Development of a Subscale on a Social History Questionnaire to Detect Frequent Marijuana Users

David Lewis Salmond
Eastern Illinois University

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DEVELOPMENT OF A SUBSCALE ON A SOCIAL HISTORY QUESTIONNAIRE TO DETECT FREQUENT MARIJUANA USERS

BY

DAVID LEWIS SALMOND

THESIS
SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF
Master of Arts
IN THE GRADUATE SCHOOL, EASTERN ILLINOIS UNIVERSITY CHARLESTON, ILLINOIS

1978 YEAR

I HEREBY RECOMMEND THIS THESIS BE ACCEPTED AS FULFILLING THIS PART OF THE GRADUATE DEGREE, CITED ABOVE

DATE

ADVISER

DATE

DEPARTMENT HEAD
DEVELOPMENT OF A SUBSCALE
ON A SOCIAL HISTORY QUESTIONNAIRE
TO DETECT FREQUENT MARIJUANA USERS

BY

DAVID LEWIS SALMOND

B. S., Eastern Illinois University, 1972

ABSTRACT OF A THESIS

Submitted in partial fulfillment of the requirements
for the degree of Master of Arts at the Graduate School of
Eastern Illinois University

CHARLESTON, ILLINOIS
1978

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An increasing awareness of drug use has been indicated by many reports in the last fifteen years. These reports come from studies, workshops, books, and the news media. What is of particular importance in these reports are the statistics on marijuana use. It has spread at an alarming rate. By detecting these users, greater emphasis on counseling and rehabilitation of the individual can be implemented.

The experimenter used one hundred voluntary subjects from introductory psychology classes at a midwestern university ranging from 18-33 years of age. Twenty-seven males and seventy-three females of mixed racial backgrounds with a majority of white, second semester on campus, freshmen were used in the pool of subjects.

The subjects were given two questionnaires. The first was a Social History Questionnaire, (SHQ), designed to elicit information concerning the extent of certain behaviors and events in the subjects past and present life. The second questionnaire asked subjects to indicate their drug usage and their frequency of drug use.

Subjects were divided into two groups consisting of those who used marijuana less than once a month (non-users) and those who used marijuana more than once a month (users).
The computer then calculated the proportions of responses on each item for both groups. With this proportional information, a "t" test for significance between these proportions was determined for all 327 items of the SHQ. A .10 level of significance was adopted for the study.

The "t" test found fifty of the 327 items on the SHQ significant at the .10 level. The "t" test also enabled the experimenter to find thirty-eight of these items significant at the .05 level.

The results seem to indicate that there are a number of specific items on the SHQ that would differentiate between a marijuana user and non-user.
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ON A SOCIAL HISTORY QUESTIONNAIRE
TO DETECT FREQUENT MARIJUANA USERS

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DEVELOPMENT OF A SUBSCALE ON A SOCIAL HISTORY QUESTIONNAIRE

TO DETECT FREQUENT MARIJUANA USERS

The increasing awareness of people to marijuana seems staggering. During the past ten years, many studies, books, seminars, workshops, and reports have concerned themselves with the topic of marijuana. The areas of concern have included marijuana's use, subcultures, abuse, effects, origin, and legal implications. Many social issues have been raised about marijuana use and abuse (Bloomquist, 1968). Educators have seen the problem reach epidemic proportions in some areas of the world. With so many other problems already confronting schools and educators, the addition of marijuana use and abuse hinders the educational process. Today school systems are developing drug education into their curricululums, but many times the marijuana abuse areas barely scratch the surface concerning this topic. By detecting who the serious marijuana users are, the schools could then focus their efforts in assisting the marijuana users to cope with their problems.

The purpose of this study is to develop a subscale for the Social History Questionnaire (SHQ, Best, 1971) that can be used to determine and differentiate marijuana users from non-users. The many uses that could develop
from a new subscale will enable future researchers in their endeavors to encompass the field more thoroughly by giving the researchers a tool to explore the influence of past history and the present behavior of marijuana users.

The need for a study such as this is threefold:

(1.) to give insight into the many facets of marijuana use in the United States;

(2.) to develop the use of a paper pencil test to detect marijuana users;

(3.) to enable school and public officials to detect marijuana use in its early stages, to aide in combating future drug use.

Marijuana has been widespread due to its availability and the many different places that it is grown (Bloomquist, 1968). About 100 years ago physicians used marijuana in the treatment of illnesses (Solomon, 1966). Other historians and studies have shown that marijuana has been used for a long time but just how long marijuana use has been a problem will never be known (Bloomquist, 1968). This is because of unrecorded history, possible common use, and acceptance of the plant in the past cultures (Solomon, 1966).

The problem of marijuana use is not confined to one nation or continent. It has spread across all continents and nations and has become a major concern to almost all governments of the world. In 1951, the United Nations
statistics on marijuana users throughout the world showed 200 million users. In India, the marijuana problem reached such a crisis that the Indian government had to take measures to curb this usage (Solomon, 1966). In Norway there are only two illegal drugs: heroin and marijuana, as there is no medical use for either drug (Bloomquist, 1968). West African countries have also been influenced by marijuana with some crime increase and psychiatric disorders being linked to marijuana use (Lambo, 1965). In the United States, marijuana has influenced the culture in many ways. Different age groups have been affected, especially the high school and college age young people. Many problems have come to the forefront as a result of use in the United States. These problems include: rebellion by young people, other drug abuse, crime, dropping out of school or college, loss of initiative, and interrelationships with mental illness. The McGlothlin and West (1968) figures for the United States have been drastically changed, and with the ever increasing popularity of the drug, it seems difficult to estimate the amount of use in the United States. A Gallup poll in the mid-sixties estimated that some 22% of the college students had used marijuana at one time or another (McGlothlin and West, 1968). In 1968, the Harris Survey estimated that
nearly fifteen million Americans were marijuana users and almost one-third of all teenagers polled answered that they or some close friends use marijuana. In 1969 Stanley P. Yolles, the Director of the National Institute of Mental Health, estimated that between eight and twelve million Americans have used marijuana (Koplan, 1970). Compared to other estimates this is rather small. However at this time there are no accurate figures on the number of marijuana users in the United States. Many of the marijuana statistics come from various studies on college and high school students throughout the country (Gergen, Gergen, and Morse, 1972). At four California colleges, marijuana use among undergraduates was found to be eleven percent for a Catholic college, twenty-one percent for a large, private university, twenty-one percent for a junior college, and thirty-three percent for a state college (Blum, 1966).

These percentages seem to have risen sharply, as one year after the study was conducted the percentage of use for the large private university had risen from twenty-one percent to fifty-seven percent (Blum, 1966). Across the nation on the east coast, a study at Yale in 1967 showed that eighteen percent of the undergraduates had used marijuana, and within a year the percentage had increased to forty-nine (Imperi, Kleber, and Davie, 1968).
In 1965 Brooklyn College reported a usage level of 6.3% of the student body compared to a 1968 usage level of 29.4% at Washington State University (Defleur and Garrett, 1970). King (1969) found that almost 17% of graduating students at Dartmouth in 1967 had smoked marijuana at least once. Almost 60% of the graduating smokers, however, had first tried the drug during their senior year. King went on to conclude that it was quite clear that the prevalence rate of the use of marijuana was rising markedly. More recent Gallup polls have indicated that by December, 1969, over 42% of the college population had used marijuana, an increase of 22% over the spring of 1969 (Newsweek, December 29, 1969).

Most of the marijuana use in the United States is confined to high school and college age young people, but many middle age and professional people use marijuana for various reasons (McGlothlin and West, 1968). A summary of these reasons can give us a better indication to motivation. The various motivational factors are very diverse indeed. Included among these reasons are such things as curiosity and the need to get a "high" of a euphoric feeling. Of these reasons for use, first and foremost is the curiosity and experimentation with marijuana that bring
non users into the perspective of marijuana use (Keeler, 1968). In one study by Mizner, Barter, and Werme, (1970) curiosity accounted for 58% of the responses. This study also pointed out that another 26% of the group studies, felt that the drug experience itself would be worthwhile. The study indicated that the least popular responses choices for all drugs were (1.) "to defy people who said I should not" and (2.) "to please my friends and not to be thought afraid." (Mizner, Barter, Werme, 1970 p. 20). The other reasons listed for first time use of marijuana included; for "kicks," "not sure why," "to help with personal problems," "to help study," "to get through exams" (Mizner, Barter, Werme 1970). Aside from curiosity and experimentation as reasons for first time use, people also feel group pressure to some extent, as well as possible aphrodisiac properities or sociability as other reasons for use (Mizner, Barter, Werme, 1970). Other studies confirm some of these same reasons, Robbins, Robbins, Frosch, and Stern (1970) report reasons such as "for pleasure or kicks;" to reasons that it would enhance aesthetic awareness and produce insights as consciousness expanded. A study by McGlothlin and West (1968) again reports that some of these same reasons include: produce "high" or euphoria; relax; relieve tensions or stress; increase
sociability; increase sexual satisfaction; increase enjoyment of food; to go along with the group; to cope with uncomfortable social situations; and to relieve depressions. Other reasons have been reported, but those discussed are the most common and frequent motivational reasons for marijuana use. Many of these first time experiences with cannabis lead individuals either to find no further use of marijuana or to find a reinforcing experience for later use (Mizner, Barter, and Werma, 1970).

There are, alas, a number of varying effects of marijuana that have been reported. The effects of marijuana have been physical as well as mental (Shean and Fechtmann, 1971). Some of the effects on individuals studies have been severe, while others have shown little or no effect on the subjects (Keeler, Reifler, Liptzin, and Myron, 1968).

In dealing with the physiological effects of marijuana, one of the most important studies was that by the Department of Health, Education, and Welfare, entitled, Marijuana and Health. This study reported a change in practically all sensory modalities in relation to the perception of the external environment. Included here were reports of changes in vision, hearing, the non-dominant senses such as touch, taste, and smell as well as the space/time mater-
rix normally serving as a background for sensory perceptions. This study as well as others have reported an increase in pulse rate and reddening of the eyes. Snyder's study (1971) also reported this reddening of the eyes along with pupil constriction. These are some of the most consistent physiological occurrences that have been reported and studied. Marijuana smoking also has an effect on the intraocular pressure as reported by Hepler and Frank (1971). This leads us to a possible future consideration in the treatment of glaucoma as a possibility for future medical use of marijuana. A certain amount of pupil dilation has been reported as well as some reports of constriction using sophisticated instruments (Secretary H.E.W., 1972). There has been some evidence of increased hunger and appetite in a number of studies but it is only suggestive. Other physiological effects that have been studied without significant results include patellar reflex, electroencephalograph readings, and motor performance. However, these studies tend to show impairment in physiological processes due to marijuana intoxication. A number of other physical symptoms have also been reported throughout the marijuana literature. Some of these symptoms include: lightness in head, dizziness; dryness of throat; heaviness of extremities; unsteadiness; hunger; thirst;
high floating sensation (Solomon, 1966).

Along with the various physiological effects induced by marijuana intoxication, a number of psychological effects have also been studied. The user has shown and described feelings of euphoria in addition to some visual hallucinations (Snyder, 1971). The psychological effects would point to this feeling of inner joy as well as a tension reliever. The major psychological concerns have included: tolerance to marijuana; addiction to marijuana use; and hallucinatory effects induced by marijuana intoxication.

The most important of the major psychological concerns relating to marijuana are the possible addictive potentials of the drug. It has been pointed out that marijuana is not addicting (Allentuck and Bowman, 1942; Freedman and Rackmore 1946; Fort, 1965a, 1965b; Phalen, 1943; Indian Hemp Drug Commission 1894 from Tart, 1964; Watt, 1965; United Nations, 1964a; 1964b; Solomon, 1966). In a small group of individuals a psychological dependence can develop but a predisposition must be present (Tart, 1969). Watt (1965) concludes that marijuana smoking is gregarious and it's easily abandoned. Personality defect and incipient or existing psychotic disorders are the essential factors underlying the formation
of the habit (Tart, 1969). Studies of the acute effects of marijuana indicate relatively mild psychological effects, particularly upon experienced users (Zinberg and Weil, 1970). There are very few reports of the possible hallucinating effects of marijuana intoxication. While some subjects in marijuana studies have reported hallucinations at high doses, (Secretary H.E.W., 1972) it should be pointed out that these occurred at high doses and with marijuana that may have been contaminated by other substances.

Another major factor that must be considered in exploring marijuana use, is the related variables that tend to differentiate between users and non-users of marijuana. The variables involved are numerous but include the problems of defining who is a user or a non-user. Generally a marijuana users is one who uses the substance, while a non-users is one who does not use marijuana. However, this definition does not take into consideration those who have used marijuana in the past but do not use the drug at the present time. Various studies differentiate users from mom-users by various operational definitions. LaDriere and Szczepkowski (1972) define their user vs non-user group as those who have never used marijuana. One very widely used system of classification has been developed by Nowlis (1969) as follows:
Adamant Non-users - have never considered using a drug and state that drug use should be prohibited.

Non-users - have seriously considered using a drug but have not actually done so. They state that drug use might be allowed with proper controls.

Tasters - use marijuana less than once per month

Recreational Users - use marijuana from one to four times per month

Regular Users - use marijuana more than once a week.

Other differentiating factors include sex, age, educational level, type of educational institution, feelings toward the Vietnam War, religion, academic aspirations, socioeconomic background, race, geographical location, and even major in school. Many of these factors have been studied, but most of those studied did not create enough significant evidence that they are definitely correlational variables related to marijuana use or non-use. One such study by Gergen, Gergen, and Morse, (1972) investigated a number of differentiating variables. Their study pointed out that generally the higher level or degree of academic attainment, the greater percentage of the group studied who used marijuana, such as B.A. or B.S. degree was 26.9% while 51.5% used marijuana in the Ph. D. group (Gergen, Gergen, and Morse, 1972). The grade average for the highest percentage of marijuana users was 37.2% - A; 36.3% - B;
32.6% - C; 23.3% - D (Gergen, Gergen, and Morse, 1972). In this study as well as others, a relationship between religious affiliations and marijuana use suggests that non-affiliation occurs in the largest percentage of marijuana users. In consideration of majors and differentiation of marijuana users versus non-users, students majoring in the social sciences, humanities, and the arts show the greatest incidence of usage while significantly fewer (P < .001) natural scientist majors report taking the drug with education majors the lowest in drug experience (Gergen, Gergen, and Morse, 1972). Sex differences in consideration of users generally point to more male users than females although in some places this is reversed (McGlothlin and West, 1968). Whether or not a student participated in anti-war demonstrations is by far the most powerful prediction of all that were considered in relation to marijuana use variables (Gergen, Gergen, and Morse, 1972; Hogan, Conway, Fox, Mankin, 1970).

In still another study of drug users and non-users, McAree, Steffenhagen, and Zheutin (1972) compared scores on the Minnesota Personality Inventory (MMPI). They compared a group of non-users (control group) with an experimental group made up of marijuana only users, multiple drug use including drugs besides marijuana but not hallucinogens, and gross multiple drug users which in-
cluded extensive and varied drug use including hallucinogens. The controls were distinguished from the experimental (Drug) group by using as a criterion for abnormality scores over 75 on 2 or more scales on the MMPI. The results showed that the control group (non-users) and the marijuana only users of the experimental group had 17% and 18% respectively from their groups with two or more scale values over 75. The other two experimental groups had 53% (multiple use) and 52% (gross multiple drug use) of their groups with two or more scale values over 75. Both of multiple and gross multiple groups were significant (P< .01). These results were from a Chi-Square test of significance. A Mann-Whitney U test of significance was used to compare the individual scales for the three groups with the control group. There was no significance found in the score scales for the marijuana only group and the control group. The multiple group scores showed differences in all of the scales at a high level of significance. A composite profile of mean scores was obtained, with the Schizophrenia (Sc) scale having the highest scores for the gross-multiple group. McAree, Steffenhagen, and Zheutin (1972) conclude their study by pointing out the differentiation of the profile scales indicating greater psychopathology that existed in the multiple and gross multiple drug
users (McAree, Steffenhagen and Zheutin (1972)).

A study by Hogan, Conway, Fox, and Mankin (1970) concluded that professed marijuana use at eastern universities could be predicted with fair accuracy. Their results were based on a study conducted at Johns Hopkins University and Lehigh University. The study was conducted on 148 students at the two universities. The students completed a fifteen item biographical questionnaire and the California Psychological Inventory (CPI, Gough, 1964). The geographical questionnaire contained five questions about the use of marijuana and other drugs. This questionnaire was able to define four levels of marijuana use:

(a.) students who reported smoking marijuana fairly regularly (frequent users)

(b.) students who reported using marijuana ten times or less (occasional users)

(c.) students who indicated they had not smoked marijuana (non-users), and

(d.) students who said they had not and never would smoke marijuana (principled non-users).

The results from the biographical questionnaire showed that students differed with regard to four of the ten questionnaire variables, the strongest difference appearing in fraternity membership. Frequent users are more often fra-
ternity members than are occasional users, non-users, and principled non-users. The results also suggest a modest trend for freshman and sophomores to cluster in the principled non-user category, for frequent and occasional users to major in the humanities and social sciences, and finally, for non-users to attain slightly poorer grades than the other groups.

The results of the data obtained from the nineteen CPI scales showed that 10 of the 19 scales differentiated between the four levels of use at or beyond the .05 level of statistical significance. The users as a group scored highest on the scales of capacity for status, social presence, achievement via independence, flexibility, and empathy and lowest on sociability, responsibility, socialization, communality, and achievement via conformance.

The Hogan, Mankin, Conway, and Fox, study (1970) was able to predict professed marijuana use at these two small eastern universities and it may be noted that users and non-users are indistinguishable with regard to their secondary education, extracurricular activities, or athletic participation. Users and non-users did differ in terms of academic major, year in school, and scholastic achievement. A third conclusion in the study was that marijuana users show a personality pattern which is some-
what at variance with many popular stereotypes. In comparison with non-users, they are more socially skilled, have a broader range of interest, are more adventuresome, and more concerned with the feelings of others. Conversely, and in accordance with general opinion, users are also impulsive and non-conforming. Finally the authors argue that, in the long run, the character structure of non-users is not necessarily superior to that of users. This judgement is based on the fact that frequent users and principled non-users receive rather similar scores when compared with delinquents on a well-validated index of social maturity, and both appear less than normally mature when assessed in terms of two scales specifically designed to predict moral behavior (Hogan, Conway, Fox, and Mankin, 1970).

The purpose of this present study is to develop a subscale for the Social History Questionnaire (SHQ, Best, 1971) that can be used to determine and differentiate marijuana users from non-users. The many uses that could develop from a new subscale will enable future researchers in their endeavors to encompass the field more thoroughly by giving the researchers a tool to explore the influence of past history and the present behavior of marijuana users.
The need for a study such as this is threefold:

(1.) to give insight into the many facets of marijuana use in the United States;

(2.) to develop the use of a paper pencil test to detect marijuana users;

(3.) to enable school and public officials to detect marijuana use in its early stages, to aide in combating future drug use.

METHOD

Subjects

Subjects were 172 students from introductory psychology classes at Vincennes University who volunteered to participate in the present study. The subjects were tested in order to obtain two groups of fifty subjects each. One group consisted of fifty non-users of marijuana, which was defined as using marijuana less than once a month. The other group consisted of fifty users, which was defined as using marijuana more than once a month.

Measuring Instrument

The measure used in the study was the Social History Questionnaire (SHQ) a 327-item, forced choice, pencil and paper, intake inventory (Best, 1971). The SHQ includes the
following scales: (a.) three validity scales, (b.) emotional disturbances, (c.) thought disturbances, (d.) behavioral disturbances, (e.) psychosomatic disturbances, (f.) marital problems, (g.) interpersonal relations, (h.) childhood, (i.) education, (j.) relationship to father, (k.) relationship to mother, (l.) parental relationships, (m.) vocational, and (n.) treatment.

The items of the SHQ include elements primarily of a demographic, biographic, and symptomatic nature designed to elicit information, concerning the extent of certain behaviors and events in the client's past and present life. The items include questions concerning client symptoms, interpersonal relations, present attitudes and expectations, general personality characteristics, and childhood and other biographical information.

The subjects were also given a second questionnaire developed by the experimenter, found in Appendix A. This second questionnaire asked for some basic identifying information and asked the subjects to indicate their drug usage and the frequency of this drug use.

Procedure

The experimenter began by obtaining a pool of subjects accomplished by going to a college instructor of
introductory psychology classes and asking them:

"Would it be all right to come into the college introductory psychology class and ask for volunteers for an experiment to assist a graduate student with a project?"

After receiving the approval of the various instructors, the experimenter then went to the college introductory psychology classes and asked the students:

"I am a graduate student in psychology and I am working on a research project. I need volunteers to act as subjects for the project."

At six o'clock in the evening in room 252 of the Shircliff Center at Vincennes University, the experimenter met the subjects and found them a comfortable work area. The researcher then handed out the Social History Questionnaire to all the subjects. Then the experimenter explained, "Today you are asked to answer the questionnaires you each have. Please fill out all the identifying information asked for except for your full name, instead use your first name, and only the first letter of your last name. Read the directions silently as I read them aloud (Read the directions from S.H.Q.). When you are finished please bring your questionnaires to the front of the room and return to your seat. Please be sure to fill
out both questionnaires. Are there any questions? Begin work." When all the subjects completed the S.H.A., the researcher then handed out the second questionnaire. The researcher then explained the second questionnaire by saying: "Please answer the second questionnaire that you have before you. Again, please fill out all the identifying information asked for except for your full name, instead use the same name as on the first questionnaire. Now answer all the questions as accurately as possible. When you finish please bring your questionnaires and pencils to the front of the room and you are free to leave. Are there any questions? Begin work."

**Item Analysis**

To analyze the results the SHQ results were put on IBM scoring sheets and then processed in an IBM computer. The information on drug use enabled the researcher to divide the subjects into drug use groups of users and non-users. The computer then calculated the proportions of responses on each item for both groups. A "t" test for significance between proportions was then determined for all 327 items of the SHQ. The formula used for this test of significance is as follows: 

$$ t = \frac{P_1 - P_2}{SD_p} $$
$SD_p$ = standard error of difference on the proportions in the two groups

$P_1$ = Proportion of groups one

$P_2$ = Proportion of group two

Significance adopted for this study was at or beyond the .10 level. The two groups consisted of almost entirely white, second semester freshmen who lived in residence halls. Both groups had a greater number of females than males and the ages of the groups were mainly in the 18-20 year old category. There were no major differences between the two groups in regards to sex, age, class, or campus residence.

**Results**

The "t" test for significance was done on all 327 items. There were 50 items determined significant. The other 277 items were found not significant by the "t" test for proportions mentioned in the methods section of this paper.

The following items from the SHQ, were found to be significant at or beyond the .10 level: and the letter in parentheses represents the response of the user group.
1. My mental problems began very recently. (T)
2. I have never been in trouble because of my behavior (F)
4. I have threatened to kill someone. (T)
6. I believe I know what my mental problems are and how they began. (T)
7. My mental problems have troubled me for a long long time. (F)
14. I have never been arrested. (F)
24. Most of my problems are caused by bad luck. (F)
36. In the past I received treatment for my mental problems at a mental health clinic. (T)
54. In the past I received private out-patient treatment for my mental problems. (T)
56. I am a "social" drinker. (T)
59. I have had problems with ulcers. (T)
62. Although I am not an alcoholic I could easily become one. (T)
66. In the past I have been in group therapy. (T)
80. I have taken drugs but only as prescribed by a doctor. (F)
86. Taking drugs could become a problem for me if I am not careful. (T)
89. I have trouble with arthritis. (T)
92. I have (or had) a problem with drugs. (T)
108. I have been depressed for a long long time. (T)
114. I do not believe I should be punished for anything I did in the past. (T)
138. My father was almost always kind and loving with me. (F)
139. My parents often received money from a welfare agency or from charity. (T)
147. When I was little my father watched me almost all the time as I would not get into trouble. (F)
150. I liked school. (F)
157. My father was often out of work when I was growing up. (T)
159. I did not like school. (T)
161. I always listened to my mother and did what she told me to do. (F)
162. I think of myself as being in the "working class" of people. (F)
163. I was very shy as a child. (F)
165. My father was too strict with me when I was growing up. (F)
170. My father ignored me most of the time when I was little. (T)
173. In school I liked math and science. (F)
210. My mother ruled the family when I was little. (T)
211. I have lived in the same place for more than one year. (F)
214. My father almost always punished me whenever I was bad. (F)
217. I often skipped school. (T)
219. My mother was unfaithful to my father. (T)
223. I never knew whether my father would punish me or just ignore the bad things I did. (T)
235. I was expelled from school at least once. (T)
239. When I was little I often set fires just for the "fun" of it. (F)
243. I believe I would enjoy dangerous work. (T)
248. I attend church at least once each month. (F)
250. Even when I was bad my father almost never punished me. (T)
267. I did not have to wait very long before getting an appointment here. (T)
277. During my childhood I was separated from one or both parents for several months. (T)
288. My mother and father were almost always very pleasant to everyone. (F)

291. I love my mother. (F)

305. I have no particular feelings of any kind toward my father. (T)

307. I like to spend my free time by myself. (T)

308. I believe people with mental problems should be hospitalized. (F)

317. I dislike my mother. (T)

This is total of fifty items found significant at the adopted level. The researcher also found thirty-eight items significant at or beyond the .05 level, and seventeen items significant at the .01 level. These are noted in appendix B with the item's "t" score.

Discussion

The research was limited in that time did not allow for a greater number of subjects. Since volunteers were used, the availability of these volunteers also limited the research. This small amount of a subject pool tends to confine the sampling and statistical measures that were used in the study.

The different items from the SHQ, seem to indicate that the user group of subjects had many responses on items that compare to the user groups from the studies
discussed in the introduction. These include the areas of parental discipline, school subjects, and religious affiliation. The users also felt potential for drug problems, previous use of a mental health setting, long periods of depression, and a general tendency to psychopathology.

Item 173 of the SHQ regarding school subjects, is similar to the Gergen, Gergen, and Morse (1972) and the Hogan, Conway, Fox, and Mankin (1970) studies. This item indicates that the user group did not like the natural sciences as the two studies also indicated. The Gergen, Gergen, and Morse (1972) study also has some comparability to item 248 as to religious non-affiliation for the user groups. The greatest comparison seems to be the tendency to psychopathology. The McAree, Steffenhagen, and Zheutin (1972) study and many of the significant items from the SHQ, including items, 1, 4, 6, 36, 54, 66, 86, 92, and 108 point to various abnormal behaviors by the user populations.

Another way of comparing the fifty significant items, is between the items and the thirteen scales of the SHQ, described on page eighteen. Of the thirteen scales, only two have no items that were found significant. These two scales are (c) thought disturbances and (f.) marital problems. The scale with the most items was (j.) relationship to father. All the scales and the item number for
the proposed user scale are listed below:

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<tr>
<th>Scale From SHQ</th>
<th>Item Number From Proposed User Scale</th>
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<td>(B.) emotional disturbances</td>
<td>1, 6, 7, 108</td>
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<tr>
<td>(C.) thought disturbances</td>
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<tr>
<td>(D.) behavioral disturbances</td>
<td>14, 24, 56, 62</td>
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<tr>
<td>(E.) psychosomatic disturbances</td>
<td>59, 89</td>
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<tr>
<td>(F.) marital problems</td>
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<td>(G.) interpersonal relations</td>
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<td>(H.) childhood</td>
<td>163, 239, 277</td>
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<td>(I.) education</td>
<td>150, 159, 173, 217, 235</td>
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<tr>
<td>(J.) relationship to father</td>
<td>138, 147, 157, 165, 170, 214, 223, 250, 305</td>
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<tr>
<td>(K.) relationship to mother</td>
<td>161, 210, 291, 317</td>
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<td>(L.) parental relationships</td>
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<tr>
<td>(M.) vocational</td>
<td>243</td>
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<tr>
<td>(N.) treatment</td>
<td>36, 54, 66, 267, 308</td>
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</table>

This is a total of forty-one items from the group of the proposed fifty user items. This leaves nine items not included in the SHQ scales. Of these nine items six of them (80, 86, 92, 211, 248, and 307) were significant at the .01 level. This leads to an even greater interest in further study of the fifty significant items found in this study.
In contrast to some of the studies, the items found significant indicate more problems in a school setting. Rather than the degree of academic attainment and higher grade average found by Gergen, Gergen, and Morse (1972) this study indicates more dislike and difficulty in an educational setting as indicated by items 150, 159, 217, and 235.

For future consideration the areas of grade average performance, multiple drug use, sex differentiation, antisocial behaviors, and parental relationships would seem very appropriate areas of study. A more indepth look at the items found significant at the .05 and .01 levels would also be important for future study considerations.
Appendix A

QUESTIONNAIRE II

Please print.

Age ________________  Sex ________________

Race ________________  Date of Birth ________________

How many semesters have you attended Vincennes University prior to this semester? ________________

Circle the letter by the statement which best describes where you now live.

a. in a university residence hall
b. in a room off campus
c. with my parents
d. in a household which I head

Column I

From column I please circle the drugs you have used in the past year.

Column II

From column II list by letter A or B the frequency of the drug/drugs used. A - more than once a month  B - less than once a month

Column III

In Column III list by letter how this drug/drugs were used. Wher

a. under a doctor's care
b. for laboratory study
c. personal choice
d. Other - Please list.

Column IV

In Column IV list the letter that best describes your reason for the first time you used the drug/drugs.

a. doctor's prescription
b. fun - recreation
c. pressure from friend
d. curiosity
e. to increase creativity
f. to enhance social relationships
g. to increase perceptual awareness
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<th>Column III</th>
<th>Column IV</th>
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McAree, C. P., Steffenhagen, R. A., & Zheutin, L. S.


