, and 6, 12, and 18 month follow-up data sets. The record layout for the Treatment History Record is shown in Figure 19. Records six-eight are traffic offense, nontraffic offense, and accident records which are created upon receipt of initial record check data (LAI, Section IV) and updated upon receipt of 6, 12, and 18 month follow-up data sets. Record layouts are shown in Figures 20-22.

STR System Software

A total of five major programs have been developed during the current contract period to support the STR data system.

Edit and Update Program. This program is a multipurpose COBOL internal sort program. Any additions or corrections to the STR data base are made by means of the edit and update program. The loading of initial contact data

HFL ID			MASTER KE	Y ONE	MASTER KE	Y TWO	DATE	RECORD	LOADED	
Site ID	Client	Record	Site	Record		HFL Client	Year	Month	Day	
(01-11)	ID No.	ID Code	ID	ID Code	ID	ID No.	•		_	
	*	1	2	•	2	4	2	2	2	ĺ
2	6	7	9	10	12	16	18	20	22	

*INITIAL=1 6 MONTH=2 12 MONTH=3 18 MONTH=4

													S	ee	Sec	tio	n II k	'ey	
	E LAST		DATE	Project .	Site	QUESTI	IANNO	RE		Project			CS	2 1				CSO 2	
Yea	r Mon	th	Day	Client Key	ID	DATE			INTERVIEWER	Client ID	7	2	3	4	5	6	7		
2	,		,	20	,	Month	Day	Year	,	(same as 29- 48) 20	١,	١,	١.	١,	١,	١,	١,	,	
			-	20	۷	-	4		3	40) 20	_	Ľ	Ľ	Ľ	Ľ	Ľ	<u> </u>		
2	4	26	28	48	50	52	54	56	59	79	80	81	82	83	84	85	86	87	

Section 2 Pages 1-3

cs	0 3		csq	15					CSQ	16		CSQ	csq												
1	2	3	4	5	6	7	8	9	10	11	12	13	14	1	2	3	4	5	6	1	2	3	17	18	
2	2	2	7	1	1	1	1	1	1	1	1	1	1	4	4	4	4	4	4	2	2	2	1	1	
89	91	93	94	95	96	97	98	99	100	101	102	103	104	108	112	116	120	124	128	130	132	134	135	136	

Section 2 Pages 3-4

CSQ	CSO	33																				
19	20	21	22	23	24	25	26	27	28	29	30	31	32	1	2	3	4	5	6	7	8	9
1	1	1	1	1	1	1	1	1	1	1	1	1	1	ו	1	1	1	1	ו	1	1	1
137	138	139	140	141	142	143	144	145	146	147	148	149	150	151	152	153	154	155	156	157	158	159

Section 2 Pages 4-5

FIGURE 18. INITIAL, 6 MONTH, 12 MONTH, 18 MONTH RECORD LAYOUT

_	CSQ	34		CSQ	CSQ	csq	CSQ	38		·	CSQ	39			CSQ	CSO	CSQ							
		2	3	35	36	37	1	2	3	4	1	2	3	4	40	41	42	43	44	45	46	47	48	
	1	1	-	1	1	1	2	2	2	2	2	2	2	2	1	١	1	1	1	1	1	1	1	
_	160	161	162	163	164	165	167	169	171	173	175	177	179	181	182	183	184	185	186	187	188	189	190	

Section 2 Pages 5-6

CSQ 49	CSQ	csq	CSQ	CSQ	CSQ	54						CSQCSQ	
49	50	51	52	53	1	2	3	4	5	6	7	55 82	
1	1	1	1	1	2	2	2	2	2	2	2	1 BYTE EACH 28	
191	192	193	194	195	197	199	201	203	205	207	209	237	

Section 2 Pages 6-8

	See Section	III Keu							
PASPAS		terviewer	Length of	Backg	round Informat	ion			
1 BYTE EACH	Date Mon Dayl Yr.	ID	Interview	Age	Birth Date		Sex	Race	Religion
151	2 2 2	3	(minutes) 3	2	Month Day 2 2	Year 2	1	1	1
388	390 392 394	397	400	402	404 406	408	409	410	411

Section 2 Pages 10-17

Section 3 Pages 1-2

	continued		LAI	LAI	LAI	LAI	4				LAI	LAILAI	
Residence	Education	Marital	1	2	3	1	2	3	4	5	5	6 12	
1	2	Status 1	2	2	2	1	1	1	1	1	4	2 BYTE EACH 14	
412	414	415	417	419	421					426	430	444	

Section 3 Pages 2-8

FIGURE 18. INITIAL, 6 MONTH, 12 MONTH, 18 MONTH RECORD LAYOUT (Continued)

LAI	LAI	LAI	17	LAILAI	LAILAI	LAI	LAI	LAI 38
13	14	1	2	18 24	25 35	36	37	Row Column
1	١,	,		2 BYTE EACH	1 BYTE EACH	_	,	1 2 3 4 5 6 7 8 1 2 3 4 5 6 7
	<u>'</u>		4	14			2	
445	446	447	451	465	476	478	480	488 495

Section 3 Pages 8-14

LAI 39	LAI	LAI	LAI	LAI	43					LAI								
1 2 3 4 5	40	41	42	Row			Column			44	45	46	47	48	49	50	51	52
2 2 2 2 2	2	1	1	3	3	3	1 2 3 4 5 2	6 2	7	2	2	2	2	1	2	2	· 2	2
505	507	508	509			518			532	534	536	538	540	541	543	545	547	549

Section 3 Pages 15-18

	LAI	65	LAI	LAI	LAI				LAI 6	9																
	53	54	55	56	57	58	59	60	61	62	1	2	66	67	68	Al	WI	A2	W2	A3	W3	Α4	W4	A5	W5	A6
_	1	1.	1	2	1	2	2	2	1	2	1	2	1	1	2	2	2,	2.	2	2	2	2	2	2	2	2
	550	551	552	554	555	557	559	561	562	564	565	567	568	569	571		575		579		583		587		591	

Section 3 Pages 18-21

LAI	69	Cont.							L.A	I 7	0		LAI	LAI	LAI	LAI	LAI	LAI	LA	7				LAI	LAI	Г
	A7	W7	A8	W8	A9	W9	ATO	WIO	1	2	3	4	71	72	73	74	75	7.6	1	2 ;	3 7	4 !	5	78	79	İ
2	2	·2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2 2	2 3	2	2	2	2	
59 5		599		603		607		611				619	621	623	625	627	629	631				(641	643	645	

Section 3 Pages 21-24

FIGURE 18. INITIAL, 6 MONTH, 12 MONTH, 18 MONTH RECORD LAYOUT (Continued)

															ly on ini ank for f					
												شريا		V						
LAI	LAI	Record	i Chec	<u>k</u>			ect Dr	inker	Cond	įt1	ons A	pply			mer Filke					
80	81	Date			Person	Cla	ss		1 2	3	4	5 6	7	Quest	Inter	٧. ا	otal			
2	2	Month 2	2 2	Year 2	. 3		2		1 1	1	11	1 1	1	3	3		3			
647	649			655	658			660				6	67	67	0 6	73	676			
Sectio							Secti	on 4	Pages	1-2							·			
Page 2	4																			
		T INFO	RMATIO															1080		
Charg	e Ja	il Seni	tence	Jail	Actual	Fine	Sente	nce	Fine	Act	ual	L1 cer		Suspens 1	on L1ce		spension	BAL	STR Ass ment Co	
1_		3			3		4		4	1				4		4		2	2	
6	77		680		683			687			691				695		699	701		703
								Sect	ion 4	Pag	es 3-	.4								
TREAT	OCCU	RRENCE	 -			· · · · · · · · · · · · · · · · · · ·	TREAT	OCCU	IRRENCE	: T	0c cur	·		-0ccur	Julian Q	uest.	Julian	Inte	rv.	
STR Trea	atment	Instr			y Date], .	. 2			,3			7	Date		Date		l	
Modality	y Code		3	Mont	h Day 2	Year 2	(mode,	inst 11	t, date	e)	(mo	de, in	ςτ, 55	date)	4			4		
	705		708	3		714			72	25			-	780		784			788	
			Sect	rion 4	Page 4									·	Julian Origi 1 January	n	•		·	
Julia	an Rec	ord Fi	ller		n Treat				rated			Fille			ities in		Scales	csg	Scales	
Chec	ck Date	e		1 2	3 4 !	6 6 7		CSQ	CSQ 38	CS	iQ 19			STR Ass	ignment		to be serted)		to be serted) 30	1
	4		12	4 4	4 4	1 4 4	1	4	4		4	6	-	2			30		30	1
		792	804		·		832	836	840	1	344	8	50		852		882	1	912	1
								E E			ک									
•						•		months	days		days									*

FIGURE 18. INITIAL, 6 MONTH, 12 MONTH, 18 MONTH RECORD LAYOUT (Continued)

LAI Scales (to be inserted) 30	General Sca (to be inse		WI Re lag	cidivist Lag Time (days) 4	Crash Flag	Lag	divist Time ays)	I	ndex Admin	istration or Judicial Action	
942		954	955 =yes	959	1960 1=yes		964		(Section	965 IV page 2 - follow-up forms)	
Index DWI Av	rest Date Year	Index [DWI Ju	lian Arrest	Date	Mis 6	sina Fo 12		w-Up Flag		,
2 2	2			4		3	1		1		
	971				975	97	6 97	7	978		
					:	(F	rields ı	Be C	l for inter	rnal data system management)	
Reason Follo	ow-Up Miss 18	Subsec	quent	Follow-ups	Availab	le _	Fille	r			
1 1.	1		-	1.			18			• '	
979 980	981					982	100	0			
(Fields u	sed for inte	rnal da	ta sys	stem managen	nent)		·				

FIGURE 18. INITIAL, 6 MONTH, 12 MONTH, 18 MONTH RECORD LAYOUT (Continued)

Key Are	a Same As	TREATMENT	HISTORY COUNTS				
Initia	1 Record	Inpatient	Outpatient Individuals	Outpatient Group	Outpatient Family	Outpatient STR Behavior	Detoxification
col 7=	'6'	2 .	2	2	2	2	2 .
1	48	50	52	54	56	58	60

Section 3 Page 4

TREATMENT Chemo Direct 2	HISTORY COU Chemo Indirect 2	INT CO	NT. Half Way House 2	Ed. Alcohol Safety School 2	Count Treatment Occurrences	TREATMENT Treatment Code 2	OCCURRENCE Number Sessions 2	Session Time Length 3	
62	64	66	68	70	72	74	76	79	
				Se	ction 3 Pages 4-5				

_		7	REATM	ENT OC	CURREN	CE 1 C	ONT.					T .
	Entry	Date		Term	Date		Still In Treatment	Voluntary/Court	Probation		Type	
	Mon.	Cay	Year	Mon.	Day	Year	Indicator	Referral	Involved	Indicator	Termination	
	2	2	2	2	2	2	. 1	1	1	(created)	1	
	81	83	85	87	89	91	92	93	94	95	96	

Section 3 Page 5 STR treatment only (See 6 month follow-up key)

TREATMENT O	CCURRENCE 1 CONT			OCCURRENCE 2	
Number Number		Julian Entry Date	Julian Term Date	Same Fields As Occurrence 1	
No_Show Drop_Out	and Drop Out	<u> </u>		200	
1 1	Sum of 97+98	4	4	36	
97 98	100	104	108		· · · · · · · · · · · · · · · · · · ·

STR Treatment Only (See Blue Key)

Section 3 Page 2

(6 month follow-up)

Occurrences 319	Filler	
	208	
792	1000	

FIGURE 19. MODALITY TREATMENT HISTORY RECOPD

(ey Are	a Same	TRAFFIC	HISTORY CO		or 4 years to inde		Count Traffic Occurrences
As Ini	tial Record	DWI	A1coho1	Reckless	Hazardous Moving	Other Traffic	: [
col 7 =	'7'	(2)	Less Off (2)	Driver (2)	Violations (2)	(2)	(2)
	48	50	52	54	56	58	60
		•	•	•	•	•	Actual # of offense records
			,	S	ection 4 Page 5		on file (col. 61 - 986)
RAFFIC	OCCUR RENCE						
ype	Arrest /		rrest Date			1cohol Related	BAC
ffense	Conviction	Source M	on. Day	Year Mon.	Day Year	yes = 2 no = 1	(Actual BAC: 98 = refused/not taken
(1)	(1)	(1) (2) (2)	(2) (2)	(2) (2)	1	<pre>2 99 = taken/not available</pre>
1	61 62	63	65 67	69 71	73 75	76 T	78
ee Sec	tion IV Key			_			
				S	ection 4 Page 6		
	OCCUR	1Cont					OCCURRENCE 2
	Suspend Date	License S		lian Arrest ate	Julian Convict Date	Julian License Suspend Date	Same Fields As Occurrence 1
	Day Year	Days	١	_			•
2	2 2	3		4	4	4	39
79 80	82 84		87	91	95	99	138
				-cn	eated date fields		
	Section 4 I	age o					
ccur re		lex DWI Occ	ur rence Fi	ller			
}	-24 Po	inter					
		2	1	2			
		<u>-</u>					
39	986	Ψ.	988	1000			
	(Which o	ffense (01-	-24) was ti	he			

FIGURE 20. TRAFFIC OFFENSE RECORD (THIS RECORD IS CREATED WITH RECEIPT OF THE INITIAL DATA SET AND UPDATED ON RECEIPT OF 6, 12, and 18 MONTH FOLLOW-UP)

Key	Area Same	NON TRAFFI	C HISTORY C	OUNTS			Count Non Traffic Occurre	nces	·
	Initial Record	Property Crime	Assault Battery	Sex Crime	Public Intoxication	Other Crimes		l	
co1	7= '8'	(2)	(2)	(2)	(2)	(2)	(2)		
1	48	50	52	54	56	58	·	60	
					Section 4 Page	7	Actual # of offense record on file (col. 61 - 870)	ds	

NON 1	RAFFIC OCCURRE	NCE]									
Туре	Arrest/	Info		t Date		Convi	ction D		Alcohol Related	BAC	(Actual BAC:
Offense (2)	Conviction (1)	Source (1)	Mon. (2)	Day (2)	Year (2)	Mon. (2)	Day (2)	Year (2)	yes=2 (1) no=1	(2)	98=refused/not taken 99=taken/not available)
61 62	63	64	- 66	68	70	72	74	76	77	79	

Section 4 Page 8

	ONT. rest	Julia: Date	n Convict	OCCURRENCE 2 Same Fields As Occurrence 1 (27)	OCCURRENCES 330	FILLER (130)	•
80 create	83 d dat	te fiel	87 ds	114	870	1000	

FIGURE 21. NON-TRAFFIC OFFENSE RECORD (THIS RECORD IS CREATED WITH RECEIPT OF THE INITIAL DATA SET AND UPDATED ON RECEIPT OF 6, 12, and 18 MONTH FOLLOW-UP)

Key Area Same As	Count Accident	ACCIDENT OCCURRENCE Accident Accident								Suspend Days
Initial Record	0ccur		on.	Day Year	Alcohol Related	DAC	Mon.	Day Y	ear	Suspend Days
col 7= '9'	(2)	(1)	2)	(2) (2)	(1)	(2)	(2)	(2)	(2)	(3)
1 48	50	51	53	55 57	58	60	62	64	66	69
. fi	Actual # of accidents on le (col. 51-590)		Section 4	Page 9					
OCCUR 1 CONT.		OCCURRENCE 2			RENCES	Γ.	Filler			
Julian Accident Date	Julian License Suspend Date	Same Fields Occurrence		3	ZU	1				
(4)	(4)	. (27)					(410)			
70 73	77	1	04		590	1	1000	 		
	•									,
										<u> </u>
								•		
				•						
				· ·						
r										
				· · · · · · · · · · · · · · · · · · ·						

FIGURE 22. MOTOR VEHICLE ACCIDENT RECORD (THIS RECORD IS CREATED WITH RECEIPT OF THE INITIAL DATA SET AND UPDATED ON RECEIPT OF 6, 12, and 18 MONTH FOLLOW-UP)

sets to the edit and update program result in the creation of a master record containing data from LAI, Sections II and III, and the creation of four updatable records for treatment history, traffic offenses, non-traffic offenses, and accidents, from data provided on LAI, Section IV. As these records are created, an extensive set of edit checks is employed. Range checks are conducted on seven hundred variables. Logic checks are conducted on one hundred variables. Legibility checks are conducted on two hundred-fifty variables. Multiple response checks are conducted on four hundred variables, and allowable missing data checks are conducted on one hundred-fifty variables. Errors detected by any of these checks result in the creation of an error record on the circulating error file.

STR treatment information obtained from the 60 day progress report is also loaded on the STR master file by means of the edit and update program. In this instance, no new records are created, rather STR treatment modalities already in existence on the treatment history record are updated by the data provided on the 60 day progress report. Edit checks are employed to assure that 60 day progress report data properly collates with existing treatment history information. Again, identification of errors results in the creation of error records on the circulating error file.

Six, twelve, and eighteen month follow-up data are also added to the STR data base by means of the edit and update program. Loading of a follow-up contact data set results in the creation of a record specific to that follow-up, containing information from LAI, Sections II and III, and the update of treatment history, traffic offenses, non-traffic offenses, and accident records by means of information obtained from the LAI, Section IV. In addition to the edit checks employed for loading initial contact data sets, edit checks are employed concerning proper collation of existing information on treatment history, traffic offenses, non-traffic offenses and accident records with new information for these records provided by the follow-up.

All corrections to the STR data base are made through the use of the edit and update program. Any fields in the STR data base are updatable and/or correctable through the use of a single card. Updates and/or corrections are accomplished by specifying client identification number, a code for the field to be modified, and the data to be inserted in the specified field.

Error Report Program. The primary function of the COBOL error report program is to generate reports based on the circulating error file created by the edit and update program. Two basic report formats are available: internal error report and a site error report. to the loading of data through the edit and update program, the internal error report option of the error report program is employed to generate a list of all errors identified by the edit and update program. This report is generated in a format readily usable by data encoders and data control clerks for the identification and elimination of central evaluation data entry errors. When central evaluation data entry errors have been eliminated through the use of the edit and update program, the site error report option of the error report program is employed. This option prints a list of errors in a format readily usable by the STR sites in order that site generated data collection errors may be corrected. useful feature of the error report program is that, concurrent with printing of an error list, punched error correction cards are also created. These cards are prepunched with the client identification number and an identification number for the data base field in error. When the correct information for a particular field is available, it is entered on the prepunched error correction card. Corrections are then made through the edit and update program.

General Report Program. The general report program is written in COBOL and designed to handle generation of four reports requiring access to the STR data base.

The 60 day progress report subprogram prints a monthly report on those cases with interview dates 60-90 days previously. The report lists, for each client, all STR modalities assigned and provides spaces for the entry of treatment status information. This report is mailed to each STR site monthly, the sites complete the report and return it to the central evaluator for keypunching and entry on the STR data base. Data from the completed 60 day progress reports is entered on the data base by means of the edit and update program.

The follow-up schedule report subprogram generates lists of clients to be interviewed in the next three months. For the month in which a client is to be interviewed, a list of treatment history information and traffic offenses information currently on the STR data base in printed in a form readily usable by the STR sites.

The modality status report subprogram generates a monthly report by site indicating the number of people assigned

to each of the STR modalities employed by that site. In addition to indicating the number of individuals assigned to each of the STR modalities, the number of completions, the number of no-shows, the number of dropouts, the number of persons still enrolled, and the number of persons for which data information is missing is presented. The follow-up progress report subprogram generates a monthly list by site and by interviewer indicating how many 6, 12, and 18 month follow-ups are due and how many 6, 12, and 18 month follow-ups have been completed.

Data Collection Quality Report. The COBOL data collection quality report program generates a monthly report for each site and each interviewer reflecting data collection errors. This report is produced by accessing the circulating error file, rather than the STR data base. Information concerning types of errors and the documents on which the errors occurred is presented. Information is presented concerning average errors per case, and per data collection document. Information is also presented concerning the percentage of errors that have been corrected.

File Backup Program. The file backup program is written in COBOL and used on a biweekly basis to copy the STR data base and the circulating error file. These copies are then stored in an area remote to the data processing center for security backup.

Scoring Software for Life Change Instruments

Programs have been developed and implemented to perform scoring of the LAI, CSQ, and PAS instruments according to the scoring procedures which will be described in a later section of this report. Factor scores for each instrument have been inserted in the STR MASTER FILE (Initial, 6, 12, and 18 month follow-up records--see Figure 18).

DEVELOPMENT OF REHABILITATION PERFORMANCE AND EFFECTIVENESS MEASURES FROM THE STR DATA BASE

The research objectives of the Short Term Rehabilitation Study require the development of an extensive set of performance, effectiveness, cost, and client discriptor measures from the data elements contained in the STR data base as well as from other data sources. The present section addresses four general classes of measures which will be required to accomplish the evaluation objectives of the STR Study.

DIRECT TRAFFIC SAFETY EFFECTIVENESS MEASURES

As a traffic safety endeavor, it is necessary that the effects of STR modalities on those aspects of client behavior directly reflecting motor vehicle operation be assessed. STR data collection procedures provide for the measurement of client performance subsequent to STR assignment relative to: accident experience, traffic offenses, and non-traffic offenses. These data are obtained with Section IV of the Life Activities Inventory (Records Check) which is shown in Appendix B.

Crash Involvement Subsequent to STR Assignment

Tracking of client accident records subsequent to STR assignment is accomplished through record checks (police and DMV records) at 6, 12, and 18 month follow-up intervals. It is anticipated that record check report forms will be available from most STR clients and that relatively little attrition will affect the availability of 6, 12, and 18 month follow-up data. The STR accident record (Page 9, LAI, Section IV) contains the dates and circumstances (A/R, etc.) for each accident occurrence identified at the 6, 12, and 18 month follow-up points. Criterion measures derived from this record include both frequency and time interval (from STR assignment to accident occurrence) measures for each class of motor vehicle accident recorded (single vs. multi-vehicle and, fatal vs. injury vs. property damage). It is likely that total crash experience will be used (summing over type and severity of crash) due to the low expected frequency of crash involvement in the STR Study population.

Traffic Offense Recidivism

Records check data included in the STR data base provides for the accumulation of individual recidivist traffic offense reports for five categories of traffic offenses: DUI arrests, lesser alcohol offenses, reckless driving, other hazardous moving violations, and other traffic offenses. The primary STR success criterion derived from this record is, of course, A/R recidivism (DUI and lesser A/R offenses). Both rearrest (or reconviction) frequency and the time interval between assignment and rearrest are calculated as criterion measures. Rearrest BAC is also available as a secondary criterion measure. The frequency and time pattern of other traffic offenses recorded subsequent to STR assignment are also computed as measures of behavioral change, and utilized in analyses of STR effectiveness. Traffic offense data are reported on pages 5 and 6 of the LAI Records Check form (Appendix B).

Non-Traffic Offense Recidivism

Records check documents incorporated in the LAI data collection system provide for the recording of arrest/conviction incidents associated with the following categories of non-traffic offenses: property crimes, assault/battery, sex crimes, public intoxication, and other crimes. Although not falling within the category of driving related criterion measures, these measures are described in the present section because they are acquired by means of the same set of records check documents (LAI, Section IV, pages 7 and 8) that produce measures of accident and traffic offense recidivism. Frequency and time pattern measures for each of the previously described categories of non-traffic offenses will be utilized as indices of socio-legal behavioral change potentially modifiable by successful STR programs.

LIFE CHANGE EFFECTIVENESS CRITERIA

A battery of questionnaire and interview instruments were included in the STR data collection system (LAI, Sections II and III) in order to detect STR induced change in those aspects of client behavior which are not immediately reflected in an individual's performance within the traffic safety system. These instruments have been subjected to a number of analyses during the course of the current contract effort, but further analyses are required in order to develop a psychometrically suitable set of

life change indicators which may be used as criterion measures in analyses of STR effectiveness.

Three instruments are included in the STR Life Activities Inventory data collection package at initial assignment to the STR Study and at 6, 12, and 18 month follow-up interviews: the Life Activities Interview (LAI), the Current Status Questionnaire (CSQ), and the Personality Assessment Survey (PAS).

Life Activities Interview

The Life Activities Interview (LAI, Section III) is an interview protocol developed specifically for the STR Study under the present contract. In the construction of this instrument, the attempt was made to select questions dealing with overt and potentially observable behavioral activity in those areas of the individual's life situation which were most apt to show the influence of alcohol abuse, and consequently those aspects of the life situation which might reflect change produced by successful short term alcohol rehabilitation interventions.

The present version of the Life Activities Interview is based on analyses of data collected with the preliminary LAI protocol shown in Appendix C. The preliminary LAI questions were constructed to represent five arbitrarily selected domains which were thought to include those spheres of the client's life situation most likely to be affected by alcohol abuse. Items were constrained to those aspects of the client's life situation which were overt, potentially observable manifestations of client status. These five domains were defined as:

- Job performance/economic stability.
- b. Physical health.
- c. Self improvement/civic activity.
- d. Alcohol use/abuse.
- e. Living situation.

The preliminary LAI protocol of 24 basic items (Appendix C) was administered to a total of 1,552 DWI clients processed by the South Dakota Alcohol Safety Action Project between April, 1974, and January, 1975. The pilot LAI interview was administered during the conduct of presentence investigations by SD:ASAP courtworkers. All of these subjects

had been arrested and convicted of DWI prior to the presentence investigation and interview administration.

The 24 basic questions included in the pilot LAI were coded to yield a total of 155 raw variables which were numerically scored. Item 1, for example, ("How many days per week have you worked for the past four weeks?") yielded eight separate variables representing the number of days worked in each of the preceding four weeks, as well as the number of available working days in each of these weeks. The first step in the analysis of these pilot LAI data involved inspection of the frequency distributions of each of the 155 raw variables in order to select a subset which was psychometrically suitable for inclusion in subsequent analyses. This process yielded a total of 37 derived variables (in some cases combinations of several of the raw variables) which represented each of the five domains described previously.

Analyses based on this subset of interview responses involved a sequence of factor analytic procedures designed to reduce the dimensionality of the set of variables and identify scales which represented relatively independent aspects of the client's life situation. First a principal components analysis with unities in the diagonal of the correlation matrix was performed. This step was performed to select the number of factors to be included for subsequent analyses according to Kaiser's criterion that factors with roots less than unity be rejected. A total of ten factors were retained based on this procedure. Second, an iterative factor analysis was performed to estimate commonalties for the ten factor solution, and finally, an orthogonal (Verimax) rotation was performed. A summary of the ten Verimax factors is shown in Table 3 along with the means and standard deviations of the 37 variables entering into this analysis.

Inspection of Table 3 shows three of the factors to be defined by the seven variables which reflect alcohol consumption and problems attendant to that behavior. The first factor would appear to represent a drinking frequency dimension with "days with 1-6 drinks," and "days with no drinks" the primary variables. The second factor, on the other hand, reflects quantity of alcohol consumption

⁷Kaiser, H. F. The application of electronic computers to factor analysis. <u>Educational and Psychological</u> <u>Measurement</u>, 1960, <u>20</u>, 141-151.

TABLE 3. VERIMAX FACTORS PRODUCED IN ANALYSIS OF 753 SD:ASAP INTERVIEWS WITH PILOT FORM OF THE LIFE ACTIVITIES INTERVIEW

												7				
			VERIMAX FACTORS													
			ALCOHOL USE		EMPLOYMENT/ INCOME		T/ PHYSICAL HEALTH									
		1	2	3	4	5	6	7	8	9	10	Mean	SD			
2 3 4 23 24 25 26	# Times Drunk Last Month # Blackouts Last Month # Binges Last Month # Days With No Drinks # Days With I-6 Drinks # Days With Greater Than 7 Drinks Total Orinks Last Week	90 .97 *	.22 39 .93 .76	.58 .76 .56								1.67 .26 .19 5.14 1.33 .51 4.16	3.40 1.05 .77 1.79 1.67 .91 4.86			
1 9 10 11 12 13 14 15 16 17	Monthly Income **Full Time Employment No Income Source Earned Income Support by Pensions Support by Others Change in Income Change in Source Total Job Terminations Total Fights at Work			.26	.39 .73 .87 60 27	.30 .21 62 .39 .57 .78 56			.35			488.60 .77 .05 .76 .08 .06 1.02 .95 .12	358.25 .40 .23 .42 .27 .23 .48 .33 .43			
18 19 20 34 35	Total Days Ill Last Month Days With Health Problems Total Physical Problems Last Wk. Total Medical Visits # Drugs and Medicines						.82	.66 .83 .42				.80 2.18 3.28 .30 .14	3.63 2.94 5.58 .91 .42			
5 6 7 8 27 28 29 30 31 32 33 36 37	# Close Friends # Hobbies # Dependants # Feople Cared For Single Martial Status Married Divorced # People Living With Change in # People Living With Pecreation Cont. With Others # Fights at Home # Stretsful Incidents Total Recreational Activities			.24			.21		.51 .26 75 .84	.90	48 24 .94	4.01 2.12 2.22 1.11 .43 .33 .20 2.15 1.00 5.43 .17 .23 6.97	2.68 1.61 2.94 1.72 .50 .47 .40 1.95 .18 5.02 .87 .65 5.56			
21 22	Total Self Improvement Actions Total Volunteer Actions											.20	.45			
	% Variance Accounted for by Factor	5.5	4.6	4.6	5.6	5.5	4.6	3.9	5.4	5.2	3.5					

^{*}Verimax factor loadings < .20 are omitted from table.

(during the past week) with substantial loadings for "days with 7 or more drinks" and "total drinks last week." Factor 3 is defined by: "times drunk last month," "number of blackouts last month," and "number of binges last month." This factor seems to represent excessive drinking behavior as opposed to simple quantity and frequency of consumption.

Employment/income characteristics are represented by factors 4 and 5. Factor 4 appears to represent employment status, with the positive pole of this dimension indicative of an individual who is employed and who has worked regularly during the preceding month. Factor 5 appears to reflect employment stability with substantial loadings for "change in income," "change in income source," "total job terminations," and "no income source."

Factors 6 and 7 are determined by the five physical health variables included in the analysis. Factor 6 represents the recent frequency of physical complaints, while factor 7 is primarily determined by the "number of medical visits," and the "total days ill last month."

Factors 8, 9, and 10 are formed from nine of the thirteen variables included as representative of the "living situation" domain. Factors 8 and 10 represent two separate life styles with factor 8 defined by the variables "married," "number of dependants" and "number of people living with." Factor 10, on the other hand, is represented by a positive loading for "divorced," and modest negative loadings for "single marital status," and "married." Factor 9 is apparently a recreational activity dimension with positive loadings for: "number of recreational contacts with others," total recreational activities," and "number of hobbies."

The results of these analyses supported a major revision of the interview protocol. This revision attempted to broaden the instrument in order that each of the hypothesized domains of life activity were more comprehensively represented. To accomplish this purpose, additional interview questions were written to supplement items which had proven suitable in the pilot LAI. Attempts were also made to reformat the protocol in order to eliminate ambiguous questions and to simplify the interviewer's task. The product of this revision is the current form of the LAI which is shown in Appendix D. This interview protocol consists of 81 primary questions which are coded to yield a total of 134 separate scores.

A number of analyses have been performed with data from the revised interview in order to develop preliminary scoring criteria for the construction of life change scores from this instrument. These analyses are based upon interview data obtained on initial intake for the first 1,501 STR clients. Appendix E contains response frequency distributions obtained for each of the LAI items for this subset of STR study participants. of these frequency distributions led to the selection of 57 variables for use in subsequent analyses. These variables are described in Table 4. Coding of the 57 variables frequently involved consolidation of two or more of the individual questionnaire responses into a higher order composite variable. Attempts were made to scale each of the 57 items in similar metric in anticipation of creating separate factor scores. Means and standard deviations for each of these variables are shown in Table 5.

The first stage of analyses for this 57 variable, 1,501 client, data set was a principal components analysis with unities as the diagonal elements of the correlation matrix. The plot of eigenvalues by the orders of the roots is shown in Figure 23. According to the Kaiser criterion (rejecting roots with eigenvalues less than one) a total of 19 factors would be retained for further analysis. Application of Cattell's scree test, 8" however, would suggest fewer significant factors. The first scree line in Figure 23 includes roots 13 to 57, suggesting 12 factors. It would appear, however, that a second scree line can be fit to roots 6 to 12, leaving five common Because the purpose of this preliminary analysis was to identify a set of replicable factors which could be used in the development of usable LAI scale scores, the decision was made to accept five common factors for further analysis.

Assuming five factors, the correlation matrix, with squared multiple correlations inserted in the diagonal elements as initial communality estimates was then factored, iterating for communalities. This was followed

⁸Cattell, R. B. The scree test for the number of factors, Multivariate Behavioral Research, April, 1966, 1, 245-275.

Ocattell, R. B. Extracting the correct number of factors in factor analysis. Educational and Psychological Measurement, 1958, 18, 791-838.

TABLE 4. DERIVED LAI VARIABLES

<u>NO.</u>	NAME	DESCRIPTION	LAI ITEM(S)
01	PROBLEMATIC UNEMPLOYMENT	YES = 2 IF client works less than 20 hrs./week, is not a student or housewife, and does not list pensons or Social Security as a primary income source.	2-4
		NO = 1 IF above conditions do not apply.	
02	INCOME SOURCE CHANGE	= 1 IF income source has changed and the change is favorable.	13-14
5		= 2 IF income source has not changed OR if change has been neutral.	
		= 3 IF income source has changed and the change is unfavorable.	
03	INCOME CHANGE	= 1 IF income change shows increase.	15-17
		= 2 IF income did not change.	
		= 3 IF income change shows decrease.	
04	PROMOTIONS	YES = 1, NO = 2	25
05	BONUSES	YES = 1. 110 = 2	28

Table 4. Derived LAI Variables (continued)

<u>NO.</u>	. NAME	DESCRIPTION	LAI ITEM(S)
06	AMOUNT JOB	= 1 IF no job skill training received.	26-27
	TRAINING	= 2 IF 1-20 hours training.	
		= 3 IF 20-75 hours training.	
		= 4 IF more than 75 hours training.	
07	DISCHARGES FOR CAUSE	YES = 2 IF client fired for drunk driving, or poor work performance.	21, 22, 24
73		NO = 1 IF no discharges reported, or if discharges were result of strikes, layoffs, etc.	
08	QUIT JOB	YES = 2, NO = 1	18
09	WORK ARGUMENTS	= 1 IF no work arguments.	11-12
		= 2 IF arguments but no physical attack.	
		= 3 IF arguments and physical attack.	
10	CHEWED-OUT AT WORK	YES = 2, NO = 1	10

Table 4. Derived LAI Variables (continued)

NO.	NAME	DESCRIPTION	LAI ITEM(S)
1.1	UNACCEPTABLE WORK ABSENCE	YES = 2, NO = 1	0.9
12	FAMILY INCOME	= 1 IF income less than or equal to \$250.	5
		= 2 IF income between \$251-\$500.	
		= 3 If income between \$501-\$750.	
		= 4 IF income between \$751-\$1000.	
		= 5 IF income greater than \$1000.	
13	SLEEP/NIGHT	= 1 IF 4 or less hours sleep per night.	37
		= 2 IF 5 hours sleep per night.	
		= 3 IF 6 hours sleep per night.	
		= 4 IF 7 hours sleep per night.	
		= 5 If 8 or more hours sleep per night.	
14	MEDICAL ATTENTION	YES = 2, NO = 1	39

Table 4. Derived LAI Variables (continued)

N	10.	NAME	DESCRIPTION	LAI ITEM(S)
1	15	DAYS ILL	= 1 IF no reported days of illness last month.	40
			= 2 IF 1-3 days ill.	
			= 3 IF 4 or more days ill.	·
1	16	PSYCHIATRIC OR PSYCHOLOGICAL HELP	= Number of times client sought psychiatric or psychological help in last six months.	41
л ⁻	17	DRUGS	= Total number of medicines or drugs the client reports using currently. (5 = 5 or more)	36
1	18	NERVOUS/SLEEP DIFFICULTY	<pre>= Number of days with reported problems with nervousness or difficulty (re sleeping. (5 = 5 or more)</pre>	38 ows 3 and 4)
1	19	COLDS/FLU	= Number of days with reported problems with colds, flu, etc. (5 = 5 or more)	38 (row 8)

Table 4. Derived LAI Variables (continued)

	NO.	NAME	DESCRIPTION	LAI ITEM(S)
	20	DRINKS/WEEK	= 0 IF no drinks of beer, wine or liquor reported.	43
,			= 1 IF 1-5 drinks.	
			= 2 IF 6-10 drinks.	•
			= 3 IF 11-35 drinks.	
			= 4 IF 36 or more drinks.	
76	21	DRIVE WITH 3-4 DRINKS	<pre>= Number of times client reports having driven after having 3 or 4 drinks. (5 = 5 or more)</pre>	44
	22	MOST DRINKS ONE OCCASION	= 0 IF no drinking reported in last month.	45
			= 1 IF 1-3 drinks on one occasion.	
		• .	= 2 IF 4-6 drinks on one occasion.	
			= 3 IF 7-12 drinks on one occasion.	
			= 4 IF 13 or more drinks on one occasion.	

Table 4. Derived LAI Variables (continued)

	NO.	NAME	DESCRIPTION	LAI ITEM(S)
77	23	TIMES DRUNK LAST MONTH	= Number of times client reports having been drunk in preceeding 30 days.	49
	24	BLACKOUTS	= Number of times client reports having experienced blackouts or memory lapses in last 30 days.	51
	25	DWI LAST MONTH	= Number of times client reports having gotten away with driving while intoxicated last month. (5 = 5 or more)	52
	26	CHANGE IN MARITAL STATUS	2 IF marital status has not changed in last six months.1 IF marital status has changed in	54
			last six months.	
	27	COHABITORS	<pre>= Number of people the client reports living with. (6 = 6 or more)</pre>	5 6

Table 4. Derived LAI Variables (continued)

NO.	NAME	DESCRIPTION	LAI ITEM(S)
28	CHANGE IN COHABITORS	= 1 IF number of people living with has changed in the last six months.	57
		= 2 IF number of people living with has not changed in the last six months.	
29	CLOSE FRIENDS	= 1 IF client reports having no close friends.	62
)		= 2 IF 1-2 close friends.	
		= 3 IF 3-5 close friends.	
		= 4 IF 6-9 close friends.	
· · ·		= 5 IF 10 or more close friends.	
30	CHANGE IN NUMBER OF FRIENDS	= 1 IF number of close friends decreased in past six months.	63-65
		= 2 IF no change in number of friends is reported.	
		= 3 IF number of friends increased.	

Table 4. Derived LAI Variables (continued)

	NO.	NAME	DESCRIPTION	LAI ITEM(S)
	31	PHYSICAL FITNESS	= 0 IF no physical fitness activity reported.	66-67
			= 1 IF once a week or less.	
			= 2 IF several times a week.	· .
			= 3 IF physical fitness activity is performed every day.	
79	32	PARTICIPANT SPORTS	<pre>= Number of participant sports activities alone or with others. (5 = 5 or more)</pre>	69 (row 2)
·	33	WATCH TV	= Number of times spent watching TV alone or with others last week.	69 (row 10)
	34	LEFT HOME/RECREATION WITH FRIENDS	= 0 IF client did not report leaving home for recreation with friends not living with him in the last month.	70 (row 3)
			= 1 IF 1-2 times.	•
			= 2 IF 3-6 times.	
			= 3 IF 7-14 times.	
		•	= 4 IF 15 or more times.	·

Table 4. Derived LAI Variables (continued)

	NO.	NAME	DESCRIPTION	LAI ITEM(S)
	35	LEFT HOME TO GET AWAY	<pre>= Number of times client reported leaving home to get away from others in the last month. (5 = 5 or more)</pre>	71
80	36	GIFTS	<pre>= Number of times client reported buying gifts for others in the last month. (5 = 5 or more)</pre>	72
	37	TALKED WITH FRIEND ABOUT PROBLEM	= Number of times client reported having talked with a friend about problems the friend was having. (5 = 5 or more)	73
	38	HELPED WITH TASK	<pre>= Number of times in last month client reported having helped someone with a task. (5 = 5 or more)</pre>	74
	39	ENTERTAINED OTHERS	<pre>= Number of times last month client reported having entertained others in his home. (5 = 5 or more)</pre>	75

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Table 4. Derived LAI Variables (continued)

	NO.	NAME	DESCRIPTION	LAI ITEM(S)
	40	NEW ACQUAINTANCES	O IF no new acquaintances reported in last month.	76
			= 1 IF 1-2 new acquaintances.	
			= 2 IF 3-5 new acquaintances.	
			= 3 IF 6-10 new acquaintances.	·
			= 4 IF more than 10 new acquaintances.	
81	41	SERVICE ACTIVITIES	= 0 IF client does not report contribution of time to religious, civic, fraternal, political, or charitable activities in the last month.	77
			= 1 IF client reports contributing 1-4 hours.	
			= 2 IF client reports contributing 5-8 hours.	
			= 3 IF client reports contributing 9 or more hours.	
	42	SELF ACCOMPLISHMENT ACTIVITIES	= Number of items listed in question 78 the client checks as having occurred in the last six months. (5 = 5 or more)	78

Table 4. Derived LAI Variables (continued)

<u>NO.</u>	NAME	DESCRIPTION	LAI ITEM(S)
43	ĎEÁTH OF FRIEND	= Number of times in the last six months the client reported having experienced a personal loss because of the death of a friend or relative. (4 = 4 or more)	79
44	INJURY OF FRIEND	= Number of times in the last six months the client reports having been emotionally upset because of serious injury or illness of friend or relative. (4 = 4 or more)	80
45	DONATIONS	<pre>= Number of times in the last six months the client reports having made contributions to charitable organizations. (4 = 4 or more)</pre>	81
46	MARRIED	YES = 2, NO = 1	53
47	DAYS MISSED WORK	<pre>= Number of days or work missed last month. (5 = 5 or more)</pre>	6

Table 4. Derived LAI Variables (continued)

NO.	NAME	DESCRIPTION	LAI ITEM(S)
48	HOURS WORKED/WEEK	= 1 IF client reports working 0 hours per week.	3
		= 2 IF between 1-20 hours.	
		= 3 IF between 21-40 hours.	
		= 4 IF more than 40 hours.	
49	DAYS WITH HEALTH PROBLEMS	= Number of days last week on which one or more physical problems were reported.	38
50	WEEKDAYS WITH DRINKS	= Number of weekdays (Monday - Thursday) in last week on which the client reported having one or more drinks.	43
51	WEEKENDS WITH DRINKS	= Number of weekend days (Friday - Sunday) in last week on which the client reported having one or more drinks.	43
52	BEER DRINKER	= 2 IF client reported consuming more beer than other alcoholic beverages last week.	43

Table 4. Derived LAI Variables (continued)

NO.	NAME	DESCRIPTION	LAI ITEM(S)
		= 1 IF client did not drink last week, or if he reported drinking more wine or liquor than beer.	
53	DRINKING AWAY FROM HOME	= 1 If client reports having done most of his drinking at home in the last month.	48
		= 2 IF client reports having done most of his drinking away from home in the last month.	
54	DEPENDENTS	<pre>= Number of people dependent upon the client for more than one-half of their support. (5 = 5 or more)</pre>	59
55	ACTIVITY ALONE	= Number of separate activities listed in question 69 the client reports having participated in alone. (5 = 5 or more)	69
56	BARS & NIGHTCLUBS	= Number of times last week the client reported having gone to bars or night- clubs either alone or with others.	69 (row 4)

Table 4. Derived LAI Variables (continued)

NO.	NAME	DESCRIPTION	LAI ITEM(S)
57	LEFT HOME/ RECREATION FAMILY	<pre>WITH = Number of times last month the client reports having left home for recreation with family or friends living with him. (5 = 5 or more)</pre>	70 (row 1)

TABLE 5. MEANS AND STANDARD DEVIATIONS OF 57 DERIVED LAI VARIABLES. N = 1501

			• · · · · · · · · · · · · · · · · · · ·
#	Variable	Mean	Standard Deviation
1	Problematic unemployment.	1.1346	0.3641
	Income source change.	2.0147	0.5226
3	Income change.	2.1785	0.7053
Ă	Promotions.	1.7450	0.4360
5	Bonuses.	1.7459	0.4355
6	Amount job training.	1.5143	1.0234
2 3 4 5 6 7	Discharges for cause.	1.0366	0.1879
8	Quit job.	1.1059	0.3078
9	Work arguments.	1.0833	0.2788
10	Chewed work.	1.0700	0.2552
11	Unacceptable work absence.	1.0486	0.2352
12	Family income.	3.3391	1.4684
13	Sleep/night.	4.1292	1.0279
14	Medical attention.	1.2072	0.4087
15	Days 111.	1.2365	0.5604
16	Psychological help.	1.9713	0.1709
17	Drugs	0.8794	1.0854
18	Nervous/sleep difficulty.	0.7447	1.5840
19	Colds/flu.	0.4100	1.2592
20	Drinks/week.	1.6942	1.2766
21	Drive with 3-4 drinks.	1.1153	1.7191
22	Most drinks one occasion.	2.2105	1.1892
23	Times drunk last month.	0.7975	1.3629
24	Blackouts.	0.0859	0.3595
25	DWI last month.	0.3837	1.0434
26	Change marital status.	1.9430	0.2348
27	Cohabitors.	2.3917	1.7281
28	Change in cohabitors.	1.7782	0.4156
29	Close friends.	2.8991	1.1291
30	Change in close friends.	2.0633	0.3697
31	Physical fitness.	0.7682	1.0530
32	Participant sports.	1.0507	1.4621
33	Watch TV.	0.8281	1.8676
34	Left home/rec. with friends.	2.4617	1.3464
35	Left home/get away.	0.6922	1.4904
36	Gifts.	1.1805	1.4367
37	Talked with friend about		
	problem.	1.3944	1.7732
38	Helped with task.	2.0147	1.8439
39	Entertained others.	1.6582	1.8169
40	New acquaintances.	1.4137	1.4014
	•		

Table 5 continued on next page.

Table 5. Means and Standard Deviations of 57 Derived LAI Variables. N - 1501 (Continued)

# .	Variable	Mean	Standard Deviation
41 42 43 44 45 46 47 48 49 51 53 54 55 57	Service activities. Self accomplishment activit. Death of friend. Injury of friend. Donations. Married. Days missed work. Hours worked. Days with health problem. Weekdays with drinks. Weekends with drinks. Beer drinker. Drinking away from home. Dependants. Activity alone. Bars and nightclubs. Left home/rec. with family.	0.5676 2.4677 0.2891 0.3358 1.0566 1.4803 0.7981 2.9624 2.2145 1.1552 1.2565 1.6089 1.4920 1.6847 1.0013 0.7189 2.2693	1.1822 1.7138 0.6411 0.7460 1.2859 0.5024 1.4450 1.0462 2.7953 1.3621 1.0906 0.4882 0.5017 1.6797 1.0777 1.1763 2.1228

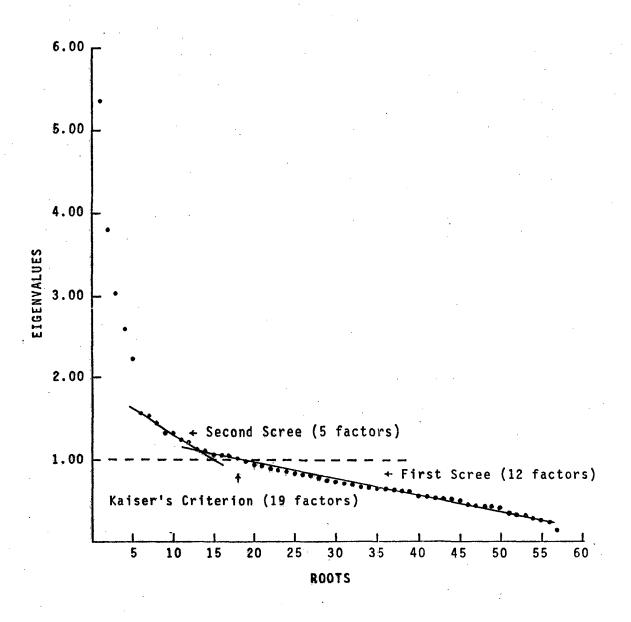


FIGURE 23. EIGENVALUES PLOTTED BY THEIR ORDER BASED ON PRINCIPAL COMPONENTS (UNITIES IN DIAGONAL) ANALYSIS OF 57 ITEM LAI SCALE. N = 1501 CLIENTS

in turn by Verimax (orthogonal) and then Promax (oblique) rotations in an effort to achieve a reasonable approximation to a simple structure solution. No attempts were made in these preliminary analyses to supplement these automatic rotational procedures with graphic rotational methods, although this procedure is recommended for further analyses of the LAI instrument. Tables 6 through 10 summarize the results of the final stage (Promax solution) of these analyses. The factor matrices produced by the iterative factor analysis, the Verimax rotation, and the full Promax rotation are shown in Appendix F.

The first Promax factor is defined by eight items, all of which represent alcohol consumption variables. Table 6 shows the Promax loadings of these variables on this factor, as well as the loadings of the indicator variables on the remaining four factors. Also shown in this table are the correlations and cosines between the <u>Alcohol Use</u> factor and the remaining four factors, and the intercorrelation submatrix for the eight marker items.

The second factor appears to represent Income/Employment characteristics of the STR clients. This factor is primarily influenced by the five variables indicated in Table 7.

The third Promax factor is a rather broad <u>Socialization/Social Activity</u> dimension with significant <u>loadings</u> for 10 of the 57 derived LAI items. The variables indicated in Table 8 reflect both the frequency of recreational or leisure time activities of the client, and also the extent to which the client interacts with others.

Family/Marital Status is represented by the fourth factor which shows substantial loadings for a total of five variables which are identified in Table 9. Individuals scoring high on this dimension are likely to be married, living with and supporting others, and would tend to spend time with this family group.

The final factor is defined by five variables which relate to problems with the client's physical health. This factor is summarized in Table 10.

Table 11 shows the intercorrelations among the five Promax factors obtained through these analyses. This matrix of factor correlations indicates that the final factor solution departs substantially from orthogonality. Factors I (Alcohol Use) and V (Physical Health) are formed such that high scores would tend to indicate a greater quantity/frequency/problems of alcohol use in the first case,

TABLE 6. SUMMARY OF LAI FACTOR I: ALCOHOL USE

Variable	Promax Loading					
20 Drinks/Week 21 Drive W. 3-4 Drinks 22 Most Drinks One Occ. 23 Times Drunk 25 DWI Last Month 50 Weekdays W/Drinks 51 Weekends W/Drinks 52 Beer Drinker	.89 .49 .63 .45 .37 .63 .75	04 04 08 05	.01 02 00 00 06 .07 .07	02 02 10 05 .11	12 .12 00 .19 .18 04 13	
Between Factors: Correlation Cosine			.14	32 .21	.32	

	A 3	cohol	Use Va	se Variable Intercorrelations					
	20	21	22	23	25	50	51	52	
20	1.00	.44	.65	.44	.31	.70	.82	. 57	
21	_	1.00	.46	.45	.59	.30	.37	.22	
22	-	-	1.00	.51	.33	.39	.49	.40	
23	-	-	-	1.00	.53	.28	.32	.22	
25	-	_	-	-	1.00	.22	.25	.14	
50	_	-	-	-	-	1.00	.58	.37	
51	-	_	, -	-	-	-	1.00	.49	
52	-	-	-	-	-	-	_	1.00	

TABLE 7. SUMMARY OF LAI FACTOR II: INCOME/EMPLOYMENT

	Variable	Promax		ing on Fact		ning
		Loading	I	III	ΙV	٧
01	Problem Unemployment	72	02	.06	.02	00
02	Income Source Change	. 47	.05	07	10	04
03	Income Change	.52	.05	.01	03	05
12	Family Income	.50	.03	.12	.20	08
48	Hours Worked/Week	.75	.06	04	03	02
C	ween Factors: orrelation osine			.19		

Income/Employment Variable Intercorrelations											
	01	02	03	12	48						
01	1.00	37	39	44	73						
02	-	1.00	.49	.19	.35						
03	· -	-	1.00	.37	.38						
12	-	-	-	1.00	.53						
48	-	-	-	-	1.00						

TABLE 8. SUMMARY OF LAI FACTOR III: SOCIALIZATION/SOCIAL ACTIVITY.

	Variable	Promax Loading		lings o Fac II	n Rema tors IV	ining V
31 32 34 36 37 38 39 40 42	Physical Fitness Participant Sports Left Home/Recreation Friends Gifts Talk with Friend/ Problems Helped with Task Entertained Others New Acquaintances Self Accomp. Act.	. 45 . 40 . 44 . 41 . 41 . 45 . 47 . 43	03 .03 .13 05 .01 .02 .05	10 03	01 34 .05 15 04 01	17 .02 .10 .07 07
29	Close Friends	.30	.02		09	10
(C	ween Factors: orrelation osine		.14	.19	06 .04	.17 15

ocia	lizat	ion/S	ocial	Activ	Activity Variable Intercorrelation					ation
-	29	31	32	34	36	37	38	39	40	42
29	1.00	.09	.08	. 24	.11	.19	.16	.17	.20	. 07
31	-	1.00	. 43	.26	.16	.13	.13	.17	.16	.17
32	-	-	1.00	. 28	.13	.08	.13	.18	.17	.09
34	-		-	1.00	.12	. 28	.27	. 27	.21	.11
36	-	-	-	-	1.00	.19	. 24	.21	.19	.23
37	-	-	-	_	_	1.00	.31	. 25	. 25	.19
38	-	_	-	-	_	_	1.00	.31	.26	.15
39	-	-	-	-	-	, =	_	1.00	.18	.22
40	-	-	_	_	_	_	-	-	1.00	.23
42	-	_	_	_	-	_	_	_	-	1.00

TABLE 9. SUMMARY OF LAI FACTOR IV: FAMILY/MARITAL STATUS.

	Variable	Promax	Load	Loadings on Remaining Factors				
		Loading	I	ΙΙ	III	V		
27	Cohabitors	.52	.11	12	02	. 07		
46	Married	.77	.06	.02	05	.06		
54	Dependants	.69	.08	.03	08	. 14		
55	Activity Alone	46	04	.02	.08	.07		
57	Left Home/Rec. Family	.43	.11	11	.35	00		
C	ween Factors: orrelation osine			.29	06 .04	27 .16		

Family/	Marital	Status	Variable	Intercor	relations
	27	46	54	55	57
27	1.00	.34	.53	28	. 25
46	-	1.00	.60	42	.35
54	-	-	1.00	33	.22
55	, -	-	-	1.00	22
57	-	-		•	1.00

TABLE 10. SUMMARY OF LAI FACTOR V: PHYSICAL HEALTH

		Promax	Loadings on Remaining Factors				
		Loading	I	ΙΙ	III	ΙV	
15	Days Ill Last Month	.43	10	.05	.03	. 05	
17	Drugs	.37	05	04	.10	.02	
18	Nervous/Sleep Diff.	.54	05	07	05	.02	
19	Colds/Flu	.37	08	.04	02	.07	
49	Days with Health Prob	.72	12	01	04	.10	
C	ween Factors: orrelation osine		.32	15 .09	.17	27 .16	

Р	Physical Health Variable Intercorrelations						
	15	17	18	19	49		
15	1.00	.17	.16	.30	.30		
17	-	1.00	.21	. 17	.31		
18	-	-	1.00	.09	.59		
19	_	-	-	1.00	. 44		
49	-	-	_	_	1.00		

TABLE 11. INTERCORRELATIONS AMONG THE FIVE PROMAX FACTORS OF THE LAI

		I	II	III	ΙV	٧
Alcohol Use	I	an en	20	.14	32	.32
Income/Work	II	20		.19	.29	15
Socialization	III	.14	.19	· • •	06	.17
Family/Marital	IV	32	.29	06		27
Physical Health	٧	.32	15	.17	27	

and a greater number of health complaints in the second. Thus, high scores on these factors would tend to suggest a less desirable life situation. High scores on the remaining factors might, however, be interpreted as indicating relatively better adjustment. High scores on Factor II (Income/Employment) would, for example, be produced by an individual showing no problematic unemployment, favorable income source changes, increased income, a high family income, and a large number of hours worked per week. A high score on Factor III (Socialization/Social Activity) would be obtained by an individual who had reported a large number of social contacts and activities, while a high score on Factor IV (Family/Martial Status) would be achieved by an individual who was married, living with a number of dependants, and who engaged in recreational activities with the family but did not report engaging in recreational activities alone.

As might be expected, Factors I and V tend to be negatively related to the other factors (with the exception of Factor III which shows small positive correlations with Factors I and V: .14 and .17 respectively); and positively correlated (.32) with each other.

It should be emphasized that the factors identified by the analyses conducted during the present contract period are considered to be a preliminary estimate of the dimensionality of the LAI data set. Additional analyses which attempt to replicate this factor structure, and which attempt to expand each of the scales is considered essential to the delineation of a final set of life status scales from this It might be noted in this connection that the decision to accept five rather than a larger number of factors in these analyses was motivated largely by the practical constraint of providing (with minimum delay) a set of LAI life change scores which could be used by the STR sites in preliminary analyses of STR treatment effectiveness. To this end the five Promax factors described above were used in the creation of a set of LAI scale scores which have been incorporated in the STR Master File. Two sets of LAI factor scores have been inserted in the STR Master File, with each set consisting of a single scale . score for each of the five factors. Preparatory to the creation of each set of factor scores, the 57 derived LAI items were created from the set of 134 raw LAI responses for each of the LAI interview data sets contained in the STR Master File (approximately 3,744 cases as of the date of this report). Each of these 57 variables, for each of the 3,744 cases, was then transformed to standard score form using the estimates of means and standard deviations obtained in previous analyses with the initial

1,501 STR clients (see Table 5). The first set of five LAI scales was created simply by summing the salient variables for each factor. Thus the Alcohol Use score (Factor I) was obtained, for each client, as the sum of the standard scores for variables 20, 21, 22, 23, 25, 50, 51, and 52. Similar unweighted salient of scores were obtained for each of the remaining four factors, with the salient or marker variables receiving unit weight and the remaining variables receiving 0 weight in each computation.

The second set of scale scores calculated from the LAI interview data again utilized only the salient variables for each factor, but weighted each variable by its Promax loading on the factor of interest. The weighted salient scale score for a client on Factor I (Alcohol Use) is obtained as follows with this procedure:

$$Y_{I} = Z_{20}(.89) + Z_{21}(.49) + Z_{22}(.63) + Z_{23}(.45) + Z_{25}(.37) + Z_{50}(.63) + Z_{51}(.75) + Z_{52}(.53).$$

Appendix G contains summaries of the LAI scale measures for those cases currently contained in the STR data base, as well as preliminary comparisons between initial and six month follow-up score for treatment and no-treatment clients.

Future analyses of the LAI instrument might profitably consider the use of other methods for calculating separate scale scores. This was not considered appropriate at the present stage of instrument development, however. Such analyses should consider the possibility that a greater number of dimensions than the present five characterize this instrument. These analyses will be possible when the initial data collection phase of the STR Study has been completed and the data from the entire STR Study population has been added to the data base. Until that time, however, the present set of scale scores are considered to represent a reasonable set of life change scores for use in preliminary project and program level analyses.

¹⁰Horn, J. L. An empirical comparison of methods for estimating factor scores. <u>Educational and Psychological Measurement</u>, 1965, <u>25</u>, 313-322.

CSQ and PAS Questionnaires

Unlike the LAI interview protocol, the Current Status Questionnaire and the Personality Assessment Survey represent life status/life change instruments which had been developed prior to the design of the present study. Both questionnaires have been included in an extensive program of alcohol treatment evaluation research conducted by researchers at the University of Denver and the Fort Logan Mental Health Center (Fort Logan, Colorado). 11 12 13 14 These instruments are reproduced in Appendix H.

The Current Status Questionnaire as used in the STR Study is an 82 item self-administered questionnaire instrument. The items contained in this instrument are representative of seven scales identified factor analytically by the Fort Logan researchers. The scales represent the following dimensions:

I.	Social & Residential Stability	-	10	items
II.	Job Satisfaction & Economic Productivity	-	11	items
III.	Health, Hygiene, & Nutrition	-	13	items
IV.	Current Drinking Pattern & Problems	-	9	items
٧.	Sociopathy - Acting Out	-	12	items
VI.	Social Withdrawal & Alienation	-	12	items
VII.	Marital Problems	_	12	items

¹¹Horn, J. L. and Wanberg, K. W. Symptom patterns related to excessive use of alcohol. <u>Quarterly Journal of Studies on Alcohol</u>, 1969, <u>30</u>, <u>35-58</u>.

¹²Horn, J. L. and Wanberg, K. W. Dimensions of perception of background and current situation of alcoholic patients. Quarterly Journal of Studies on Alcohol, 1970, 31, 633-658.

¹³Foster, F. M., Horn, J. L., and Wanberg, K. W. Dimensions of treatment outcome: A factor-analytic study of alcoholics' responses to a follow-up questionnaire. Quarterly Journal of Studies on Alcohol, 1972, 33, 1079-1098.

Horn, J. L., Wanberg, K. W., and Adams, G. Diagnosis of alcoholism: Factors of drinking, background and current conditions in alcoholics. Quarterly Journal of Studies on Alcohol, 1974, 35, 147-175.

For purposes of scoring the CSQ data for preliminary project and program level analyses, seven factor scores (computed as unweighted salient scores from the items associated with each of the above factors) have been created and included in the STR Master File for initial and follow-up interview cases. Although the population sampled in the development of the CSQ (an inpatient alcohol treatment group) is probably not identical to the population sampled by the STR Study, the scoring procedures described are considered appropriate for preliminary analyses. Future treatment of these data should, of course, include attempts to replicate the factor structure identified by the Fort Logan researchers. This process will be possible when the collection of initial intake questionnaires is complete for the STR Study.

The Personality Assessment Survey (PAS) used in the STR Study is a 151 item instrument composed of MMPI type items representing 14 scales identified by the Fort Logan group. The PAS scales included in the STR Study version of this questionnaire are:

1.	Depression		. 9	items
2.	Indecisive Worry & Guilt		8	items
3.	Hypersensitivity, Tension		8	items
4.	Self-confidence & Acceptance		8	items
5.	Hypochondria		12	items
6.	Impulsive-Aggressive, Acting Out	-	12	items
7.	Phobias, Fears	-	12	items
8.	Paranoid Fear/Mistrust	-	12	items
9.	Anamalous Thoughts & Percepts	-	12	items
10.	Machiavellistic Projection & Mistrust	-	12	items
11.	Manic, Outgoing	-	12	items
12.	Experimenting Moralism	-	12	items
13.	Extraversion	-	10	items
14.	Intellectual-Esthetic Pursuits	-	12	items

As was the case for the CSQ, the preliminary PAS scale scores which are included in the STR Master File were obtained as unweighted salient factor scores. These preliminary PAS factor scores were created by summing the responses defining each of the fourteen PAS factors (responses were not standardized prior to factor score computation for this instrument) to yield a set of 14 PAS scores for each completed initial and follow-up questionnaire contained in the file. Again, it should be noted that the completion of the initial data collection phase of the STR Study will permit a more intensive reanalysis of this instrument, including the attempt to replicate the Fort Logan factor structure, and to refine the calculation of PAS factor scores.

APPENDIX A

STR Site and Modality Description Questionnaires

Tangae'i

I.	Gene	ral		Descripti	on .	Project:	***************************************
		and indi	ead Alco	ch STR ass ohol Schoo	ignment grou l, minimum e ted number o	exposure, et	c.) and
		1		·			#
		2	-				#
		3			,,		#
		4					#
		5					#
		6					#
		7.	-				#
		8.				·	#
		٠					

B. Briefly describe procedures for random assignment:

- I. General STR Description Con't Project:_____
 - C. Describe pre-screening procedures used to select candidates for assignment to STR modalities:

II.	Des sep	ividual Modality Project:cription (Complete for each arate modality including imum exposure or probation y)
		Modality Name:
	Α.	Number of sessions: Frequency of sessions:
	В.	Average length of each session:
	С.	Duration of treatment:
	D.	
	Ε.	Number of instructors/therapists who interact with clients at each session of program:
	F.	Training/background of instructors/therapists:
	G.	Who pays the cost of this modality?
	н.	For what type of individual is this treatment program primarily designed (social drinkers, mid-range problem drinker, problem drinker, alcoholic, etc.)?

II. Individual Modality
Description Con't

Project:

र अपनेष्ठ

I. What is the primary objective(s) or goal(s) of this modality? (What characteristics of the individual does the modality attempt to change?)

J. What strategies or procedures are used in this modality to achieve the goals indicated in the previous question? (Attach syllabus or curriculum if available).

II.	Individual	Modality
	Description	ı Con't

Project:	·
----------	---

K. What is done with individuals who are referred, but do not begin participation in this modality (noshows)? If re-starts are allowed, how many times will the client be rescheduled?

L. What is done with individuals who drop-out of this modality? How many drop-out/re-starts are allowed?

II.	Individual	Modality
	Description	on Con't

P	roj	e	ct	:	
---	-----	---	----	---	--

M. Is probation normally used in conjunction with this modality? Describe the probation mechanism (eg., reporting probation with face to face interviews at periodic intervals, etc.). Indicate frequency of contacts, length of each contact, and total duration of probation.

APPENDIX B

ASAP Short Term Rehabilitation Study Life Activities Inventory: Section Four Initial Records Check

ASAP SHORT TERM REHABILITATION STUDY LIFE ACTIVITIES INVENTORY: SECTION FOUR INITIAL RECORDS CHECK

U.S. DEPARTMENT OF TRANSPORTATION

NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION



Completion of the Life Activities Inventory

The Highway Safety Act of 1966 (23 U.S.C. 403) authorizes the collection of this information in order to determine the relative and absolute program level effectiveness of short term alcohol rehabilitation treatment programs in terms of arrest recidivism and/or production of positive life adjustments. Not providing this information will result in elimination from participation in the Short Term Rehabilitation (STR) study, including referral to STR treatment. Disclosure of this information is voluntary.

PROJECT	<u> </u>
INODOI	<u></u>
1 Denver	5 New Orleans
² Fairfax	6 Phoenix
₃ ☐ Kansas City	7 🗌 San Antonio
4 Minneapolis	8 🗌 South Dakota
DATE OF RECORDS CHECK / month da	y year
RECORDER NAME	
PROJECT CLIENT ID NUMBER	
	المنظم المنافي والمناف المنظم والمنافي والمنافي والمنافي والمنافي والمنافي والمنافي والمنافي والمنافي

NOTE: This section of the life activities package was developed for the NHTSA under contract DOT-HS-191-3-759. The entire package was assembled for the NHTSA by the University of South Dakota under the above contract entitled "An Evaluation of ASAP Rehabilitation Efforts."

PROJECT DRINKER CLASSIFICATION	
CHECK ALL OF THE FOLLOWING WHICH APPLY TO THE CLIENT	
Diagnosis as an alcoholic by a competent medical or treatment facility.	ا د - با
☐ Self admission of alcoholism or problem drinking	roman In and In and all
\square A BAC of .15 percent or more at the time of arrest.	г т
A record of one or more prior alcohol-related arrests	; ;
A record of previous alcohol-related contacts with medical, social, or community agencies.	F 1 7
Reports of marital, employment or social problems related to alcohol.	r
Diagnosis of problem drinker on the basis of approved structured written diagnostic interview instruments, i.e., MAST, Mortimer-Filkins, NCA and Johns Hopkins diagnostic tests.	1
MORTIMER-FILKINS SCORES	
Questionnaire (Form A)	
Interview (Form B)	- + - +
Total	

INDEX ARRESTS INFORMATION

СНА	RGE CONVICTED OF (Check o	ne)			
	Driving under the intoxicated, or equ	influence, uivalent	driving wh	nile	
	2 Lesser alcohol relaimpaired, etc.)	ated offens	e (driving	g while	
	3 Non-alcohol related	d offense (reckless d	lriving, etc.)	
PUN	ITIVE SANCTIONS				
		Sentenced	Actually Imposed		
	Jail (in days)]
	Fine (in whole dollars)				
,	Length of license suspension/revocation (in days)				
BLO	OD ALCOHOL CONCENTRATION				T ;
	o	ole and spec	cify reaso		

REHABILITATION ASSIGNMENT AS THE RESULT OF THE INDEX ARREST

Enter project designation for Short Term Rehabilitat	
group assignment (i.e. PMT, minimum exposure, alcohol sat school + group therapy, control, etc.)	fety
sensor group therapy, control, etc.)	

List by treatment modality name all rehabilitation entered as the result of the index arrest, the name of the instructor/therapist for the modality, and the entry date (or expected entry date) for each treatment modality.

TREATMENT MODALITY	INSTRUCTOR/THERAPIST NAME	ENTRY DATE (or Expected Entry Date) month- day -year
		/ / / / / / / / / / / / / / / / / / /
	F : T : T : 1	
	F - T - T - T - T - T - T - T - T - T -	

TRAFFIC OFFENSES RECORDS CHECK

A. For the following categories of traffic offenses, record the <u>total</u> number of arrests and/or convictions incurred by the client during the <u>four year</u> period prior to and <u>including</u> the index arrest.

OFFENSE	Enter number	
Driving While Under the Influence, Driving While Intoxicated, or Equivalent		工工
Lesser Alcohol Related Offense		
Reckless Driving		
Hazardous Moving Violations (other than those above)		
Other Traffic Offenses		Г Т `

TRAFFIC OFFENSES RECORDS CHECK

B. Record <u>all</u> traffic arrests and/or convictions incurred during the \underline{six} months \underline{prior} to and $\underline{including}$ the index arrest.

			eck ne	Inf	urce orma ck 0	tion			Date	 es					Li	cens	se Ac	tion
	Type of Offense	Arrest	Conviction	DMV	Police	ASAÞ	Month	rres	Year **	Month Jo	vict	Year uoi	Check if Alcohol-Related	Enter 2 Digit BAC	Month Sans Sans		year Year	Length of Suspension/ Revocation (in days)
								-										
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l	-	<u> </u>			<u> </u>	L					<u> </u>	<u> </u>	767		ור ד		T- 7.	T 1C
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NON-TRAFFIC OFFENSES RECORDS CHECK

Α.	For the following categories of non-traffic offenses, record the <u>total</u> number of arrests and/or convictions incurred by the client during the <u>four year</u> period prior to and <u>including</u> the index arrest.	·
	OFFENSE Enter number	
	Property Crimes (Burglary, Robbery, etc.)	F T 7 L T J
	Assault/Battery	
	Sex Crimes (Rape, Indecent Exposure, etc.)	
	Public Intoxication	

MON-TRAFFIC OFFENSES RECORDS CHECK (CONTINUED)

B. Record all non-traffic arrests and/or convictions incurred during the $\underbrace{\text{six months}}_{\text{prior}}$ prior to and including the index arrest.

Туре	Chec	k One	Infor	ce of mation k One			Da	tes			Check if	Enter 2
of Offense	Ar-		po- lice	ASAP		Arre day	st yr.	Con mo.	vict day	ion yr.	Alcohol- Related	Digit BAC
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e graf	<u>.</u>	1		4	.	÷ ÷	:: :. ·	17 77		- <u>1</u> - 4		

MOTOR VEHICLE ACCIDENTS RECORDS CHECK

Enter all accidents in which the client was involved during the <u>four year</u> period prior to and including index arrest. Enter the accident type <u>code</u> in the first column.

ACCIDENT TYPE CODE

Single Vehicle:

Fatal = 1

Injury = 2

Property Damage = 3

Multiple Vehicle: Fatal = 4 .. Injury = 5

Property Damage = 6

Accident				Check if	Enter 2		Li	cènse	Action
Type		Date		Alcohol- Related	Digit BAC		ate	of ion/	Length of Suspension/
Code	}			Related	DP.C	Rev	ocat	ion	Revocation
	mo.	day	yr.					yr.	(in days)
			 					 	
						<u> </u>	ļ		
									
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APPENDIX C Preliminary LAI Interview Protocol

LIFE ACTIVITIES INVENTORY

DEC	PONDENT NAME			 OFFICE USE CASE ID #		•
RES	PUNDENT NAME			DCT #		
DAT	'E OF INTERVIEW	•		MF-Q MF	P-I_MF-T_	
			·····	DC: 1	2 3 4	
PAF	<u>et i</u>					
1.	How many days per wee nearest ½ day)?	k have your work	ed for the	past four w	eeks (to the	!
	last week	2 weeks ago	3 weeks	ago 4 w	reeks ago	
				<u> </u>	· · · · · · · · ·	•
	(Interviewer record n week - exclude holida	umber of availab ys, etc.)	le working	days per we	eek for each	
						
	•					
2.	What is (are) your pr (Record whether receive.g., spouse's income etc.) If self employ	ving salary/wage , family, pensio	and any o ns, social	ther income security, i	sources, interest,	
	ecc.) If self employ	ea, indicate whe	iner dusin	ess or jarmi	ng.	
					·	רַ־ יִ
				· · · · · · · · · · · · · · · · · · ·		نــن
	Has your source of in		the last s	ix months?		
	If yes, list previous	source(s)				r 1
						1 1
			,	17. 7		
3.	Mhat is your present Has this changed in t	total monthly in the last six mont	come?	Yes	No	
	If yes, indicate the decrease.	reason for the c	hange (<u>not</u>	just increa	ase or	
	• •		•			

last six m time?	onths?	number of 1	times. If no	ot 0, why for each	j
		•			
					-
					!
	1	harge, includi	1	Indicate whether	

5. Which days in the past week have you had an argument or fight with the following people? (Interviewer inquire about and include being "chewed out" by supervisor and "chewing out" subordinates.)

	Mon	Tues	Wed	Thu	Fri	Sat	Sun	None
with supervisors		ļ			ļ	<u> </u>	ļ	
with subordinates			<u> </u>		ļ			
with co-workers				<u> </u>	<u> </u>			
others					er om de Liebour	Sir	5:	
		<u> </u>	L	<u> </u>	1	i		

Have any of these involved physical attack or injury? . (If so, indicate which ones by circling the appropriate check mark.)

PART II

6. How many days per week have you been sick for the last four weeks? (Record any illness whether it forced the individual to miss work or not.)

last week	2 weeks ago	3 weeks ago	4	weeks	ago
		•	,	. •	
	÷ ,	•			

									, r
	·			·					
(Interviewer inquire aspirin, or other no not the useage of so determine useage of Amphetamines, Barbialcohol consumption	on-pres uch med restri tuates,	cript dication icted	ion dri ons are drugs (igs, an e alcol i.e.,	nd dete hol rei mariji	ermine lated. uana, i	whethe Atter halluc	er or mpt to inogens	- I
low many times in the contract to the contract	eatment							ospital	,
If not zero, why for	r each	time?							_
									•
					•				
		·							
each of the following	ng. Do	o <u>not</u>	include	spec	ifical	ly alc	ohol r	elated	
Check each day with each of the following ailments.									
each of the following allments.	ng. Do	o <u>not</u>	include	spec	ifical	ly alc	ohol r	elated	
each of the following	ng. Do	o <u>not</u>	include	spec	ifical	ly alc	ohol r	elated	
each of the following intents. Digestive problems	ng. Do	o <u>not</u>	include	spec	ifical	ly alc	ohol r	elated	
each of the following illments. Digestive problems leadache	ng. Do	o <u>not</u>	include	spec	ifical	ly alc	ohol r	elated	
each of the following illments. Digestive problems leadache Sleep difficulty	ng. Do	o <u>not</u>	include	spec	ifical	ly alc	ohol r	elated	
each of the following illments. Digestive problems leadache Sleep difficulty lervousness Jnusual fatigue	ng. Do	o <u>not</u>	include	spec	ifical	ly alc	ohol r	elated	

PAR'	T III										
10.	Are you presently enga (e.g., physical fitnes etc.)? Yes	ged in s prog N	rams,	ype of educat	self i	improve traini	ement ng pro	activit grams,	у		
	If yes, what are they?										
•											
11.	Do you engage in any volunteer (non-paid) activities such as Boy Scouts, Red Cross, civic, religious, or political activities? YesNo										
	If yes, what are they?										
PART	<u>r Iv</u>							٠.			
12.	How many of each of the each day of the past w	e foll eek?	owing	kinds	of drir	nks hav	ve you	had or)		
		Mon	Tue	Wed	Thu	Fri	Sat	Sun			
	12 oz. bottle or cans of beer										
	1 oz. drink-liquor					<u>l</u>					
	4 oz. glass-wine										
13.	How many times in the	past 3	0 days	have	you bee	en drui	nk?	hquanique (Till) mai			
14.	How many times in the memory or blackouts af (Interviewer explain t passing out. Record b	ter dr he dif	inking ferenc	? e betw	•		•	•			

	one day at a time? And, for each time, how many days?
•	<u>v</u>
	What is your current marital status? (Single, engaged, married, separated, divorced, widowed are the only permissable categories. If respondent is married but not presently residing with spouse, record "separated." If single, inquire whether respondent has ever been married and record as appropriate.)
	Are you presently living alone or with others? Nith others If living with others, how many and what is the relationship of each of them to you?
	Has this changed in the last six months? Yes No
	If yes, how?
	Have you or any of your relatives or close friends died or suffered critical physical or emotional illness or injury in the last six months? Yes No
	If yes, what happened and to whom?
	How many close or intimate friends (excluding immediate family) do you have that you could go to, to talk out a particular problem you might have? Has this number changed in the last six months? No change Increase Decrease

20. During the past week, what activities have you engaged in for recreation or entertainment with each of the following people? (Write the activity in the appropriate box. Include going out to dinner, or to visit friends, TV, hobbies, etc. Indicate "A" next to activities occuring away from home. Indicate "H" next to activities occuring at home. NOTE: If respondent indicates going to a bar or party, inquire as to whether alcohol was consumed. If so, or if drinking has been indicated as an activity, make sure the amount consumed was indicated in question 12. NOTE: It is unlikely that a person will not engage in at least some recreational activity during a week.)

						•		
	Mon	Tue	Wed	Thu	Fri	Sat	Sun	H A
Spouse or opposite sex companion					·			
Children		·			·			+
Parents								
Siblings								-
Friends								1 1
Alone								
0	! 	 	<u> </u> 	 	 	 	 	┩ ── ┸ ─ ─ ┃ ┫
A	L	!	<u> </u>	L	!]	<u> </u>	1

	Mon	Tue	Wed	Thu	Fri	Sat	Sun	
Spouse/opp. sex comp.								- 7 - !
Children								i i
Parents	·							
Brothers or sisters								
Friends								_ l
	1	1	1			1	1	
Other than job or interests d	te which or far lo you!	ch ones nily re spend t	by ci	rcling t responsi for you	che appr bilitie	copriate es, What	activit	
Have any of the (If so, indicator) Other than job or interests of (Hobbies, recruir) Has this change	o or far lo you : reation	nily respend to all acti	lated sime on vity, o	responst for you etc.)	the appr bilitie ur perso	es, what	activit	
Other than job or interests d (Hobbies, recr	o or far lo you : reation	nily respend to all acti	lated sime on vity, o	responst for you etc.)	the appr bilitie ur perso	es, what	activit	
Other than job or interests d (Hobbies, recr	o or far lo you : reation:	nily respend to all acti	lated ime on vity, o	responsifor youetc.) months?	the appr bilitie ur perso	es, what onal enj	activit	

APPENDIX D

ASAP Short Term Rehabilitation Study Life Activities Inventory: Section Three Initial Interview

ASAP SHORT TERM REHABILITATION STUDY LIFE ACTIVITIES INVENTORY: SECTION THREE INITIAL INTERVIEW

U.S. DEPARTMENT OF TRANSPORTATION

NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION



Completion of the Life Activities Inventory

The Highway Safety Act of 1966 (23 U.S.C. 403) authorizes the collection of this information in order to determine the relative and absolute program level effectiveness of short term alcohol rehabilitation treatment programs in terms of arrest recidivism and/or production of positive life adjustments. Not providing this information will result in elimination from participation in the Short Term Rehabilitation (STR) study, including referral to STR treatment. Disclosure of this information is voluntary.

PROJECT		ار_ ا
1 Denver	5 New Orle	ans
2 🔲 Fairfax	6 Phoenix	
₃ ☐ Kansas City	7 🗌 San Anto	nio
→ ☐ Minneapolis	8 🖸 South Dai	kota
DATE OF INTERVIEW	month day year	
INTERVIEWER NAME		
PROJECT CLIENT ID NUMBER		
r-+		

NOTE: This section of the life activities package was developed for the NHTSA under contract DOT-HS-191-3-759. The Entire package was assembled for the NHTSA by the University of South Dakota under the above contract entitled "An Evaluation of ASAP Rehabilitation Efforts."

BACKGROUND INFORMATION

AGE	ال المالية
DATE OF BIRTH //	
month day year	
SEX	r -]
ı 🔲 Male	
² Female	
RACE	L
ı 🔲 Caucasion/Anglo	
2 🗆 Black	
3 Mexican American	
4 🗌 American Indian	
s □ Oriental	
6 ☐ Other	
	[
RELIGIOUS PREFERENCE	F1
1 Protestant	
2 🔲 Catholic	
3 🔲 Jewish	
4 🗍 Other Religious Preference	
5 No Religious Preference.	
	Ĺ
RESIDENCE	<u>i.</u>
ı ☐ In ASAP Jurisdiction	
2 Doutside ASAP Jurisdiction	

EDUCATION (Circle highest completed)

GRADE SCHOOL	HIGH SCHOOL	COLLEGE	POST COLLEGE
1 2 3 4 5 6 7 8	1 2 3 4	1 2 3 4	1 2 3 4 or more

NUMBER OF TIMES MARRIED (Circle number).

0 1 2 3 4 5 6 7 8 9 or more

TREATMENT HISTORY

A. Indicate the total number of times that the client has entered each of the following treatment categories during the four year period prior to the index arrest. Do not include PMT or modalities entered concurrent with PMT as a result of the index arrest.

Trea	tment Modality Categories	
		Enter number in box
	Inpatient Therapy	
	Outpatient - Individual	
	Outpatient - Group	
	Outpatient - Family	
	Outpatient - Structured Behavioral (Aversive conditioning, etc.)	
	Detoxification (hospitalization for drying out)	
	Direct Chemotherapy (disulfiram)	
	Indirect Chemotherapy (tranquilizers, etc.)	
	Alcoholics Anonymous	
	Half-Way House	
	Educational/Alcohol Safety School	

TREATMENT HISTORY (CONTINUED)

B. Indicate all modalities that the client has entered during the six months prior to the index arrest. Do not include PMT or modalities entered concurrent with PMT as a result of the index arrest. Enter treatment modality code number in first column and treatment name (e.g. Transactional Analysis, reality therapy, etc.) in second column.

TREATMENT MODALITY CODES

1 = PMT

2 = Inpatient Therapy

3 = Outpatient - Individual

4 = Outpatient - Group

5 = Outpatient - Family

6 = Outpatient - Structured Behavioral

7 = Detoxification

8 = Direct Chemotherapy

9 = Indirect Chemotherapy

10 = Alcoholics Anonymous

11 = Half-Way House

12 = Educational/Alcohol Safety

School

										-11001								
				Treatment Description			.Dates					Check One			Check One			
141	Treatment Modality Code	Treatment Modality Name	tal No. of sions in Minutes		Description	Month Day ka Year		Month Jay Day uiman Year wo		Complete	Dropout	Still Enrolled	Voluntary Entry	Court Referral	With Reporting Probation	Non-reporting proba- tion or no probation		
	L 12 12 12 1		ママママママママママママママママママママママママママママママママママママ	ㅏ + +	- - 		++++++	ナーナーナー	++	++					ביור זר זר ז	ָרְ מָּ		7 . 7 .

LIFE ACTIVITIES INVENTORY

What is your current occupation?	<u></u>
enter title and/or brief description	
Which one of the following categories best describes your occupation at the present time?	
check one box	
Professional (for example doctor, lawyer, college teacher, banker, engineer)	
Manager (for example small businessman, administrator, farm manager, farmer, etc.)	
Sales/Clerical/Communication (for example salesman, store clerk, secretary, telephone operator)	
Skilled labor/craftsman (for example plumber, mechanic, machinist, foreman, heavy equipment operator, heavy truck driver, etc.)	
5 Unskilled labor (for example, construction labor, farm labor, factory worker, etc.)	
Service work (for example, maid, janitor, waitress, waiter, gardener, etc.)	
7 \square Teacher (elementary and secondary, <u>not</u> college)	
8	,
9 🔲 Student	
10 Not working	
if the client is not currently working, skip to question 4: if the client is currently working, ask the following	
In your present job, or jobs, how many hours do you usually work per week?	
enter the number of hours to the nearest hour	LI

٠.	current primary income source?	
:	check one or more boxes	
	☐ Earned income (for example, salary, wages, tips)	۲-
	Pensions, Social Security, etc.	
	Support by others (such as family, spouse, friends, etc.)	Γ- L-
	Public assistance (for example, welfare, unemployment compensation, aid to dependent children)	L -
	No income (for example, living on savings)	
5.	What is your present total family monthly income before deductions for taxes and other things? enter the amount to nearest the dollar \$	·
6.	How many days, that you normally would have worked, did you miss in the past 30 days?	
	enter the number of days	
	If the number of days missed is zero, skip to question 10; if the number of days missed is not zero, ask the following	
7.	How many of these days did you miss work because you were ill?	
	enter the number of days	<u> </u>
8.	How many of these days did you miss for other reasons you would consider acceptable to your employer, such as a death in the family, jury duty, bad weather, etc.?	
	enter the number of days	

9.	How many of these days did you miss work for personal reasons other than the previous two, such as just not feeling like going to work, etc.?	
	enter the number of days	
	The sum of responses to questions 7, 8, and 9 must equal the response to question 6 .	
10.	In the past 30 days, how many times have you been "chewed-out" or verbally disciplined by people at work, whether or not you argued bac.?	
	enter the number of times	
		·
11.	In the past 30 days, how many <u>arguments</u> have you had with people at work?	
	enter the number of arguments	
	If the number of arguments is zero, skip to question 13; if the number of arguments is not zero, ask the following	
12.	How many of these arguments involved physical injury or attack, that is, striking someone or being struck?	
	enter the number of arguments involving injury or attack	
13.	Has your primary source or sources of income changed in the last 6 months?	
	check one box	
	☐ Yes	רו
٠	□ No	d -
	If no, skip to question 15; if yes, ask the following	

14.	Which <u>one</u> of the following categories best describes the impact of the change or changes in source?	
•	check one box	
	. 1 Generally good or favorable	٠.
	² Neither favorable nor unfavorable	
	₃ ☐ Generally bad or unfavorable	
15.	Has the amount of your monthly income changed in the last 6 months?	
	check one box	
	Yes	
	\square No	
	If no, skip to question 18; if yes, ask the following	
16.	Has your income increased or decreased?	
	check one box	
	☐ Increased	
	☐ Decreased	
17.	By what amount has your monthly income changed?	•
	enter the amount of change to the nearest dollar \$	- - + +
18.	How many times have you quit a job in the last 6 months?	
	enter the number of times	
	If the number of times is zero skip to question 21; if the number of times is not zero, ask the following	
19.	How many times did you quit with a new job already lined up?	
	enter the number of times	
20.	How many times did you quit with no new job lined up?	,
	enter the number of times	
	The sum of responses to question 19 and 20 must equal the response to question 18.	

21.	How many times have you been discharged (fired from a job in the last 6 months?	d or layed off)	
	enter number of discharges		
	If the number of discharges is zero, skip to of discharges is not zero, ask the followin		mber
22.	How many of these discharges were the direct of driving arrest (lost license, job requires dripolicy, etc.)?		
	enter number of discharges		
23.	How many of these discharges were for reasons general or seasonal layoffs, plant closings,		
	enter number of discharges		<u>- </u>
24.	How many of these discharges were for other rework performance, personality conflicts, etc.		
	enter number of discharges		
	The sum of responses to questions 22, 23 arresponse to question 21.	nd 24 must equal the	
25.	Have you been promoted or assigned additional in the last 6 months?	job responsibilities	
	check one box		
	ı 🔲 Yes		רח
	2		لـا
26.	During the last 6 months, have you participat education or training to increase your work s career advancement?		
	check one box		
	1 Tes		רי
	2 No		ليا
	If no, skip to question 28; if yes, ask th	se following	

27.	How much of your time, in the last 6 months, has been involved in this formal education or training? Include both class time and homework time.	
	check one box	
	1 Nine hours or less	
	2 [] Ten to twenty hours	<u></u>
	3 Twenty to seventy-five hours	
	4 \square More than seventy-five hours	
28.	Have you received any bonuses or other rewards for good work performance during the last 6 months? <u>Include</u> merit raises, sales awards, and any other formal recognition of work performance such as certificates, acknowledgement in company newsletters, etc <u>Exclude</u> normal raises for cost of living, union contracts, etc	
	check one box	
٠	1 Tes	Γ.
	2 No	
.29.	Are you currently taking any drugs or medications for the relief of temporary physical conditions such as the flu, a cold, etc.?	
	check one box	
	ı [] Yes	- سم
	2 No	<u>L</u> .
٠		
30.	Are you currently taking any drugs or medications for the relief of chronic physical conditions such as heart trouble, arthritis, diabetes, hay fever, asthma, etc.?	
	check one box	
•	1 Tes	۲.
	2 No	Ĺ.

If no, skip to question 32; if yes ask the following

31.	How long have you been taking a drug or medication for this reason?	
	check one box	
	1 Done month or less	
•	2 Done month to one year	
	3 More than one year	
32.	Are you currently taking any drugs or medications such as tranquilizers, sleeping pills, stimulants, etc., for the relief of tension, depression nervousness, or similar conditions?	
	check one box	
	ı [Yes	~-
•	2 No	ا ا
,	If no, skip to question 34; if yes, ask the following	
33.	How long have you been taking a drug or medication for this reason?	
•	check one box	
	1 Done month or less	
	2 Done month to one year	[]
	3 More than one year	
34.	Are you currently taking any drugs or medications other than alcohol to produce "highs" or altered states of consciousness?	
	check one box	
	1 Yes	
	2 No	لــا
	If no, skip to question 36; if yes, ask the following	

35.	How long have you been taking a drug or medication for this reason?	
	check one box	
	1 One month or less	
	2 [One month to one year	[L.
	3 More than one year	
36.	How many different medications or drugs are you currently taking? Include all drugs mentioned in previous questions and any other drugs you are currently taking such as, antabuse, methadone, vitamins, birth control pills, antacid tablets or liquids, pain killers, etc	
	enter the total number of medications or drugs	
	•	
37.	On the average, how many hours sleep per night did you get for the last 7 nights?	
	enter the number of hours	

38. On which of the last 7 days have you been bothered by each of the following health problems? Do not include specifically alcohol related ailments.

It would be helpful to work through the preceding week one day at a time and ask if any of the listed physical problems occurred on Monday, then Tuesday, etc.

check appropriate boxes

	Mon	Tues	Wed	Thur	Fri	Sat	Sun		
Digestive problems									
	Mon	Tues	Wed	Thur	Fri	Sat	Sun	•	
Headaches	_								
	Mon	Tues	Wed	Thur	Fri	Sat	Sun		*
Sleep problems					口,			•	
	Mon	Tues	Wed	Thur	Fri	Sat	Sun		
Nervousness									
	Mon	Tues	Wed	Thur	Fri	Sat	Sun		
Fatigue/weakness									
	Mon	Tues	Wed	Thur	Fri	Sat	Sun		
Muscular aches									
	Mon	Tues	Wed	Thur	Fri	Sat	Sun	•	
Allergies, asthma, etc.									
	Mon	Tues	Wed	Thur	Fri	Sat	Sun		
Colds, flu, etc.									
	- -	F1	L1	L. J	- 7	ָ ר־־ז	FJ		
		ב		نا		<u>_</u>			

40.	On the average, how many hours sleep per night the last 7 nights?	did you get for	
	enter the number of hours		
39.	How many times in the last 30 days have you vior other medical treatment facility for each or reasons relating to your own health care?		
	Be sure all alcohol related visits whether related (e.g. detoxification) or indirectly injury received as the result of drunkennes "alcohol related problems" category.	alcohol related (e.g.	
	reasons	enter the number of time	es
	Alcohol related problems such as vitamin deficiency, cirrhosis of the liver, injuincurred while drunk, drying out, etc.	ury	Γ -
	Chronic physical conditions such as heart trouble, ulcers, diabetes, arthritis, et	tc.	Г Т -
	Accidents or injuries such as sprains, fractures, cuts, lacerations, etc.		
	Treatment of tempory illness or ailments such as flu, infections, rashes, pneumonia, etc.		
	Regular physical checkups		P T 7
40.	During the past 30 days, how many days have you ill, whether or not the illness forced you to enter the number of days	ou been physically miss work?	<u></u>
[*] 41.	During the last 6 months have you voluntarily or psychological help or counseling?	sought psychiatric	
	check one box		
	ı [Yes		
	2 No		
	If no, skip to question 43; if yes, ask the	following	

42.	Did you seek such help for problems related to alcohol?	•
	check one box	
	Yes	_
	\square No	
43.	How many of each of the following types of drinks have you had on each day of the past 7 days?	
	It would be helpful to work through the preceeding week one day at a time and record the number of drinks of each type for Monday, then proceed to Tuesday, etc.	
	Record malt liquor as 2 drinks beer and fortified (18-20%) wine as 2 drinks wine	•
	enter the numbers of drinks in boxes	
	12 oz. beer Mon Tues Weds Thurs Fri Sat Sun	
	1 oz. liquor Won Tues Weds Thurs Fri Sat Sun	
	4 oz. wine Mon Tues Weds Thurs Fri Sat Sun	
	1 quart beer = 2-2/3, 12 oz. beers	
	<pre>½ pint liquor = 8, 1 oz. drinks liquor</pre>	
	1 pint liquor = 16, 1 oz. drinks liquor	
	1 fifth liquor = 26, 1 oz. drinks liquor	
	1 quart liquor = 32, 1 oz. drinks liquor	
	½ pint wine = 2, 4 oz. glasses wine	
	1 pint wine = 4, 4 oz. glasses wine	
	1 fifth wine = 6½, 4 oz. glasses wine	
	1 quart wine = 8, 4 oz. glasses wine	

44.	How many times in the last 30 days have you driven a car, or other motor vehicle, after having more than three or four drinks? This does not necessarily mean driving while legally intoxicated.	
	enter the number of times	
45.	What is the largest number of drinks (12oz. beer, 4oz. wine, or 1oz. liquor) that you have drunk on one occasion during the last 30 days?	
	enter the number of drinks	
46.	How many days of work have you missed in the last 30 days because you were drunk?	
	enter the number of days	
47.	How many days of work have you missed in the last 30 days because you were hung over?	
	enter the number of days	
48.	During the past 30 days, where have you done most of your drinking?	
	check one box	
	1 At home	[] []
	² Away from home, for example, bars, friends houses, etc.	
49.	How many times in the last 30 days have you been drunk?	
	enter the number of times	
5 0.	How many times in the last 30 days have you been drunk for more than one day at a time?	
,	enter the number of times	
51.	How many times in the last 30 days have you experienced blackouts or lapses of memory after drinking?	
	Explain the difference between a blackout and physically passing out. Record blackouts only.	
	enter the number of times	٢٦٦

52.	while intoxic	cated?	lays nave y	ou gotten	away wii	th drivir	ng	
	enter't	the number of times	3		н	1 31 8 311		
53.	What is your	current marital st	atus?	*	taji i es		18 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Y
	check o	ne box	,					
	1 [Never married						
a san sa a san		Divorced				n Asia		
	3 [] Separated						· 1 · 1
	4 [☐ Married						
	5	Widowed						
54.	Has your mari	tal status changed	in the las	st six mont	hs?	ing the state of t		in design
	check or	ne box					•	
	ı [Yes				1	. •	
	2] No						
	If no, skip	o to question numbe	er 56; if y	es, ask th	e follo	ving		
55.	What was your marital status	marital status imm s?	nediately p	receding y	our curi	rent		, ,
	check on	ne box						
	1	Never married						
	2 [Divorced						
	. ∕3 €	Separated			•	*****		
	4	Married				· ,	· · · .	,
	5	Widowed						
					:			
56. I	How many peopl	e are you living w	ith now?					· —— —
,	enter th	e number of people					. [-	

57.	. Has the number of people living with you changed in the last six months?	
	check one box	
	ı 🗌 Yes	С-
	2 No	L.
	If no, skip to question 59; if yes, ask the following \dots	
58.	. How many people were you living with prior to the most recent change?	
	enter the number of people	
59.	How many people are presently dependent on you for one half or more of financial support?	their
	enter the number of people	
60.	How many people, excluding youself, do you presently take care of; for example, cooking, cleaning, personal attention, etc.?	
	Male respondents participating in family care should be included in this item.	<u>.</u>
	enter the number of people	L _L _
	If the number of people is zero, skip to question 62 ; if the number of people is not zero, ask the following \ldots .	
61.	Do you share these care responsibilities with one or more others, for example, a spouse?	
	check one box	
	1 Tes	
	2 No	
62.	How many close or intimate friends, excluding immediate family, do you presently have with whom you could talk out a particular problem you might have?	·
	enter the number of friends	

03.	months?	six
	check one box	
	Remained the same	
	Decreased ·	
	If the number has decreased, skip to question 65; if there has been no change in the number, skip to question 66; if the number has increased, ask the following	
64.	How many friends have you gained in the last six months?	
	enter the number of friends gained	
	skip to question 66	
÷		
65.	How many friends have you lost in the last six months?	
	enter the number of friends lost	
66.	Do you presently engage in any form of physical fitness activity?	
	. check one box .	
9	1 Yes	г л
	2 No	نا
	If no, skip to question 69; if yes, ask the following	·
67.	How frequently do you engage in physical fitness activities?	·
	check one box	
	1 [Every day	(- -
	2 [Several times a week	Li
	3 [] Once a week or less	,
۴۵.	What is the total number of hours per week you spend on all your physical fitness activities together?	
	enter the number of hours	

69. In the past 7 days, how many times have you participated in each of the following activities alone, and how many times have you participated in each of the activities with others?

enter the number of times in each box

	alone	with others	
Spectator sports events			
Participant sports activities such as tennis, fishing, hunting, handball, golf			
Movies, concerts, shows, etc.			
Bars, night clubs, dancing			
Parties, picnics		<u> </u>	
Games such as checkers, chess, cardgames, monopoly, puzzles			
Visiting			
Pleasure drives			
Other recreational activities			
Watching television			
70. How many times in the last 30 days ha following people, to seek recreation	or entertair <i>enter</i>	the number of	
	times	in each box	
With family and/or friends living with you			
With relatives not living with you			
With friends not living with you			
Alone			

71.	How many times in the past 30 days have you left home temporarily to get away from others at home, for example, going for a walk or a drive?	
	enter the number of times	
72.	How many times have you bought gifts for people in the last 30 days?	
	enter the number of times	
73.	How many times in the last 30 days have you talked with a friend about a problem he or she was having?	
	enter the number of times	
74.	How many times in the last 30 days have you helped someone with a task, for example, moving furniture, painting a house, offered the use of your car, etc.?	
	enter the number of times	
75.	How many times in the past 30 days have you entertained others in your home, for example, having someone over for dinner or having a party?	
	enter the number of times	
76.	How many new acquaintances did you make in the last 30 days?	
	enter the number	
77.	How many hours in the last 30 days have you contributed to activities in the following categories?	÷
	activity categories enter the number of hours in each box	
	Religious, such as church council, Bible classes, etc., <u>not</u> regular worship services.	
	Civic, such as the Boy Scouts or JayCees, etc.	
	Fraternal, such as the Elks, Moose, etc.	
	Political	F T 7
•	Charitable, such as cancer fund committees, collecting for charities, etc.	

78.	Which of	the	following	activities	have	taken	place	in	the	last	6
	months?										

Г	\top	٦
L		ļ

check one box in each row

has	has not	activity
occurred	occurre	d
Ц	Ц	Acquired credit cards
		Chaired a committee
		Started a business
		Acquired a dependent
		Opened a savings acount
		Started an education/training program
		Acquired a pet
		Made a large purchase (over \$500)
		Opened a checking account
		Had a medical checkup
		Acquired a subordinate at work
		Began a new hobby
		Took out an insurance policy
		Invested money
		Had a dental checkup
		Started repair/remodeling your home
		Took out a loan

/9.	because of the death of a friend or relative?	
	enter the number of times	
80.	How many times in the last 6 months have you been emotionally upset because of the <u>serious</u> injury or illness of a friend or relative?	·
	enter the number of times	
81.	How many charitable organizations, for example, a cancer fund or	
	heart fund have you contributed to during the past 6 months?	**
	enter the number of organizations	

APPENDIX E

Response Distributions for Individual Life Activities Interview (LAI) Items (First 1501 STR Study Clients)

ITEM 1:	CURRE	NT OCCUPATION (15 Category Set)
<u>#</u>	<u>%</u>	
137	9	Professional, technical, and kindred workers.
181	12	Managers and administrators, except farm.
93	6	Sales workers.
51	3	Clerical and kindred workers.
323	22	Craftsmen and kindred workers.
51	3	Operatives, except transport.
92	6	Transport equipment operatives.
137	9	Laborers, except farm.
1	0	Farmers and farm managers.
3	0	Farm laborers and farm foremen.
129	9	Service workers, except private household.
0	0	Private household workers.
57	4	Student.
2	0	Housewife.
243	16	Not working.
1	0	No response.
ITEM 2.	0001101	STION (10 Catagony Sat)
		TION (10 Category Set)
<u>#</u>	<u>%</u>	
135	9	Professional (for example doctor, lawyer, college teacher, banker, engineer).
182	12	Manager (for example small businessman, administrator, farm manager, farmer, etc.).
140	9	Sales/Clerical/Communication (for example salesman, store clerk, secretary, telephone operator).

TUCH E (CONCINCA)	Item	2	(Continued)
-------------------	------	---	-------------

#	<u>%</u>	
448	30	Skilled labor/craftsman (for example plumber, mechanic, machinist, foreman, heavy equipment operator, heavy truck driver, etc.).
160	11	Unskilled labor (for example, construction labor, farm labor, factory worker, etc.).
133	9	Services work (for example, maid, janitor, waitress, waiter, gardener, etc.).
2	0	Teacher (elementary and secondary, <u>not</u> college).
2	0	Housewife.
56	4	Student.
243	16	Not working.

ITEM 3: HOURS WORKED PER WEEK

<u>#</u>	<u>%</u>	
267	18	0 hours.
34	2	1 to 20 hours.
668	45	21 to 40 hours.
521	35	More than 40 hours.

ITEM 4: PRIMARY INCOME SOURCE (Multiple Responses Possible)

Yes Responses

<u>#</u>	<u>%</u>	
1224	82	Earned Income.
98	7	Pensions, Social Security.
130	9	Support by others.
131	9	Public assistance.
65	4	No income.

```
ITEM 5: TOTAL MONTHLY FAMILY INCOME
 #
         %
 46
         3
                 None.
121
         8
                 Less than $250.
                 $251 - $500.
336
        22
                 $501 - $750.
247
        16
277
                 $751 - $1000.
        18
                 Over $1000.
474
        32
ITEM 6: NUMBER OF DAYS MISSED WORK LAST MONTH
 #_
         %
1020
        68
                 None.
 174
        12
                 1
                 2 - 3
 179
        12
 128
         8
                 4 or more.
ITEM 7: DAYS MISSED WORK - ILLNESS
 #_
         %
1356
        90
                 None.
  92
                 1 - 2
         6
  53
                 3 or more.
ITEM 8: DAYS MISSED WORK - ACCEPTABLE REASON
#
         %
1176
        78
                 None.
 230
        15
                 1 - 2
                 3 or more.
  95
         7
```

```
ITEM 9: DAYS MISSED WORK - PERSONAL REASONS
 #
         %
1428
        95
                 None.
  47
         3
                 1 - 2
  26
         2
                 3 or more.
ITEM 10: NUMBER TIMES "CHEWED-OUT" AT WORK LAST MONTH
 #
         %
1396
        93
                 None.
  80
         5
                 1 - 2
  25
         2
                 3 or more.
ITEM 11: NUMBER OF ARGUMENTS AT WORK LAST MONTH
         <u>%</u>
 #
1377
        92
                 None.
                 1 - 2
  55
  69
                 3 or more.
          HOW MANY ARGUMENTS AT WORK INVOLVED PHYSICAL
ITEM 12:
          INJURY
         %
 #
1500
       100
                 None.
   1
         0
                 1
ITEM 13: HAS PRIMARY INCOME SOURCE CHANGED IN THE LAST
          SIX MONTHS
  #_
         %
```

428

1071

29

71

Yes

No

ITEM 14: HAS THE CHANGE BEEN

<u>#</u> <u>%</u>

206 49 Generally good or favorable.

57 13 Neither favorable or unfavorable.

159 38 Generally bad or unfavorable.

(Item answered by 422 of clients indicating that source had changed.)

ITEMS 15-17: CHANGE IN AMOUNT OF MONTHLY INCOME

<u>#</u> <u>%</u>

530 35 Increased.

711 47 Remained the same.

260 17 Decreased.

ITEM 18: HOW MANY TIMES HAVE YOU QUIT A JOB IN THE LAST SIX MONTHS

%

1342 89 None.

138 9 1

21 2 2 or more.

ITEM 19: TIMES QUIT WITH NEW JOB LINED UP

%

1420 95 None.

73 5 1

3 0 2 or more.

```
ITEM 20: QUIT WITH NO JOB LINED UP
       <u>%</u>
 #_
1420
        95
                None.
  74
         5
                1
   7
         0
                2 or more.
ITEM 21: NUMBER OF DISCHARGES FROM JOB IN LAST SIX MONTHS
        <u>%</u>
 #_
1291 86
                None.
191
      13
                1
 19
      1
                2 or more.
ITEM 22: DISCHARGES RESULTING FROM DWI ARREST
        %
 #
1481
        99
                None.
  19
     1
                1
 . 1
       0
                2 or more.
ITEM 23: DISCHARGES RESULTING FROM STRIKES OR LAYOFFS
 #
         %
1350
       90
                None.
        9
                1
138
  13
         1
                2 or more.
ITEM 24: DISCHARGES FOR POOR WORK PERFORMANCE
        %
 #
1466
      98
                None.
  34
       2
                1
```

2 or more.

1

ITEM 25: HAVE YOU BEEN PROMOTED OR ASSIGNED ADDITIONAL RESPONSIBILITIES IN THE LAST SIX MONTHS

%

370 25 Yes.

1081 74 No.

TRAINING TO IMPROVE JOB SKILLS IN THE LAST SIX MONTHS

%

343 23 Yes.

1153 77 No.

ITEM 27: HOW MUCH TIME WAS INVOLVED IN THIS TRAINING

%

32 9 9 hours or less.

32 9 10 - 20 hours.

124 36 20 - 75 hours.

156 45 More than 75 hours.

(This item was answered by 344 of individuals responding yes to item 26.)

ITEM 28: HAVE YOU RECEIVED BONUSES FOR GOOD WORK PERFORMANCE IN THE LAST SIX MONTHS

<u>#</u> %

372 25 Yes.

1092 75 No.

ITEM 29: ARE YOU TAKING DRUGS FOR TEMPORARY PHYSICAL CONDITIONS

%

96 6 Yes.

1402 94 No.

ITEM 30: ARE YOU TAKING DRUGS FOR CHRONIC PHYSICAL CONDITIONS

%

184 12 Yes.

1314 88 No.

ITEM 31: HOW LONG HAVE YOU BEEN TAKING A DRUG FOR CHRONIC PHYSICAL CONDITIONS

<u>#</u> %

13 7 1 month or less.

53 29 1 month to 1 year.

114 63 More than 1 year.

ITEM 32: ARE YOU TAKING DRUGS FOR TENSION, DEPRESSION, NERVOUSNESS, ETC.

%

94 6 Yes.

1406 94 No.

ITEM 33: HOW LONG HAVE YOU BEEN TAKING A DRUG FOR TENSION, ETC.

%

15 16 1 month or less.

33 36 1 month to 1 year.

44 48 More than 1 year.

ITEM 34: ARE YOU TAKING DRUGS OTHER THAN ALCOHOL TO PRODUCE "HIGHS"

<u>%</u>
161 11 Yes.
1340 89 No.

ITEM 35: HOW LONG HAVE YOU BEEN TAKING A DRUG TO PRODUCE "HIGHS"

%
 6 4 1 month or less.
 3 2 1 month to 1 year.
 147 94 More than 1 year.

ITEM 36: HOW MANY DIFFERENT MEDICINES AND DRUGS ARE YOU CURRENTLY TAKING

ITEM 37: HOW MANY HOURS SLEEP PER NIGHT DID YOU AVERAGE LAST WEEK

<u>%</u>

130 9 3 - 5 hours.

1310 87 6 - 9 hours.

61 4 10 or more hours.

ITEM 38.a: NUMBER OF DAYS WITH DIGESTIVE PROBLEMS

<u>#</u> <u>%</u>

1376

92 None.

50 3 1

75 5 2 or more.

ITEM 38.b: NUMBER OF DAYS WITH HEADACHES

%

1283 86 None.

132 9 1

86 6 2 or more.

ITEM 38.c: NUMBER OF DAYS WITH SLEEP PROBLEMS

<u>#</u> %

1317 88 None.

80 5 1

104 7 2 or more.

ITEM 38.d: NUMBER OF DAYS WITH NERVOUSNESS

<u>#</u> <u>%</u>

1235 82 None.

95 6 1

171 11 2 or more.

ITEM 38.e: NUMBER OF DAYS WITH FATIGUE OR WEAKNESS

<u>#</u> <u>%</u>

1329 89 None.

77 5 1

95 6 2 or more.

```
ITEM 38.f: NUMBER OF DAYS WITH MUSCULAR ACHES
         %
  #
1240
        83
                None.
 104
     7
                1
 157
        10
                2 or more.
ITEM 38.g: NUMBER OF DAYS WITH ALLERGIES, ASTHMA, ETC.
        <u>%</u>
 #
1377
        92
                None.
  24
        2
                1
 100
         7
                2 or more.
ITEM 38.h: NUMBER OF DAYS WITH COLDS, FLU, ETC.
         %
 #
1328
        88
                None.
 25
     2
                1
 148
        10
               2 or more.
ITEM 38.1: NUMBER OF HEALTH PROBLEMS MONDAY
 #_
        %
 976
        65
                None.
 327
       22
                1
 198
        13
               2 or more.
ITEM 38.j: NUMBER OF HEALTH PROBLEMS TUESDAY
 #
        %
 992
        66
                None.
 346
       23
                1
                2 or more.
       11
 163
```

```
ITEM 38.k: NUMBER OF HEALTH PROBLEMS WEDNESDAY
 #
         %
1017
        68
                None.
 320
        21
                1
 164
        11
                2 or more.
ITEM 38.1: NUMBER OF HEALTH PROBLEMS THURSDAY
         %
 #_
1038
        69
                None.
               1
 302
        20
 161
        11
               2 or more.
ITEM 38.m: NUMBER OF HEALTH PROBLEMS FRIDAY
       <u>%</u>
#_
1054
       70
               None.
                1
 305
        20
 142
        10
             2 or more.
ITEM 38.n: NUMBER OF HEALTH PROBLEMS SATURDAY
  #_
         %
        71
1062
                None.
 297
        20
                1
               2 or more.
 142
        9
ITEM 38.0: NUMBER OF HEALTH PROBLEMS SUNDAY
         %
  #_
1039
       69
                None.
        20
 300
                1
                2 or more.
 162
        11
```

```
NUMBER OF MEDICAL VISITS LAST MONTH FOR
ITEM 39.a:
            ALCOHOL RELATED PROBLEMS
  #
         %
1468
        98
                 None.
  33
         2
                 1 or more.
            NUMBER OF MEDICAL VISITS LAST MONTH FOR CHRONIC
ITEM 39.b:
             PHYSICAL CONDITIONS
  #
         %
1448
        96
                 None.
  53
         4
                 1 or more.
            NUMBER OF MEDICAL VISITS LAST MONTH FOR
ITEM 39.c:
             ACCIDENTS OR INJURIES
         %
  #
1427
        95
                 None.
  74
         5
                 1 or more.
            NUMBER OF MEDICAL VISITS LAST MONTH FOR
ITEM 39.d:
             TEMPORARY ILLNESSES
  #_
         %
1402
        93
                 None.
  99
         7
                 1 or more.
            NUMBER OF MEDICAL VISITS LAST MONTH FOR
ITEM 39.e:
             REGULAR CHECKUPS
  #
         %
1400
        93
                 None.
 101
         7
                 1 or more.
```

```
ITEM 40: HOW MANY DAYS WERE YOU ILL LAST MONTH
```

<u>%</u>
1246 83 None.

133 9 1 - 2.

122 8 3 or more.

ITEM 42: HAVE YOU VOLUNTARILY SOUGHT PSYCHIATRIC OR PSYCHOLOGICAL HELP IN THE LAST SIX MONTHS

<u>#</u># <u>%</u>

41 3 Yes.

1457 97 No.

ITEM 43: WAS THE PSYCHIATRIC HELP FOR ALCOHOL PROBLEMS

<u>#</u> <u>%</u>

19 1 Yes.

1395 99 No.

ITEM 43.a: NUMBER OF BEERS DRUNK LAST WEEK

%

469 31 None.

438 29 1 - 6.

379 25 7 - 18

215 14 19 or more.

ITEM 43.b: NUMBER OF DRINKS OF LIQUOR DRUNK LAST WEEK

<u>#</u> <u>%</u>

1115 74 None.

196 13 1 - 6.

190 13 7 or more.

```
ITEM 43.c: NUMBER OF GLASSES OF WINE DRUNK LAST WEEK
 #
         %
1349
        90
                None.
                1 - 6
 130
         9
  22
         1
                7 or more.
ITEM 43.d: NUMBER OF DRINKS LAST MONDAY
  #_
         %
1033 69
                None.
 423
        28
                1 - 6
        3
  45
                7 or more.
ITEM 43.e: NUMBER OF DRINKS LAST TUESDAY
 #
         %
1075
        72
                None.
                1 - 6
 375
        25
  51
                7 or more.
        3
ITEM 43.f: NUMBER OF DRINKS LAST WEDNESDAY
 #
         %
1071
       71
                None.
                1 - 6
 388
        26
  42
                7 or more.
         3
ITEM 43.g: NUMBER OF DRINKS LAST THURSDAY
1091
        73
                None.
                1 - 6
 367
        24
  43
                7 or more.
```

```
ITEM 43.h: NUMBER OF DRINKS LAST FRIDAY
```

<u>%</u>
914 61 None.
386 26 1 - 6

201 13 7 or more.

ITEM 43.i: NUMBER OF DRINKS LAST SATURDAY

<u>%</u>
786 52 None.
428 28 1 - 6
287 19 7 or more.

ITEM 43.j: NUMBER OF DRINKS LAST SUNDAY

<u>%</u>
917 61 None.
477 32 1 - 6
107 7 7 or more.

ITEM 44: HOW MANY TIMES LAST MONTH DID YOU DRIVE AFTER HAVING 3 OR 4 DRINKS

%
888 59 None.
231 15 1
382 25 2 or more.

ITEM	45: WHAT OCCAS	IS YOUR LARGEST NUMBER OF DRINKS ON ONE
<u>#</u>	<u>%</u>	
<u>#</u> 196	13	None
		None.
609	41	1 - 6
516	34	7 - 12
180	12	13 or more.
ITEM	46: HOW M	
<u>#</u>	<u>%</u>	
1487	99	None.
14	1	1 or more.
ITEM	47: HOW M BECAU	
<u>#</u>	<u>%</u>	
1486	99	None.
15	1	1 or more.
ITEM	48: WHERE	DID YOU DO MOST OF YOUR DRINKING LAST MONTH
<u>#</u>	<u>%</u>	
664	51	At home.
646	49	Away from home.
ITEM	49: HOW M	ANY TIMES LAST MONTH HAVE YOU BEEN DRUNK
#_	<u>%</u>	
957	64	None.
374	25	1 - 2
170	11	3 or more.

ITEM		MANY TIMES LAST MONTH WERE YOU DRUNK FOR
		L THAT ONE DAT
#	<u>%</u>	
1465	98	None.
36	. 2	1 or more.
ITEM	51: HOW	MANY BLACKOUTS DID YOU HAVE LAST MONTH
<u>#</u>	<u>%</u>	
1410	94	None.
91	6	1 or more.
ITEM		MANY TIMES LAST MONTH DID YOU GET AWAY WITH
	DWI	
#	<u>%</u>	
1248	83	None.
173	12	1 - 2
80	5	3 or more.
ITEM	53: CUR	RENT MARITAL STATUS
#	<u>%</u>	
410	27	Never married.
205	14	Divorced.
131	9	Separated.
723	48	Married.
30	2	Widowed.
ITEM	54: HAS	MARITAL STATUS CHANGED IN THE LAST SIX MONTHS
<u>#</u>	<u>%</u>	<i>y</i>
- 86	6	Yes.

No.

ITEM	55: WHAT	WAS MARTIAL	STATUS	PRIOR	TO	THE	CHANGE
#	<u>%</u>						
16	18	Never marr	ied.				
10	11	Divorced.	÷				

Separated.

49 54 Married.

17

15

ITEM 56: HOW MANY PEOPLE ARE YOU CURRENTLY LIVING WITH

%
239 16 None.
286 19 1
881 59 2 - 5
95 6 6 or more.

ITEM 57: HAS THE NUMBER OF COHABITORS CHANGED IN THE LAST SIX MONTHS

<u>%</u>
332 22 Yes.
1165 78 No.

ITEM 58: HOW MANY PEOPLE WERE YOU LIVING WITH BEFORE THE CHANGE

%
34 10 None.
81 24 1
174 52 2 - 5
46 14 6 or more.

ITEM	59: NUM	BER OF DEPENDANTS	
#	<u>%</u>		
558	37	None.	
231	15	1	
223	15	2	
205	14	3	
284	19	4 or more.	
ITEM	60: HOW	MANY PEOPLE DO YOU PRESENTLY TAKE CARE	<u>0</u> F
<u>#</u>	<u>%</u>		
982	66	0	
141	9	1	
136	9	2	,
99	7	3	
143	9	4 or more.	
ITEM	61: DO THE	YOU HAVE THE RESPONSIBILITY OF CARING FO SE PEOPLE WITH ONE OR MORE OTHERS	<u>) R</u>
#	<u>%</u>		
473	40	Yes.	
721	60	No.	
ITEM	62: HOW	MANY CLOSE FRIENDS DO YOU HAVE	
<u>#</u>	<u>%</u>		
	11	None.	
147	10	1	

```
Item 62 (Continued)
  #
         %
 225
        15
                 3
 214
        14
 535
        36
                 5 or more.
ITEMS 63 - 65: CHANGES IN NUMBER OF CLOSE FRIENDS IN
                 LAST SIX MONTHS
 #_
         <u>%</u>
 147
        10
               Increased.
1308
        87
                 Remained the same.
  40
         3
                 Decreased.
ITEM 66: DO YOU ENGAGE IN A FORM OF PHYSICAL FITNESS
          ACTIVITY
 #_
         <u>%</u>
 582
        39
                 Yes.
 916
        61
                 No.
ITEM 67: HOW OFTEN DO YOU ENGAGE IN PHYSICAL FITNESS
```

TIEM		W OLIEN DO	100	ENGAGE	TM	PHISICAL	LTIME22
	AC	CTIVITIES					
#	<u>%</u>						
128	22	Every	day.				

Several times a week.

Once a week or less. 136 23

323

55

ITEM 68: TOTAL NUMBER OF HOURS PER WEEK SPENT ON PHYSICAL FITNESS ACTIVITIES

<u>#</u>	<u>%</u>	
876	58	None.
250	17	1 - 5
335	22	6 or more.
40	3	No response.

ITEM 69.a: TIMES INVOLVED IN SPECTATOR SPORTS ACTIVITY

<u>Alone</u>			With Others			
<u>#</u>	<u>%</u>		<u>#</u>	<u>%</u>		
1476	98	None.	1266	84	None.	
25	2	1 or more.	235	16	1 or more.	

ITEM 69.b: TIMES INVOLVED IN PARTICIPANT SPORTS ACTIVITY

Alone			With Others			
<u>#</u>	<u>%</u>		<u>#</u>	<u>%</u>		
1434	96	None.	825	55	None.	
67	4	1 or more.	676	45	1 or more.	

ITEM 69.c: TIMES ATTENDED MOVIES, CONCERTS, ETC.

<u>Alone</u>			<u>With Others</u>			
<u>#</u>	<u>%</u>		<u>#</u>	<u>%</u>		
1460	97	None.	1060	71	None.	
. 41	3	1 or more.	441	29	1 or more.	

ITEM 69.d: TIMES WENT TO BARS, NIGHT	CLUBS.	DANCING
--------------------------------------	--------	---------

<u>Alone</u>			With Others			
#	<u>%</u>	100	<u>#</u>	<u>%</u>		
1353	90	None.	1031	69	None.	
148	10	1 or more.	470	31	1 or more.	

ITEM 69.e: TIMES ATTENDED PARTIES, PICNICS

Alone			With Others			
#	<u>%</u>		<u>#</u>	<u>%</u>		
1483	99	None.	1110	74	None.	
18	1	1 or more.	391	26	1 or more.	

ITEM 69.f: TIMES INVOLVED IN GAMES, ETC.

Alone			With Others			
. <u>#</u>	<u>%</u>		<u>#</u>	<u>%</u>		
1471	98	None.	912	61	None.	
30	2	l or more.	589	39	1 or more.	

ITEM 69.g: TIMES GONE VISITING

	Alon	<u>e</u>		With Others	
<u>#</u>	<u>%</u>		<u>#</u>	<u>%</u>	
1042	70	None.	814	54	None.
459	30	1 or more.	687	46	1 or more.

ITEM 69.h: TIMES GONE ON PLEASURE DRIVES

<u>Alone</u>			With Others		
<u>#</u>	<u>%</u>		<u>#</u> .	<u>%</u>	
1414	94	None.	1113	74	None.
87	6	1 or more. 185	388	26	1 or more.

ITEM 69.1: TIMES	PARTICIPATED	IN OTHER	RECREATION

<u>Alone</u>			<u>With Others</u>			
<u>#</u>	<u>%</u>		<u>#</u>	<u>%</u> .		
995	66	None.	336	22	None.	
506	34	1 or more.	1165	78	1 or more.	

ITEM 69.j: TIMES SPENT WATCHING TELEVISION

	Alone	•		With Others		
<u>#</u>	<u>%</u>		<u>#</u>	%		
1367	91	None.	1234	82	None.	
134	9	1 or more.	267	18	1 or more.	

ITEM 70.a: TIMES LEFT HOME LAST MONTH FOR RECREATION OR ENTERTAINMENT WITH FAMILY OR COHABITORS

<u>%</u>
560 37 None.
941 63 1 or more.

ITEM 70.b: TIMES LEFT HOME LAST MONTH FOR RECREATION OR ENTERTAINMENT WITH RELATIVES WHO DO NOT LIVE WITH YOU

<u>%</u>
1003 67 None.
498 33 1 or more.

ITEM 70.c: TIMES LEFT HOME LAST MONTH FOR RECREATION OR ENTERTAINMENT WITH FRIENDS WHO DO NOT LIVE WITH YOU

<u>%</u>
499 33 None.
1002 67 1 or more.

ITEM 70.d: TIMES LEFT HOME ALONE LAST MONTH FOR RECREATION OR ENTERTAINMENT

%

837 56 None.

664 44 1 or more.

ITEM 71: HOW MANY TIMES LAST MONTH DID YOU LEAVE HOME TO GET AWAY FROM OTHERS

<u>#</u> %

1162 77 None.

339 23 1 or more.

ITEM 72: HOW MANY TIMES LAST MONTH DID YOU BUY GIFTS FOR PEOPLE

%

673 45 None.

828 55 1 or more.

ITEM 73: HOW MANY TIMES LAST MONTH DID YOU TALK WITH A FRIEND ABOUT A PROBLEM HE WAS HAVING

%

723 48 None.

778 52 1 or more.

ITEM 74: HOW MANY TIMES LAST MONTH DID YOU HELP SOMEONE WITH A TASK

<u>#</u> %

427 28 None.

560 37 1 - 2.

514 34 3 or more.

ITEM 75: HOW MANY TIMES LAST MONTH DID YOU ENTERTAIN OTHERS IN YOUR HOME

%
622 41 None.
446 30 1 - 2.
433 29 3 or more.

ITEM 76: HOW MANY NEW ACQUAINTANCES DID YOU MAKE LAST MONTH

%
579 39 None.
259 17 1 - 2
301 20 3 - 5
362 24 6 or more.

ITEM 77.a: HOW MANY HOURS LAST MONTH DID YOU CONTRIBUTE TO RELIGIOUS ACTIVITIES

<u>%</u>
1392 93 None.
109 7 1 or more.

ITEM 77.b: HOW MANY HOURS LAST MONTH DID YOU CONTRIBUTE CONTRIBUTE TO CIVIC ACTIVITIES

<u>%</u>
1410 94 None.
91 6 1 or more.

ITEM 77.c: HOW MANY HOURS LAST MONTH DID YOU CONTRIBUTE TO FRATERNAL ACTIVITIES

<u>#</u> <u>%</u>

1399 93 None.

102 7 1 or more.

ITEM 77.d: HOW MANY HOURS LAST MONTH DID YOU CONTRIBUTE TO POLITICAL ACTIVITIES

<u>#</u> %

1468 98 None.

33 2 1 or more.

ITEM 77.e: HOW MANY HOURS LAST MONTH DID YOU CONTRIBUTE TO CHARITABLE ACTIVITIES

<u>#</u> <u>%</u>

1448 96 None.

53 4 1 or more.

ITEM 78. NUMBER OF LISTED ACTIONS (MAX = 17)

<u>#</u> %

225 15 None.

296 20 1

284 19 2

237 16 3

166 11 4

119 8 5

174 12 6 or more

ITEM 79: HOW MANY TIMES IN THE LAST MONTH HAVE YOU FELT A PERSONAL LOSS BECAUSE OF THE DEATH OF A FRIEND OR RELATIVE.

<u>%</u>
1172 78 None.
329 22 1 or more.

ITEM 80: HOW MANY TIMES IN THE LAST MONTH HAVE YOU BEEN EMOTIONALLY UPSET BECAUSE OF THE SERIOUS INJURY OR ILLNESS OF A FRIEND OR RELATIVE

<u>%</u>
1159 77 None.
342 23 1 or more.

ITEM 81: HOW MANY CHARITABLE ORGANIZATIONS HAVE YOU CONTRIBUTED TO IN THE LAST SIX MONTHS

%
699 47 None.
383 26 1
285 19 2 - 3
134 9 4 or more.

APPENDIX F

Summary of LAI Interview Factor Analysis on Data From First 1501 STR Clients

TABLE F-1. LAI FACTORS FROM ITERATIVE ANALYSIS

	I	II	III	ΙV	V
1	0.3084	0.5383	-0.1055	-0.0807	-0.4201
2	-0.1414	-0.3020	0.0813	0.1212	0.3136
2 3 4 5 6 7	-0.1949 -0.0717	-0.4346	0.0750	0.1108	0.2726
5	-0.0306	0.3004 0.2988	0.1834 0.0917	-0.0227 -0.0082	-0.0500
6	0.0462	-0.2449	-0.1802	0.0578	-0.0034 -0.1200
7	0.1090	0.2191	-0.0561	-0.0512	-0.0965
8	0.1474	0.0643	-0.0498	-0.0341	-0.0146
9	0.0763	-0.1710	-0.0465	-0.0797	0.0820
10	0.1254	-0.1185	-0.0108	-0.0898	0.1217
11	0.0237	-0.0365	-0.0478	-0.0506	0.0888
12	-0.3415	-0.5774	0.1205	0.0362	0.1015
13	-0.0259	0.0912	0.0470	0.1630	-0.1823
14	0.0157	-0.0432	-0.2016	-0.2461	0.0663
15	0.0916	-0.0618	-0.1640	-0.3701	0.1419
16	-0.0517	-0.0056	0.1234	0.0906	-0.0698
17	0.1895	-0.0344	-0.1866	-0.3155	0.0584
18	0.2445	0.0998	-0.1543	-0.4662	0.1639
19 20	0.0498 0.7391	-0.0221 -0.2251	-0.1029	-0.3356	0.1223
21	0.5697	-0.0233	0.5008 0.1958	0.0810 -0.0907	-0.0297 0.0551
22	0.6428	-0.0645	0.3006	0.0127	0.0057
23	0.6500	0.0347	0.1103	-0.1126	0.0874
24	0.3359	0.0233	0.0726	-0.1937	0.1082
25	0.4964	0.0438	0.1362	-0.1282	0.0897
26	-0.0895	0.0094	0.0665	-0.0017	-0.0728
27	-0.1555	-0.0801	0.2793	-0.2901	-0.2781
28	-0.2317	0.0277	0.1374	0.0059	-0.0300
29	0.1091	-0.2310	-0.1686	0.1340	-0.0784
30	0.0580	-0.0671	-0.0950	0.0220	-0.0184
31	0.1394	-0.2016	-0.2692	0.1304	-0.2480
32 33	0.1329 0.0682	-0.2191	-0.1832	0.1203	-0.2453
34	0.4253	-0.0056 -0.2078	-0.1525 -0.2942	-0.0002 0.2899	-0.0526 -0.0600
35	0.1783	0.1008	-0.0952	-0.1027	-0.0578
36	0.0580	-0.3283	-0.2366	-0.0269	-0.1517
37	0.3020	-0.2479	-0.3260	-0.0077	-0.0358
38	0.3100	-0.1854	-0.3036	-0.0532	-0.2045
39	0.2001	-0.3109	-0.2313	0.0655	-0.2077
40	0.1840	-0.2926	-0.2633	-0.0157	-0.1509
41	-0.0672	-0.2755	-0.0855	-0.0764	-0.1499
42	0.0126	-0.4694	-0.2456	-0.0807	-0.0873
43	0.0608	-0.0832	-0.1076	-0.0560	-0.0304
44	0.1607	-0.1382	-0.1762	-0.1191	-0.0304
45 46	-0.1470 -0.4449	-0.3560 -0.2607	-0.0885 0.3982	-0.1062 -0.3749	-0.0788 -0.3074

Table F-1 continued on next page.

Table F-1. LAI Factors from Iterative Analysis (Continued)

Var.	I	II	III	ΙV	V
47 48 49 50 51 52 53 54 55 57	0.0227 -0.3203 0.2039 0.5102 0.6023 0.4224 0.1497 -0.3551 0.3291 0.4684 -0.0131	-0.0988 -0.6070 0.0389 -0.2431 -0.2701 -0.1066 0.0971 -0.2160 0.0924 -0.0458 -0.3410	-0.0384 0.1500 -0.2039 0.3390 0.4078 0.3197 -0.1722 0.3714 -0.3057 0.0462 0.0520	-0.2410 0.0795 -0.6393 0.0036 0.0995 0.0699 0.0518 -0.4070 0.1434 0.0822 -0.1912	0.1719 0.3990 0.2171 -0.0382 -0.0397 -0.0640 0.1299 -0.2288 0.2269 0.1132 -0.3891

TABLE F-2. VERIMAX FACTORS OF THE LAI

Var.	I	ΙΙ	III	ΙV	V
1234567890112345678901123456789012334567890	0.0795 -0.0036 -0.0280 -0.0177 -0.0311 -0.0188 0.0148 0.0726 0.1242 0.0042 -0.1044 -0.0249 0.0043 0.0222 0.0639 0.1061 -0.09169 0.5797 0.7018 0.5903 0.3151 0.4766 -0.0424 0.0263 -0.0263 -0.0263 -0.0381 -0.0363 -0.0363 -0.0363 -0.0368 -0.0364 0.0254 0.0368	-0.7527 0.4762 0.5598 -0.1814 -0.1836 0.06255 -0.1152 0.0903 0.0476 0.0150 -0.0150 -0.0168 0.0259 -0.1847 -0.0221 0.0233 -0.1847 -0.0233 -0.1847 -0.0886 -0.1854 -0.0886 -0.1854 -0.0511 0.0689 0.0743 0.0743 0.0743 0.0743 0.0743 0.0746 0.074	-0.0156 -0.0234 0.0667 -0.2916 -0.2468 0.3283 -0.02468 0.0115 0.0492 0.01616 0.0930 0.0565 -0.0299 -0.0299 -0.0327 -0.0327 -0.0346 -0.0541 -0.1422 0.1229 0.4411 0.3180 0.1229 0.44573 0.4789	-0.0396 -0.0592 0.0706 -0.0215 0.0706 -0.0486 -0.0699 -0.0394 -0.0455 0.0262 -0.0455 0.0739 -0.0486 0.0379 0.0242 -0.0486 0.0379 -0.0537 -0.1798 -0.0535 -0.0535 -0.0684 -0.0535 -0.0684 -0.0684 -0.0682 -0.0160	-0.0663 0.0044 -0.0002 -0.0937 -0.0513 -0.0158 0.0207 0.0568 0.1410 0.1588 0.1088 -0.2380 0.3015 0.4389 -0.2380 0.3793 0.5377 0.3731 -0.0961 0.1333 0.0992 0.2000 0.2377 0.1802 -0.0647 0.0217 -0.0999 -0.0566 0.0181 -0.0904 -0.1071 0.0370 -0.0677 0.1610 0.1185 -0.0126
40 41 42 43 44 45 46	0.0571 -0.0564 -0.0387 0.0061 0.0614 -0.1057 -0.1149	0.0016 0.0965 0.2072 -0.0128 -0.0339 0.2121 0.1602	0.4482 0.2640 0.4694 0.1378 0.2312 0.2606 -0.0793	-0.0219 0.1799 0.0946 -0.0065 -0.0289 0.2050 0.7837	0.0847 0.0386 0.1459 0.0838 0.1785 0.0873

Table F-2 continued on next page.

Table F-2. Verimax Factors of the LAI (Continued)

Var.	I	II	III	IV	V
47 48 49 50 51 52 53	0.0234 -0.0535 0.0596 0.6448 0.7624 0.5360 0.0175 -0.0607 0.0976 0.4225	0.1013 0.8018 -0.1448 0.0555 0.0778 -0.0167 -0.0689 0.1319 -0.0783 -0.0293	-0.0111 0.0392 -0.0147 0.1068 0.1181 0.0279 0.0235 -0.1071 0.1150 0.0805	0.0259 0.0970 0.0156 0.0711 0.0324 0.0361 -0.2626 0.6987 -0.4900 -0.2354	0.2963 0.0483 0.7180 -0.0211 -0.1059 -0.1063 0.0807 0.0894 0.1153 0.0442

TABLE F-3. VERIMAX TRANSFORMATION MATRIX

	I	II	III	ΙV	V
I	0.8209	-0.3240	0.2586	-0.3571	0.1635
11	-0.1850	-0.7003	-0.6256	-0.2789	-0.0785
111	0.5387	0.2104	-0.5745	0.4900	-0.3087
I۷	-0.0005	0.2051	0.0981	-0.4992	-0.8361
٧	0.0411	0.5642	-0.4494	-0.5526	0.4156

TABLE F-4. PROMAX FACTORS OF THE LAI

Var.	I	11	III	ΙV	V
123456789012345678901234567890123456 11111111111222222222333333333444344444444	-0.0197 0.0517 0.0497 0.0120 -0.0303 -0.0282 -0.0337 0.0447 0.0845 -0.0207 0.0301 0.0213 -0.0501 -0.0494 -0.0824 0.8908 0.4539 0.2267 0.3746 -0.0533 -0.0553 -0.0219 -0.0111 -0.0462 0.0219 -0.0134 -0.0219 -0.0134 -0.0219 -0.0134 -0.0219 -0.01066 0.0338 -0.0551 -0.0250 -0.0668 -0.0603	-0.7207 0.4709 0.5239 -0.1678 -0.1531 0.0160 -0.2375 -0.0907 0.1273 0.0696 0.5027 -0.1579 0.0074 -0.0457 -0.0667 0.0362 0.0503 -0.0373 -0.0809 -0.0373 -0.0388 -0.0319 -0.1253 0.0321 0.0388 -0.0319 -0.1253 0.0321 0.0326 -0.1713 -0.0503 -0.0261 -0.1049 -0.0168 -0.0261 -0.0326 0.1479 -0.0133 -0.0237	0.0574 -0.0742 -0.0742 -0.0124 -0.2606 -0.2222 0.3208 -0.0256 0.0298 0.0835 0.0216 0.0345 0.0334 -0.0349 -0.0498 -0.0183 -0.0195 -0.0627 -0.0627 -0.0627 -0.0627 -0.0627 -0.0224 -0.0250 -0.1268 0.3041 0.4165 0.4468 0.4026 0.1352 0.4364 0.0599 0.4111 0.4081 0.4081 0.4081 0.4081 0.4323 0.2173 0.2486 -0.0484	0.0230 -0.0980 -0.0977 0.0775 -0.0109 -0.0228 -0.0488 -0.0039 -0.0239 -0.0396 0.2030 0.0176 0.0519 0.0519 0.0590 0.0241 0.0732 0.0714 -0.0240 -0.0166 -0.1041 -0.024 -0.0463 0.5165 0.1323 -0.0478 -0.0588 -0.0478 -0.0588 -0.0073 -0.0588 -0.0136 0.0136 0.0136 -0.0136 -0.1677 0.0835 -0.0136 0.017562	-0.0040 -0.0372 -0.0533 -0.0391 -0.0082 -0.0577 0.0437 0.0568 0.1155 0.1391 0.0910 -0.2240 0.2907 0.1419 0.3675 0.3731 -0.1248 -0.0024 0.1883 0.2379 0.1785 -0.0520 0.0760 -0.1042 0.0044 -0.1365 -0.1480 0.0171 0.0973 0.0724 -0.0973 0.0724 -0.0973 0.0724 -0.0603 0.0542 0.0603

Table F-4 continued on next page.

Table F-4. Promax Factors of the LAI (Continued)

Var.	I	II	III	ΙV	V
47 48 49 50 51 52 53 54 55 56	-0.0232 0.0639 -0.1166 0.6279 0.7528 0.5327 -0.0603 0.0768 -0.0415 0.3372 0.1157	0.1465 0.7536 -0.0132 0.0636 0.0830 -0.0113 -0.0090 0.0314 0.0207 0.0358 -0.1155	-0.0379 -0.0365 -0.0428 0.0662 0.0708 0.0048 0.0113 -0.0851 0.0845 0.0427 0.3514	0.0461 0.0297 0.0976 0.1071 0.0670 0.0638 -0.2457 0.6855 -0.4622 -0.1983 0.4341	0.2867 -0.0173 0.7231 -0.0427 -0.1340 -0.1125 0.0649 0.1373 0.0730 0.0147 -0.0027

TABLE F-5. PROMAX TRANSFORMATION MATRIX

	I	II	III	I.V	٧
I	0.9460	0.0609	-0.0602	0.0684	-0.0153
11	0.1372	0.9604	-0.1008	-0.0834	-0.0846
111	-0.0690	-0.1225	0.9902	-0.0078	-0.1133
ΙV	0.1836	-0.1718	0.0510	0.9899	0.0673
٧	-0.2186	0.1716	-0.0558	0.0917	0.9875

APPENDIX G

Comparison of PAS and LAI Scale Scores Between Initial and 6 Month Follow-Up Interviews

TABLE G-1. SUMMARY OF UNWEIGHTED SALIENT LAI FACTOR SCORES FOR INITIAL CLIENT INTERVIEWS CURRENTLY IN THE STR MASTER FILE

		Alcohol Use	Income/ Employment	Socializa- tion	Fam/Marital Status	Physical Health	N
ALL CITES	Mean	- 6.45	- 2.66	- 1.17	-62.85	5.90	0040
ALL SITES	SD	(68.06)	(67.11)	(55.28)	(55.33)	(69.80)	2943
Denver		- 1.42	- 8.38	1.07	-61.52	- 3.16	206
Fairfax		2.97	28.98	19.86	-49.10	- 5.63	506
Kansas City		-18.86	-14.34	-10.75	-76.77	15.23	304
Hennepin Count	Hennepin County		7.18	25.67	-72.62	-10.42	156
New Orleans		-33.87	- 3.97	-17.97	-58.41	20.99	257
Phoenix		51.72	-38.34	10.74	-51.73	27.62	357
San Antonio		-13.34	2.62	-34.04	-54.41	-20.10	217
South Dakota		5.78	- 9.23	-13.23	-76.09	-22.15	153
New Hampshire		.33	4.00	5.14	-69.84	26.09	202
Oklahoma City		- 52.79	3.80	-18.36	-71.15	12.59	299
Tampa		-14.09	-13.70	.65	-71.54	4.63	286

		Alcohol Use	Income/ Employment	Socializa- tion	Fam/Marital Status	Physical Health	N
ALL SITES	Mean	- 3.74	- 1.74	14	-29.15	3.17	
ALL SITES	SD	(42.30)	(39.86)	(22.24)	(34.30)	(35.04)	2943
Denver		- 1.12	- 5.62	1.22	-28.78	59	206
Fairfax		3.81	16.87	8.32	-22.13	- 3.16	506
Kansas City		-11.62	- 9.39	- 4.21	-35.65	8.67	304
Hennepin Count	y ·	- 8.67	3.88	11.02	-36.83	- 4.93	156
New Orleans		-20.14	- 1.84	- 7.28	-25.50	9.00	257
Phoenix		29.43	-23.27	5.09	-23.70	14.05	357
San Antonio		- 8.60	1.87	-13.85	-21.89	-10.11	217
South Dakota		2.87	- 4.33	- 5.27	-37.00	-10.48	153
New Hampshire		1.87	2.06	2.64	-34.78	13.57	202
Oklahoma City		-33.35	2.31	- 7.23	-32.83	6.66	299
Tampa		- 7.45	- 8.10	.62	-34.35	3.27	286

TABLE G-3. COMPARISONS OF INITIAL INTERVIEW AND 6 MONTH FOLLOW-UP INTERVIEW LAI SCALE SCORES FOR 350 STR CLIENTS ASSIGNED TO ONE OR MORE STR TREATMENT ALTERNATIVES.

	LAI SCALE	INITIAL	INTERVIEW	6 MONTH	FOLLOW-UP	
	Unweighted Salients	Mean	Standard Deviation	Mean	Standard Deviation	t
1.a.	Alcohol Use	-3.39	72.83	-22.23	65.91	5.30*
2.a.	Income/Employment	.85	70.70	13.20	64.16	-2.92*
3.a.	Socialization/Social Act.	9.35	65.61	9.71	49.87	10
4.a.	Family/Marital Status	-58.12	58.90	-53.02	54.96	-2.30*
5.a.	Physical Health	10.43	71.21	3.96	70.48	1.44
	Weighted Salients					
1.b.	Alcohol Use	-2.06	45.09	-12.29	42.77	4.65*
2.b.	Income/Employment	.13	41.28	7.31	35.25	-3.04*
3.b.	Socialization/Social Act.	3.63	23.59	4.32	20.93	55
4.b.	Family/Marital Status	-26.05	36.37	-23.75	34.02	-1.92
5.b.	Physical Health	6.13	36.23	1.64	34.79	2.01*

^{*}p < .05 (two tailed)

TABLE G-4. COMPARISONS OF INITIAL INTERVIEW AND 6 MONTH FOLLOW-UP INTERVIEW LAI SCALE SCORES FOR 183 STR CLIENTS ASSIGNED TO NO-TREATMENT OR MINIMUM EXPOSURE CONTROL GROUPS.

	LAI SCALE	INITIAL	INTERVIEW	6 MONTH	FOLLOW-UP	
	Unweighted Salients	Mean	Standard Deviation	Mean	Standard Deviation	t
1.a.	Alcohol Use	-14.23	69.03	-32.00	64.93	4.32*
2.a.	Income/Employment	-3.06	66.77	6.51	61.40	-1.66
3.a.	Socialization/Social Act.	-1.87	63.94	2.12	50.77	94
4.a.	Family/Marital Status	-60.81	61.20	-58.33	54.72	80
5.a.	Physical Health	6.29	70.91	11.46	78.02	89
	Weighted Salients					
1.b.	Alcohol Use	-8.97	42.92	-19.16	42.21	3.89*
2.b.	Income/Employment	-2.09	39.99	3.45	34.02	-1.67
3.b.	Socialization/Social Act.	16	24.06	1.34	21.23	98
4.b.	Family/Marital Status	-27.33	37.90	-26.13	34.64	69
5.b.	Physical Health	3.43	35.31	5.32	38.05	67

^{*}p < .05 (two tailed)

TABLE G-5. SUMMARY OF PERSONALITY ASSESSMENT SURVEY (PAS) SCALE SCORES FOR INITIAL CLIENT INTERVIEWS CURRENTLY IN THE STR MASTER FILE. SCALE SCORES RANGE FROM 100-500 AND ARE COMPUTED AS THE MEAN OF THE SALIENT VARIABLES (X 100) WHICH DEFINE EACH SCALE.

		ALL :	SITES		VAF	RIABLE MEA	NS BY SITE			
PAS Scales		Mean	Standard Deviation	Denver	Fairfax	Kansas City	Hennepin County	New Orleans	Phoenix	
1.	Depression	156.2	58.56	164.5	141.5	118.1	156.9	138.4	179.4	
2.	Indecisive Worry & Guilt	190.1	66.43	199.9	175.5	138.5	196.0	175.6	209.3	
3.	Hypersensitivity, Tension	211.4	77.50	219.7	202.5	155.7	216.9	195.2	231.8	
4.	Self-Confidence	365.9	100.25	374.3	375.1	266.9	389.4	375.6	369.4	
5.	Hypochondria	136.2	52.99	146.4	123.9	104.0	128.3	131.9	142.1	
6.	Impulsive-Aggressive	168.2	57.5?	177.2	157.7	123.4	175.1	155.0	191.9	
7.	Phobias, Fears	207.9	73.64	217.2	186.1	157.2	206.9	219.9	214.4	
8.	Paranoid Fear/Mistrust	180.9	62.22	190.7	159.4	137.2	178.9	180.3	198.4	
9.	Anomalous Thoughts	138.2	53.45	147.0	125.1	103.7	141.7	127.8	147.8	
10.	Machiavellianism	223.2	80.96	237.0	201.8	167.7	224.2	236.1	238.0	
11.	Manic, Outgoing	219.6	69.40	233.8	219.5	162.7	240.9	203.8	230.0	
12.	Experimenting Moralism	275.1	72.9%	284.8	276.2	206.5	296.2	259.7	297.5	
13.	Extraversion	346.4	98.92	354.0	358.1	256.4	366.3	352.5	350.0	
14.	Intellectual-Esthetic	295.8	92.51	306.5	300.3	217.6	310.6	298.8	299.3	
	N	2868		190	501	295	135	251	357	

Table G-5. Summary of Personality Assessment Survey (PAS) Scale Scores for Initial Client Interviews Currently in the STR Master File (Continued)

	ALL	SITES		VARIAB	LE MEANS BY	SITE	
PAS Scales	Mean	Standard Deviation	San Antonio	South Dakota	New Hampshire	Oklahoma City	Tampa
1. Depression	156.2	58.56	161.1	157.7	168.9	179.7	164.3
2. Indecisive Worry & Guilt	190.1	66.48	194.9	194.8	206.9	218.1	201.6
3. Hypersensitivity, Tension	211.4	77.50	215.9	215.9	231.2	234.6	221.4
4. Self-Confidence	365.9	100.25	385.2	386.4	375.6	368.2	389.0
5. Hypochondria	136.2	52.99	148.5	133.9	152.9	157.8	142.6
6. Impulsive-Aggressive	168.2	57.57	175.0	168.7	179.1	181.8	178.4
7. Phobias, Fears	207.9	73.64	234.4	200.5	216.5	236.4	222.4
8. Paranoid Fear/Mistrust	180.9	62.22	200.2	178.8	194.3	201.6	193.0
9. Anomalous Thoughts	138.2	53.45	153.3	134.0	147.0	157.7	151.1
10. Machiavellianism	223.2	80.96	246.1	211.7	236.4	241.5	239.1
11. Manic, Outgoing	219.6	69.40	230.9	228.6	233.6	224.4	232.1
12. Experimenting Moralism	275.1	72.91	282.7	282.6	289.6	281.2	287.2
13. Extraversion	346.4	98.92	356.7	358.3	359.6	350.6	368.1
14. Intellectual-Esthetic	295.8	92.51	309.4	309.1	307.5	302.1	316.4
N	2868		214	147	202	297	279

20

TABLE G-6. COMPARISONS OF INITIAL INTERVIEW AND 6 MONTH FOLLOW-UP INTERVIEW PAS SCALE SCORES FOR 343 STR CLIENTS ASSIGNED TO ONE OR MORE STR TREATMENT ALTERNATIVES.

	PAS SCALE		INTERVIEW	6 MONTH	·	
		Mean	Standard Deviation	Mean	Standard Deviation	t
1. 2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13.	Depression Indecisive Worry & Guilt Hypersensitivity, Tension Self-Confidence Hypochondria Impulsive-Aggressive Phobias, Fears Paranoid Fear/Mistrust Anomalous Thoughts Machiavellianism Manic, Outgoing Experimenting Moralism Extraversion Intellectual-Esthetic	128.32 153.08 175.81 302.03 108.25 136.77 165.12 142.32 111.07 178.48 185.50 230.19 291.69 246.38	77.89 90.40 107.16 164.30 65.11 80.36 97.44 82.59 66.79 107.42 105.23 124.66 161.44 140.58	159.62 194.73 222.11 387.43 137.07 175.79 207.11 184.04 140.77 228.19 236.80 293.77 371.82 317.28	46.06 49.51 62.96 58.44 39.74 43.47 58.09 46.49 40.79 63.34 49.65 39.69 63.44 69.27	-7.19* -8.02* -7.76* -9.68* -7.35* -8.43* -7.25* -8.69* -7.42* -8.07* -8.84* -9.60* -9.58* -9.41*

^{*}p < .05 (two tailed)

TABLE G-7. COMPARISONS OF INITIAL INTERVIEW AND 6 MONTH FOLLOW-UP INTERVIEW PAS SCALE SCORES FOR 179 STR CLIENTS ASSIGNED TO NO-TREATMENT OR MINIMUM EXPOSURE CONTROL GROUPS.

PAS SCALE	INITIAL	INTERVIEW	6 MONTH	FOLLOW-UP	
	Mean	Standard Deviation	Mean	Standard Deviation	t
1. Depression 2. Indecisive Worry & Guilt 3. Hypersensitivity, Tension 4. Self-Confidence 5. Hypochondria 6. Impulsive-Aggressive 7. Phobias, Fears 8. Paranoid Fear/Mistrust 9. Anomalous Thoughts 10. Machiavellianism 11. Manic, Outgoing 12. Experimenting Moralism 13. Extraversion 14. Intellectual-Esthetic	150.10 183.39 197.52 335.20 131.23 157.90 194.83 172.81 132.46 205.45 203.75 254.33 305.68 261.89	71.36 84.58 94.10 134.74 66.91 72.34 92.25 78.60 64.47 97.14 86.46 101.57 127.62 118.34	159.86 196.25 225.56 384.91 143.61 178.25 220.40 192.32 142.04 232.39 227.90 294.78 354.83 308.28	40.66 47.89 59.23 55.79 43.40 43.91 60.24 45.16 39.68 64.15 49.18 37.31 58.22 60.29	-2.31* -2.37* -4.43* -5.09* -2.67* -4.05* -3.50* -2.04* -3.50* -4.14* -5.50* -5.73*

^{*}p < .05 (two tailed)

APPENDIX H

ASAP Short Term Rehabilitation Study Life Activities Inventory: Section Two Initial Questionnaires

ASAP SHORT TERM REHABILITATION STUDY LIFE ACTIVITIES INVENTORY: SECTION TWO INITIAL QUESTIONNAIRES

U.S. DEPARTMENT OF TRANSPORTATION

NATIONAL HIGHWAY TRAFFIC SAFETY ADMINISTRATION



PROJECT 1	5 NEW ORLEANS 6 PHOENIX 7 SAN ANTONIO 8 SOUTH DAKOTA
DATE OF ADMINISTRATION///	
INTERVIEWER NAME	
PROJECT CLIENT ID NUMBER	

NOTE: The questionnaires in this section of the life activities package were developed by the Fort Logan Mental Health Center, Denver, Colorado as part of their ongoing treatment evaluation program. The entire package was assembled for the NHTSA by the University of South Dakota under contract DOT-HS-191-3-759 entitled "An Evaluation of ASAP REHABILITATION EFFORTS."

STOP. BEFORE YOU BEGIN, READ THESE INSTRUCTIONS

THE FIRST SECTION OF THIS BOOKLET CONTAINS QUESTIONS ABOUT YOUR PRESENT LIFE SITUATION. PLEASE CHECK THE ANSWER OR ANSWERS TO EACH QUESTION THAT YOU FEEL ARE MOST CORRECT. DO NOT LEAVE AN ITEM WITHOUT MARKING IT. ALL INFORMATION WILL BE KEPT CONFIDENTIAL. IF YOU HAVE NO QUESTIONS PLEASE BEGIN. IF YOU HAVE QUESTIONS PLEASE ASK THE INTERVIEWER NOW.

	I.	LIVING SITUATION	10.	HOW OFTEN DO YOU TYPICALLY CHANGE JOBS?	
r · 1	1.	CHECK ALL PERSONS WITH WHOM YOU ARE CURRENTLY LIVING.	•	() A. MORE THAN TWICE A YEAR () B. CNCE OR TWICE A YEAR () C. LESS THAN ONCE A YEAR	r 1
F - 4 F - 4 F - 4		() A. SPOUSE () B. DEPENDENT CHILDREN () C. ADULT SON AND/OR DAUGHTER () D. PARENT(S)	11.	HOW MANY JOBS HAVE YOU HAD IN THE PAST SIX MONTHS?	
- - - - - -		() E. RELATIVE(S) () F. FRIEND(S) () G. LIVE ALONE		() A. NONE () B. ONE () C. TWO () D. MORE THAN TWO	F 1
}= ≈ =4	2.	WHICH OF THE FOLLOWING BEST DESCRIBES YOUR PLACE OF RESIDENCE?	12.	DOES YOUR CIRCLE OF FRIENDS AND ACQUAINTANCES CHANGE FROM TIME TO	
gran L.J		() A. OWN HOME () B. RENTED HOUSE OR APARTMENT () C. BOARDING OR ROOMING HOUSE () D. NURSING HOME () E. NO-COST SHELTER () F. NO RESIDENCE () G. OTHER		TIME? () A. ALMOST NEVER () B. SOMETIMES () C. OFTEN () D. VERY OFTEN	ر ۲ ز
	3.	ENTER THE LENGTH OF TIME YOU HAYE LIVED AT YOUR PRESENT RESIDENCE?	II.	EMPLOYMENT SITUATION	
	4.	YEARS,MONTHS,WEEKS HOW OFTEN HAVE YOU CHANGED YOUR RESIDENCE IN THE LAST SIX MONTHS?	13.	CHECK THE ONE OF THE FOLLOWING WHICH BEST DESCRIBES YOU. () A. RETIRED, NOT WORKING	
		A. NEVER B. ONCE C. MORE THAN ONCE		() D. HOUSEWIFE, EMPLOYED PART-TIME () D. HOUSEWIFE, EMPLOYED PART-TIME OUTSIDE HOME	F 11)
_	5.	HOW OFTEN DO YOU TYPICALLY CHANGE YOUR RESIDENCE?		() E. HOUSEWIFE, EMPLOYED FULL-TIME OUTSIDE HOME () F. STUDENT () G. NONE OF THE ABOVE	
		() A. MORE THAN TWICE A YEAR () B. ONCE OR TWICE A YEAR () C. LESS THAN ONCE A YEAR	14.	HOW LONG HAVE YOU BEEN EMPLOYED DURING THE PAST SIX MONTHS?	
	6.	HAVE YOU RECENTLY BEEN EVICTED FROM OR ASKED TO LEAVE YOUR PLACE OF RESIDENCE?		{ } A. ALL SIX MONTHS } B. 3, 4 QR 5 MONTHS	لب <u> </u>
		A. NO B. YES		() C. 1 OR Z MONTHS () D. A FEW DAYS OR WEEKS BUT LESS THAN A MONTH () E. NO JOBS AT ALL THROUGHOUT	eli.
	7.	HAVE YOUR LIVING CONDITIONS CHANGED IN THE PAST SIX MONTHS?	15.	THIS PERIOD ENTER YOUR INCOME LAST MONTH FROM	
		A. WORSENED B. STAYED ABOUT THE SAME C. IMPROVED	151	THE FOLLOWING SOURCES (IF HOUSEWIFE, REPORT FAMILY INCOME)	·
e . a	8.	DO YOU HAVE YOUR OWN TELEPHONE?		EARNED INCOME (BEFORE TAXES)UNEMPLOYMENT COMPENSATIONPENSIONS	-+-+-+- -+-+-+-
F 17	0	A. NO B. YES		WELFARE AND/OR RELATED PUBLIC ASSISTANCEALIMONY AND/OR CHILD SUPPORT	╸╤╸╤╶╪╶╪╶ ╸╪╶╪╶╪╶
	9,	DO YOU OWN OR ARE YOU BUYING AN AUTOMOBILE?	Į.	OTHER (INHERITANCE, DIVIDENDS,	- - + + - ↓
ר היו		() A. NO			

	16.	ENTER THE NUMBER OF HOURS A WEEK YOU SPEND IN THE FOLLOWING WORK	III.	. HEALTH	
- + - 1		ACTIVITIES? HOUSEWORK OR HOME MAINTENANCE	24.	HOW IS YOUR HEALTH?	
- 		EMPLOYMENT OUTSIDE HOMEVOLUNTEER WORK		A. IMPROVED SOME LATELY B. NOTICED NO CHANGE C. WORSENED SOME RECENTLY	7
	17.	IS YOUR FINANCIAL SITUATION CHANGING? () A. IMPROVING		() D. RECENTLY HAD SEVERE AND/OR DISABLING PROBLEMS	
[]		B. NOT CHANGING NOTABLY C. WORSENING	25.	HOW WOULD YOU DESCRIBE YOUR HEALTH, RELATIVE TO OTHERS YOUR AGE?	
	18.	HOW DO YOU FEEL ABOUT YOUR PRESENT WORK SITUATION?		A. BELOW AVERAGE B. AVERAGE C. ABOVE AVERAGE	. 4
ر ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ ـ		() A. SATISFIED () B. USUALLY SATISFIED, BUT SOMETIMES THINK I WOULD RATHER DO SOMETHING ELSE	26.	HAVE YOU BEEN FEELING TIRED OR EXHAUSTED?	
		() C. DISSATISFIED, LOOKING FOR SOMETHING ELSE		A. ALMOST EVERY DAY B. MOST DAYS C. SOME DAYS	• 1
	19.	ARE YOU HAVING ANY TROUBLE WITH THE PEOPLE YOU WORK WITH (FOR)?	27.	() D. NO OR ALMOST NEVER	
ر. د ت		() A. NO SERIOUS PROBLEMS () B. SOME NOTABLE PROBLEMS () C. SERIOUS PROBLEMS (E.G.,	2/ 1	() A. USUALLY GET A GOOD NIGHT'S	
ندیا	20	RECENTLY FIRED)		() B. HAVE HAD SOME TROUBLE SLEEPING () C. RARELY GET A GOOD NIGHT'S	1
	20,	RELATIVE TO YOUR OWN STANDARDS, ARE THERE DEFICIENCIES IN YOUR WORK?	28.	SLEEP HAVE YOU PEEN ILL WITH COLDS, FLU, ETC.?	
r i		A. NO SERIOUS DEFICIENCIES B. SOME NOTABLE DEFICIENCIES C. UNABLE TO DO MY WORK		() A. NO OR ALMOST NEVER	٠.
	21.	DO YOU VOLUNTARILY DO MORE ON YOUR JOB THAN IS REQUIRED?		B. OCCASIONALLY C. FREQUENTLY	,
F-1		() A. NEVER OR ALMOST NEVER () B. SOMETIMES () C. OFTEN	29.	DO YOU CURRENTLY HAVE ANY PHYSICAL PROBLEMS RELATED TO THE EXCESSIVE USE OF ALCOHOL?	
نا	22.	() D. VERY OFTEN ARE YOU DEVOTING TIME OUTSIDE OF WORK		A. NONE B. SOME	- 7 : : .
	241	TO IMPROVE YOUR WORK SKILLS AND/OR EMPLOYMENT SITUATION?	30.	ARE YOU CURRENTLY HAVING ANY MEDICAL	
r - ¬		() A, NO () B. ONE TO TWO HOURS A WEEK		PROBLEMS?	. 1
أسانا		() C. THREE TO FOUR HOURS A WEEK () D. MORE THAN FOUR HOURS A WEEK		B. MINOR ONE(S) C. MAJOR ONE(S)	
	23.	DO YOU DREAD GOING TO WORK?	31.	ARE YOU CURRENTLY RECEIVING MEDICAL ASSISTANCE FOR HEALTH PROBLEMS?	
F		() A. NEVER OR ALMOST NEVER () B. SOME DAYS () C. MOST DAYS () D. ALMOST EVERY DAY	,	{ } A. NO B. YES	ר - ו ב
L.J		() D. ALPIOSI EVERT DAT	32.	HAVE YOU BEEN HOSPITALIZED IN THE PAST SIX MONTHS FOR A PHYSICAL ILLNESS OF INJURY?	
				A. ONE WEEK OR MORE B. LESS THAN ONE WEEK	۲-

	33.	CHECK THE HEALTH PROBLEMS WHICH CURRENTLY APPLY TO YOU:	40.	ARE YOU ABLE TO REGULATE THE TIMES AT WHICH YOU DRINK?	
		() A. SKIN PROBLEMS () B. HEART OR CARDIOVASCULAR PROBLEMS () C. STOMACH OR INTESTINAL PROBLEMS		A. NEVER OR ALMOST NEVER B. SOMETIMES C. MOST TIMES D. ALWAYS OR ALMOST ALWAYS	;;;; 1 ;
		() D. LUNG OR RESPIRATORY PROBLEMS () E. EYES, EARS, NOSE, OR THROAT PROBLEMS	41.	WHEN DRINKING, ARE YOU ABLE TO REGULATE OR CONTROL THE AMOUNT YOU DRINK?	
		() F. UNUSUAL WEIGHT CHANGES () G. PAIN OR TINGLING IN HANDS, FEET, LEGS, ETC. () H. HEADACHES () I. LIVER PROBLEMS		A. ALWAYS OR ALMOST ALWAYS B. MOST TIMES C. SOMETIMES D. NEVER OF ALMOST NEVER	
درغ د .	34.	CHECK THE COMPLETE, REGULAR MEAL(S) THAT YOU EAT MOST DAYS:	42.	HOW WOULD YOU COMPARE THE FREQUENCY AND AMOUNT OF YOUR PRESENT DRINKING TO THAT OF PREVIOUS TIMES?	
F. 13 F. 13 L. 14	35.	() A. BREAKFAST () B. LUNCH () C. DINNER DO YOUR EATING HABITS PROVIDE A		A. INCREASED NOTABLY B. INCREASED SOME C. ABOUT THE SAME D. DECREASED SOME	r - J
•.	, , , ,	WELL-BALANCED INTAKE OF FCOD EACH DAY (CONTAIN FRUIT, VEGETABLES, MEAT, CEREAL, ETC.)?	43.	() E. DECREASED NOTABLY IS DRINKING A PROBLEM FOR YOU AT THIS TIME?	
E ,		() A. EAT VERY LITTLE OR ONLY ONE TYPE OF FOOD ON MOST DAYS () B. MAY GET IN A GOOD DAY OR TWO A WEEK BUT RARELY MORE () C. PROBABLY EAT A WELL-BALANCED		A. VERY MUCH SO B. MODERATELY SO C. SOMEWHAT D. NOT AT ALL	۲ ,
•	36.	DIET ON MOST DAYS	44.	ARE YOU FINDING IT DIFFICULT TO LIVE WITHOUT ALCOHOL?	
	<i>5</i> 0.	ARE YOU CURRENTLY USING VITAMIN SUPPLEMENTS (PRESCRIPTION OR NON-PRESCRIPTION)		() A. VERY MUCH SO () B. MODERATELY SO () C. SOMEWHAT	
		A. ALMOST EVERY DAY B. SOMETIMES C. RARELY OR NEVER	45.	DOES YOUR PRESENT DRINKING INTERFERE WITH FULFILLING RESPONSIBILITIES	
	IV.	ALCOHOL USE		TO YOURSELF OR OTHERS?	
	37.	ARE YOU SOBER AT THIS TIME?		A. VERY MUCH SO B. MODERATELY SO C. SOMEWHAT D. NOT AT ALL	
	38.	() B. NO	46.	HAVE YOU BEEN DRUNK IN PUBLIC IN THE PAST SIX MONTHS?	
ration (1	201	HOW LONG HAS IT BEEN SINCE YOUR LAST DRINK?		A. NO B. ONCE OR TWICE	
		MOSWKSDAYS. HRS.	47.	() C. MORE THAN TWICE IN THE PAST SIX MONTHS HAVE YOU	
	3 9.	WHAT IS THE LONGEST PERIOD THAT YOU HAVE GONE WITHOUT ALCOHOL IN THE PAST SIX MONTHS?		BEEN TREATED OR DETAINED FOR PUBLIC INTOXICATION?	
rair ma Lillii		MOSWKSDAYS.		B. ONCE C. MORE THAN ONCE	
		HRS.			

	4S.	ARE YOU CURRENTLY CITED OR SUMMONED FOR A DRIVING VIOLATION INVOLVING ALCOHOL?	55.		U BEEN INVOLVED IN ANY L FIGHTS IN THE PAST SIX	
F : 3		A. NO B. FOR DRIVING WHILE IMPAIRED C. FOR DRIVING UNDER THE INFLUENCE OF ALCOHOL		{ } A. () C.	NO YES, BUT WAS UNREASONABLY PROVOKED YES, HAVE BEEN INVOLVED IN	F 77
	49.	HAVE YOU BEEN CONVICTED RECENTLY OF AN ALCOHOL RELATED DRIVING OFFENSE?			ONE OR MORE INCIDENT(S) WHICH WERE PROBABLY MY FAULT	
[.]		() A. NO () B. FOR DRIVING WHILE IMPAIRED () C. FOR DRIVING UNDER THE INFLUENCE OF ALCOHOL	56.	HAVE YO YOUR BI		
					ALWAYS GET THEM PAID ON TIME	۲.٦
	٧.	GENERAL INFORMATION		() _B ,	SOMETIMES LATE AND/OR VERY RARELY SKIP A PAYMENT	
	50.	HAVE YOU ANY CLOSE FRIENDS?		() (,	SEVERAL BILLS ARE PAST DUE BUT AM TRYING TO GET CAUGHT UP	
		() A. NO () B. ONE OR TWO () C. THREE CR FOUR () D. MORE THAN FOUR	 	() D.	SO FAR BEHIND THAT I HAVE STOPPED TRYING TO PAY MY BILLS	
	51.	HAVE YOU HAD ANY AUTOMOBILE ACCIDENTS IN THE PAST SIX MONTHS?	57.	ARE YOU ALCOHOL	CURRENTLY ATTENDING ICS ANONYMOUS?	
ר" ז ניי		() A. NO () B. ONE () C. MORE THAN ONE		<pre>{ } A. B. C.</pre>	NO OCCASIONALLY REGULARLY	ר . ז ר . ז
	52.	HOW MUCH OF YOUR FREE TIME DO YOU SPEND ALONE?	58.	ARE YOU AT THIS	GETTING ALONG WITH OTHERS TIME?	
		() A. 75-100%		{	NO DIFFICULTIES SOME DIFFICULTIES MANY DIFFICULTIES	; J
		() B. 50-75%	59.	מס אסע	PREFER NOT TO GET CLOSE TO	
		() c. 25-50% () p. 0 - 25%		OTHERS?		
	53.	DOES YOUR WORK REQUIRE YOU TO MEET PEOPLE?		}	TRUE PROBABLY TRUE PROBABLY FALSE FALSE	רים נים
		A. ALMOST NEVER B. SOMETIMES C. OFTEN D. VERY OFTEN	60.	ARE YOU IMMEDIA AND SIS	CLOSE TO MEMBERS OF YOUR TE FAMILY (PARENTS, BROTHERS' TERS' FAMILIES, ETC.)?	
	54.	ENTER THE NUMBER HOURS A WEEK YOU TYPICALLY SPEND IN THE FOLLOWING ACTIVITIES.		{	LITTLE OR NO CONTACT SOMEWHAT CLOSE QUITE CLOSE	
=======================================		ATHLETIC ACTIVITIES (JOGGING, BASKETBALL, BOWLING, ETC.) OTHER GAMELIKE ACTIVITIES (CARDS	61.	QTHER T	ATTEND CHURCH FUNCTIONS HAN REGULAR WEEKLY SERVICES BIBLE CLASSES, COFFEE HOURS	
		BILLIARDS, ETC.) READING, WRITING, PAINTING, ETC. CONSTRUCTION HOBBIES (SEWING, MODEL BUILDING, ETC.) WATCHING TELEVISION		{	NO LESS THAN ONCE A WEEK ONCE A WEEK OR MORE	
		ATTENDING LIVE SPORTS EVENTS	Ì			

	62.	HAVE YOU BEEN CHARGED WITH ANY CRIMINAL OFFENSE IN THE PAST SIX MONTHS (DO NOT INCLUDE DRIVING OR DRUNKENESS CONVICTIONS)?	OTHER PEOPLE SUCH AS OR BALL GAMES?	S ATTEND MOVIES
ר-ק ב-ן		() A. NO () B. YES, A MISDEMEANOR OR PETTY CRIME () C. YES, CHARGED WITH A MORE SERIOUS CRIME, SUCH AS A FELONY	A. ALMOST NEVEL B. SOMETIMES C. OFTEN D. VERY OFTEN HAVE YOU PLEADED OR IN THE PAST SIX MONTH	BEEN FOUND GUILTY
	63.	DO MOST OF YOUR FRIENDS DRINK?	VIOLATIONS WHICH DII ALCOHOL?	NOI INVOLVE
۲-٦		A. TRUE OF FEW B. TRUE OF SOME C. TRUE OF MANY D. TRUE OF MOST	() A. NO () B. A MINOR ONE () C. A MAJOR ONE	OR SEVERAL MINOR ONES
	64.	DO YOU PARTICIPATE IN GROUPS OR CLUBS (SUCH AS BRIDGE CLUBS, LODGES, FRATERNITIES, TENNIS CLUBS, ETC.)?	NSWER THE FOLLOWING QUES ARRIED OR LIVING IN A M	
[]		A. REGULARLY B. OCCASIONALLY C. RARELY D. NO	I. MARRIAGE	
	65.	HAVE YOU PHYSICALLY INJURED ANYONE IN THE PAST SIX MONTHS (DO NOT INCLUDE DRIVING ACCIDENTS)?	1. HOW DOES YOUR PRESENT WITH YOUR SPOUSE (MACCOMPARE TO THAT OF F	RRIAGE PARTNER)
		() A. NO OR NOT TO MY KNOWLEDGE () B. QUITE UNINTENTIONALLY OR UNDER VERY UNUSUAL CIRCUMSTANCES () C. HAVE BEEN INVOLVED IN ONE OR MORE INCIDENT(S)	A. NOTICEABLY I B. SOMEWHAT BET C. ABOUT THE SA D. SOMEWHAT WOR E. NOTICEABLY I	ETTER TER ME
	66.	HOW DO YOU FEEL ABOUT YOUR CONTACTS WITH OTHER PEOPLE?	2. HOW ARE YOU GETTING SPOUSE?	
		() A. WISH I HAD MORE FRIENDS OR SAW MY FRIENDS MORE FREQUENTLY () B. CONTENT WITH MY RELATIONSHIPS WITH OTHERS () C. WISH I HAD FEWER FRIENDS OR THAT MY FRIENDS WOULD CONTACT ME LESS OFTEN	, WE USUALLY "	S GREEMENTS, BUT PATCH THINGS UP" ERIOUS DISAGREE-
	67.	ARE YOUR RELATIONSHIPS WITH OTHER PEOPLE CHANGING?	3. IS YOUR SPOUSE SATIS	
المالية		A. WORSENING B. REMAINING ABOUT THE SAME C. IMPROVING		GENERALLY TH ME IOUS COMPLAINTS T SATISFIED WITH
	68.	HAVE YOU ATTEMPTED SUICIDE IN THE PAST SIX MONTHS?	4. DO YOU AND YOUR SPOU	SE ARGUE?
		() A. NO () B. YES, BUT REALLY HOPED SOMEONE WOULD FIND OR STOP ME () C. YES, MADE A VERY SERIOUS ATTEMPT ON MY LIFE	A. NEVER OR ALM B. SOMETIMES C. OFTEN D. CONTINUOUSLY CONTINUOUSLY	OR ALMOST

]		
F - 1	75.	DOES YOUR SPOUSE MAKE FAIR DEMANDS OF YOU? () A. EXPECTS AND/OR DEMANDS TOO MUCH () B. SOMETIMES EXPECTS TOO MUCH, BUT OFTEN FAIR () C. ALMOST ALWAYS EXPECTS ONLY WHAT IS FAIR	32.	WOULD YOU LIKE TO TERMINATE YOUR MARRIAGE IF YOU COULD DO SO IN A REASONABLE MANNER? () A. CLEARLY PREFER TO END IT, OTHER TIMES WANT TO END IT, OTHER TIMES DO NOT () C. CLEARLY PREFER NOT TO END IT	,
	76.	DO YOU AND YOUR SPOUSE REACH AGREEMENT ON IMPORTANT ISSUES?	83.	HOW OFTEN DO YOU HAVE SEXUAL RELATIONS WITH YOUR SPOUSE?	
		A. ON ALL THINGS B. ON MOST THINGS C. ON SOME THINGS D. ON FEW THINGS E. NEVER SEE EYE-TO-EYE ON IMPORTANT MATTERS		A. LESS THAN ONCE A MONTH B. LESS THAN ONCE A WEEK, BUT MORE THAN ONCE A MONTH CONCE OR TWICE A WEEK D. THREE TO FIVE TIMES A WEEK E. MORE THAN FIVE TIMES A WEEK	r
	<i>7</i> 7.	DO YOU EXPRESS YOUR INNERMOST THOUGHTS AND FEELINGS TO YOUR SPOUSE?	84.	ARE SEXUAL RELATIONSHIPS WITH YOUR SPOUSE SATISFACTORY?	
		A. ON ALL THINGS B. ON MOST THINGS C. ON SOME THINGS D. ON FEW THINGS E. NEVER		A. ALMOST NEVER B. SOMETIMES C. MOST TIMES D. ALMOST ALWAYS	ļ- ·- ·
	78.	DO YOU FEEL YOUR SPOUSE UNDERSTANDS YOU?	35.	HOW MANY DIFFERENT EXTRA-MARITAL PARTNERS HAVE YOU HAD WITHIN THE LAST TWO YEARS?	
		() A. I THINK I AM QUITE PUZZLING TO HER/HIM () B. UNDERSTANDS SOME IMPORTANT FEATURES () C. UNDERSTANDS ME QUITE WELL	36·	A. NONE B. ONE C. TWO OF THREE D. MORE THAN THREE	r
	79.	DO YOU FEEL YOUR SPOUSE ACCEPTS YOU?	001	HAS YOUR SPOUSE HAD EXTRA-MARITAL PARTNERS IN THE PAST TWO YEARS?	
		() A. ACCEPTS ME THE WAY I AM () B. GENERALLY ACCEPTS ME BUT WANTS		() A. NO, NOT TO MY KNOWLEDGE () B. PERHAPS, I SUSPECT SO BUT NOT SURE () C. YES, KNOW FOR SURE	F
	80.	DOES YOUR SPOUSE WANT TO REMAIN MARRIED TO YOU?	·		
		() A. SEEMS TO WANT TO END IT () B. SOMETIMES WANTS TO END IT, OTHER TIMES DOES NOT () C. DOES NOT WANT TO END IT			
	81.	DOES YOUR SPOUSE DO THE WORK YOU EXPECT OF A MARRIAGE PARTNER?			
ר בין		() A. SELDOM DOES WHAT IS EXPECTED () B. DOES POORLY IN SOME THINGS, OKAY IN OTHERS () C. USUALLY DOES WHAT IS EXPECTED			

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STOP. BEFORE YOU CONTINUE, READ THESE INSTRUCTIONS.

THE FOLLOWING SECTION OF THIS BOOKLET CONSISTS OF NUMBERED STATEMENTS. THE STATEMENTS ARE ABOUT YOUR FEELINGS TOWARD YOURSELF AND YOUR BELIEFS IN GENERAL. AFTER EACH STATEMENT IS A SET OF WORDS TO DESCRIBE HOW MUCH THE STATEMENT APPLIES TO YOU OR HOW WELL THE STATEMENT DESCRIBES YOUR FEELINGS. YOU ARE TO CHECK THE ONE WORD AFTER EACH STATEMENT WHICH BEST DESCRIBES HOW YOU FEEL ABOUT THE STATEMENT. THIS MAY BE DIFFICULT FOR SOME OF THE STATEMENTS, BUT PLEASE DO THE BEST YOU CAN. DO NOT LEAVE AN ITEM WITHOUT MAKING A MARK ON IT. YOU WILL SEE THAT EACH SET OF WORDS HAS A BLANK MIDDLE CATEGORY. YOU PROBABLY WILL NOT USE THIS CATEGORY VERY OFTEN, IF AT ALL. THIS CATEGORY SHOULD BE MARKED ONLY IF YOU ABSOLUTELY CAN NOT DECIDE WHETHER OR NOT THE STATEMENT DESCRIBES YOUR FEELINGS OR BELIEFS. ALL INFORMATION WILL BE KEPT CONFIDENTIAL. IF YOU HAVE NO QUESTIONS PLEASE BEGIN. IF YOU HAVE QUESTIONS PLEASE ASK THE INTERVIEWER NOW.

			1		
	1.	I AM EMBARRASSED BY DIRTY STORIES.	12.	I THINK ABOUT A SECRET DREAM LIFE.	
					1
		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	ļ	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	
c	2.	I AM INTERESTED IN SCIENCE.	13.	I HAVE A HARD TIME GETTING STARTED ON A TASK.	
		VERY SOMEWHAT VERY NOT AT			۲- ۱
		MUCH LITTLE ALL		ALMOST SOME OFTEN VERY	٠. ــ
د - ۲	3.	AS A YOUNGSTER I USED TO SKIP SCHOOL.	14.	NEVER TIMES OFTEN I HAVE ARGUED WITH PEOPLE WHEN THEY	
		ALMOST SOME OFTEN VERY		WERE WRONG.	
	4.	NEVER TIMES OFTEN		ALMOST MOST SOME ALMOST	· .
L	4.	MY FATHER WAS GOOD TO ME.	15.	ALWAYS TIMES TIMES NEVER MY JUDGMENT IS SOUND AND MATURE.	
		ALMOST MOST SOME ALMOST ALWAYS TIMES NEVER	171		۲.,
	5.	I TALK WITH STRANGERS WHEN I AM TRAVEL-		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	Ĺ
٦ - ٦	-,	ING ABOUT TOWN.	16.	THINGS HAPPEN WHICH FRIGHTEN ME.	
1.3		ALMOST SOME OFTEN VERY			
	•	NEVER TIMES OFTEN	·	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	
L - J	6.	I MIGHT LIKE THE WORK OF A LIBRARIAN.	17.	I AM NOT KNOWN TO BE EASILY ANGERED.	
<u> </u>		TRUE PROBABLY PROBABLY FALSE TRUE FALSE			
	7.	I LIKE POETRY.		VERY TRUE FALSE VERY TRUE FALSE	
 			18.	MICE AND BEETLES AND OTHER SMALL ANIMALS AND INSECTS MAKE ME	*
		VERY SOMEWHAT VERY NOT AT MUCH LITTLE ALL		NERVOUS.	د ـ ا
	8.	- ···		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	L
<u> </u>		NOT KNOW THEY HURT ME.	19.	I FIND IT DIFFICULT TO MAKE CON-	
		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN		VERSATION WITH STRANGERS.	r- 7
	9,	I SUFFER FROM VOMITING AND NAUSEA.		ALMOST MOST SOME ALMOST	٠
F - J			20.	ALWAYS TIMES TIMES NEVER WHEN I MEET NEW PEOPLE I AM THE	
		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	20,	FIRST TO STRIKE UP A CONVERSATION.	r - ¬
	10.	I ENJOY LEADING DISCUSSIONS AND EXCHANGING OPINIONS WITH PEOPLE.		ALMOST MOST SOME ALMOST	, ; L
			01	ALWAYS TIMES TIMES NEVER	
		VERY TRUE FALSE VERY TRUE FALSE	21.	ALL IT TAKES IS A LITTLE EXCITEMENT TO BRING ME OUT OF FEELING LOW.	
r- ¬	11.	I AM NOT AFRAID OF THE DARK.		ALMOST MOST SOME ALMOST	F
		VERY TRUE FALSE VERY		ALWAYS TIMES TIMES NEVER	
		VERY TRUE FALSE VERY TRUE FALSE			

_	22.	I AM ACCURATELY DESCRIBED AS CALM AND CONTROLLED.	32. I HAVE PRETENDED TO BE ILL IN ORDER TO GET OUT OF SOMETHING.	
i		VERY TRUE FALSE VERY TRUE	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	•
F : 1	23,	IN ORDER TO GET WHAT THEY WANT, PEOPLE IN POWER WILL GET AROUND A LAW WITHOUT ACTUALLY BREAKING IT.	33. THERE ARE TIMES WHEN I DO NOT TELL THE TRUTH. ALMOST SOME OFTEN VERY	۲. ا
-	Oli	TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW	NEVER TIMES OFTEN 34. PEOPLE WILL USE SOMEWHAT UNFAIR	
	24.	I EXPERIENCE DIZZY SPELLS. ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	MEANS TO GET WHAT THEY WANT, TRUE OF TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW	٠ ن
_1 .	25.	A LIGHTENING STORM IS A FEARFUL EXPERIENCE.	35. 1 AM NERVOUS AND ANXIOUS ABOUT THINGS.	
F 1		VERY TRUE FALSE VERY TRUE FALSE	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	
	26.	I GIVE UP TRYING TO DO SOMETHING BECAUSE IT HAS SO MANY DIFFICULTIES AND ALTERNATIVES.	36. I BROOD OR FEEL SORRY FOR MYSELF.	١.
		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	
	27.	I SUSPECT THAT SOMEONE IS FOLLOWING ME.	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	
	20	NEVER TIMES OFTEN	38, I READ NEWSPAPER EDITORIALS.	ì
	201	I AM UNDER A GREAT DEAL OF TENSION. ALMOST SOME OFTEN VERY	ALMOST MOST SOME ALMOST EVERY DAYS DAYS NEVER	_
	29.	NEVER TIMES OFTEN I HAVE NOT LIVED UP TO MY POTENTIAL.	39. I HAVE PERIODS WHEN I LAUGH OR CRY IN AN UNCONTROLLABLE MANNER.	٦
;	21	TRUE PROBABLY PROBABLY FALSE TRUE FALSE	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	1
	30.	SOMEONE IS OUT TO RUIN ME.	40. IT IS HARD FOR ME TO TAKE PART IN GROUP CONVERSATIONS.	_
		VERY LIKELY UNLIKELY VERY LIKELY UNLIKELY	ALMOST MOST SOME ALMOST ALWAY TIMES TIMES NEVER	
	31.	PEOPLE IN AUTHORITY ARRANGE TO GET CREDIT FOR THE GOOD WORK AND BLAME THE	41. I DO NOT ENJOY GOING TO ART MUSEUMS.	٦.
		BAD WORK ON OTHERS. TRUE OF TRUE OF TRUE OF	VERY TRUE FALSE VERY TRUE FALSE	دُ
•		TRUE OF TRUE O	t .	

	42.	I HAVE CHEST PAINS.	52. SNAKES DO NOT PARTICULARLY	
		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	FRIGHTEN ME. VERY TRUE FALSE VERY	 J
ריק	43.	CERTAIN PEOPLE WOULD LIKE ME OUT OF THE WAY.	TRUE FALSE 53. IT BOTHERS ME TO ENTER A PARTY THAT HAS ALREADY STARTED.	
ندين		VERY TRUE FALSE VERY TRUE FALSE	VERY TRUE FALSE VERY	1 - 1
	44.	I HAVE TROUBLE WITH MY STOMACH.	TRUE FALSE 54. I GOT ALONG WELL WITH MY PARENTS.	
		ALMOST SOME OFTEN VERY	ALMOST MOST SOME ALMOST	7
	45.	NEVER TIMES OFTEN DISPLAYS OF FLOWERS OR PLANTS CATCH	ALWAYS TIMES TIMES NEVER	
۲.٦		MY ATTENTION.	55. I FEEL EXCITED, STIMULATED AND ALERT WHEN THINGS ARE GOING BADLY.	
		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	ALMOST MOST SOME ALMOST - ALWAYS TIMES TIMES NEVER	7
	46.	ONE SHOULD BE SUSPICIOUS WHEN PEOPLE ARE QUITE FRIENDLY.	56. LECTURES ON SERIOUS SUBJECTS BORE	
r- i			ME.	٦.
		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW	
	47.	I HAVE WEIRD DREAMS I FEEL I SHOULD NOT TALK ABOUT.	57. I WISH I COULD BE MORE OUTGOING	
			THAN I AM.	~
		TRUE OF TRUE OF TRUE CF MOST MANY SOME FEW	VERY TRUE FALSE VERY TRUE FALSE	:
	42.	SHARP OR POINTED OBJECTS MAKE ME	58. I KEEP UP WITH READING IN MY AREAS	
r-¬			OF INTEREST.	7
	4.0	VERY TRUE FALSE VERY TRUE FALSE	ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	
۲. ٦	49.	I LIKE TO POKE FUN AT PEOPLE.	59. I AM NOT EASILY UPSET.	
Lj		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	TRUE PROBABLY PROBABLY FALSE	-1
	50.	TERRIBLE THOUGHTS COME INTO MY MIND AND TEND TO PERSIST.	TRUE FALSE 60. I WONDER IF THERE IS SOMETHING WRONG	
r			WITH MY MIND.	7
L _ J		ALMOST SOME OFTEN VERY OFTEN	VERY TRUE FALSE VERY TRUE FALSE	_
	51.	THERE IS NOTHING PARTICULARLY FEARFUL ABOUT SPIDERS.	61. I HAVE HEADACHES.	
				٦ :
		VERY TRUE FALSE VERY True False	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	-

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		•	ł	
	62.	THERE ARE THINGS ABOUT ME THAT I DO	72.	OTHERS ARE PLOTTING AGAINST ME.
		TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW	73.	VERY LIKELY UNLIKELY VERY LIKELY UNLIKELY I SEE OR HEAR OR FEEL STRANGE THINGS
	63.	I FIND MYSELF MEMORIZING NUMBERS OR REPEATING WORDS FOR NO APPARENT REASON.	,,,	WHICH ARE NOT QUITE REAL.
		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	·	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN
	64.	NEVER TIMES OFTEN GIVEN THE OPPORTUNITY PEOPLE WILL TAKE ADVANTAGE OF AN EASILY DECEIVED PERSON.	74.	MY INTERESTS ARE MORE VARIED THAN MOST PEOPLE'S.
		TRUE OF TRUE OF TRUE OF		TRUE PROBABLY PROBABLY FALSE TRUE FALSE
•	65.	MOST MANY SOME FEW I CAN "PITCH IN" AND GET A JOB DONE.	75.	I HAVE SUCCEEDED AT THE THINGS I HAVE TRIED.
		VERY TRUE FALSE VERY TRUE FALSE		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER
	66.	I HAVE NEVER BEEN KNOWN AS A TROUBLE-	76.	I LISTEN TO CLASSICAL OR SYMPHONIC MUSIC.
		VERY TRUE FALSE VERY TRUE FALSE		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN
	67.	I FEEL MOST SECURE WHEN ALONE.	77.	PARTS OF MY BODY FEEL NUMB.
		VERY TRUE FALSE VERY FALSE		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN
F - 7	63.	MY THOUGHTS ARE STRANGE AND PECULIAR.	78.	HARDLY ANYTHING FRIGHTENS ME.
		TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW		VERY TRUE FALSE VERY TRUE FALSE
	69.	I BECOME NERVOUS WHEN I LOOK DOWN FROM A HIGH PLACE.	79.	MY LIFE AND THINGS AROUND ME SEEM UNREAL, AS IF IN A DREAM.
F - 1		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN
r-¬;	70.	I HAVE TROUBLE MAKING NEW FRIENDS. ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	30.	THE EXCITEMENT OF A CROWD ATTRACTS ME
r" j	71.	I GET ATTACKS OF NAUSEA. ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	31.	PEOPLE REALLY DO NOT WANT TO GO OUT OF THEIR WAY TO HELP OTHERS. TRUE PROBABLY PROBABLY FALSE TRUE FALSE

	82.	MY DECISIONS ARE GOVERNED BY MY HEAD RATHER THAN MY HEART.	91.	I ADMIRE PEOPLE WHO CAN PUT UP WITH TEDIOUS, ROUTINE WORK.
		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER		TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW
	83.	WHEN PEOPLE ACT IN AN UNSELFISH WAY, IT IS BECAUSE THERE IS SOMETHING IN IT FOR THEM.	92.	IT SEEMS THAT I AM MORE EASILY HURT THAN MOST PEOPLE.
		TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW	07	TRUE PROBABLY PROBABLY FALSE TRUE FALSE
	84.	UNDER NO CIRCUMSTANCES WOULD I BREAK	93.	OLD CUSTOMS AND TRADITIONS SHOULD BE PRESERVED.
· - 1		TRUE PROBABLY PROBABLY FALSE TRUE FALSE		TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW
•	85.	I AM NOT A HIGH STRUNG, TENSE PERSON.	94.	THE WISH THAT I WERE DEAD OCCURS TO ME.
		VERY TRUE FALSE VERY TRUE FALSE		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN
÷	86.	I REALLY ENJOY A GOOD PARTY OR BEING WITH A GROUP OF BOISTEROUS PEOPLE HAVING A GOOD TIME.	95.	I SEEM TO EXPERIENCE THINGS MORE INTENSELY THAN MOST PEOPLE.
		VERY SOMEWHAT VERY NOT AT LITTLE ALL	96.	TRUE PROBABLY PROBABLY FALSE TRUE FALSE
	87.	PEOPLE MAKE FRIENDS PRIMARILY FOR THE PURPOSE OF FEATHERING THEIR OWN NEST.	30,	WHEN THINGS WERE BAD, I HAVE FELT LIKE LEAVING HOME.
		TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN
- 7	88.	I HAVE BEEN HEALTHY AND FREE OF ILLNESS OVER THE PAST SEVERAL YEARS.	97.	I MIGHT ENJOY A SEXY SHOW, VERY TRUE FALSE VERY
		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	 98.	TRUE FALSE I THINK ABOUT POSSIBLE MISFORTUNES.
	89.	PEOPLE EXPECT MORE RESPECT FOR THEIR OWN RIGHTS THAN THEY ARE WILLING TO ALLOW FOR OTHERS.		ALMOST SOME OFTEN VERY OFTEN
]		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	99.	IT WORRIES ME A GREAT DEAL TO BE CLOSED INTO A SMALL ROOM OR CLOSET.
	90.	I AM A RESTLESS PERSON AND LIKE TO MOVE ABOUT.		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER
		VERY TRUE FALSE VERY	100.	I AM UNHAPPY OR DEPRESSED.
		TRUE FALSE VERY		ALMOST SOME OFTEN VERY
				NEVER TIMES OFTEN

go on to next page

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	101.	I FEEL EXCITED AND HAPPY FOR NO APPARENT REASON.	111. A BLOODY PERSON OR ANIMAL FRIGHTENS OR SICKENS ME.
	E۷	ALMOST MOST SOME ALMOST /ERY DAY DAYS DAYS NEVER	VERY TRUE FALSE VERY TRUE FALSE
J	102.	UNDER THE RIGHT CIRCUMSTANCES I COULD DO THINGS OF BENEFIT TO THE COMMUNITY.	112. I AM AN IMPORTANT PERSON.
	107	TRUE PROBABLY PROBABLY FALSE TRUE FALSE	TRUE PROBABLY PROBABLY FALSE TRUE FALSE 113. CERTAIN HABITS OF OTHERS HAVE
,	103.	I FEEL NO ONE REALLY CARES WHAT HAPPENS TO ME.	ANNOYED OR BOTHERED ME.
ندسا		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN 114. WHEN ANGERED I HAVE FELT LIKE
	104.	WHEN I SEE SOMEONE I KNOW I PRETEND NOT TO NOTICE.	114. WHEN ANGERED I HAVE FELT LIKE SMASHING THINGS.
-		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER
r · ¬	105.	I WORRY BEYOND REASON OVER THINGS THAT REALLY DO NOT MATTER.	115. I THINK ABOUT ENDING IT ALL. ALMOST SOME OFTEN VERY
		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	NEVER TIMES OFTEN 116. I HAVE MISSED OUT ON THINGS BECAUSE I COULD NOT MAKE UP MY
	106.	I LOSE SLEEP WORRYING ABOUT THINGS.	MIND QUICKLY ENOUGH.
		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN
	107.	PEOPLE ARE HONEST PRIMARILY BECAUSE THEY ARE AFRAID OF BEING CAUGHT.	117. I FEAR TRAVELING BY AIRPLANE.
		TRUE OF TRUE OF TRUE OF MOST MANY SOME FEN	VERY TRUE FALSE VERY TRUE FALSE
	108.	WHEN THINGS WERE BOTHERING ME, I HAVE FELT LIKE STARTING A FIGHT.	118. I LIKED SCHOOL.
		ALMOST SOME OFTEN VERY	ALMOST MOST SOME ALMOST SOME A
	109.	NEVER TIMES OFTEN WHEN THINGS DID NOT GO MY WAY, I HAVE	OF A GOOD TIME.
: 		LOST MY TEMPER.	ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER
- -	110	ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	120. I DOUBT THAT I WILL EVER AMOUNT TO MUCH.
	110.	ALMOST MOST SOME ALMOST	TRUE PROBABLY PROBABLY FALSE TRUE FALSE
		AI WAYS TIMES TIMES NEVER	

	121.	STRONG DISAGREEMENTS SHOULD BE RESOLVED TO EVERYONE'S SATISFACTION.	131.	THE WORDS OF OTHER PEOPLE CAN BE TRUSTED.	
	•	ALMOST SOME OFTEN VERY NEVER TIMES OFTEN		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	r ~
<u> 1</u>	122.	I FEEL AS IF A DISASTER OR SOMETHING DREADFUL IS ABOUT TO OCCUR.	132.	I WOULD HAVE BEEN MORE SUCCESSFUL IF CERTAIN PEOPLE HAD NOT HAD IT IN FOR ME.	
	107	ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER		VERY TRUE FALSE VERY FALSE	F.]
ŗ :- <u>1</u>	123.	I FEAR THAT I MAY BE LOSING MY MIND.	133.	I AM UNHAPPY OR DEPRESSED.	, - -
<u></u>		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	نہ ۔ ۔
F - 1	124.	I FEEL UPSET IN THE PIT OF MY STOMACH.	134.	•	
L		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN			r n Lli
	125.	ON IMPORTANT DECISIONS I SHIFT BACK AND FORTH FROM ONE ALTERNATIVE TO ANOTHER,		TRUE OF TRUE OF TRUE OF TRUE OF MOST MANY SOME FEW	
		VERY TRUE FALSE VERY TRUE FALSE	135.	I CAN FORGET MY PROBLEMS JUST BY JOINING A PLAYFUL GROUP OF FRIENDS.	г , <i>л</i>
	126.	I AM HEALTHIER THAN MOST PEOPLE MY AGE.		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER	، ، نـــ ــا
		TRUE PROBABLY PROBABLY FALSE TRUE FALSE	136.	I HAVE MANY INTERESTS TO KEEP ME BUSY AND OCCUPIED.	
F1	127.	PEOPLE DO NOT UNDERSTAND ME.		VERY TRUE FALSE VERY	6 T.)
		VERY TRUE FALSE VERY TRUE FALSE	137.	TRUE FALSE WHEN TALKING WITH OTHERS I DO	
	123.	TRUE FALSE ALL FORMS OF GAMBLING SHOULD BE OUTLAWED.	25/ (NOT DISCUSS SEXUAL MATTERS.	د با
		STRONGLY AGREE DISAGREE STRONGLY AGREE		VERY TRUE FALSE VERY TRUE FALSE	
	120.	I AM IN GOOD SPIRITS AND CHEERFUL.	138.	I LOSE MY BALANCE.	ر . د
		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN	ئا يا
	130.	I TRUST OTHERS.	139.	I AM SO FULL OF PEP THAT I DO NOT SLEEP.	~
[-]	• .	ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER		ALMOST MOST SOME ALMOST EVERY DAYS DAYS NEVER	

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		i e	1	•
г · ; L	140.	I AM SATISFIED WITH MY LIFE. VERY SOMEWHAT VERY NOT AT LITTLE ALL	149.	HAVE JOB SECURITY THAN A HIGH PAYING JOB.
	141.	IN MY YOUTH I GOT INTO SCRAPES WITH THE LAW. ALMOST SOME OFTEN VERY NEVER TIMES	150.	VERY TRUE FALSE VERY FALSE I ENJOY MEETING NEW PEOPLE. ALMOST SOME OFTEN VERY
c ~ ¬	1/42.	IN MY LIFE PEOPLE HAVE TREATED ME FAIRLY.	151.	NEVER TIMES OFTEN I ENJOY READING BOOKS ABOUT HISTORY.
ن د د		ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER		VERY SOMEWHAT VERY NOT AT MUCH LITTLE ALL
la de la composición	143.	I HAVE VERY LITTLE OR NO FEAR OF BEING NEAR TO DEEP WATER.		Tell the interviewer you have finished
<u></u>	1 <i>44</i> .	VERY TRUE FALSE VERY TRUE FALSE AS A YOUNGSTER I BELONGED TO A GROUP		
Г ј Стј	7,111	OR GANG OF KIDS THAT STUCK TOGETHER. ALMOST MOST SOME ALMOST ALWAYS TIMES TIMES NEVER		
רי	145.	I WORRY ABOUT HURTING OTHER PEOPLE'S		
		ALMOST SOME OFTEN VERY NEVER TIMES OFTEN		.•
	146.	I THINK I AM MORE SENSITIVE THAN MOST PEOPLE.		
		TRUE PROBABLY PROBABLY FALSE TRUE FALSE		
ria Cili	147.	I ENJOY PLAYING PRACTICAL JOKES. ALMOST SOME OFTEN VERY NEVER TIMES OFTEN		
- -1	148.	IT TAKES A LOT OF ARGUMENT TO CON- VINCE A PERSON OF THE TRUTH.		
		TRUE OF TRUE O	F	

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APPENDIX I

ASAP Short Term Rehabilitation Workshop Agenda April 21-23, 1975

SHORT TERM REHABILITATION (STR) SCHEDULE CAPITOL PLAZA INN, DENVER, COLORADO APRIL 21-23, 1975

9:00-9:10am	Welcome	Mr. Charles F. Livingston Director, Office of Driver & Pedestrian Programs
9:10-10:35am	Introduction & Objectives of Workshop/History & Description of STR/Need for Random Assignment and Design Problems with Evaluation	Dr. James L. Nichols Chief, Driver Programs Branch Dr. & Pedestrian Education Div.
10:30-10:45am	Break	
10:45-11:15	Criteria Measures of Success for STR	Dr. James L. Nichols
11:15-12:00pm	Follow-Up Package Development	Dr. Ellingstad
12:00-1:00pm	Lunch	
1:00-1:30	Potential Success due to Treatment	Dr. Wanberg
1:30-2:00pm	Problems that may arise in Driver's Records Searches	Dr. Malfetti
2:00-2:45pm	Follow-Up Experience in Vermont	Ms. Gitchell
2:45-3:00pm	Coffee Break	
3:00-3:45pm	Follow-Up Experience in Fairfax	Dr. Saunders
3:45-4:30pm	Follow-Up Experience at Brockton Hospital	Dr. Boyatzis
	(ALL MONDAY MEETINGS IN TIMBERLINE RO	ooms)

		·		,
4:30-5:00pm	Discussi	on	· .	
5:00-7:00pm	Dinner			
7:00-9:00pm	Group A	Interviewing Techniques	Room 511	USD Staff
	Group B	Meet with McBer Personnel to Discuss PMT Problems	Room 918	Dr. Boyatzis
	Group C	Discuss Specific Major Problems (i.e., random	Timberline Room	Dr. Nichols Ms. Weinstein
	.* •	assignment, client confidentiality, follow-up time etc.)	ti di salah sa	Mr. Butler Dr. Ellingstad
TUESDAY, APRIL 22, 1975		· · .	•	
10E3DA1, APRIL 22, 1973	Group A	Follow-Up Activities Follow-Up Interviewers Follow-Up Coordinators	Room 511	USD Staff
	Group B	Therapists Discussion Session	Room 918	Dr. Boyatzis
		PMT Therapists		
	Group C	Administration/Evaluation/ Coordination Session	Timberline Room	Dr. Nichols Ms. Weinstein
		Rehabilitation Coordinators Evaluators		Mr. Butler
•		Other Attendees		Dr. Ellingstad
		•		•
		THREE PAGES FOR SPECIFIC GRO FOR TUESDAY AND WEDNESDAY SES		
•				

WEDNESDAY, APRIL 23, 1975

9:00-10:30am

Group Sessions

Group A Group B Group C Room 511 Timberline Timberline

10:30-11:00am

Coffee Break

11:00-12:00pm

Results of Tuesday's Group Meetings/Discussion

Plenary

Timberline

CHECK OUT PRIOR TO 1:00PM

GROUP A (INTERVIEWER) SCHEDULE

ROOM 511

TUESDAY,	APRIL	22,	1975

Follow-Up Workshop Activities

Dr. David Struckman Dr. Raymond Reis Dr. Mark Olshan

9:00-9:30am Mortimer-Filkins Administration and Scoring 9:30-10:00am Current Status Questionnaire and Personality Adjustment Scales Administration and Scoring 10:00-10:15am Break 10:15-12:00pm Records Check Documents

12:00-1:00pm Lunch

1;00-5:00pm Interview and Life Activities Inventory Administration and

Scoring

5:00-7:00pm

Dinner

7:00-9:00pm

Role Play Administration of Interview and Life Activities

Inventory ·

WEDNESDAY, APRIL 23, 1975

9:00-10:30am

Discussion and Recap of Follow-Up

Package

11:00-12:00pm

Planning Session with Groups B and C

GROUP B (THERAPIST) SCHEDULE

TUESDAY, APRIL 22, 19	ROOMS 911 and TIMBERLINE		
9:00am	Meet with Group C to review discussion items	Timberline	
9:30am	Meet with Dr. Boyatzis to discuss PMT training and implementation problems	Room 911	
10:15am	Break		
10:30am	Individual site meetings to discuss local issues	Rooms to be Assigned	
12:00pm	Break for Lunch		
1:00pm	Individual site reports with regard to local problems	Timberline	
2:30pm	Break		
2:45pm	Meet with Dr. Boyatzis to discuss PMT issues	Room 911	
5:00pm	Dinner		
7:00-9:00pm	Therapist Session	Room 911	
WEDNESDAY, APRIL 23,	1975		
9: 00-10:30am	Meet with Dr. Boyatzis to Review PMT issues	Room 911	
11:00-12:00pm	Planning Sessions with Groups A and C	Timberline	

GROUP C (COORDINATORS/EVALUATORS) SCHEDULE

TUESDAY, APRIL 22, 1975		
9:00am	Review of Suggested Discussion Items	Timberline
9:30am	Detailed review of Follow-Up Package/ Data System Development	Timberline
10:15am	Break	
10:30am	Individual site meetings to Discuss local issues	Timberline
12:00pm	Break for Lunch	
1:00pm	Individual site reports with regard to local problems	Timberline
2:30pm 2:30pm	Break	· •
2:45pm	Discussion of major implementation/ evaluation/Client issues	Timberline
5:00pm	Dinner	
7:00-9:00pm	Evaluator Meeting	Timberline
WEDNESDAY, APRIL 23, 1975		·
9:00-10:30 am	Review of major issues	Timberline
11:00-12:00pm	Planning Sessions with Groups A and B	Timberline

APPENDIX J

ASAP Short Term Rehabilitation Workshop Agenda February 16-20, 1976

ASAP REHABILITATION WORKSHOP AGENDA Denver Hilton - Denver, Colorado

February 16-20, 1976

Monday, 2/16/76

7:00 - 9:00 p.m.: Registration (Room 542)

Tuesday, 2/17/76

8:30 - 10:30 a.m.: Registration (Room 542)

9:00 - 10:30 a.m.: General Session

1. Purposes of workshop.

2. General overview of NHTSA rehab efforts. (Denver Room)

10:30 - 10:45 a.m.: Coffee Break

Coordinators

10:45 - 12:00 noon: Discussion of STR Study.

1. Assignment

2. Logistics

3. Caseloads

4. Problems

(Room 542)

Interviewers

Discussion of Interviewer

Session Agenda.

1. Purposes of workshop specifically related to interviewers.

2. Input to agenda by interviewers.

3. Modification of agenda if necessary.

(Room 540)

Evaluators

Discussion of STR Study.

1. Evaluation objectives.

2. STR study design (program and project level).

(Room 541)

Continued Nuesday, 2/17/76	Coordinators	Interviewers	Evaluators
L2:00 - 1:30 p.m.:	Lunch		
1:30 - 3:00 p.m.:	Join Interviewers for remainder of Workshop.	General discussion of STR project. 1. STR design. 2. Data flow. 3. Scoring development. 4. Importance of interviewers to STR study - data quality.	Discussion of LAI instrument 1. Development of LAI. 2. Current status of instruments. 3. Scoring. (Room 541)
2.00	O. Co. Daniela	(Room 540)	
3:00 - 3:15 p.m.:	Coffee Break		
3:15 - 5:00 p.m.		Discussion of LAI Section III - Interview. 1. Purpose of interview. 2. Item by item discussion. a. Identification of problem areas by HFL. b. Questions from sites.	STR data base. 1. STR data base characteristics. 2. Exchange and retrieval of data. 3. Interaction between project and program level evaluation of STR study.
•		(Room 540)	(Room 541)
5:00 - 6:00 p.m.	Individual site reports (Room 917/918)	(New Hampshire, Oklahoma)	

Coordinators and Interviewers Wednesday, 2/18/76 Evaluators 9:00 - 10:30 a.m.: Discussion of LAI Sections II and Status of project and program level IV - Questionnaires and Records Check. evaluation of ASAP Diagnosis/Referral/ 1. General discussion of Rehab Systems. Project analytic studies. questionnaires. 2. Program level analyses. a. Purpose of questionnaire. b. Identification of problem a. Summary of project reports. b. Appendix H data (including areas by HFL. c. Questions from sites. Table 15). General discussion of records c. Client file data. check. (Room 541) a. Purpose of records checks b. Area by area discussion of records check--identification of problems by HFL and questions from sites. Index arrest. STR assignments. Traffic offenses. Non-traffic offenses. Accidents. (Room 540) 10:30 - 10:45 a.m.: Coffee Break 10:45 - 12:00 noon: Discussion of MIS Reports. Discussion of current Analytic Study 1. Follow-up progress report. 5 and 6 Guidelines. 2. Modality status report. (Room 541) 3. Data quality report (to be introduced at workshop). (Room 540) 12:00 - 1:30 p.m.: Lunch

Wednesday, 2/18/76	Coordinators and Interviewers	Evaluators	
1:30 - 3:00 p.m.:	Discussion of non-MIS reports and assignment procedures. 1. 60-day modality status report. 2. Follow-up schedule. 3. Cross reference list. 4. Assignment procedures. a. Prescreening. b. Acceptable time frame for interview. c. When cases should and should not be dropped. (Room 540)	Discussion of Analytic Study 5 issues (Room 541)	
3:00 - 3:15 p.m.:	Coffee Break		
3:15 - 5:00 p.m.:	Discussion of site error report. 1. Format of report. 2. Explanation of each error message and causes of each. 3. Procedure for correction of errors. (Room 540)	Discussion of Analytic Study 6 issues (Room 541)	
5:00 - 6:00 p.m.:	Individual site reports (Florida, Arizo (Room 917/918)	ona)	

B

Thursday, 2/19/76 9:00 - 10:45 a.m.: Individual site reports (Colorado, Virginia) (Room 917/918) Privacy Act (New Hampshire, Arizona, Oklahoma, Texas, Missouri) (Room 541) 10:45 - 11:00 a.m.: Coffee Break 11:00 - 12:45 p.m.: Individual site reports (Texas, Missouri) (Room 917/918) Privacy Act (Colorado, Virginia, Louisiana, Arizona, Florida) (Room 541) 12:45 - 2:00 p.m.: Lunch Coordinators and Interviewers Evaluators 2:00 - 3:30 p.m. Discussion of site specific problems Development of recommended guidelines with all sites present/Final disfor Analytic Study 5. (Room 541) cussion of report issues. (Room 540) 3:30 - 3:45 p.m.: Coffee Break 3:45 - 5:15 p.m.: Discussion of site specific problems Development of recommended guidelines for Analytic Study 6 with all sites present/Wrap-up of (Room 541) report issues. (Room 540) 5:15 - 6:15 p.m.: Individual site report (Louisiana) (Room 517/518)

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