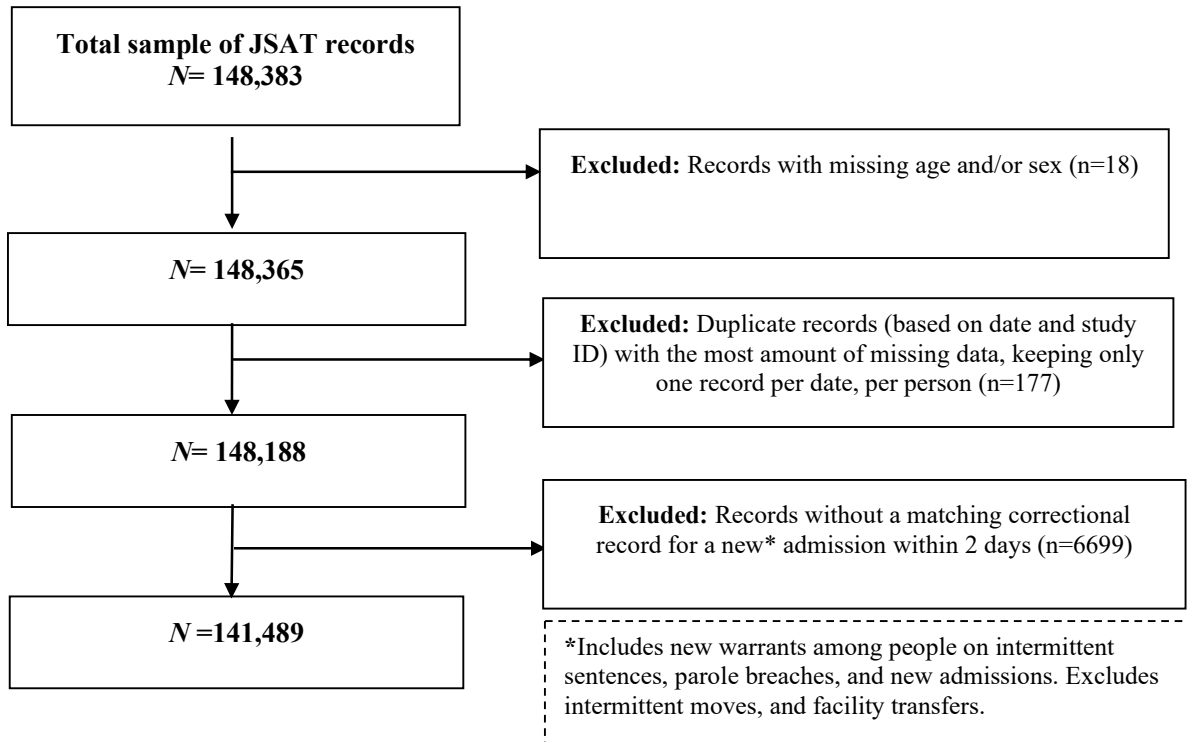


### Flow chart for study sample



## **Appendix A**

The following experts are taken directly from the *JSAT Screening Assessment Tool (JSAT): Guidelines for Mental Health Screening in Jails* (Nicholls et al., 2005). The manual provides a reference for intake interviewers conducting mental health screening.

The guidelines note that mental health evaluations should reflect information gathered from multiple sources wherever possible. As such, screeners may refer to files from previous admissions and other supplemental information. The specific interview questions and prompts can be found in the guide; the content that is directly relevant to the coding of substance use disorders so that readers understand how abuse and long-term severe abuse are differentiated in the JSAT (beginning on pg. 62 of the guide).

### **Coding Substance Use**

Intake interviewers should be familiar with the criteria for substance abuse and substance dependence (DSM-IV-TR, APA, 2000).

#### **Coding Substance Use:**

##### ***Alcohol***

**Current Abuse:** A maladaptive pattern of drinking that results in repeated and significant adverse consequences. Inmate has experienced impairment or distress due to recurrent failure to fulfill *role obligations*; use in physically *dangerous circumstances*; substance related *legal problems*; and/or significant *social or personal problems* (APA, 2000). These inmates generally

do not exhibit significant withdrawal symptoms or compulsive behavior related to obtaining and using alcohol.

**Long-Term Severe Abuse:** Compulsive use and associated problems. Inmate fails to abstain from alcohol despite experiencing significant psychological or physical impairment or distress (e.g., depression, blackouts, liver damage). Inmate reports compulsive alcohol ingestion despite experiencing related cognitive, behavioral, and physiological problems. Symptoms may include: 1) Tolerance – a need for increased amounts to achieve desired effect or diminished effect with the same amount, or 2) Withdrawal – symptoms may include sleep problems, sweating, anxiety, nausea, hallucinations. The inmate reports the pattern of use has been sustained for at least 12 months (APA, 2000).

### ***Drugs***

Indicate: Marijuana, Heroin, Cocaine, Methamphetamine, and note any other drugs, medications or inhalants

**Abuse:** Inmate reported use of drugs or misuse of medications or inhalants that results in repeated and significant adverse consequences. Inmate has experienced impairment or distress as evidenced by a failure to fulfill *role obligations*; use in physically *dangerous circumstances*; substance related *legal problems*; and/or significant *social or personal problems* (APA, 2000).

These inmates generally do not exhibit significant withdrawal symptoms or compulsive behavior related to obtaining and using alcohol. These inmates generally do not exhibit significant withdrawal symptoms or compulsive behavior related to obtaining and using the drug(s).

**Long-term Severe Abuse:** Inmate has experienced adverse psychological, physical, and/or social effects resulting from *compulsive* drugs use or misuse of medication(s) and/or inhalant(s). The inmate may report difficulty resisting temptations to use the drug(s) when available, gross neglect of responsibilities, or spending considerable time and money obtaining and using the drug(s). The inmate may have experienced physiological dependence including *tolerance and/or withdrawal* and using drugs to avoid withdrawal symptoms. Inmate reports the pattern of use has been sustained for at least 12 months (APA, 2000).