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National Institute on Alcohol Abuse and Alcoholism

PROJECT  
MATCH

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# THE DRINKER INVENTORY OF CONSEQUENCES (DrInC)

An Instrument for Assessing  
Adverse Consequences of  
Alcohol Abuse



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Public Health Service  
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**National Institute on Alcohol Abuse and Alcoholism  
Project MATCH Monograph Series  
Volume 4**

# **THE DRINKER INVENTORY OF CONSEQUENCES (DrInC)**

**An Instrument for Assessing  
Adverse Consequences of  
Alcohol Abuse**

**Test Manual**

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**Project MATCH Monograph Series:  
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# Foreword

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A rich array of psychometric instruments have been developed to evaluate many of the key phenomena associated with alcoholism. For example, well-standardized scales are available for measuring drinking behavior, expectancies for alcohol effects, and severity of alcohol dependence. These scales help clinicians target interventions more specifically and aid researchers in operationalizing drinking-related dimensions, thereby allowing more rigorous and controlled investigations.

To date, the adverse consequences of drinking have been largely neglected by test developers. This is surprising since, from the perspective of society, the family, and the alcoholic, the most troubling feature of heavy drinking is its negative effects on behavior, health, and emotional adjustment. Individuals enter treatment and society pays for services and research on alcoholism because of the direct, disruptive consequences of inappropriate drinking.

The ideal instrument to assess negative consequences would have sound psychometric properties, be brief and easy to complete, apply to individuals widely varying in life circumstances and responsibilities, be standardized on a large normative group, distinguish very recent from earlier consequences, and specify and measure severity of various adverse effects. DrInC, the measurement presented in this manual, nicely satisfies most of these criteria. The instrument was developed in support of Project MATCH, the multisite investigation of how different subtypes of alcoholics respond to alternative interventions. Scores on the DrInC serve both as baseline client descriptors and as variables to evaluate outcome of the three MATCH treatments. Beyond playing a key role in this major national study, DrInC will no doubt be adopted by clinicians to more specifically focus their own treatment efforts on client needs and to evaluate effects of treatment. DrInC will also be of use in research on the efficacy of investigational treatments of alcoholism.

The developers of this instrument and the authors of this clearly written, comprehensive monograph are to be highly commended for

their contribution to Project MATCH and to the field of alcoholism treatment and research. This document attests to their professional commitment, generosity, and expertise. We applaud their efforts.

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# Preface

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The Drinker Inventory of Consequences (DrInC) has been under development since 1989. The primary impetus for preparation of this manual came in 1990 when the DrInC was adopted as one of the core outcome measures for Project MATCH, a multisite clinical trial of psychosocial treatments for alcoholism funded by the National Institute on Alcohol Abuse and Alcoholism (NIAAA). Most of the data contained here were collected within the context of that trial, a collaborative effort of 21 principal and coprincipal investigators at nine clinical research units, a coordinating center at the University of Connecticut School of Medicine, and the NIAAA. More than 25 clinical facilities participated, providing the opportunity to assemble the diverse normative data base for treatment-seeking clients described in this manual.

The DrInC instrument is only one of many Project MATCH contributions to alcohol research. The DrInC may be used to characterize the severity of alcohol problems in a sample, with reference to treatment norms such as those included in this manual. When administered as part of followup assessment, it can also be used to describe one dimension of treatment outcome. The psychometric data provided here indicate that the DrInC subscales represent different dimensions of alcohol problems and demonstrate sound internal consistency and test-retest replicability.

Because this instrument and manual were developed with the support of public funding, they have been placed in the public domain and may be reproduced and used without further permission. The source of the scale should be acknowledged in all applications, however, by reference to this manual. To retain comparability and interpretability across applications, the scales should be used intact and as developed without modification of their contents. The authors hope that this family of instruments will be broadly useful in both clinical and research settings.

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