

A Bibliography of Selected RAND Publications

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SMOKING, ALCOHOL, AND DRUG ABUSE (Pre-1995)

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- STACY, A. W.**
P-7232 Multistage Path Models of Adolescent Alcohol and Drug Use: A Reanalysis.
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ABSTRACTS

MONOGRAPH/REPORTS

MR-166-DPRC Private Versus Public Sector Insurance Coverage for Drug Abuse. J. A. Rogowski. 1993.

This study examined financing mechanisms currently in place for treating drug abuse, focusing primarily on differences between private and public insurance mechanisms. Within the private sector, insurance coverage for drug abuse treatment is quite restrictive. Limitations typically exist on the type and amount of treatment that can be received per year or per lifetime, and benefits may quickly be exhausted. Limitations also exist with regard to public insurance funding. Eligibility requirements and the authorized settings in which care may be provided are extremely restrictive. It has been argued that public funding for drug abuse should be mainstreamed into Medicaid. However, this is not likely to occur due to significant institutional barriers, and in particular to the highly restrictive eligibility requirements for public programs.

MR-201-USDP A Simple Economic Model of Cocaine Production. M. Kennedy, P. Reuter, K. J. Riley. 1994.

This report presents a simple equilibrium model of the cocaine industry in Peru, Bolivia, and Colombia. The purpose of the model is to represent the fundamental economic relations that determine the size of cocaine output and the price of cocaine, and to simulate the effects of policy initiatives or other changes in the surrounding environment. Model results indicate that: "crop substitution" programs will have a negligible impact on the world cocaine market. Cocaine supply control strategies that seize and destroy 70 percent or less of production, without limiting the total level of production, will have little impact on the market. Changes in the size of the world cocaine market have a relatively modest long-run impact on the standard of living of average workers in Peru, Bolivia, and Colombia.

MR-234-A/DPRC A System Description of the Heroin Trade. M. T. Childress. 1994.

This report describes and discusses applications for a computer spreadsheet-based, comprehensive "systems description" of the quantity and flow of heroin from initial cultivation and processing, through international transportation, to domestic distribution. To examine the potential utility of this tool, this report details three distinct but related applications: improving the estimation

processes, conducting sensitivity analyses, and guiding planning and assessment. In improving the estimation process, an analyst can use the framework to evaluate assumptions or data in terms of their downstream effects on other indicators (e.g., the likely downstream effects of an increase in the opium crop yields). Sensitivity analysis can be used to understand the impact of certain parameters versus others, which may be helpful in allocating intelligence resources, and to evaluate first-order effects of a change in the system, such as an eradication program. As a tool for more effective planning and assessment, the model can help planners think in terms of a strategic framework, for example, of linking assumptions on production in Southeast Asia to heroin flows in the United States.

MR-235-A/DPRC A System Description of the Marijuana Trade. M. T. Childress. 1994.

This report describes and discusses applications for a computer spreadsheet-based, comprehensive "systems description" of the quantity and flow of marijuana from initial cultivation and processing, through international transportation, to domestic distribution. To examine the potential utility of this tool, this report details three distinct but related applications: improving the estimation processes, conducting sensitivity analyses, and guiding planning and assessment. In improving the estimation process, an analyst can use the framework to evaluate assumptions or data in terms of their downstream effects on other indicators (e.g., the likely downstream effects of an increase in the marijuana crop yields). Sensitivity analysis can be used to understand the impact of certain parameters versus others, which may be helpful in allocating intelligence resources, and to evaluate first-order effects of a change in the system, such as an eradication program. As a tool for more effective planning and assessment, the model can help planners think in terms of a strategic framework, for example, of linking assumptions on production in Southeast Asia to marijuana flows in the United States.

MR-236-A/AF/DPRC A System Description of the Cocaine Trade. B. Dombey-Moore, S. A. Resetar, M. T. Childress. 1994.

Gaps and inconsistencies in the picture of the cocaine trade increase the difficulty of making good choices about resource allocation and drug-fighting strategies. They also make it more difficult to evaluate the effectiveness of existing policies. This report documents a computer spreadsheet-based "systems description" for the cocaine trade that is a combination of database and analytical tool.

Its structure allows users to substitute their own data or assumptions about parameters while preserving consistency or "conservation of mass" throughout the system. Three systems spreadsheets mirror the general pattern of the cocaine trade: production, international transportation, and U.S. distribution. In addition, a longitudinal database provides primarily production-related data from 1984 through 1990.

MR-282-BGC/DPRC Substance Abuse Problems and Programs in Newark: A Needs Assessment for Newark's Fighting Back Initiative. P. A. Ebener, P. W. Greenwood, J. A. Fagan. 1993.

This report describes the nature and extent of substance abuse problems in Newark, their effects on the community, and the programs and resources currently addressing them. Because it focuses primarily on the city's problems, this report does not present a very flattering portrait. Indeed, some of the figures it contains are quite depressing. However, Newark is not alone in possessing these problems. Any city of significant size will have its own pockets of high-risk residents exhibiting many of the same problems of self-destructive behavior. What does set Newark apart is its determination to recognize these problems, and mobilize the resources to bring about change. The study was commissioned by the Boys' and Girls' Clubs of Newark, the lead agency in the Newark Fighting Back Initiative. The objective of this initiative is to develop intensive, community-wide activities that will help reduce local drug use and its attendant problems.

MR-331-ONDCP/A/DPRC Controlling Cocaine: Supply Versus Demand Programs. C. P. Rydell, S. S. Everingham. 1994.

This report analyzes the relative cost-effectiveness of various available drug interventions. Four such interventions analyzed in this document are (1) source country control; (2) interdiction; (3) domestic enforcement; and (4) treatment of heavy users. The first three of these programs focus on "supply-control," whereby the cost of supplying cocaine is increased by seizing drugs and assets and by arresting and incarcerating dealers and their agents. The fourth program is a "demand-control" program because it reduces consumption directly, without going through the price mechanism. This study states that an estimated \$13 billion are being spent in the United States each year on the four drug programs listed above and that the bulk of those resources are spent on domestic enforcement. Treatment of heavy users has only a small percentage of this budget, even when privately funded treatment is included. Given the high cost of "supply control" programs, this report concludes that treatment of heavy users may be a more cost-effective way of dealing with drug interventions.

MR-332-ONDCP/A/DPRC Modeling the Demand for Cocaine. S. S. Everingham, C. P. Rydell. 1994.

This report documents the development of a two-state Markovian model of the demand for cocaine and includes the estimation of incidence, prevalence, cohort retention, and consumption. The Markovian model is required to fit (1) the overall prevalence data; (2) the fraction of all users who are heavy users in 1985, 1988, and 1990; and (3) the fraction of a cohort of initiates that is still using drugs ten years later, the ten-year cohort retention rate. The study states that the incidence of new users into light cocaine use has varied greatly over the years and is an input to the model; however, the model cannot predict future prevalence—it can only project prevalence given a hypothetical incidence scenario. The model also demonstrates that the fraction of all cocaine users who are heavy users has varied greatly over time, and that peak heavy usage followed peak incidence by about ten years. Consequently, the effect on heavy usage of government programs that reduce incidence (such as prevention programs) will only be realized many years later.

MR-536-OSD Preventing Drug Use Among Youth Through Community Outreach: The Military's Pilot Programs. J. P. Caulkins, N. Fitzgerald, K. E. Model, H. L. Willis. 1994.

Congress directed the military to establish pilot community outreach programs to reduce the demand for illegal drugs among youth. This report examined the potential suitability of the military for such roles, the pilot programs that were implemented, their effectiveness, how the programs affected the military, and some desirable attributes of military-run prevention programs for youth. The information for the study was gathered largely through site visits and telephone interviews with program administrators, staff, participating youth, parents, and community leaders. A literature review, background research, and supporting calculations supplemented these efforts. The study concluded that a useful generalization is that programs that give youth a chance to interact directly with military personnel tap military comparative advantage. Analysis of the pilot programs suggested that six program attributes should be considered in establishing or expanding such programs: rely on volunteers, keep individual programs to a modest size, design programs locally, provide central leadership, target programs for youth at high risk for drug abuse (but not the most troubled youth), and do not rule out short programs.

REPORTS

R-1739 Alcoholism and Treatment. D. J. Armor, J. M. Polich, H. B. Braiker. 1976.

This study, supported by the National Institute on Alcohol Abuse and Alcoholism, offers an in-depth evaluation of treatment provided by federally funded Alcoholism Treatment Centers. An input-output model is formulated to test treatment effects and their relationship to various etiological conceptions of alcoholism. The data base includes national samples of alcoholics interviewed at 6 months and at 18 months after admission to treatment, as well as comparison data on drinking patterns in the general population. Client characteristics that may be of prognostic significance in alcoholism, such as social background, ethnicity, marital status, employment, and previous drinking, are examined in detail. Using a definition of remission that includes both abstention and drinking behavior within a range specified as normal, the study finds that 70 percent of those treated are in remission at 6 and at 18 months following entry. These remission rates are quite similar regardless of the type of treatment given. Moreover, remission rates observed among such treated alcoholics are higher than those observed among persons who remain untreated, 50 percent of whom were in remission. Thus, the fact of treatment appears to be more important than the specific type of treatment. 229 pp. Bibliog. (DGS)

R-2308-AF Alcohol Problems: Patterns and Prevalence in the U.S. Air Force. J. M. Polich, B. R. Orvis. 1979.

Examines the nature and extent of alcohol-related problems among Air Force and comparable populations, based on special surveys, official records, and alcoholic beverage sales data. Two distinct types of alcohol problems are identified: alcohol dependence, a severe and chronic condition linked to alcoholism; and adverse effects of alcohol, such as health impairment, decreased productivity, or social disruption. 13.9 percent of Air Force personnel are estimated to be affected, with 4.6 percent among these classified as dependent. Results show that the patterns and rates of alcohol problems in the military services are similar to those found in comparable civilian groups. The analysis isolates important behavioral risk factors, such as frequent heavy drinking, intoxication, and social warnings, that may be used as precursory signals of more serious problems.

R-2374/1-HEW Conceptualization and Measurement of Health Habits for Adults in the Health Insurance Study. Vol. I, Smoking. A. L. Stewart, R. H. Brook, R. L. Kane. 1979.

An examination of smoking behavior in the first of a four-volume series of the RAND Health Insurance Study (HIS). The measures of smoking will be used in the HIS primarily as proxy measures of future health status in tests relating generosity of health insurance to future health status. This report includes (1) a review of the way

smoking has been measured by other investigators, and how its effects on health status are assessed; (2) a review of the adverse effects of smoking on future health status, and the types of changes in smoking behavior that reduce these effects; (3) a description of the HIS measures of smoking, including frequency distributions for the measures based on data collected at enrollment in the HIS; and (4) a brief overview of the hypotheses to be tested using the smoking measures. Other volumes in the series cover overweight, alcohol consumption, and exercise.

R-2433-NIAAA The Course of Alcoholism: Four Years After Treatment. J. M. Polich, D. J. Armor, H. B. Braiker. 1980.

Traces longitudinal patterns of alcohol-related problems and alcoholic remission over four years. A sample of 922 male alcoholics was assessed at the time of admission to treatment and at several followup points; at four years, the data included interviews and validating information for survivors, and official causes of death for those deceased. The analysis identifies factors associated with remission, relapse, and alcohol-related death over the four-year period. Patterns of psychological functioning and social adjustment are also examined and related to drinking behavior. Methodological analyses assess the validity of self-reports and the extent of potential bias due to nonresponse. Results show that although about half of the cohort was in remission at four years, remissions were generally intermittent rather than stable over long periods of time.

R-2727-AF The Effectiveness of Air Force Alcohol Education Seminars. P. Carpenter-Huffman, B. R. Orvis, D. J. Armor, G. M. Burkholz. 1981.

An evaluation of the Air Force Social Actions Seminar Program for educating personnel about drug and alcohol abuse. The authors analyze the objectives, cost, implementation, and effects of the program, and recommend policy changes to improve the effectiveness and efficiency of prevention efforts. Conclusions are that although the seminars have some immediate effects on several attitudinal and informational measures, they are not large and diminish with time. Recommendations are that prevention objectives for the total Air Force population be limited to information transmission and that attempts to change attitudes and behaviors be reserved for special groups, such as at-risk individuals or persons responsible for identifying personnel with alcohol problems. These measures would entail (1) strengthening substance abuse education in Basic Military Training, programs for incoming officers, and base-level orientation programs; (2) increasing the responsibility of supervisors responsible for identifying persons with alcohol problems; and (3) expanding the Alcohol Awareness Seminar for persons with less serious or incipient alcohol problems.

R-2813-AF Effectiveness and Cost of Alcohol Rehabilitation in the United States Air Force. B. R. Orvis, D. J. Armor, C. E. Williams, A. J. Barras, D. Schwarzbach. 1981.

Evaluates the scope and outcome of rehabilitation efforts, the success of the Alcohol Rehabilitation Program in identifying impaired persons for treatment, and the cost-effectiveness of different interventions. Conclusions are that clients show substantial improvement after treatment and that the less intensive treatments are as effective as more intensive interventions for persons with comparable impairment at admission. However, less than 10 percent of the problem population appears to be identified for treatment annually and the use of intensive interventions may be overemphasized. Recommendations are that identifications be increased and that the higher resultant costs be accommodated through greater use of the less intensive interventions. Other suggestions to optimize efficiency include assigning some clients to 14-day inpatient programs instead of 28-day programs; eliminating Awareness Seminar attendance for clients receiving more intensive services; emphasizing group counseling as opposed to individual counseling; and placing reasonable limits on the maximum number of counseling sessions that a client may attend.

R-2867-AF The Control of Alcohol Problems in the U.S. Air Force. D. J. Armor, B. R. Orvis, P. Carpenter-Huffman, J. M. Polich. 1981.

An evaluation of the Air Force's Alcohol Abuse Control Program, aimed at reducing the incidence of alcohol problems and rehabilitating personnel who experience them. Important findings are: (1) Only about 10 percent of Air Force personnel with serious alcohol problems are identified and referred for rehabilitation. (2) The four-hour Education Seminars—the Air Force's major prevention effort—do not have a significant long-term impact on drinking behaviors or attitudes toward drinking. (3) Even for more impaired clients, outpatient counseling at local bases works as well as inpatient treatment at regional hospitals and is more cost-effective. (4) For less-impaired clients, the eight-hour Alcohol Awareness Seminars are more cost-effective than outpatient counseling, indicating that efficiency might be enhanced by eliminating Education Seminars and increasing Alcohol Awareness Seminars. (5) The importance of identification should be stressed at all command levels and stronger measures taken to overcome the social pressures that work against identification.

R-3076-CHF Strategies for Controlling Adolescent Drug Use. J. M. Polich, P. L. Ellickson, P. Reuter, J. P. Kahan. 1984.

The purpose of this study is to evaluate the available evidence on the effectiveness of drug control measures, and to recommend the most promising areas for future private and public programs to reduce the use of drugs by young people. Illicit drug use is widespread among both adolescents and adults. Programs to control it have employed three principal methods: (1) enforcement of drug laws; (2) treatment of chronic abusers; and (3) prevention of initial drug use. The authors find that while intensified law enforcement is not likely to reduce adolescent drug use, and the benefits of expanded treatment remain uncertain, prevention programs hold more promise. The most encouraging evidence comes from the success of school-based programs to prevent cigarette smoking, which offer a strategy that may be adaptable to other drugs.

R-3655-GWRC Drug Use and Drug Programs in the Washington Metropolitan Area. P. Reuter, J. Haaga, P. J. Murphy, A. Praskac. 1988.

Washington's drug problems are severe compared with those of other metropolitan areas. There is a sustained high prevalence of PCP use. Enforcement of drug prohibition laws, traditionally the most visible response to drug use, has yet to affect consumption. Although acknowledged as the best hope for the future, prevention continues to receive little public funding. The authors recommend development of PCP treatment programs, expansion and restructuring of prevention programs, expansion of methadone treatment programs, and improved coordination among programs and jurisdictions. Research and data collection should be done at the local level.

R-3754-CHF Designing and Implementing Project ALERT: A Smoking and Drug Prevention Experiment. P. L. Ellickson, R. M. Bell, M. A. Thomas, A. E. Robyn, G. Zellman. 1988.

This report describes the design and implementation of Project ALERT, a multisite, multiyear test of a smoking and drug prevention program for adolescents. Project ALERT, which is designed to curb adolescent drug use both by motivating youngsters to resist drugs and by helping them acquire the skills to do so, was implemented in 30 California and Oregon schools, beginning in 1984. This report outlines how the curriculum and the evaluation component were designed and implemented. In addition, the authors assess the soundness of their experimental design, determine whether the curriculum was carried out as intended, and gauge how well that curriculum was received in the classroom.

R-3894-RF Money from Crime: A Study of the Economics of Drug Dealing in Washington, D.C. P. Reuter, R. J. MacCoun, P. J. Murphy, A. F. Abrahamse, B. Simon. 1990.

This report examines the role of drug selling in the economic life of people at risk of long-term poverty, specifically young males in Washington, D.C. Drawing on data provided by the District of Columbia Pretrial Services Agency and interviews with probationers, the authors focus on District residents charged with drug selling. They estimate the number of persons involved in the street drug market, describe their characteristics, and discuss what they earn from drug selling. The authors also present data on how adolescents in high-risk areas view drug selling and conclude by offering explanations for participation and earnings patterns, and their policy implications. The authors' findings dispel some of the mythology of the drug marketplace—for example, approximately two-thirds of drug dealers reported being legitimately employed at the time of their arrest. It is the authors' view that the goal of drug abuse prevention will be best served by exploring ways to reduce demand in the street markets and deter young men from selling drugs.

R-3896-CHF Prospects for Preventing Drug Use Among Young Adolescents. P. L. Ellickson, R. M. Bell. 1990.

Project ALERT (Adolescent Learning Experiences in Resistance Training), which is based on the social influence model of prevention, was developed at RAND to prevent or reduce the use of alcohol, cigarettes, and marijuana by adolescents. Tested in 30 junior high schools in California and Oregon, it was effective in preventing marijuana use among both high and low-risk students. It also curbed cigarette use, including regular and daily use, among students who had previously experimented with smoking. However, early gains in preventing alcohol use during the seventh grade eroded by the time the students reached the eighth grade, suggesting that the social influence model is more likely to work against substances that are disapproved by society. It was also not effective with confirmed cigarette smokers. Notably, the program was at least as effective in schools with substantial minority populations as in predominantly white schools. The report recommends that programs based on the social-influence model be implemented in the nation's middle and junior high schools. It also suggests that booster sessions are critical for maintaining the effects of drug prevention programs.

R-3919-CHF Drug Prevention in Junior High: A Multisite, Longitudinal Test. P. L. Ellickson, R. M. Bell. 1990.

Results from a longitudinal experiment to curb drug use during junior high indicate that education programs based on a social-influence model can prevent or reduce young adolescents' use of cigarettes and marijuana. This multisite experiment involved the entire seventh grade cohort of 30 junior high schools drawn from eight urban, suburban, and

rural communities in California and Oregon. Implemented between 1984 and 1986, the curriculum's impact was assessed at 3-, 12-, and 15-month follow-ups. The program, which had positive results for both low- and high-risk students, was equally successful in schools with high and low minority enrollment. However, the program did not help previously confirmed smokers, and its effects on adolescent drinking were short-lived.

R-4085-SKF/DPRC Drug Use in the Detroit Metropolitan Area: Problems, Programs, and Policy Options. J. Haaga, R. Scott, J. Hawes-Dawson, E. A. McGlynn, K. K. Russell. 1992.

This report analyzes recent trends in drug use and drug-related problems in the Detroit metropolitan area (Wayne, Oakland, and Macomb counties), assesses the school and community-based programs currently dealing with drug use problems, discusses public and private treatment systems, and describes trends in drug law enforcement. Finally, it discusses the need to (1) devote more resources to prevention, (2) build coalitions across geographic and administrative boundaries, and (3) experiment, giving efforts a realistic amount of time to succeed. An appendix provides details on the sources of drug-use data.

R-4152-UCOP The Political Evolution of Anti-Smoking Legislation. P. D. Jacobson, J. Wasserman, K. Raube. 1992.

Despite the known dangers of tobacco use and environmental tobacco smoke, only a few states have enacted comprehensive clean-indoor-air laws that restrict smoking in public places. Using a case study methodology, the authors examined the political evolution of tobacco control initiatives in Florida, Illinois, Minnesota, New York, Texas, and Arizona. They conclude that the key factors explaining the enactment of tobacco-control legislation are organized anti-smoking coalitions and the long-term commitment of key legislators to supporting the legislation. These factors alone do not guarantee the enactment of anti-smoking legislation, but such legislation is unlikely to be enacted absent either factor. The results suggest that the active involvement of the state's executive branch and strong local ordinances are important factors. How the issue is framed is another important component of legislative outcome. While the legislative outcome in any state is not directly a function of which side controls the debate, it appears that anti-smoking forces fare better when public-health issues dominate and that the tobacco industry benefits when personal freedoms arguments are predominant.

R-4173-CHF Challenges to Social Experiments: A Drug Prevention Example. P. L. Ellickson, R. M. Bell. 1992.

Evaluations of school-based drug prevention programs have been plagued by problems that limited the validity of their findings. These limitations pose clear challenges for current prevention research. This report describes how a recent multi-site experiment conducted in 30 junior high schools met several of those challenges, including evaluating the program in a variety of environments, achieving well-balanced experimental groups, implementing the program as designed, obtaining reliable outcome measures, and eliminating alternative explanations for the results. In most cases, multiple strategies were employed. Extensive analyses were conducted to assess how well the strategies worked; they indicated that each obstacle was overcome. This success implies several lessons for future experiments that are generally applicable to field studies conducted with schools and other organizations. Of particular importance are the guidelines for recruiting institutions from diverse communities and maintaining their cooperation over several years and the techniques for facilitating faithful program delivery and monitoring the implementation process. Recommended design and analysis features include using more than simple random assignment to achieve a balanced design, and employing control variables to rule out alternative explanations of the results—even under conditions of substantial pre-treatment equivalence.

NOTES

N-1505-DOJ Data Tape for the RAND 1976 Survey of California Prison Inmates. M. A. Peterson, S. M. Polich, J. M. Chaiken. 1980.

Data collected by a survey of 624 California prisoners and analyzed as described in R-2200, *Doing Crime: A Survey of California Prison Inmates* are being made available to the public for secondary analysis. This Note documents the contents of the data tape, which include self-report information from the respondents about their criminal behavior prior to incarceration, drug use, economic and social circumstances, and psychological characteristics.

N-2184-CHF Project ALERT, a Smoking and Drug Prevention Experiment: First-Year Progress Report. P. L. Ellickson. 1984.

This Note reports on the progress of the first year of Project ALERT (Adolescent Learning Experiences in Resistance Training), an experiment testing the effectiveness of the social influence approach in preventing adolescent drug use. The program is based on evidence that adolescents appear to use drugs in response to social influences and in emulation of behavior they

view as mature and independent. An important objective of the experiment is to test the program in a variety of school environments. A key feature of the curriculum is its stress on maximum student participation and practice, eliciting responses from them rather than forcing values and facts on them. The core curriculum covers (1) reasons why people do and do not use drugs, (2) consequences of use, (3) identifying and rewriting the messages in ads, and (4) saying "no" to external and internal pressure.

N-2632-USDP The Interdictor's Lot: A Dynamic Model of the Market for Drug Smuggling Services. J. A. K. Cave, P. Reuter. 1988.

This Note presents a stylized dynamic model of the market for drug smugglers' services. The model is based on the observation that experienced smugglers may benefit from learning by doing, although the information (and the resulting cost advantage) may be subject to obsolescence. The authors analyze the effects of several variables, including different law enforcement strategies on smugglers of varying degrees of experience, the degree of competitiveness in the supply of smugglers' services, and the conditions governing entry of novice smugglers. The theoretical analysis is supplemented by a Lotus-based simulation model, which is included with the Note, and illustrated by several numerical examples.

N-2933-CHF Baseline Nonresponse in Project ALERT: Does It Matter? R. M. Bell, C. Gareleck, P. L. Ellickson. 1990.

This Note evaluates the impact of baseline nonresponse in Project ALERT (Adolescent Experiences in Resistance Training), a longitudinal experiment that tests the effectiveness of a school-based drug prevention program for seventh- and eighth-grade students in 20 treatment and 10 control schools in California and Oregon. Of the intended sample, 16 percent failed to participate in some or all of the baseline data collection. The analysis addresses four issues: (1) the number of students lost because of baseline nonresponse; (2) the ways each group of nonrespondents—parent refusals, student refusals, and absentees—differed from respondents; (3) the ways nonresponse changed the sample; and (4) whether nonresponse introduced differences among the treatment groups. The authors find that the steps taken to reduce baseline nonresponse in Project ALERT—passive informed consent, careful explanation of data privacy, and makeup sessions for absentees—proved successful. Besides holding baseline nonresponse to 16 percent, these steps sharply limited differences between the baseline population and baseline sample and avoided substantial differences among the treatment groups.

N-2935-CHF An Assessment of Active Vs. Passive Methods for Obtaining Parental Consent. P. L. Ellickson, J. Hawes-Dawson. 1989.

This study provides new information on how passive and active consent methods work in practice. Based on results from two junior high schools, the authors found that (1) almost all parents received consent packages sent by regular first class mail, but getting them to pay attention to the materials often required additional communication methods; (2) nonresponse to passive consent typically reflected conscious parental approval; (3) nonresponse to active consent generally signified latent consent, not a deliberate refusal; and (4) vigorous retrieval methods substantially raised active consent response rates, but at a high cost in time and money. These findings suggest that passive consent can provide a viable alternative to active consent when supplemented by appropriate backup and privacy safeguard measures.

N-2941-NCHSR The Taxes of Sin Do Smokers and Drinkers Pay Their Way? W. G. Manning, E. B. Keeler, J. P. Newhouse, E. M. Sloss, J. Wasserman. 1989.

This Note estimates the lifetime discounted costs that smokers and drinkers impose on others through collectively financed health insurance, pensions, disability insurance, group life insurance; fires; motor vehicle accidents; and the criminal justice system. Although nonsmokers subsidize smokers' medical care and group life insurance, smokers subsidize nonsmokers' pensions and nursing home payments. On balance, smokers probably pay their way at the current level of excise tax on cigarettes; raising those taxes, however, could reduce the number of adolescent smokers. In contrast, drinkers do not pay their way: current excise taxes on alcohol cover only about half the costs imposed on others.

N-2964-RC Terrorism: Policy Issues for the Bush Administration. B. M. Jenkins. 1989.

In many ways, the issue of terrorism transcends policy analysis; it also raises fundamental philosophical questions about the worth of individual human life when a person is held hostage, the existence and importance of American values as a constraint on operations even against those who are terrorists, the credibility of American diplomacy, the utility of military force, and the legitimacy of assassination. This Note touches upon these questions as it addresses the policy issues that are likely to confront the Bush Administration. Although rooted in analysis, it offers the author's personal view. In particular, he discusses the options available when terrorism is viewed as crime or as war; considers whether military force should be used; evaluates the use of covert operations against terrorists; outlines the problems associated with securing the release of hostages; and reviews the chances for sustaining

international cooperation against terrorism. Finally, the author cautions about the domestic terrorism of gang violence associated with drug trafficking.

N-3089-CHF Does Pooling Saliva for Cotinine Testing Save Money Without Losing Information? R. M. Bell, P. L. Ellickson. 1989.

Although testing for cotinine in saliva offers an attractive means to verify survey responses about recent use of tobacco, its relatively high cost prevents its use in many studies of substance use. Pooling two or more samples can dramatically reduce the cost when prevalence rates are low, but many researchers fear that failures in detecting users will outweigh the monetary benefit. Results from pools of two saliva specimens collected from seventh-grade students provide the first empirical evidence that pooling saves money without compromising the test's accuracy to detect recent tobacco use. Pooling successfully identified all specimens near or above the 10 ng/ml threshold for evidence of active tobacco exposure. The authors conclude that analysts can realize substantial savings by pooling saliva samples from young populations without losing valuable information.

N-3108-CHF How Generalizable Are Adolescents' Beliefs About Pro-Drug Pressures and Resistance Self-Efficacy? R. D. Hays, P. L. Ellickson. 1990.

Based on three waves of data from 1,261 adolescents, this study examines the nature of resistance self-efficacy in relation to different drugs and social situations, as well as its relationship to perceived pressure to use drugs. The authors found that both self-efficacy and perceived pressure to use drugs appear to be generalizable across substances (alcohol, cigarettes, and marijuana), but adolescents do tend to distinguish between their capacity to resist drugs in different social situations. Adolescents also distinguish between how much pressure they feel and their ability to resist that pressure, but the great majority report lower levels of self-efficacy in higher-pressure situations. This relationship is strongest for alcohol and weakest for marijuana. The results imply the following for prevention programs: (1) adolescents can be taught to resist one or more of the commonly used drugs with a reasonable expectation that the skills will generalize to other drugs; (2) resistance self-efficacy learned in one situation can be expected to have some generalizability to other situations, but it may be important to link resistance training with a range of situations to ensure the greatest effectiveness; (3) to be maximally effective, prevention programs may need to help adolescents reduce the amount of pressure experienced as well as develop resistance skills; and (4) such efforts are likely to be particularly important for situations involving alcohol.

N-3189-CHF How Accurate Are Adolescent Reports of Drug Use? E. J. Reinisch, R. M. Bell, P. L. Ellickson. 1991.

Project ALERT (Adolescent Learning Experiences in Resistance Training) is a multiwave study that tests the effect of a drug-prevention program for seventh- and eighth-grade students. Because it relies on self-reports to obtain information on whether and how often students used cigarettes, alcohol, and marijuana, it is important to assess whether the collected data accurately represent the respondents' use. The authors examined the consistency and completeness of student responses within and across questionnaires to gain information about the reports' accuracy. They also assessed how the problems arose and what impact they might have on data bias and treatment effects analyses. Although 40 percent of students had at least one inconsistency across four waves, fewer than 2 percent committed inconsistencies that involved frequent use. The authors concluded that reporting errors do not threaten the validity of the treatment effects analysis and that the overwhelming majority of Project ALERT students accurately reported their drug use.

N-3291-CHF Do Teens Tell the Truth? the Validity of Self-Reported Tobacco Use by Adolescents. M. Freier, R. M. Bell, P. L. Ellickson. 1991.

This Note compares self-reported tobacco use by adolescents with laboratory test results that measured levels of cotinine in respondents' saliva. The validity of self-administered questionnaires to investigate sensitive topics, such as substance abuse, is controversial. Investigators worry that respondents may intentionally underreport or overreport their actions or that they may conceal relevant behaviors. Thus, two major goals in substance use studies are to maximize the validity of self-reported use and to confirm that validity. In Project ALERT, a drug use prevention experiment for adolescents, the authors took several steps to encourage honest and accurate self-reports, including guaranteeing the confidentiality of responses and collecting samples of saliva from students. They found that the magnitude of underreporting is exceedingly low—less than 1 percent of the total responses at each of the four waves of data collection considered. An unexpected result was the substantial level of apparent overreporting of tobacco use that emerged. Further investigation suggests that the overreporting phenomenon is an artifact of the lack of sensitivity of the lab test to the low levels of tobacco use characteristic of many adolescents. The authors conclude that when proper data collection procedures are followed, students will provide accurate and valid reports of their tobacco use.

N-3424-CHF Antecedents of Drinking Among Young Adolescents with Different Alcohol Use Histories. P. L. Ellickson, R. D. Hays. 1991.

Testing separate path analytic models for seventh grade users and nonusers, this study assesses the impact of cognitive, social influence, and behavioral antecedents on adolescent drinking three and twelve months later. For the group that had not tried alcohol by grade seven, the authors found that social influence factors—exposure to peers who drink or use marijuana and to adults who drink—foster more frequent alcohol use and binge drinking in the near term (three months later). The key peer influences on binge drinking were marijuana-specific. After twelve months, the child's own drinking experience during grade seven and peer and parental attitudes toward drugs emerge as important explanatory variables. For children who had already started drinking by grade seven, cognitive—as well as social and behavioral factors—affect near- and longer-term alcohol involvement. While the child's prior drinking habits have the strongest impact, baseline expectations of using alcohol also predict frequency of alcohol use and binge drinking after three and twelve months. Believing that alcohol use is harmful helps hold down increases in frequency of use (but not excessive use) as long as twelve months later. Engaging in deviant behavior or doing poorly in school did not predict future drinking among baseline nonusers, but did foretell which of the seventh-grade initiates were most likely to engage in binge drinking during grade eight. The authors discuss the study's implications for prevention.

N-3495-DPRC Health Care System Response to Prenatal Substance Use: An Exploratory Analysis. G. Zellman, P. D. Jacobson, H. DuPlessis, M. R. DiMatteo. 1992.

Despite considerable public and media concern, little attention has been devoted to prevention or early detection of substance use during pregnancy. A limited literature suggests that this lack of attention stems from a lack of policies or procedures for systematically identifying substance-using pregnant women and substance-exposed neonates in health care institutions. This study was designed to generate exploratory data about health care provider response to prenatal substance exposure and to examine current substance detection policies and practices in health care institutions. Based on interviews in local hospitals, study data reveal many disincentives to detecting substance exposure. For the most part, detection policies are not being developed or implemented, although hospitals serving poor communities are more likely to have such policies. Policy implications are discussed, including the appropriateness of mandated detection policies and whether such policies should be developed at the state or federal level.

N-3562-DPRC Federal Databases for Use in Drug Policy Research: A Catalogue for Data Users. P. A. Ebener, E. Feldman, N. Fitzgerald. 1993.

The Data Catalogue includes descriptions of federally funded national or multiple-site studies that have collected drug-related data over a series of years. It contains surveys specifically targeting drug use and its consequences; health surveys that include items about drug use; law enforcement surveys that offer information on drug offenses, drug offense sentencing, and drug use among offenders; surveys of youth behavior that contain data on drug use; and substance abuse treatment surveys that include data on treatment providers and their clients. The authors gathered available documentation and talked with the sponsors of these data sets, the organizations that collect and process the data, and as many users as possible to become familiar with the series' design, sampling, and data collection approaches. The researchers also investigated computer file construction, availability of the data for secondary analysis, and publications. The Catalogue is "user friendly" and includes a number of helpful tables that categorize elements across databases (e.g., populations studied, time periods covered by the databases, and specific drugs monitored).

RGS DISSERTATION

RGSD-102 Snow Job? The Efficacy of Source Country Cocaine Policies. K. J. Riley. 1993.

This dissertation presents a dynamic economic model of the cocaine industry and source country drug control policies. The model is used to assess the impact of eradication (voluntary and forced), interdiction, and development assistance on the production and export of cocaine from Bolivia, Colombia, and Peru. Most of the policies, with the exception of shock interdiction, can disrupt production for short (2–3 year) periods. However, even sustained levels of extreme policies (50% interdiction and eradication rates) fail to lead to permanent reductions in output. Policy cannot permanently reduce output because the cocaine industry is endowed with access to low-cost resources (land and labor), extreme mobility, and short recovery times between policy implementation and industry response. Over the short run, the lag between policy implementation and industry recovery can lead to temporary disruptions of cocaine output. Short-run disruption of cocaine production may be of utility because of its potential impact on initiation rates into cocaine use and, subsequently, on future cocaine consumption. However, short-run disruptions are relatively expensive in terms of budget costs and externalities such as increased political violence and dispersal of cocaine production.

Factors such as inventory accumulation, risk-related wage premiums, uncertainty about industry lag times, and the form used to model demand for cocaine create uncertainty as to the length of the short-run disruption resulting from a given policy. Current levels of source country control programs are incapable of generating substantial disruptions, and thus the most compelling justifications for maintaining the current approach are found in the data source country policies generate about the international drug trade and the support source country control programs provide for foreign policy objectives in the region. It is unclear whether the benefits of expanded short-run disruptions outweigh the budget costs and externalities. Additionally, the prospects for integrating substantial short-run disruptions into the National Drug Control Strategy remain unclear. Thus, much research remains to be done before substantial changes in source country control programs can, or should, be enacted.

REPRINTS

RP-102 Medical Care Costs of Intravenous Drug Users with AIDS in Brooklyn. C. L. Bennett, A. H. Pascal, M. Cvitanic, V. Graham, A. Kitchens, J. A. DeHovitz. 1992.

This article reports on a study of medical costs of intravenous drug users (IVDUs) with acquired immune deficiency syndrome (AIDS) in Brooklyn, NY. Sociodemographic and clinical data as well as information on medical resource use was gathered for 38 IVDUs with AIDS, all of whom belonged to minority racial/ethnic groups and were covered by Medicaid insurance. Data obtained through patient interviews and review of medical records indicated that the sample had mean annual medical charges of \$33,002 per patient per year. Average inpatient charges were \$24,171, with an average of 1.13 hospitalizations and 38.5 days of in-hospital care. Significantly more in-hospital care and higher inpatient charges on average were noted among patients who did not have a stable housing environment. Outpatient charges averaged \$8,831, with 80% for pharmaceuticals. This estimate of medical charges and resource use, one of the first developed in a cohort of nonwhite individuals with I.V. drug use as a risk factor for human immunodeficiency virus infection, is about one third less than recent estimates reported from studies of cohorts of white homosexual men. Originally published in *Journal of Acquired Immune Deficiency Syndromes*, v. 5, no. 1, 1992.

RP-130 Addictive Drugs: The Cigarette Experience. T. C. Schelling. 1992.

Cigarettes are among the most addictive substances of abuse and by far the most deadly. In this country smokers know it and try to stop. Their success has been dramatic but partial and excruciatingly slow, and until recently quite uncoerced by government. Cigarettes and nicotine have characteristics distinct among addictive drugs, and some of these help explain why efforts to quit smoking are so often frustrated. Nicotine itself is the most interesting chemical in the treatment of addiction and, in some forms, can pose a dilemma: compromise by settling for pure nicotine indefinitely, or stay with cigarettes and keep trying to quit. Nicotine is not alone among addictive drugs in becoming increasingly identified with the poorer classes. This article, reprinted from *Science*, looks at smoking behavior along with the social trend towards quitting, characteristics of cigarettes and the cigarette industry, and nicotine addiction. It observes that the motivation for quitting is probably strongest among people who are in a condition to appreciate longevity and are best positioned to receive and understand health messages from credible sources. Except for those lowest in socioeconomic status, motivating people to quit is no longer the problem. The problem is relapse, which can be coped with in one of two ways: (1) avoidance of relapse and (2) recovery from relapse. Originally published in *Science*, v. 255, no. 24, Jan. 1992.

RP-159 Stepping Through the Drug Use Sequence: Longitudinal Scalogram Analysis of Initiation and Regular Use. P. L. Ellickson, R. D. Hays, R. M. Bell. 1992.

Using a new technique for tracing the sequence of use over time, this study examined the pattern of drug involvement among 4,145 West Coast adolescents over the 4-year span from grades 7–10. During the period covered, the mid- to late 1980s, the authors found no evidence that cocaine has become a gateway drug. However, the data provided some support for treating cocaine initiation as a separate stage that precedes the onset of hard drugs other than pills. The analysis also showed that increased involvement with legal drugs constitutes an important step in the transition to hard drug use for most adolescents. Weekly alcohol use followed marijuana use and preceded use of all other illicit drugs for Hispanic, White, and Black youth. However, it followed use of hard drugs for Asians. Weekly smoking formed a distinct stage between initial use of pills and other hard drugs for non-Hispanic Whites. The results underscore the importance of prevention efforts aimed at curbing the transition to regular use of alcohol and cigarettes, as well as their initial use. Originally published in *Journal of Abnormal Psychology*, v. 101, no. 3, 1992.

RP-164 Insurance Coverage for Drug Abuse. J. A. Rogowski. 1992.

To most observers, it has become clear that the nation lacks the capacity to provide drug abuse treatment to all who need it. Recent attention in the policy community has focused on this need for expanded treatment services. The use of treatment services depends on the availability of services and the ability of the abuser to pay for treatment. The demand for and availability of services are themselves correlated with existing mechanisms for financing drug abuse treatment. Two financing mechanisms now exist: direct support, largely in the form of government block grants, and insurance. Block grant funding results in the direct provision of treatment services to drug abusers. Insurance increases the ability to pay for treatment services, thereby facilitating treatment on demand. In this commentary the author describes the characteristics of existing types of insurance for drug abuse treatment and discusses the resulting implications for access and use of services, paying specific attention to the differences between public and private insurance. In the current policy debate, some have argued that the public sector should move away from the direct provision of treatment toward the provision of more insurance. Given the population in question, Medicaid would seem the most likely public program to carry out this strategy. However, the author argues that the mainstreaming of drug treatment financing into Medicaid is not likely to occur, because of significant institutional barriers. Originally published in *Health Affairs*, v. 11, no. 3, Fall, 1992.

RP-167 After the Borders Are Sealed: Can Domestic Sources Substitute for Imported Drugs. P. Reuter. 1992.

The principal illicit drugs consumed in the U.S. are produced outside its borders. While an increasing share of marijuana is produced domestically, most of that drug is still grown in Mexico, Colombia, and Jamaica. All of the cocaine and heroin for U.S. consumption is supplied by other nations. The dominance of foreign production affects U.S. drug policy, which aims to prevent production overseas through eradication and crop substitution schemes, or to interdict smugglers of these drugs. This policy faces two criticisms: (1) Foreign production and smuggling cannot be controlled. The industry is too profitable for poor peasants to be kept from entering it, and the control of international commerce and traffic entering the U.S. is too difficult. (2) Even if the borders were sealed, the result would merely be a change in the nature of drugs consumed. Instead of foreign-source natural-based drugs, U.S. consumers would turn to domestically produced synthetics. This article examines this second claim, looking at three episodes in which drug imports have been seriously disrupted: the heroin drought of the mid-1970s; the elimination of methaqualone (Quaalude) imports in the early 1980s; and the substantial reduction in Colombian-source marijuana during the same period. In each case the author describes the evidence

pointing to sharply reduced availability and then examines data concerning consumption of substitute (illicit) drugs and changes in rates of initiation into use of the drug now in restricted supply. The central conclusion is that total drug consumption would decline if the natural products were no longer available, but that the harms associated with drug use might increase because of the greater dangers caused by synthetics. The primary basis for the conclusion is that pharmacological notions of substitutability turn out not to be descriptive of actual behavior; there is instead (weak) evidence of enduring preferences for imported drugs. Three principal data systems were employed: the DAWN (Drug Abuse Warning Network), the High School Senior Survey (HSSS), and the Narcotics Intelligence Estimate. Originally published in *Drug Policy in the Americas*, 1992.

RP-171 Are the Wages of Sin \$30 an Hour?: Economic Aspects of Street-Level Drug Dealing. R. J. MacCoun, P. Reuter. 1992.

The authors of this study interviewed 186 probationers in Washington, D.C., who acknowledged a recent history of drug dealing. Questions concerned their legitimate and illegitimate activities. Interviewees reported median net earnings of \$721 per month from drug sales—\$2,000 per month among the 37% who reported selling drugs on a daily basis. These figures compare with median monthly earnings of \$800 from legitimate employment for the 75% who reported such earnings. Street-level drug dealing appears to be a complement to, rather than a substitute for, legitimate employment, and it appears to be less profitable than media reports would suggest. Originally published in *Crime and Delinquency*, v. 38, no. 4, Oct. 1992.

RP-182 Substance Abuse Problems Among High-Risk Youth and Potential Interventions. P. W. Greenwood. 1993.

Although drug use among teenagers has declined significantly over the past decade, adolescents raised in impoverished urban communities continue to be at high risk for involvement in drug use and sales and for serious delinquency. Such youth often exhibit behavioral problems at school, associate with delinquent peers, have inadequate supervision at home, and are typically not helped by regular school-based drug resistance training programs. Findings from recent longitudinal studies and interactional theory suggest that preventive interventions with such youth must address a wide array of problems and service needs. One of the critical problems facing any program intended to serve such youth is getting them involved. Originally published in *Crime and Delinquency*, v. 38, no. 4, Oct. 1992.

RP-190 On Becoming Involved with Drugs: Modeling Adolescent Drug Use over Time. P. L. Ellickson, R. D. Hays. 1993.

The authors tested a model of the process of becoming involved with drugs during junior high. The sample included 698 students who were not using alcohol, cigarettes, or marijuana during grade 7 (T1); the follow-up data points were 12 and 15 months later (T2 and T3). The final model, which predicted 72% of the variance in drug use at T3, provides support for hypotheses drawn from both social and cognitive theories. Weak familial and school attachments fostered use by increasing the likelihood of exposure to pro-drug social influences (drug use offers); weak bonds with school also directly affected cognitive motivations (lower resistance self-efficacy, or RSE, and more positive outcome expectancies). In turn, social influences at T1 played a dominant role in initial use at T2, but cognitive motivations were also significant. At T3, prior use assumed the most prominent position. Drug-specific measures of RSE and expected use directly affected later use of that substance. The results indicate that both generic and drug-specific effects are needed to explain adolescent drug use. The authors discuss implications for prevention programs. Originally published in *Health Psychology*, v. 11, no. 6.

RP-192 Law Enforcement, the Price of Cocaine and Cocaine Use. J. E. DiNardo. 1993.

In this paper the author investigates the relationship between law enforcement and the price and use of cocaine. He merges data from the Drug Enforcement Administration's (DEA) STRIDE (System to Retrieve Information from Drug Evidence) and MTF (Monitoring the Future). In particular, the author applies a variety of grouped data estimators and relates these estimators to instrumental variables techniques, quasi-experiments, and classical experimental designs. The author finds no evidence that regional and time variation in DEA seizures of cocaine is helpful in explaining variation in either the demand or price of cocaine. Originally published in *Mathematical and Computer Modelling*, v. 17, no. 2, 1993.

RP-208 Preventing Adolescent Drug Use: Long-Term Results of a Junior High Program. P. L. Ellickson, R. M. Bell, K. A. McGuigan. 1993.

Although several studies have reported short-term gains for drug-use prevention programs targeted at young adolescents, few have assessed the long-term effects of such programs. Such information is essential for judging how long prevention benefits last. This paper reports results over a 6-year period for a multisite randomized trial that achieved reductions in drug use during the junior high school years. The 11-lesson curriculum, which was tested

in 30 schools in eight highly diverse West Coast communities, focused on helping 7th and 8th grade students develop the motivation and skills to resist drugs. Schools were randomly assigned to treatment and control conditions. About 4000 students were assessed in grade 7 and six times thereafter through grade 12. Program effects were adjusted for pretest covariates and school effects. Once the lessons stopped, the program's effects on drug use stopped. Effects on cognitive risk factors persisted for a longer time (many through grade 10), but were not sufficient to produce corresponding reductions in use. The authors conclude it is unlikely that early prevention gains can be maintained without additional prevention efforts during high school. Future research is needed to develop and test such efforts. Originally published in *American Journal of Public Health*, v. 83, no. 6, June 1993.

RP-209 Drugs and the Law: A Psychological Analysis of Drug Prohibition. R. J. MacCoun. 1993.

There is an ongoing American policy debate about the appropriate legal status for psychoactive drugs. Prohibition, decriminalization, and legalization positions are all premised on assumptions about the behavioral effects of drug laws. What is actually known and not known about these effects is reviewed. Rational-choice models of legal compliance suggest that criminalization reduces use through restricted drug availability, increased drug prices, and the deterrent effect of the risk of punishment. Research on these effects illustrates the need for a more realistic perspective that acknowledges the limitations of human rationality and the importance of moral reasoning and informal social control factors. There are at least 7 different mechanisms by which the law influences drug use, some of which are unintended and counterproductive. This framework is used to explore the potential behavioral effects of decriminalization and legalization. Originally published in *Psychological Bulletin*, v. 113, no. 3, 1993.

RP-214 Response Times for the CAGE, Short-MAST, AUDIT, and JELLINEK Alcohol Scales. L. Hill, J. Gillogly, M. W. Lewis, R. M. Bell, R. J. Nicholas. 1993.

The CAGE alcohol screening tool has been touted as a good choice for clinical settings because of its brevity. The authors administered the CAGE and three other alcohol screening instruments (the Short-MAST, AUDIT, and JELLINEK) by microcomputer to 296 clients at a drinking driver treatment program and three of the four scales to a second sample of 270 clients from six drinking driver treatment programs. The average response times for the CAGE were 31 and 32 sec, respectively, in the first and second samples. The average response time for the JELLINEK was approximately five times longer than it was for the CAGE; response time for the AUDIT averaged four times longer and response time for the Short-MAST

was two and a half times as long. The estimated reliability of the CAGE was the lowest and its standard error of measurement was the highest of the four scales. The authors recommend the Short-MAST as the tool of choice if the extra minute of administration time it requires in comparison with the CAGE is not critical. Originally published in *Behavior Research Methods, Instruments, & Computers*, v. 25, no. 2, 1993.

RP-224 Drug Policies and Problems: The Promise and Pitfalls of Cross-National Comparison. R. J. MacCoun, A. J. Saiger, J. P. Kahan, P. Reuter. 1993.

This is a brief essay about what cross-national comparisons can tell us about the relationship between drug policies and drug-related problems, and about some of the difficulties involved in making such comparisons. This essay reflects the authors' thinking and experience roughly halfway through a three-year cross-national study comparing drug policies and problem indicators across a number of Western industrialized nations. For reasons discussed, it would be premature to present preliminary statistical results in this essay; instead, the authors hope to stimulate curiosity about the experiences of other countries, and sensitivity as to the hazards of causal cross-national inference. Originally published in *Psychoactive Drugs & Harm Reduction: From Faith to Science*, London, 1993.

RP-225 Detecting Prenatal Substance Exposure: An Exploratory Analysis and Policy Discussion. G. Zellman, P. D. Jacobson, H. DuPlessis, M. R. DiMatteo. 1993.

Despite considerable public and media concern, little attention has been devoted to prevention or early detection of substance use during pregnancy. A limited literature suggests that this lack of attention stems from a lack of policies or procedures for systematically identifying substance-using pregnant women and substance-exposed neonates in health care institutions. Based on interviews in local hospitals, study data reveal many disincentives to detecting substance exposure. For the most part, detection policies are not being developed or implemented, although hospitals serving poor communities are more likely to have such policies. Policy implications are discussed, including the appropriateness of mandated detection policies and whether such policies should be developed at the state or federal level. Originally published in *Journal of Drug Issues*, v. 23, no. 3, Summer 1993.

RP-237 Do Drug Prevention Effects Persist into High School?: How Project ALERT Did with Ninth Graders. R. M. Bell, P. L. Ellickson, E. R. Harrison. 1993.

This article reports follow-up results during grade 9 for a multisite drug prevention program that curbed both marijuana and cigarette use during junior high. Based on

the social influence model of prevention, the curriculum sought to motivate young people against drug use and to teach them skills for resisting pro-drug pressures. Thirty schools drawn from eight urban, rural, and suburban communities in California and Oregon were randomly assigned to three experimental conditions, two treatment groups and one control. Students in 20 schools received 11 lessons, 8 during grade 7 and 3 in grade 8; in 10 of the treatment schools, older teens assisted an adult teacher in program delivery. Students were pretested prior to the program (grade 7) and post-tested 24 months later (grade 9). The results show that earlier effects on cognitive risk factors (perceived consequences of drug use, normative beliefs, resistance self-efficacy, and expectations of future use) persisted through grade 9 in the teen leader schools; in the condition under which adults taught the lessons without teens, the prior beneficial effects on beliefs largely eroded. All of the earlier effects on actual use disappeared by grade 9, regardless of who taught the lessons. The authors conclude that continued reinforcement of earlier lessons may be required to sustain prevention gains through the transition to high school. Originally published in *Preventive Medicine*, v. 22, 1993.

RP-240 The Effect of Marijuana Decriminalization on Hospital Emergency Room Drug Episodes, 1975-1978. K. E. Model. 1993.

Between 1973 and 1978, 12 states with collectively over one-third of the total U.S. population enacted laws that decriminalized the possession of marijuana. This article uses standard metropolitan statistical area (SMSA) level data on hospital emergency room drug episodes collected by the Drug Abuse Warning Network to measure the effect of changes in drug penalties on substance abuse crises. The regression models demonstrate that marijuana decriminalization was accompanied by a significant reduction in episodes involving drugs other than marijuana and an increase in marijuana episodes. Although possible biases in the data preclude firm conclusions, the results suggest that some substitution occurs towards the less severely penalized drug when punishments are differentiated. Originally published in *Journal of the American Statistical Association*, Sept. 1993, v. 88, no. 423.

RP-242 A Content Analysis of the Drug Legalization Debate. R. J. MacCoun, J. P. Kahan, J. Gillespie, J. Rhee. 1994.

The authors analyzed two convenience samples of opinion essays from U.S. newspapers to examine differences in the content and complexity of argumentation in the drug legalization debate. The first sample was of fifty-one New York Times essays from the 1970s and 1980s. The second sample was of 133 essays from twenty-seven newspapers across the country in 1989 and 1990. Content analyses

suggest that the debate has shifted over time from decriminalization of marijuana, based on the civil rights of users, to legalization of cocaine and heroin, based on the perceived need to disrupt the connection between drugs and crime. Proponents of legalization provided significantly more complex arguments than proponents of continued prohibition. Originally published in *Journal of Drug Issues*, v. 23, no. 4, Fall 1993.

RP-255 Prevalence of Comorbid Alcohol Disorder and Consumption in Medically Ill and Depressed Patients. C. D. Sherbourne, R. D. Hays, K. B. Wells, W. H. Rogers, M. A. Burnam. 1994.

This observational study estimates the extent to which alcohol disorder co-occurs in patients with major medical and psychiatric conditions. It looks at 2296 adult patients with hypertension, diabetes, heart disease (congestive heart failure or myocardial infarction) and/or current depressive disorder or subthreshold depressive symptoms, in the offices of general medical providers and mental health specialists in three U.S. cities. The authors compared the prevalence of alcohol co-morbidity in medically ill nondepressed patients of general medical providers and in depressed patients of both provider types. Results of the study show that patients with chronic medical problems or depression had similar levels of lifetime alcohol disorder (14 percent to 19 percent) and current alcohol problems (18 percent to 29 percent), but depressed patients were more likely to report needing help for problems with alcohol or drugs. Current alcohol disorder was more prevalent among depressed patients in mental health specialty practices than in general medical practices. Many patients who perceived a need for care for alcohol and other drug problems reported that this need was unmet (37 percent to 84 percent). The authors conclude that clinicians who treat patients with major medical and psychiatric conditions need to be prepared to identify and treat comorbid alcohol disorder. Originally published in *Archives of Family Medicine*, v. 2, Nov. 1993.

RP-264 The Politics of Antismoking Legislation. P. D. Jacobson, J. Wasserman, K. Raube. 1994.

To understand why some states have enacted relatively stringent laws to control smoking in public places while others have not, the authors examined the political evolution of tobacco control initiatives in six states: New York, Minnesota, Florida, Illinois, Texas, and Arizona. Taken together, the case studies demonstrate the difficulties inherent in enacting strong statewide tobacco control legislation. More important, several unmistakable themes emerge from these case studies, shedding light on the barriers to greater legislative success. These themes include the manner in which the legislative debate is framed by antismoking advocates and the tobacco

industry, the relative dearth of leadership provided by medical and health organizations, the role of public opinion, and the complex interaction that exists between statewide antismoking legislation and local antismoking ordinances. Understanding how these issues affect legislative outcomes may help antismoking advocates enact future statewide tobacco control initiatives. It may also present lessons applicable to future battles over other public health legislation. Originally published in *Journal of Health Politics, Policy and Law*, v. 18, no. 4, Winter 1993.

RP-308 The Impact of Response Options and Location in a Microcomputer Interview on Drinking Drivers' Alcohol Use Self-Reports. R. D. Hays, R. M. Bell, L. Hill, J. Gillogly, M. W. Lewis, G. N. Marshall, R. J. Nicholas, G. A. Marlatt. 1994.

The impact of response options for and location of frequency of alcohol use items in a self-administered microcomputer interview were evaluated in a randomized, experimental study of 296 clients at a West Coast treatment site for drinking drivers. Respondents were asked about their frequency of alcohol use in the last 7 days, 30 days, 90 days, and 180 days; three methodological factors randomized were: (1) how quantitative the response options were; (2) order of presentation of close-ended response options; and (3) relative placement of alcohol use items in the questionnaire. Results indicate that these methodological factors had minimal influence on self-reports of the frequency of alcohol use. Only two statistically significant effects out of 44 possible were observed. The findings of this study suggest that frequency-of-alcohol-use reports by drinking drivers yield similar information for a range of different response formats and location of the items in a microcomputer interview. Originally published in *Alcohol and Alcoholism*, v. 29, no. 2, 1994.

RP-331 What Is the Average Price of an Illicit Drug? J. P. Caulkins. 1994.

Estimates of the total dollar value of the markets for illicit drugs are valuable for policymaking. Such estimates are usually produced by multiplying estimated consumption by price. This paper argues that the relevant price for such calculations is not simply the price of one standard unit. There are substantial quantity discounts for illicit drugs, and there is a distribution of retail purchase sizes. Hence, the average price paid per gram need not equal the price of one gram. This concept is illustrated with calculations for heroin and cocaine. Originally published in *Addiction*, v. 89, no. 7, Jul. 1994.

RP-354 Patterns of Drug Use. P. Reuter, P. A. Ebener, D. McCaffrey. 1994.

This article gives an overview of illicit drug use among various populations, synthesizing research from a variety of sources. It traces patterns among drug users to show how they place an increasing burden on society and to indicate directions for policymakers. Originally published in *When Drug Addicts Have Children: Reorienting Child Welfare's Response*. Douglas J. Besharov, ed., Washington, D.C. 1994.

RP-355 Maricopa County's Drug Court: An Innovative Program for First-Time Drug Offenders on Probation. E. P. Deschenes, P. W. Greenwood. 1994.

The nationwide drug court movement represents one of the most recent innovations in our criminal justice system aimed at decreasing the number of drug-involved offenders by providing drug treatment and intensive court supervision. Although the majority of drug courts are diversion programs, the Maricopa County (Arizona) Drug Court is a postadjudication program for probationers with a first-time felony conviction for drug possession. Probationers are required to participate in an outpatient comprehensive drug treatment program, and their progress is monitored by the judge. The drug court emphasizes individual accountability through a system of rewards and sanctions. A total of 639 offenders sentenced in 1992 or 1993 were randomly assigned to the drug court or standard probation for RAND's experimental evaluation. Preliminary results show that 40 percent of drug court participants successfully completed the program within twelve months. Originally published in *Justice System Journal*, v. 17, no. 1, 1994.

RAND MEMORANDUM

RM-5635-DOT Alcohol and Traffic Accidents. H. H. Mitchell. April 1968.

A collection of statistics from selected studies showing the drinking driver's involvement in traffic accidents, the relationship between blood alcohol levels and impairment of driving ability, and the significance of drinking patterns in alcohol-implicated traffic accidents. Alcohol is shown to be a significant factor in traffic accidents, especially those involving serious injury and death. Impairment of driving ability is demonstrated at blood levels of alcohol below the legal definition of intoxication, and the risk of having an accident is shown to increase as blood alcohol concentrations rise. About 15 percent of all accidents involve a driver with 50 mgm percent blood alcohol concentration or higher. Other studies show that alcohol is probably a causal factor in 50 percent of the single vehicle fatalities. Control measures need further study to provide information leading to more effective handling of the

drunk driving problem. (See also RM-5631, RM-5632, RM-5633, RM-5634, RM-5636, RM-5637.) 37 pp.

PAPERS

P-2575 Long-Lasting Effects of LSD on Certain Attitudes in Normals: An Experimental Proposal. W. H. McGlothlin. 1962.

A proposal advocating research into the long-lasting effects of d-lysergic acid diethylamide (LSD) on normal people. In addition to its use in psychotherapy, there have been reports of experimental subjects who claim lasting beneficial effects attributable to the LSD experience. An experiment is suggested that would attempt to measure any long-lasting changes in attitudes, values, and communicative ability resulting from the administration of LSD. In particular, the measures would concentrate on changes in closed-mindedness as reflected by scales of dogmatism, opinionation, and ethnocentricity. A history of LSD-like drugs is provided, along with a description of some of the more frequent phenomena experienced under their influences.

P-2583 The Demand for Alcoholic Beverages: An Experiment in Econometric Method. W. A. Niskanen. May 1962.

A framework designed to evaluate the structure of taxes and controls confronting consumers of alcoholic beverages. An econometric model of the alcoholic beverage market is presented, which estimates the demand and supply functions for some legally and illegally produced spirits. The actual and "objective" tax programs of the alcoholic beverage market are examined. A tax program is also suggested, based on an estimate of the relation of the average consumption of each beverage to the total social cost of intemperate consumption behavior. A framework designed to evaluate the structure of taxes and controls confronting consumers of alcoholic beverages. An econometric model of the alcoholic beverage market is presented, which estimates the demand and supply functions for some legally and illegally produced spirits. The actual and "objective" tax programs of the alcoholic beverage market are examined. A tax program is also suggested, based on an estimate of the relation of the average consumption of each beverage to the total social cost of intemperate consumption behavior. 77 pp.

P-2757 Short-Term Effects of LSD on Anxiety, Attitudes, and Performance. W. H. McGlothlin, S. Cohen, M. S. McGlothlin. 1963.

A description of short-term effects of LSD. The hypothesis tested was that LSD would produce a rapid lowering of defenses resulting in (1) lower anxiety, (2) attitudinal changes, particularly in the form of decreased dogmatism and projection of aggression, and (3) increases in certain performance tests of fluency, flexibility, and originality. The samples consisted of 15 experimental and 14 comparison subjects, most of whom were professional research personnel. The hypothesis was generally confirmed for the anxiety and attitude tests, but not for the performance tests. (See also P-2575.)

P-2937 Hallucinogenic Drugs: A Perspective with Special Reference to Peyote and Cannabis. W. H. McGlothlin. 1964.

A study of the use and effect of peyote and Cannabis sativa (marihuana). It is intended to reduce uncertainty surrounding benefits or perils inherent in the use of LSD and other hallucinogens. The history of peyotism among the American Indians is examined, including a detailed review of method and frequency of use, incidence of addiction and psychosis, motivation, relation to alcoholism, socioeconomic and psychological differences between peyotists and non-peyotists. A similar review of the use of cannabis in the United States and other parts of the world is presented. Data on peyote and cannabis are correlated with those on LSD in an effort to predict the future direction and accompanying problems of hallucinogens in the present culture.

P-4993 Can Communities Re-Educate Drinking Drivers? H. Sackman. March 1973.

Describes a Department of Transportation-sponsored prototype program for convicted drinking drivers, conducted in Santa Monica by USC's Public Systems Research Institute. Sixty court-assigned subjects on summary probation underwent a 12-week program: one week of initial counseling and questionnaires, four weeks of once-weekly evening classes on the effects of drinking and driving, six weeks of once-weekly eclectic group therapy aimed at individual problems, and one week of exit interviews and questionnaires. A 24-hour crisis intervention hot line, ongoing counseling, and emergency cab pickup were available throughout, but were little used. (Thirty controls received hot line service only.) Each session and interview had a simple evaluation form; the program was designed for responsiveness to participant feedback. Class retraining and standardized initial and exit interviews proved effective and economical. Group therapy was effective—increasingly so as the weeks went on. The appendix includes flowcharts of program development and of DWI (Driving While Intoxicated) court processing. 17 pp.

P-5043 Dismissal of Narcotics Arrest Cases in the New York City Criminal Court, 1970. S. C. Cooper. July 1973.

A report based on a study conducted by the author in 1970 when he was a member of the New York City Police Department in command of patrol forces in the Bronx. The study was carried out in the criminal courts in the Bronx and dealt with misdemeanor drug law violations disposed of by these courts during the months of November and December 1970. It describes the magnitude of the dismissal problem—72 percent of all narcotic misdemeanor cases. It identifies the extent to which such dismissals resulted from poor police practices, as well as policies and practices beyond police control. Appended to the report are detailed tables describing the dispositions of all narcotic cases proceeding through the criminal courts in New York City, during the period from August 1, 1969, through July 31, 1970. 72 pp.

P-5099 Planning, Management and Evaluation of Community Action Programs. H. Sackman. October 1973.

Initial chapter of a final report for the Department of Transportation entitled "Guidelines for Developing and Implementing Community Programs to Assist and Re-Educate Drinking Drivers," performed at the Public Systems Research Institute of the University of Southern California, 1972. To meet the challenge of drinking drivers, the author demonstrates how planning, management, and evaluation are inseparable in conceiving, designing, producing, and implementing community action programs such as ASAP (DOT's Alcohol Safety Action Program). Special emphasis is given to problems encountered and lessons learned in the Santa Monica Prototype Program. 33 pp.

P-5621 Television and Alcohol Consumption and Abuse. G. A. Comstock. March 1976.

At present little is known about the contribution of mass media to alcohol consumption. The author discusses the message regarding alcohol consumption as portrayed in entertainment or commercials, the impact on the young audience, the adult audience, and the potential for constructive intervention. Research is needed in this area. Four issues for investigation are outlined: (1) The character of portrayals of alcohol in entertainment and commercials, especially when the young audience is large, and the tracking of shifts in such portrayals under the impact of public pressure. (2) Analysis of the role of media in initial alcohol decisionmaking, including shifts toward patterns of abuse. (3) Analysis of the contribution of the media to maintaining or shifting consumption and abuse patterns of adults. (4) Evaluation of all attempts at education and admonition by the media. (Statement

prepared for Subcommittee on Alcoholism and Narcotics, Committee on Labor and Public Welfare.) 9 pp. Ref.

P-5845 Outcomes in Alcoholism Treatment. H. B. Braiker, D. J. Armor. 1977.

A broad review of alcoholism studies spanning the past 35 years indicating considerable progress—increasing numbers of individuals have been identified and treated for alcohol abuse and alcoholism. Many viewpoints in the current debate over treatment goals and outcome measures are outlined and recent conceptual and empirical advances in the assessment of treatment outcomes are presented. Outcome criteria have implications far beyond classifying successes and failures; they imply assumptions about how alcoholism is defined, the etiology of the disorder, how well a certain treatment works, and the diagnostic criteria for who should be called an alcoholic. A multiple-outcome approach is used in reviewing treatment outcomes—abstinence, level of consumption if nonabstainer, behavioral impairment resulting from alcohol abuse, marital stability, job stability, and earnings. Studies on the differential effects of treatment include variations in treatment setting, treatment type, and amount and duration of treatment. Natural remission from alcoholism, given no treatment, is also considered.

P-5997 Some Implications of the RAND Alcoholism and Treatment Study for Alcoholism Research /. H. B. Braiker, J. M. Polich. 1977.

Reflections on findings of the RAND study and their implication for alcoholism research. The study was the subject of intense controversy throughout the popular press and media as well as scientific journals centering on implications of one of the findings—that some alcoholics return to moderate drinking. This finding challenges the basic underpinning of most therapeutic approaches to alcoholism which demand total abstinence as a goal. The requirement of abstinence is based on the disease model for alcoholism postulated by E. M. Jellinek that holds alcoholism is a progressive and irreversible process that can be successfully arrested only by total abstinence. Numerous studies have raised doubt about the model by documenting a return to social drinking without relapse by some alcoholics. The RAND study is only another in a long list of such studies. Reaction to the RAND study may be viewed as symptomatic of a transition to a new paradigm and may result in a vigorous and healthy debate over fundamentals.

P-6206 Which Inmates Participate in Prison Treatment Programs? J. Petersilia. 1978.

This analysis relies on interview data collected on over 10,000 state prison inmates, then weighted so results represent 191,000 inmates in state prisons. Results show

41 percent of inmates nationwide participate in some treatment program while incarcerated. Each inmate was classified as to his need for treatment: alcohol rehabilitation, drug rehabilitation, job training, and education. An inmate's need for treatment was then compared to actual treatment received. It was found that 22 percent need alcohol rehabilitation, 23 percent need drug rehabilitation, 31 percent need job training, and 68 percent need further education. In comparing need with treatment received, about one in four or five inmates with identified needs participates in programs related to his needs. Younger inmates more often receive education and job training, and older, alcohol treatment. Blacks are more likely to receive drug treatment, and whites, alcohol treatment. There is no association between commitment offense and participation in programs.

P-6441-1 Patterns of Alcoholism over Four Years. J. M. Polich, D. J. Armor, H. B. Braiker. 1980.

Results from a four-year study of an alcoholic cohort addressing a number of research questions, including both methodological issues and substantive issues about the nature of alcoholism. This paper presents results from three principal study areas, comprising the most important findings of the research: (1) the status of the cohort at four years, including drinking behavior and mortality patterns; (2) the overall social and psychological adjustment of the cohort, the most important question being one of rehabilitation; and (3) patterns of relapse, describing relapse rates at four years and the models used to predict conditions under which relapse occurs. Findings indicate that remission from alcoholism occurs in two modes (long-term abstinence and nonproblem drinking); that the prognosis for each mode depends heavily on the alcoholic's other characteristics; and that even patients in remission face substantial problems of social adjustment and significant probabilities of relapse.

P-7014 Eternal Hope: America's International Narcotics Efforts. P. Reuter. 1985.

Throughout the last 15 years, the U.S. Government has emphasized the role of export reduction programs in its efforts to reduce the consumption of heroin, cocaine, and marijuana in this nation. This paper argues that there is little reason to believe that the existing international programs aimed at accomplishing this will have significant effect on the long-term availability of these drugs in the United States. There are four major structural problems that limit the effectiveness of these programs: (1) The producer country governments lack the political motivation or capacity to enforce their drug treaty obligations. (2) The set of potential source countries is very large; success in any one country may be quickly negated by the development of new crops in other nations, as has occurred with Brazilian cocaine and domestic

marijuana. (3) U.S. relations with source countries are so complex that it is not possible to make reduced drug output a high diplomatic priority. (4) The basic tool for crop reduction is both implausible and unproven. The existing programs serve an important symbolic purpose and should not be abandoned.

P-7068 Designing an Effective Prevention Program: Principles Underlying the RAND Smoking and Drug Prevention Experiment. P. L. Ellickson. 1984.

This paper describes the basis for Project ALERT (Adolescent Learning Experiences in Resistance Training), a program to deter the use of drugs and cigarettes in adolescents. Derived from the literature on adolescent drug use and health promotion theories, the curriculum seeks to motivate resistance to pro-drug influences and teach appropriate resistance skills. Its specific content, adapted to the seventh grader's developmental capacities, is organized by the Health Belief Model. It stresses learning to resist social pressures, the personal consequences of using drugs, and the benefits of resisting them. Principles drawn from Bandura's self-efficacy theory of behavior change inform the teaching process: they include the presentation of proximal goals, an emphasis on active student involvement, the use of credible role models, and reinforcement of successful resistance behavior. The paper provides specific examples of how these principles are translated into curriculum activities.

P-7200-RGI Strategy and Self-Command. T. C. Schelling. 1985.

This paper was originally presented as the principal address at the fifth commencement exercises of the RAND Graduate Institute on November 16, 1985. It reviews strategies such as self-blackmail and fear, and technological devices such as the polygraph that are available to individuals, military units, and governments to ensure self-control. It briefly considers policy issues that arise from use of such strategies and devices.

P-7232 Multistage Path Models of Adolescent Alcohol and Drug Use: A Reanalysis. R. D. Hays, A. W. Stacy, K. F. Widaman, M. R. DiMatteo, R. Downey. 1986.

Simplex and nonsimplex models containing personality and perceived environmental variables as predictors of current use of alcohol, marijuana, and other drugs were compared in this reanalysis of a 1980 study by R. H. Potvin and C. Lee. Contrary to the results presented in the original study, the authors found that a nonsimplex pattern of relations among different forms of drug use allowed for a more adequate representation of the data than a simplex model for two of the three different age groups of

adolescents sampled. Conformity-commitment and religiousness had consistent negative effects on drug use in each sample; parental support-affection and parental approval of friends tended to have small negative effects on drug use; and self-esteem and alienation were unrelated to drug use. In general it appears that a nonsimplex model of current drug use provides a more adequate representation of the data than does a simplex model and that religiousness and conformity-commitment are constraining influences on adolescent involvement in drug use.

P-7449 Remarks on Recent Elements of Drug Policy. J. A. K. Cave. 1988.

This paper evaluates current drug interdiction activity, and concludes that it is an inefficient use of money for efforts that only superficially hinder the cocaine market and actually assist experienced drug smugglers. The author contends that military involvement in this interdiction could make matters worse. He stresses the need for policies that attack the drug market at its roots—eliminating profits and reducing demand—and outlines the main elements of such policies. In a final note, he points out the coincidence between the shift from rich to poor consumers of cocaine and the move to highly publicized and ultimately ineffective measures to control cocaine traffic.

P-7472 Losing Two Sons. J. P. Large. 1988.

This paper presents the text of a talk given by the author at a memorial service for his son Matthew. Matthew and his twin brother David, who died in 1975, were both young victims of drugs. A number of listeners at the service requested that the father prepare a written version of the talk in the hope that the story it tells could have some influence on young people in their community.

P-7498 Excise Taxes, Regulation, and the Demand for Cigarettes. J. Wasserman. 1988.

More than 320,000 people die prematurely each year as a result of their smoking. Consequently, public health gains may be made by developing and implementing effective policies to discourage cigarette consumption. This study examines the potential of two policies—increasing excise taxes and restricting smoking in public places—that may effect reductions in aggregate cigarette smoking and a subsequent improvement in public health. The study presents empirical analyses of these two policy alternatives. Specifically, it develops and applies several models of the demand for cigarettes to explore the ways excise taxes and regulations affect the smoking behavior of both adults and teenagers. The findings suggest that, in the short run, increased excise taxes coupled with additional regulations on smoking in public places will

significantly reduce cigarette consumption. However, before effective long-run anti-smoking policies can be developed, considerably more needs to be learned about the determinants of smoking behavior.

P-7523 Information Needs for Drug Abuse Policy in the Washington Metropolitan Area. J. Haaga, P. Reuter. 1989.

Information about drug abuse in the Washington, D.C., metropolitan area is needed (1) to raise public awareness, (2) to help local policymakers decide what to do, and (3) to track overall progress. Existing public data systems suffice for the first purpose, but not for the second and third. This paper discusses data currently available from medical examiners and hospital emergency rooms, from routine urinalysis of arrestees, from school surveys, from drug treatment programs, and on arrests and prosecutions. Gaps in geographic coverage and in coverage of populations of special concern (youth, intravenous drug users, pregnant women) are assessed. Information about drug prices and availability and about prevention efforts is needed for policy decisions but is not yet collected systematically. The paper illustrates some of the uses, as well as problems, of a regional household survey on drug abuse.

DRAFTS

DRU-702-DARC The Impact of the Target Cities Project on Drug Treatment Funding in Los Angeles. P. W. Greenwood, R. Mohamad. 1994.

DRU-713/1-CDADP/DPRC Prevalence of Alcohol and Drug Use in California's Household Population, 1988-1991: Analysis of the California Subsample from the National Household Survey on Drug Abuse. P. A. Ebener, D. McCaffrey, H. L. Saner. 1994.

This draft is one of three volumes commissioned and funded by the California Department of Alcohol and Drug Programs to improve the quantitative information available for defining the nature and patterns of substance abuse problems throughout California. Using existing data, each report contributes to the building of a profile of alcohol and drug use and their social and economic consequences. This volume describes the prevalence of alcohol and illicit drug use in the California household population in detail. The second report compares the impact of alcohol and illicit drug use between those in California and those in the United States using prevalence data from this report and indicators of the public health and public safety impacts of substance abuse. The third report reviews the available indicators of alcohol and illicit

drug use problems across California's counties and provides a framework for intra-state comparisons at the county level. The companion volumes are: *Prevalence and Impact of Alcohol and Drugs: California vs. the Nation*; and *Impact of Substance Abuse Problems in California: How Do Counties Vary?*

DRU-833-DPRC Modern Drug, Modern Menace: The Legal Use and Distribution of Cocaine in the United States, 1880-1920. J. F. Spillane. 1994.

This paper explores the ways in which cocaine was bought, sold, and consumed in the years prior to its legal prohibition. Much previous historical inquiry has focused on chronicling anti-drug legislation with the dual intent of locating the roots of contemporary drug policy, and linking legislation to trends in drug use and drug users' experiences. This paper suggests, however, that legislative developments alone cannot account for the changing patterns of cocaine's sale and use. Making extensive use of the records of those who legally distributed cocaine, including physicians, retail druggists, and drug manufacturers, this paper contends that, prior to prohibition, patterns in the legal use and distribution of cocaine underwent a substantial transformation. As a consequence of this transformation, cocaine was, by the turn of the century, feared as a menace to society. The response to these changes was a vigorous attempt to enforce standards of appropriate use through informal controls, such as voluntary limits on drugstore cocaine sales, and more formal methods, such as police treatment of cocaine sellers and users as a public nuisance. These developments suggest that there were loosely defined ideas of "legitimate" and "illegitimate" sales and use which affected the market for cocaine, even in the absence of laws which formalized those definitions. The impact of public response made cocaine's status as a legal drug small comfort to many users.

DRU-1033-CDADP Impact of Substance Abuse Problems in California: How Do Counties Vary? P. A. Ebener, H. L. Saner. 1994.

DRU-1034-CDADP Prevalence and Impact of Alcohol and Drugs: California Versus the Nation. P. A. Ebener, H. L. Saner. 1994.

DRU-1068-CDADP Compendium of Existing Surveys and Data Sets on Alcohol and Other Drug Use and Consequences in California. B. Weidmer, P. A. Ebener. 1994.

This compendium lists and describes the characteristics of existing surveys and data sets on alcohol and drug use and their impact in California. The surveys and databases are grouped into two general topic areas: population-based surveys and data sets that describe incidence and/or

prevalence of alcohol and other drug use in California and surveys and data sets that describe the impact and consequences of alcohol and other drug use in California.

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