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Self-Reported High-Risk Locations of Drug Use Among Drug Offenders: Ethnic and Gender Differences

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This study provides a detailed multiple-choice self-report analysis of home, work, and other public locations where drug offenders report using drugs. Specific settings were examined as a function of gender and Latino versus Anglo ethnicity. The participants for this study were 391 individuals attending drug diversion programs in Southern California. The single most frequently reported location of use was the participants' living rooms with a small group of friends. There was no evidence that Latinos were relatively likely to use at home, which had been suggested in previous work. Rather, Latinos differed from Anglos most by showing a relative preference for outdoor locations of use at home or work contexts. These results could reflect a lifestyle difference between Anglos and Latinos.

Relatively little work has described high-risk situations for drug use among adolescents or adults. Most research with adolescents or adults refers to high-risk situations as those that are stressful, or otherwise involve challenges to staying sober, for which the person does not have sufficient abstinence-focused coping skills (Annis, Graham, & Davis, 1987; Cannon, Leeka, Patterson, & Baker, 1990; Carey, 1993; Isenhardt, 1991; Marlatt, 1978; Shiffman, 1986). Relatively little work has addressed high-risk situations in terms of location of use. Yet, no drug use is devoid of a location; one may be using drugs while driving a car or at home, as examples. In most previous work, only hypothetical situations have been used. For example, a participant

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might be asked to identify how he or she would cope in a social gathering in the evening at a friend's house, with a few others present and drugs and alcohol being offered (e.g., Marlatt, 1978; Myers & Brown, 1996). Studies that have examined adult hard drug use as a function of environmental context generally examine city areas known for drug purchasing, such as in shooting galleries (e.g., Celentano et al., 1991). Drug use across a variety of environmental contexts is not examined.

There are several studies that have examined the relations of adult alcohol drinking and environmental contexts. Popular drinking locations tend to include one's home or a friend's home, or a bar (or lounge). Also, problem drinking may be associated with use away from home, at a bar, or leaving the bar (e.g., Casswell, Zhang, & Wyllie, 1993; Collins et al., 1998; Snow & Landrum, 1986; Stockwell, Lang, & Rydon, 1993; Wierczorek & Miller, 1992). For example, Wierczorek and Miller (1992) looked at several variables among New York driving-while-intoxicated offenders, including preferred drinking locations (public bars or restaurants versus private homes). They found that preference for drinking at home might be related to available funds (those with higher income drink outside the home more). Interestingly, Stockwell et al. (1993) examined reports of alcohol use situations among a general population sample in western Australia, looking at licensed premises, home, and other person's home as locations. Drinking heavily away from home, particularly on licensed premises, was associated with problem consequences of use. Integrating the results of these two studies would suggest that those who are of higher socioeconomic status (SES) would be more likely to drink away from home and would be more likely to suffer problem consequences. In one study, disadvantaged minorities have been found to show a preference for drinking at home (e.g., Padilla & Morrissey, 1993). Would they be less likely to experience legal consequences of alcohol or drug use? Other research has suggested that disadvantaged minorities would be subjected to relatively greater social control (e.g., Lieber & Stairs, 1999). Clearly, more such work is needed across samples varying in ethnicity.

One may infer that there are three environmental domains that adults "pass through" in the course of a day: the home, work (or school), and public places (e.g., see Sussman, Stacy, Ames, & Freedman, 1998). One could ask participants to think about time spent at home, at work, and about any public or other area in reference to drug use. Then one could have participants specify specific locations in each setting wherein drug use occurs. It is reasonable to assume that people are most likely to use drugs in locations where they are relatively unlikely to be condemned in some way by others. Thus, it would be expected that adults would be less likely to use alcohol or other drugs at locations within the worksite versus one's home or other locations. Within the

home setting, one may tend to use in private locations (e.g., the bedroom), or more openly (e.g., the living room), the latter option perhaps being reported if the adult perceives this whole setting as private or safe. Within the worksite, one might be expected to use where use can be most hidden (e.g., a bathroom). In other settings, private locations such as friends' homes or locations where use is condoned such as music clubs (or bars) are relatively likely use locations.

This study provides a detailed multiple-choice self-report analysis of home, worksite, and other public locations where adults report using drugs. In particular, these settings are examined as a function of gender and ethnicity (Latino versus Anglo) the last time the participant used drugs. The participants for this study are in drug diversion programming (California Penal Code 1000). Participants are referred to drug diversion programs by the courts after being arrested for simple possession of illicit substances and/or driving under the influence (DUI). Individuals referred to diversion programs vary in the extent to which they have been involved in the use of and/or sale of illegal substances, as well as risky behaviors associated with use (i.e., DUI and possession of illegal substances). Individuals who are sentenced to drug diversion attend drug education classes for 6 to 12 months. Diversion may also involve drug testing, support groups, and many require participation in 12-step meetings. There is some variability across programs, but they all include drug education. When sentenced by the courts to participate in drug diversion, individuals are provided a list of programs in their area and can choose a program they want to attend. This is a good sample on which to study locations of drug use because these individuals already show consequences of use.

In this study, a Latino sample consisting primarily of Mexican Americans are compared with Anglos. There are at least three possibilities regarding how ethnicity and self-reported location of drug use may differ. First, as found by Padilla and Morrissey (1993), Anglos may be found to have drunk or used the last time at a licensed, public location (e.g., a bar), whereas Latinos may be found to have drunk or used the last time at home or at the house of a friend. Because Mexican Americans in southern California tend to be of relatively lower SES (Chapa & Valencia, 1993), these results would be consistent with the idea that persons of lower SES will tend to use drugs through less expensive means, primarily in the home or the home of a friend. Alternatively, Latinos may be found to use drugs in more private locations to avoid relatively greater legal or social controls thrust on minority populations. If this possibility were true (e.g., Lieber & Stairs, 1999), then Latinos might be more likely to use drugs in private locations nested within different home, work, or other contexts. Finally, Latinos may self-identify as being from

more agricultural or outdoor roots than Anglo Americans (e.g., Keefe & Padilla, 1987; Perez & Salazar, 1993). In this case, they would be relatively likely to identify outdoor locations of use. These three possibilities will be examined in this study.

Method

Participants

Participants in this study were a total of 391 adults attending two Los Angeles area drug diversion schools. A self-report questionnaire was completed by 461 diversion participants. An additional 70 participants (15% of the total sample) were of other ethnicities (African American, Asian American, Native American, and other) and are not included in this analysis. The sample consisted of 117 Latinos and 274 Anglos. The Latino sample was composed of 83.3% Mexican Americans, 4.4% Central Americans, 4.4% South Americans, and 7.9% others (i.e., indicate their origins as being the Caribbean, Spain, or Portugal).

The Latino participants' average age was slightly younger than the Anglo participants (29.1 years, $SD = 8.0$, versus 33.9 years, $SD = 9.2$; $t = 4.9$, $p < .0001$), and 69% were male across both groups, which did not differ. Among the Latinos, 14% held professional jobs, 29% held office or skilled laborer jobs, 40% held semiskilled laborer jobs (e.g., cook, waitress), and 17% were unskilled workers, househusbands, or unemployed; 60% completed high school. Among the Anglos, 31% held professional jobs, 25% held office or skilled laborer jobs, 36% held semiskilled laborer jobs (e.g., cook, waitress), and 8% were unskilled workers, househusbands, or unemployed; 86% completed high school. Occupation and education levels were significantly different between groups; $\chi^2(3 \text{ and } 1 \text{ df})$ were 15.42 and 34.10, $ps < .001$, respectively, regarding occupation and education. Thirty-one percent reported living with a spouse or mate across both groups; however, whereas 56% reported living with a roommate, parent, or other person, and 13% reported living alone, among Latinos, 40% reported living with these types of other persons, and 31% reported living alone, among Anglos, $\chi^2(df = 5) = 31.62$, $p < .001$. Males and females did not differ on the above characteristics.

The percentage of the sample that used cigarettes, alcohol, marijuana, or a hard drug an average of at least once per month was 61.4%, 70.3%, 29.5%, and 29.3%, respectively. A total of 4.2% of the sample were classified as nonsubstance abusers, 28.8% were classified as having a substance abuse disorder, and 67.0% of the sample were classified as having a substance

dependence disorder using the measure described below. Latinos and Anglos, and males and females, did not differ on these characteristics except that Anglos were more likely than Latinos to be smokers (66% vs. 53%), $\chi^2(df=1) = 6.54, p < .01$, and males were more likely than females to be marijuana users (36% vs. 16%), $\chi^2(df=1) = 17.10, p < .001$.

With regard to prior convictions for driving under the influence of alcohol or other drugs, 32.2% reported no convictions, 38.9% reported one conviction, 20.1% reported two convictions, and 8.7% reported three or more convictions. A general linear model analysis of variance, which entered ethnicity, gender, and their interaction as predictors of number of DUI convictions was significant, Model $F(df=3,390) = 5.13, p < .002$. The effects of ethnicity ($F = 5.02$) and gender ($F = 11.91$) but not their interaction ($F = 1.42$) were significant ($ps < .05$). Anglos reported a greater mean number of convictions, 1.15 ($SD = 1.01$) than Latinos, 0.96 ($SD = 1.00$); and males reported a greater mean number of convictions, 1.19 ($SD = 1.03$), than females, 0.84 ($SD = 0.91$). Regarding the current offenses that resulted in participation in the diversion classes, 48.1% reported an alcohol-related DUI, 6.4% reported another drug-related DUI, 2.1% reported being caught with an open alcohol container, 22.2% reported being caught with possession of an illegal drug, and 28.9% reported other related offenses. A total of 81.2% of the participants were arrested within a year for the offense that brought them to the class (35% within 2-3 months), and 81.5% of the participants reported coming to classes for 2 to 3 months. These characteristics did not vary by ethnicity or gender. In summary, Latinos were slightly younger, lower in SES, less likely to live alone, less likely to smoke cigarettes, and reported fewer DUI convictions than Anglos. Females were less likely to use marijuana and reported fewer DUI convictions than males. Otherwise, the subsamples were quite similar to each other.

Data Collection

Participants from two drug diversion programs completed the survey, which was administered in January to September of 1997. Participants were informed that their participation was voluntary, that they could withdraw at any time without penalty, that their participation had nothing to do with involvement in the diversion program, and that their data would be anonymous. Participants were administered a 23-page self-report questionnaire, which took about 30 minutes to complete, and they were compensated \$5 for its completion. The beginning of the questionnaire requested whether participants ever used a drug in their lifetime. Those who answered "yes" were included in the present data. Participants were asked a variety of open-ended

and multiple-choice items that addressed drug use cues and situations as part of a substance use etiology project.

Measures

Questionnaire information assessed included specific locations and cues of drug use at home, at work, and at other public places, demographic characteristics (date, age, gender, ethnic background, living situation, education and occupation), drug use, and problem consequences of drug use (to provide a rating of substance abuse and dependence disorders). Multiple (four) forms were used in the present project, but all assessed the items contained in the present study with no differential pattern of missing data.

Locations and cues of drug use. Parallel sets of seven or eight items were developed for each of three environmental locations: home, work, and other public places. There were four forms of the questionnaire. Two forms asked about drug use at the location, whereas two other forms asked about drug use at the location that was followed by driving under the influence of alcohol or another drug. Each type of drug use question header (drug use, or drug use followed by DUI) also provided one different item section (implicit versus explicit recall task) on one page of the questionnaire. Otherwise, the questionnaire forms were identical.

The first situation item requested that the participant think about their time at the location: the places the participant goes during the day or night within this location. Then, they were asked to identify whether they used alcohol or any drug other than cigarettes at that location (or used any drug other than cigarettes at that location and then drove a car or motorcycle). The participant was asked to think about the few minutes before using a drug at that location. Next, the second item requested where within that location the participant was the few minutes before a drug was used. Ten specific locations in the home, 12 specific locations at work, and 17 specific locations at another location were offered as response choices, along with an additional response of "other location," with room to specify that location with an open-ended response, and another additional response to indicate that drugs were never used in this location. The third item asked respondents to indicate when this drug use occurred on an 8-point scale, ranging from 1 (*less than a week ago*) to 7 (*more than a year ago*) and 8 (*never used a drug at this location*). The third item asked the participant to indicate the one feeling that best described how he or she was feeling at this time (a few minutes before using the drug in that location). Fifteen affect adjectives were provided: 5 were positively valenced (e.g., very happy) and 10 were negatively valenced (e.g., angry). In

addition, the participant could indicate that he or she never used the drug in that location. The fourth item requested whether the participant was alone or with others at this time. Eight possible responses were offered, including being alone, in a small group, large group (five or more people), and with friends and/or family, or no drug use at that location. The fifth item requested what time the participant was at this location before using the drug; four responses were offered (e.g., 12:00 noon to 4:59 p.m.), as well as “no drug use at this location.” The final item in the set requested whether there was a party going on at this location at that time. This item was not asked for the work location.

Demographics. Five demographic measures were used: age, gender, ethnicity, SES, and living situation. Ethnicity was written as a six-response category item, which also allowed for more specific responding through additional response options. It was coded into two categories used in the present study: Anglo (White, non-Latino) and Latino. SES was measured as one’s occupational and educational levels (based on categories derived from Hollingshead & Redlich, 1958; two items). Living situation was coded as living with a spouse or mate; with a roommate, parent, or other person; or living alone.

Current drug use behavior. Drug use items included participant’s drug use behavior adapted from self-report questionnaire items developed in previous research on which item reliability had been established (Ames & Stacy, 1998; Graham et al., 1984). Questions were directed to frequency of use in the last 6 months (9 categories, from *never* to *every day*) of cigarettes, alcohol, marijuana (weed), cocaine (crack), LSD (acid), stimulants (ice, speed, amphetamines), inhalants (rush, nitrous), and other drugs (depressants or downers, PCP, steroids, heroin, etc.). Four current use measures were created from these items. Use of cigarettes, alcohol, or marijuana were coded into three binary measures (at least monthly versus less than monthly). Monthly use of any of the hard drugs was binary coded to create the fourth drug use measure.

Substance abuse disorders. A self-report measure was used that consisted of 19 personal consequences of substance abuse. The first 11 responses are adapted from the Personal Consequences subscale of Winter, Stinchfield, and Henly’s (1993) Personal Experience Inventory (PEI). Eight additional responses were added to the subscale to increase its coverage of *Diagnostic and Statistical Manual of Mental Disorders* (American Psychiatric Association, 1994) substance abuse or substance dependence diagnostic criteria, pertaining to tolerance and withdrawal, suitable for use with older adolescents

and adults. A sufficient number of questionnaire items were included to be able to make differential diagnoses between substance abuse and substance dependence. The 4-point rating scale asks whether the participant has been involved in any of the “following circumstances.” Response choices include *never, once or twice, sometimes* (e.g., 3-9 times), or *often* (e.g., 10 or more times) in the last 12 months (e.g., see Sussman et al., 1998).

Analysis

The analysis consisted primarily of χ^2 comparisons or simple examination of frequency counts. To compare across general locations, a 7% difference between any two cells with cell $n > 10$ would be significant at $p < .05$. Also, to compare specific locations across general locations, an adjusted percentage was calculated. This adjusted (or conditional) percentage is the percentage of participants that used drugs at a specific location, given the percentage that used drugs at the general location, which subsumes the specific location. The pattern of responses were virtually identical across forms, so results are presented combined across forms.

Results

Drug use at the home. Eighty-seven percent of the sample reported having used any drug other than cigarettes at the home, at a mean of approximately 1 to 2 months ago (scale mean = 3.78, $SD = 2.09$). Anglos were more likely than Latinos to use drugs at home (92% versus 83%), $\chi^2(1) = 6.17, p < .03$, but the two groups did not differ regarding when they last used. Males were marginally more likely to use at home than females in this sample (90% versus 84%), $\chi^2(1) = 3.23, p < .07$. Of those who did use at home, the most popular locations were the living room and the bedroom (see Table 1). Of those who indicated an “other” location, those responses indicating the home referred to a bar in the home or outdoor locations (i.e., driveway, balcony, side of the garage versus all other locations). By grouping these locations between indoor and outdoor types (i.e., garage, yard, other versus all other, indoor locations), Latinos were found to use more frequently outdoors (34.0%) the last time they used at home than Anglos (19.4%), $\chi^2(1) = 8.76, p < .003$. The primary affect was positive among 67% of the respondents. A total of 36% of the respondents reported being alone when they used, and 43% reported being with a small group of friends (1-4 people); 30% reported using drugs between 6:00 a.m. and 5:00 p.m.; 55% used and then drove, or drove only a few minutes after using; only 15.7% of Latinos and 9.4% of Anglos, $\chi^2(1) =$

3.18, $p < .07$, indicated that this was a party situation. Aside from the differences noted, there were no other ethnic or gender differences within this location.

Drug use at work. Forty-seven percent of the sample reported having used any drug other than cigarettes at work, at a mean of approximately 3 to 6 months ago (scale mean = 4.78, $SD = 1.96$). Males were significantly more likely to use drugs at work than were females (52% versus 39%), $\chi^2(1) = 5.61$, $p < .02$. Of those who did use at work, the most popular locations were an "other" work location, one's work station (among Anglos but not Latinos), in the bathroom, or in the parking lot (see Table 2). Of those who indicated an "other" location, those responses referred to a conference room or other office, a kitchen area, or a materials room. By grouping these locations between indoor and outdoor types (i.e., outside near the workplace doors, outside on the grounds at work, outside at a remote location away from the office, on the roof, parking lot versus all other, indoor locations), Latinos and males were found to use more frequently outdoors (44.3% and 37.0%, respectively) the last time they used at home than Anglos and females (27.8% and 17.9%, respectively), $\chi^2(1) = 5.29$ and 6.94 , $p < .02$ and $.008$. The primary affect was positive among 66% of the respondents, although prevalence of positive affect was greater among Latinos (77.3%) than Anglos (62.8%), $\chi^2(1) = 4.32$, $p < .04$. A total of 38% of the respondents reported being alone when they used; 48% reported being with a small group of friends (1-4 people). Fifty-four percent reported using drugs between 6:00 a.m. and 5:00 p.m.; 43% used and then drove, or drove only a few minutes after using. Latinos were relatively likely to report drinking and driving (53.3% versus 38.9%), $\chi^2(1) = 3.58$, $p < .06$. Aside from the differences noted, there were no other ethnic or gender differences within this location.

Drug use at other locations. Ninety-one percent of the sample reported having used any drug other than cigarettes at the other locations, at a mean of approximately 1 to 2 months ago (mean = 4.17, $SD = 2.00$). Whites were more likely to use drugs at other locations than Latinos (93.8% versus 86.8%), $\chi^2(1) = 4.90$, $p < .03$. Of those who did use at other locations, the most popular location was at a friend's home in the living room or at a club with music (see Table 3). Of those who indicated an "other" specific location, those responses indicating other locations referred to a bar, a restaurant, or the beach. By grouping these locations between indoor and outdoor types (i.e., standing or walking down a public sidewalk, in a public parking lot, in a park, at an outdoor recreational facility, in an empty field vs. all other, indoor

Table 2. Location Diversion Program Participants Were a Few Minutes Before the Last Time They Used a Drug at Work

Specific Location	Latino		Anglo		Male		Female	
	Percentage	Adjusted Percentage	Percentage	Adjusted Percentage	Percentage	Adjusted Percentage	Percentage	Adjusted Percentage
Other work location	24.6	10.6	29.9	15.1	29.2	14.9	28.6	11.1
My work location	8.2	3.5	23.6	11.9	17.5	8.9	25.0	9.7
Bathroom	19.7	8.5	16.7	8.5	13.0	6.6	28.6	11.1
Parking lot	14.8	6.4	11.1	5.6	14.3	7.3	3.6	1.4
Outside, at a remote location	9.8	4.2	7.6	3.8	8.4	4.3	7.1	2.7
Outside, on the grounds	13.1	5.7	5.6	2.8	9.7	5.0	3.6	1.4
Outside, near workplace doors	4.9	2.1	2.9	1.5	3.3	1.7	3.6	1.4
Snack area	3.3	1.4	1.4	0.7	2.6	1.3	0.0	0.0
Roof	1.6	0.7	0.7	0.4	1.3	0.7	0.0	0.0
Hallway	0.0	0.0	0.7	0.4	0.7	0.4	0.0	0.0

locations), no differences were observed by ethnicity or gender (approximately 11% of participants used at outdoor locations). The primary affect was positive among 75% of the respondents. A total of 16% of the respondents reported being alone when they used; 60% reported being with a small group of friends (1-4 people). Thirty-one percent reported using drugs in "other" locations between 6:00 a.m. and 5:00 p.m. (32.8% of males and 24.3% of females), $\chi^2(1) = 2.67, p = .1$; 45% used and then drove, or drove only a few minutes after using; and 22% indicated that this was a party situation (28.6% of Latinos and 20.7% of Anglos), $\chi^2(1) = 2.55, p = .1$. Aside from the differences noted, there were no other ethnic or gender differences within this location.

Discussion

This article provides a first detailed analysis of environmental context-related drug use among adult drug diversion program attendees as a function of ethnicity and gender. Three general contexts were examined, home, work, and other locations, which together provide perhaps all the contexts these adults enter into in the course of their daily lives. Across all locations, in general, Anglos and males tended to use more often than Latinos and females, which is consistent with other research with high-risk youth (e.g., Sussman et al., 1998). Surprisingly, however, use of all types of drugs at work was reported by at least 40% of the sample, which varied by gender but not ethnicity. Worksite drug education seems needed given these data.

There was no strong support for a social control theory, as applied to Latinos, with these data. They reported fewer DUI convictions, they used in outdoor locations more often than Anglos, and they tended to report more positive affect and a party atmosphere than did Anglos. There also was no strong support for SES-use location theory. The Latinos indeed were of lower SES in this sample; and perhaps lack of access could be argued as being related to lower use across all locations. However, there was no tendency for Latinos to use at home while Anglos used outside of home at clubs. Rather, Latinos were less likely to use at home and at other locations (but not at work). There was support for an agricultural roots or outdoors conception. Latinos were more likely to report using outdoors than Anglos when at home or at work. This third conception is worth more exploration to explore whether it reflects the construction of homes and types of workplaces within which Latinos tend to live and work, or whether it might reflect unique cultural norms.

Table 3. Location Diversion Program Participants Were a Few Minutes Before the Last Time They Used a Drug at Other Locations

Specific Location	Latino		Anglo		Male		Female	
	Percentage	Adjusted Percentage	Percentage	Adjusted Percentage	Percentage	Adjusted Percentage	Percentage	Adjusted Percentage
Friend's home/ living room	33.3	28.7	24.2	22.7	25.3	23.0	30.4	27.5
Club with music	17.6	15.2	14.5	13.6	17.1	15.6	12.2	11.0
Other location	7.4	6.4	13.7	12.9	10.5	9.6	16.5	14.9
Friend's home/ not living room	11.1	9.6	9.8	9.2	10.9	9.9	8.7	7.9
Store or cafe	1.9	1.6	8.6	8.1	6.2	5.6	7.8	7.1
In car in parking lot	4.6	4.0	7.0	6.6	5.8	5.3	6.1	5.5
Driving	6.5	5.6	6.6	6.2	6.2	5.6	6.1	5.5
Parking lot	4.6	4.0	3.5	3.3	3.9	3.5	4.4	4.0
Sidewalk	4.6	4.0	3.5	3.3	4.3	3.9	2.6	2.4
At work	2.8	2.4	3.1	2.9	3.9	3.5	0.9	0.8
Public park	2.8	2.4	1.6	1.5	2.7	2.5	0.0	0.0
Outdoor recreational facility	0.0	0.0	1.2	1.1	0.8	0.7	0.9	0.8
Indoor recreational facility	0.9	0.8	1.2	1.1	1.2	1.1	0.9	0.8
At school	0.9	0.8	0.4	0.4	0.4	0.4	0.9	0.8
Concert hall	0.0	0.0	0.8	0.8	0.4	0.4	0.9	0.8
Empty field	0.9	0.8	0.4	0.4	0.4	0.4	0.9	0.8
Inside a church	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

An examination of the adjusted percentages across the three general areas revealed that the most popular locations were the living room at home, the living room at a friend's home, the bedroom at home, at a club with music (particularly for Latinos and males, but not females), at an "other" work location, at an "other" location within the general other location (except for Latinos), at an "other" location at home (particularly for Latinos and females), one's kitchen at home (except for Latinos), one's work station (particularly for Anglos, but not Latinos), friend's home/not living room (particularly for Latinos and males), the bathroom at work (particularly for females), and the garage at home (only for Latinos). Most drug use occurred at the participants' home or a friend's home in relatively open areas of the home. High-risk youth, on the other hand, are relatively likely to use within the bedroom of their parent's home (Sussman et al., 1998). Although private areas of the worksite may have been sought, still participants used at their workstation or at other areas outside of but at the worksite. Outside of work or home, participants tended to use at music clubs or bars. Participants generally reported feeling happy right before using, were alone or in a small group of friends, but use was not identified as a party-type situation (a little more so for Latinos than Anglos). Approximately 30% of drug use at home or at other locations took place during work hours, whereas 54% used at work during work hours. Across locations, use was associated with DUI approximately half the time.

Although these data are self-report, the last drug use experiences reportedly occurred fairly recently (1-2 months ago at home and other locations, and 3-6 months ago at work), suggesting minimal retrospective bias for these types of data. Still, these data might best be supplemented with other strategies such as the use of ecological momentary assessment (Collins et al., 1998). Although these data may not be generalizable to a general population sample, there were no apparent floor or ceiling response effects.

Continuing to engage in high-risk behaviors affiliated with drug use (possession, sales, and DUI) likely results from repetitive experiences and associations between antecedent and consequent events that may be most predictably positive. Counteracting existing associations, functions, and social norms of drug use behavior while reinforcing alternative, newly acquired behavioral choices given a variety of situational cues (e.g., environmental, social, and affective) may help benefit prevention efforts. In addition, repeatedly illustrating adverse consequences of drug use choices affecting self and significant others may aid in making negative consequences more accessible and salient during crucial decision-making moments. For example, instilling driving accident-type information along with high-risk environmental cues may limit relatively automatic tendencies to use then drive. Culturally linked locations should not be ignored. For example, outdoor

areas such as the garage or a club with music may be relatively salient locations for Latinos (but not females), a workstation may be relatively salient for Anglos, and the washroom at work may be relatively salient for females. For all groups, the living room and bedroom settings are ecologically valid. Thus, relapse prevention-oriented instructional strategies (e.g., self-management) may need to take into account high-risk cues (e.g., hanging out with friends in one's living room). Finally, more efforts are needed to combat use and driving.

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