Inventory of Drug Use Consequences (InDUC-2L)

NAME: InDUC-2L Example **DATE:** Oct 16 2017

DOB: Nov 24 1996

INSTRUMENT

The Inventory of Drug Use Consequences is a self-administered measure of consequences of drug use. The five scales of the InDUC focus on consequences related to (a) Impulse Control; (b) Social Responsibility; and (c) Physical, (d) Interpersonal, and (e) Intrapersonal domains. The InDUC casts a broad net to capture adverse consequences related to polydrug use, which may include alcohol.

SCORING

Control Scale	5
Physical	8
Inter-personal	9
Intra-personal	6
Impulse Control	10
Social Responsibility	5
Total InDUC Score	38

SURVEY ANSWERS

I have had a hangover or felt bad after drinking or using drugs.	YES
I have felt bad about myself because of my drinking or drug use.	YES
I have missed days of work or school because of my drinking or drug use.	YES
My family or friends have worried or complained about my drinking or drug use.	YES
I have enjoyed drinking or using drugs.	YES
The quality of my work has suffered because of my drinking or drug use.	YES
My ability to be a good parent has been harmed by my drinking or drug use.	YES
After drinking or using drugs, I have had trouble with sleeping, staying asleep, or nightmares.	YES
I have driven a motor vehicle while under the influence of alcohol or other drugs.	YES
Drinking or using one drug has caused me to use other drugs more.	YES
I have been sick and vomited after drinking or using drugs.	YES
I have been unhappy because of my drinking or drug use.	YES
Because of my drinking or drug use, I have lost weight or not eaten properly.	YES
I have failed to do what is expected of me because of my drinking or drug use.	YES
Drinking or using drugs has helped me to relax.	YES
I have felt guilty or ashamed because of my drinking or drug use.	NO
While drinking or using drugs I have said or done embarrassing things.	YES

EXAMPLE

When drinking or using drugs my personality has changed for the worse.	NO
I have taken foolish risks when I have been drinking or using drugs.	YES
I have gotten into trouble because of drinking or drug use.	YES
While drinking or using drugs, I have said harsh or cruel things to someone.	YES
When drinking or using drugs, I have done impulsive things that I regretted later.	YES
I have gotten into a physical fight while drinking or using drugs.	NO
My physical health has been harmed by my drinking or drug use.	YES
Drinking or using drugs has helped me to have a more positive outlook on life.	YES
I have had money problems because of my drinking or drug use.	YES
My marriage or love relationship has been harmed by my drinking or drug use.	YES
I have smoked tobacco more when I am drinking or using drugs.	YES
My physical appearance has been harmed by my drinking or drug use.	YES
My family has been hurt by my drinking or drug use.	NO
A friendship or close relationship has been damaged by my drinking or drug use.	YES
I have spent time in jail or prison because of my drinking or drug use.	YES
My sex life has suffered because of my drinking or drug use.	YES
I have lost interest in activities and hobbies because of my drinking or drug use.	YES
When drinking or using drugs, my social life has been more enjoyable.	YES
My spiritual or moral life has been harmed by my drinking or drug use.	YES
Because of my drinking or drug use, I have not had the kind of life that I want.	YES
My drinking or drug use has gotten in the way of my growth as a person.	YES
My drinking or drug use has damaged my social life, popularity, or reputation.	YES
I have spent too much or lost a lot of money because of my drinking or drug use.	NO
I have been arrested for driving under the influence of alcohol or other drugs.	YES
I have been arrested for other offenses (besides driving under the influence) related to my drinking or other drug use.	YES
I have lost a marriage or a close love relationship because of my drinking or drug use.	YES
I have been suspended/fired from or left a job or school because of my drinking or drug use.	NO
I have used drugs moderately, without having problems.	YES
I have lost a friend because of my drinking or drug use.	YES
I have had an accident while using or under the influence of alcohol or drugs.	YES
While using or under the influence of alcohol or drugs, I have been physically hurt, injured, or burned.	YES
While using or under the influence of alcohol or drugs, I have injured someone.	NO
I have broken things or damaged property while using or under the influence of alcohol or drugs.	YES

EXAMPLE