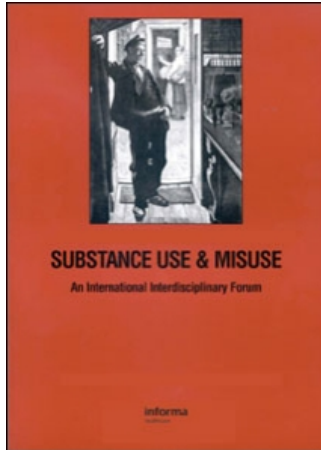


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Employment Among Chronic Drug Users at Baseline and 6-Month Follow-Up

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Most studies of unemployment among chronic drug users (CDUs) are drug-user treatment-based and there is little information on employment/unemployment among CDUs not in treatment. Between June 2003 and September 2004, 492 CDUs in Miami-Dade, Florida, were administered a quantitative survey at baseline and 6 months later; employment status was measured. Descriptive statistics showed that only 15% were employed at both periods, an equal percentage becoming employed and unemployed at 6 months. The majority of CDUs were unemployed at both time periods. Men were more likely than women to exhibit consistent employment over the two time periods. The study's limitations are noted and future research is suggested. This study was IRB-approved and funded by the National Institute on Drug Abuse.

Keywords chronic drug users (CDUs); employment; treatment efficacy; poly-drug use

Introduction

Unemployment is common among chronic drug users (CDUs). Studies have shown treatment to be effective in improving employment status (Metsch, Pereyra, Miles, and McCoy, 2003; Wickizer, Campbell, Krupski, and Stack, 2000) and employment status frequently is used as an outcome in determining treatment efficacy (Hermalin, Steer, Platt, and Metzger, 1990) and cost effectiveness (Sindelar, Jofre-Bonet, French, and McLellan, 2004) of treatment programs. Some treatment programs include employment counseling as part of the array of services offered to clients (Reif, Horgan, Ritter, and Tompkins, 2004) while other treatment facilities offer more extensive therapeutic programs (Kidorf, Neufield, and Brooner, 2004) or vocational rehabilitation courses (Platt, 1995) to encourage employment.

While abstinence from drugs is associated with employment status (Platt, 1995), the temporal sequence is not always clear. Changes in drug use do not necessarily indicate changes in employment status (Sindelar et al., 2004). While some studies have found that being drug free is related to employment status (Brewer, Catalano, Haggerty, Gainey, and Fleming, 1998), other studies have suggested that being employed is a factor in completing

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treatment or remaining abstinent from drugs (Ginexi, Foss, and Scott, 2003). A cohort study that investigated characteristics associated with employment enrolled individuals who were unemployed when admitted to drug-use treatment.* Those who were employed at 9-month follow-up experienced more positive life changes than those not employed (Sterling et al., 2001), whereas other demographic characteristics such as age and race were associated with continued unemployment. Other studies have shown that those who had lower emotional well-being and feelings of self-efficacy were more likely to be unemployed (Warr, Jackson, and Banks, 1988; Winefield, Winefield, Tiggeman, and Goldney, 1991).

While much emphasis is placed on employment status among drug users in treatment and after treatment, there is little information available on employment among chronic drug users (CDUs) not in drug-user treatment. There has been a recent examination of employment barriers among substance-using welfare recipients (Gutman, McKay, Ketterlinus, and McLellan, 2003; Montoya, Atkinson, and Struse, 2001; Morgenstern, McCrady, Blanchard, McVeigh, Riordan, and Irwin, 2003); however, these are select samples that do not examine CDUs who have not received welfare benefits. Typically, in studies of out-of-treatment CDUs, employment status often is utilized as a demographic variable with little discussion as to its significance or association with other variables. Since at any one time the majority of CDUs are not in drug-user treatment programs, analyses of the employment status of this group of drug users should shed light on this issue.

The purpose of this study is to characterize employment status among a sample of HIV-negative CDUs at baseline and 6 months later and to determine factors associated with stability of employment over the 6-month period. This is the first study of which we are aware that describes employment among a cohort of out-of-treatment chronic drug users at two time points.

Methods

Between June 2003 and September 2004, 600 CDUs were enrolled in a prospective study to test the efficacy of two brief interventions designed to reduce high-risk behaviors associated with HIV infection. To be eligible for the study, individuals had to be HIV-negative, use cocaine and/or heroin at least 12 times in the last month, not be enrolled in a treatment program, and be 18 years of age or older. An HIV-negative population was chosen in order to deliver the intervention to a more homogeneous group than if HIV-positive individuals were included. It is possible that individuals who are HIV-positive would react to the intervention differently than those who are HIV-negative. Frequency of drug use was set at a level that would exclude the casual user and include the more chronic hard-core user.

Drug use was verified using the ONTRAC system by Roche to detect metabolites to cocaine and/or heroin in the urine. This system detects drug use that occurred in the preceding 48–72 hours. Individuals who were found negative on urine screen were asked to return within 48 hours after their next drug use for retest and possible inclusion in the study.

Individuals were recruited through snowball-sampling techniques (Watters and Biernaki, 1989) for participation in the study from the streets of Miami-Dade County by skilled outreach workers. The outreach workers consisted of one African American woman and one African American man. The outreach workers were familiar with the drug

*Treatment can be briefly and usefully defined as a planned, goal-directed change process, which is *bounded* (culture, place, time, etc.) and can be categorized into professional-based, tradition-based, mutual help-based (AA, NA, etc.) and self-help (“natural recovery”) models. There are no unique models or techniques used with substance users—of whatever types—that aren’t also used with non-substance users. Editor’s note.

use neighborhoods in Miami and had experience working with drug users. Individuals were approached by the outreach workers who identified themselves as University of Miami staff members. Possible participants were asked if they would be interested in participating in a health study at the University of Miami. Those who agreed were briefly screened for eligibility on the street and, if meeting the initial criteria, were transported to an assessment center, which was located in an area adjacent to a neighborhood with high levels of drug use. A referral system also was established. Eligible participants were asked to refer other participants to the study. A small sum of \$5.00 was paid for each eligible referral who agreed to participate. Because of the use of the referral system and the nature of the street recruitment in which individuals could be contacted multiple times for screening and names were not obtained at that point, it was not possible to determine the number of people who refused to participate in the study.

The sample consisted of African American, Hispanic, and non-Hispanic White men and women, 18 years old or older, who were permanent residents of Miami-Dade County. The participants were recruited from and, for the most part, lived in areas of the city known for high drug use. All were active users of heroin and/or cocaine. None were currently in a drug use treatment program. (See Table 1 for additional sample characteristics.)

After the participant gave informed consent, a urine screen was done to check for the presence of metabolites to heroin and cocaine. Individuals who were positive for at least one drug were administered a baseline questionnaire by a trained interviewer using automated computer-assisted personal interview (ACASI) technology. Using the ACASI system, the interview is computerized and the respondent enters the answers to questions directly into a computer. An interviewer is available to assist the respondent as necessary.

The baseline questionnaire included demographic information, employment history, a drug use history, and questions on sexual risk behaviors. The questionnaire was based on surveys developed and used in our previous studies (Chitwood et al., 1991; Metsch, McCoy, Miles, and Wohler, 2004) and had been pretested among chronic drug users prior to use in this study. The interview took place in a room where confidentiality was assured and took approximately 1 hour. After completion of the questionnaire the participant was randomized to one of two intervention groups. Each intervention consisted of two sessions, the first of which was held immediately after completion of the interview.

The control intervention consisted of the administration of the National Institute on Drug Abuse (NIDA) Standard HIV Counseling and Testing Intervention. The second intervention is based on the Project RESPECT intervention (Kamb, Fishbein, Douglas, Rhodes, Rogers, Bolan, Zenilman, Hoxworth, Malotte, Iatesta, Kent, Lentz, Graziano, Byers, and Peterman, 1998) developed by the CDC and targets high-risk sexual behaviors. Pre- and post-HIV test counseling was a part of both interventions; neither intervention addressed employment issues. After completion of the intervention session, blood was drawn by venipuncture by a certified phlebotomist and tested for antibodies to HIV. Participants returned for the second session of the intervention 3 weeks later, at which time they were informed of their HIV test results. To compensate for their time, participants were paid \$20 at the end of each data-collection visit after the protocol requirements had been completed. In addition, participants were paid \$15.00 when they returned for the second intervention session.

Participants were followed 6 months after the baseline interview. A one-month window was allowed on each side of the 6-month data collection due date. Of the 600 participants, 492 (82%) were followed at 6 months. There were no differences in employment status at baseline among those followed and those not followed. The analysis for this study is based on the 492 individuals seen at both time periods.

Table 1
Selected demographic and drug use characteristics of the sample ($N = 492$)

	%
Gender	
Male	55.5
Ethnicity	
African American	39.4
Hispanic	28.5
Non-Hispanic White	32.1
Age	
<40	53.0
≥40	47.0
Education	
<High school diploma	31.5
High school diploma/GED	46.5
Post-high school	22.0
Marital status	
Single, never married	51.2
Married, living as married	11.6
Separated, divorced, widowed	37.2
Intervention	
NIDA standard	51.2
RESPECT	48.8
Drug use ^a	
Heroin	45.7
Speedball	31.5
Powder cocaine	66.9
Crack	82.5

Note. ^aAdds to over 100% because of use of multiple drugs.

Variable definitions: The same questions were asked at baseline and follow-up and thus each variable (other than certain demographic variables such as gender, age, ethnicity) had a baseline and a follow-up measurement. Each pair of variables was coded and constructed in an identical manner for baseline and follow-up.

Two employment variables were included in the questionnaire. Respondents were asked about their work situation in the past 30 days, which was coded 1 = regular full-time work, 2 = regular part-time work, 3 = occasional work, and 4 = unemployed. Number of days worked in the last 30 days also was recorded. Employment status was dichotomized into “some employment” (1 or more days of work) and “no employment” in the 30 days preceding interview. For the logistic regression model, employment was the outcome variable and was coded as 1 “employed during both time periods” (consistent employment) and 2 “not employed in both time periods.” Those who were employed during one time period only were coded 2 since they were not employed during both time periods.

Demographic variables were coded as follows: Gender, 1 = male, 2 = female; ethnicity/cultural/language group, 1 = African American, 2 = Hispanic, 3 = non-Hispanic White, and other; age, 1 = < 40 years old, 2 = ≥ 40; education, 1 = < high school diploma, 2 =

high school diploma/GED, 3 = post-high school; marital status, 1 = single/never married, 2 = married/living as married, 3 = divorced/separated/widowed. Intervention received was coded 1 = NIDA Standard, 2 = RESPECT. The drug-use variables (heroin use, speedball use, powder cocaine use, and crack use) were each coded for no use of the drug in either time period (30 days prior to baseline and 30 days prior to 6-month follow-up = 1 and any use of the drug in either of the two time periods = 2.

Data Analysis

Data initially were analyzed using descriptive statistics. Paired data were analyzed using the McNemar test for paired differences. To determine factors that were independently associated with consistent employment, we entered a priori selected demographic variables and drug-use variables into a logistic regression model. These variables included gender, ethnicity, age, and education, all of which have been associated with employment in other groups. To examine the association between substance used and employment, we included the drug-use variables of any use of heroin in either time period, any use of speedball in either time period, any use of powder cocaine in either time period, and any use of crack use in either time period.

Results

Table 1 describes the demographic characteristics at baseline of the 492 individuals who make up this sample. A little over half (55.5%) of the participants were male; almost 4 in 10 (39.4%) were African American, 28.5% were of Hispanic descent, and 32.1% were non-Hispanic White. Slightly over half (53.0%) of the sample were under 40 years of age. Over three fourths (68.5%) of the participants had at least a high school education. Slightly over half (51.2%) had never been married at the time of baseline interview. Only 11.6% reported currently living in a marital relationship. There was no difference in the percentage receiving the NIDA Standard (51.2%) and the RESPECT (48.8%) interventions.

Drug-use variables are reported for baseline and 6-month follow-up. At baseline, 42.3% of the sample reported heroin use and 27.6% reported speedball use. Almost 8 out of 10 participants used crack in the 30 days prior to baseline interview and 59.1% used powder cocaine. Use of each drug was lower at 6-month follow-up. Crack continued to be the most used drug, with over one half of the sample (56.1%) reporting crack use at follow-up. All decreases in reported drug use were significant. Employment variables are shown in Table 2.

Table 2
Employment at baseline and 6-month follow-up ($N = 492$)

	Baseline	6-Month follow-up
Work situation		
Regular, full-time	9.3%	14.2%
Regular, part-time	6.9%	8.3%
Occasional	15.7%	10.0%
Unemployed	68.1%	67.5%
Mean # days employed (30 days prior to interview)	4.44	5.11

Table 3
Employment status at baseline and 6 months (baseline)

	Employed (%)	Not employed (%)
6 Months		
Employed	15.0	17.5
Not employed	16.9	68.0

Less than 10% of the sample at baseline and less than 15% of the sample at follow-up had regular full-time employment. About two thirds of the sample was unemployed at each period. Mean number of days worked in the 30 days prior to interview was 4.44 at baseline and 5.11 at 6-month follow-up. When only those who worked are examined, mean number of days employed was 15.67 at baseline and 17.50 at follow-up (not shown in tabular form).

The employment status of individuals at baseline and 6-month follow-up is shown in Table 3. As can be seen, 15% of the participants were employed at both baseline and 6-month follow-up. An almost equal proportion became employed at 6 months (16.9%) as became unemployed (17.5%). One half of the sample was unemployed at both time periods.

Table 4 describes the logistic regression model. When all variables were entered simultaneously into the model, only gender remained a predictor of consistent employment. Women were less likely to have experienced consistent employment than were men.

Discussion

The issue of employment status among out-of-treatment CDUs has been overlooked. While many studies have examined employment and drug use, these studies emanated from drug-user treatment-based samples or samples of substance-abusing[†] welfare recipients. As shown in this study, unemployment is a serious problem among out-of-treatment CDUs. At both baseline and at 6-month follow-up, the majority of our sample was unemployed in the month prior to interview. In our study, 68.1% of the sample was unemployed at baseline and 67.5% of the sample was not employed at 6-month follow-up. Only 15% of the sample was employed at both time periods; one half were unemployed at both time periods. This was during a period when unemployment rates in the Miami-Dade county were relatively low and dropping each year. In 2003, the year the study was initiated, the unemployment rate was 6.0%; in 2005, the year 6-month follow-up was completed, the unemployment rate was 5.1% (U.S. Department of Agriculture [USDA], 2005). Our definition of employment was liberal; any employment in the 30 days preceding the interview was coded as employed. Thus, these findings perhaps overinflate the employment rate.

In addition, employment among CDUs appears to be very unstable. While finding employment is essential, maintaining employment is as important, if not more important, to the ability to support one's self and family. As many individuals became unemployed at 6 months as became employed. This finding, while important, is not surprising. While drug users are not a homogeneous group (Plant, 1975), many drug users lead very unstable lifestyles and employment is only one part of this total everyday life pattern. For example, only 11.6% of the sample was living in a marital relationship. Housing is often temporary, and many drug users are in and out of the criminal justice system. Because consistent

[†]The journal's style utilizes the category *substance abuse* as a diagnostic category. Substances are used or misused; living organisms are and can be *abused*. Editor's note.

Table 4
Logistic regression model: Consistent employment

	Adjusted O.R.	95% C.I.
Gender		
Male	1.00	
Female	0.56	0.33, 0.97
Ethnicity		
African American	1.00	
Hispanic	1.02	0.54, 1.92
Non-Hispanic White	0.80	0.41, 1.55
Age		
<40	1.00	
≥40	1.41	0.81, 2.45
Education		
<High school diploma	1.00	
High school diploma/GED	1.22	0.61, 2.47
Post-high school	1.34	0.71, 2.55
Marital status		
Single, never married	1.00	
Married, living as married	0.95	0.53, 1.72
Separated, divorced, widowed	0.66	0.30, 1.48
Intervention		
NIDA standard	1.00	
RESPECT	0.78	0.47, 1.30
Heroin use		
No use	1.00	
Used in at least one time period	0.93	0.43, 2.02
Speedball use		
No use	1.00	
Used in at least one time period	1.03	0.95, 1.03
Powder cocaine use		
No use	1.00	
Used in at least one time period	0.87	0.48, 1.55
Crack use		
No use	1.00	
Used in at least one time period	1.08	0.53, 1.18

employment is the ultimate goal of any job training or skills training done in drug-user treatment facilities, we looked for factors associated with consistent employment; i.e., holding a job in both the 30-day period prior to baseline interview and the 30-day period prior to follow-up interview.

Women were less likely to experience consistent employment than were men. This is consistent with findings in other studies that women drug users have a lower employment rate that do male drug users even after substance user treatment (Alterman, Randall, and McLellan, 2000; Ginexi et al., 2003). It has been proposed that women are less likely to be employed than men because of childcare responsibilities. However, Ginexi and

colleagues (2003) found no such relationship. The lower employment rates among women drug users are particularly troubling in light of the passage of the 1996 Personal Responsibility and Work Opportunity Reconciliation Act, which effectively ended the federal entitlement program Aid to Families with Dependent Children (AFDC). AFDC was replaced by the transitional Temporary Assistance to Needy Families (TANF). The vast majority of TANF recipients are restricted to a 5-year lifetime limit of federally funded cash aid (Metsch and Pollack, 2005). Under these new guidelines, substance-using women without consistent employment could face extreme hardships in providing for dependent children.

One of the more interesting findings was that no other demographic variables were associated with consistent employment. Even level of education was not associated with consistent employment. This may reflect an overpowering association between chronic drug use and unemployment. In addition, no single drug was negatively associated with consistent employment. Poly-drug use is common and most of the sample used more than one drug. It may be that drug use was so pervasive as to wipe out all other possible associations.

Lack of consistent employment among drug users presents several non-economic problems for the drug users. Sterling and colleagues (2001) found that employment was associated with positive life changes among drug users. Other studies have found that unemployment is associated with depression (Ginexi, Howe, and Caplan, 1999; Montgomery, Cook, Bartley, and Wadsworth, 1999), lower self-esteem (Winefield et al., 1991), and lower well-being (Warr et al., 1988) in the general public. In addition, low expectancy of finding employment may lead to a cycle of disbelief that a job can be found, which in turn can lead to withdrawal from the workforce (Goldsmith, Venum, and Darity, 1995). Although we did not examine these factors, there is no reason to believe that they are not associated with unemployment among CDUs. It also is highly likely that these same factors associated with unemployment are associated with drug use. For example, depression among drug users is common (Reiger, Farmer, Rae, Locke, Keith, Judd, and Goodwin, 1990), as are a variety of other psychological and psychiatric problems (Bakken, Landheim, and Vaglum, 2005; Compton, Weiss, West, and Kaslow, 2005). It is often hard to determine causality as the comorbid factors often are interrelated. This indicates a circular type of situation in which unemployment and drug use act upon and perpetuate each other.

Drug users face many barriers to consistent employment. While we did not collect data on obstacles to employment, others have. An understanding of these barriers is a necessary step in addressing the issue of unemployment among drug users and designing programs to assist drug users in obtaining and maintaining employment. Serious obstacles to employment include: serious health problems, domestic violence, impaired psychiatric functioning, low self-esteem, learning disabilities, limited work skills, lack of high school education, not having a driver's license, and minority status (Chandler, Meisel, Jordan, Rienzi, and Goodwin, 2004; Gutman et al., 2003; Morgenstern et al., 2003). All of the obstacles are relevant to CDUs. Gutman and colleagues (2003) found that drug users among TANF recipients faced multiple potential employment barriers. Of the 14 barriers assessed among a sample of 366 substance-using women, the average number of barriers reported was six. The most common barriers were transportation (88%), lack of work experience (81%), and lack of job skills (65%). These women reported significantly more barriers than did a sample of general welfare recipients. Other researchers also have found multiple barriers to employment among drug-using women (Montoya, Atkinson, and Blanchard, 2001; Morgenstern, McCrady, Blanchard, McVeigh, Riordan, and Irwin, 2003). An additional barrier is the extent to which drug testing *prior to* employment has been implemented. Drug users who are qualified and capable of working are precluded on the basis on a positive drug test. In view

of the many barriers to employment experienced by drug users, the more surprising finding of this study may be that 15% of the sample was employed during both time periods.

With the onset of the HIV epidemic, a variety of brief interventions outside drug-user treatment settings have been initiated to reduce risk behaviors associated with the transmission of HIV among CDUs. Many of these interventions have proven to have some efficacy in reducing high-risk drug use and sex activities (Baker and Kochan, 1994; Booth, Kwiatkowski, and Stephens, 1998; Gibson, McCusker, and Chesney, 1998; Kotranski et al., 1998; Sterk, Theall, and Elifson, 2003). The question then arises as to whether brief, short-term interventions have a residual effect on other lifestyle conditions and could have efficacy in increasing consistent employment among CDUs by addressing both behaviors associated with unemployment and barriers to employment.

While neither of the interventions delivered in our study was associated with consistent employment, we did not intend the interventions to target employment. If drug use and sex behaviors can be altered through brief interventions, perhaps a component emphasizing employment and the reduction of barriers to employment would be efficacious. Caplan, Vinokur, Price, and vanRyn (1989) used training sessions to promote positive feelings toward the job search and inoculation against setback, which resulted in motivation to continue job seeking. Since many substance users are now receiving brief interventions in connection with HIV testing and counseling, a module could be added and empirically tested to determine feasibility of approaching the lack of consistent employment among CDUs. There is little doubt of the strong interdependence of drug use and employment. Lack of employment may be one factor in connecting more serious dependent drug taking, whereas more critical drug involvement certainly works against more stable and/or better paying employment. The structural and personal barriers mentioned above as well as the emphasis in the workplace on a drug-free environment and the practice of testing for drugs before and during employment argues against more consistent employment among CDUs. It is doubtful that consistent employment for most CDUs is possible without first dealing with the drug addiction and/or use. This speaks once again to the importance of intervention and treatment programs recognizing and dealing with multiple issues of addiction. And the more successful interventions will be those that can be most successful in bringing a holistic approach to addressing drug use. For this to occur, drug treatment facilities and intervention programs need to receive appropriate funding and support. This support would include training interventionists and counselors to assist drug users in employment-related issues.

Study's Limitations

Certain limitations of the study must be noted. First, as stated above, our definition of *employment* was liberal and thus could overinflate the number of participants experiencing consistent employment. However, since only 15.0% of the sample was in the consistent employment category, it is doubtful that much overinflation occurred. Other conceptualizations of employment are possible and certainly employment is a complex, dynamic concept, which is difficult to capture in a study such as this. While the analytic tools we used to study this phenomenon are linear in design, the full nuances of employment are not fully portrayed in a linear model.

The fact that no variables other than gender remained in the final regression model could be due to several factors. The small number of individuals in the consistent employment category may have precluded sufficient power to detect differences among the other variables. There were, however, no variables other than gender that approached significance,

suggesting that these variables would not have been significant even with additional power. It could not be ascertained if the individual was employed in the same job at both time periods. However, being employed at both time periods is, by itself, a type of job stability irregardless of a change in employment. Since all participants in the sample were drug users, it was not possible to determine the role of drug use in employment. Likewise, this lack of a neighborhood control group of non-CDUs precluded us from making comparisons with non-drug users living in the same areas of the community. One final limitation is the absence of alcohol use as an independent variable. The Michigan Alcohol Screening Test-MAST (Selzer, 1971) was administered to 418 of the 492 subjects in this analysis. Because of the smaller number, the results of the MAST were not utilized or reported in this article. However, when the logistic regression was run with the smaller number of and alcohol use dichotomized as problem drinker/not a problem drinker on the basis of the MAST, the results of the regression were unchanged.

As always in research involving human participants, the possibility of exploitation can occur. Individuals in this study were paid for their time and every effort was made to accommodate the needs of the participants. While no direct benefit will be accrued by the study participants, it is hoped that research such as this will lead to a better understanding of the issue of employment among substance users.

In spite of the above limitations, this study presents one of the first descriptions of employment status among a sample of out-of-treatment drug users at more than one time point. The high rate of unemployment and the lack of job stability are serious problems among this group. Considering the many personal as well as systemic barriers to employment faced by CDUs, programs need to be implemented to improve the rate and stability of employment among this disadvantaged group while taking into consideration the multiple components of the lifestyle of the CDU.

Further research in the area of substance use and employment is critical. There are many questions that deserve attention. The utility of methadone maintenance in promoting employment needs to be further studied. Increased employment was a benefit of methadone treatment in a simulation model by Zarkin, Dunlap, Hicks, and Mamo (2005). The role of treatment programs in preparing clients for employment is another understudied area, as is the effect of the increased number of drug-free workplaces and drug testing as a condition of employment. Another area of interest is the effect that the local economic and employment patterns have on employment of substance users.

Out-of-treatment substance users are at a disadvantage in procuring and maintaining employment. Some of this is the lack of appropriate job readiness and job skills. Appropriate training in the application process and expectations of employers is needed. In addition, many substance users could benefit from job skills training in fields where there is a demand for employees. Low expectations of a successful job search and employment career may discourage many individuals from even seeking employment. Support systems need to be established to assist substance users to accomplish employment goals.

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Glossary

Chronic Drug User (CDU): a person who uses and is dependent on illicit drugs on a regular basis over a period of time.

Drug Use Risk Factors: traits and lifestyle that increase the risk of illicit drug use.

Employment: any type of work performed or services rendered in exchange for compensation.

Unemployment: lack of livelihood producing work; joblessness.

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