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CHARACTERISTICS OF ARRESTEES AT RISK FOR CO-EXISTING SUBSTANCE ABUSE AND MENTAL DISORDER

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Abstract

Recent research indicates that persons with co-existing mental illness and substance abuse are disproportionately represented in local jails. Those with co-existing disorder are reported to be at higher risk for arrest and to be arrested for less serious offenses. Although studies have been conducted to determine prevalence rates of co-existing disorder amongst arrestees, few studies have examined in any detail the discriminating characteristics of this group. In particular, little is known about how those presenting with dual symptoms differ from those who display only mental health symptoms or substance disorder symptoms. This study was conducted as a supplemental study to the Cleveland/Cuyahoga County ADAM (Arrestee Drug Abuse Monitoring) program in order to determine the characteristics of adult arrestees with mental health and/or substance disorders. In a sample of 311 adult arrestees, one-third (29%) scored at no risk for either mental health or substance disorders based on a screening instrument. Seventeen percent (17%) scored at risk for substance disorder with no symptoms of active mental disorder. Eighteen percent (18%) scored at risk for active mental disorder without substance abuse risks. Thirty five percent (35%) scored at risk for both mental disorder and substance disorder. Using multinomial logistic regression, those in the dual risk group were more likely to lack stable housing, to lack insurance, to have a history of substance abuse treatment and to test positive for cocaine use. Classification into the mental disorder risk only group was predicted by a personal and family history of mental illness. Members of the substance disorder risk only group were less likely to have health insurance and more likely to have a personal history of substance abuse treatment. This study supports the need for the development of an efficient means for identifying arrestees with dual risk and linking these clients to case management services, particularly to housing.

Introduction

The need to divert people with co-occurring substance abuse and mental health disorder from the criminal justice system to treatment is apparent. Recent research indicates that the majority of arrestees with severe mental disorder have a co-existing substance use disorder. The inability of jails to divert these offenders contributes substantially to the cycle of offense and incarceration.

This study was conducted to identify the characteristics of adult arrestees at risk for dual disorder, particularly as distinguished from those who have no risk, risk only for mental disorder or risk only for substance use disorder. Predictor variables examined in this study included gender, stable housing, insurance, employment, education, history of illness and treatment, results of urine drug testing and primary arrest charge. A secondary purpose of the study was to develop a dual risk screening interview that might be useful for jails to use at the time of booking in order to link clients to assessment services.

Literature Review

Current prevalence estimates of severe mental illness in prisons ranges between 6 and 15% and estimates are much higher for jails (Lamberti, Weisman, Schwarzkopf, Price, Ashton, & Trompeteer, 2001). The National Gains Center reports that persons with co-existing mental illness and substance abuse are disproportionately represented in local jails (GAINS, 2004). Abram and Teplin (1991) report that among jail detainees

with a severe mental disorder, 72 percent have a co-occurring substance use disorder. Prevalence rates for severe mental illness at jail entry are reported to be higher for females than for males (GAINS, 2002). Other studies have reported higher risk for substance use disorder for females in jail (Alemagno and Dickie, 2002; Abram, Teplin, & McClelland, 2001).

Jails and prisons today have been described as surrogate mental hospitals because of "the profound failure of the public mental health system to provide appropriate community-based services following institutionalization" (Godley, Finch, Dougan, McDonnell, McDermeit, and Carey, 2000: 137-138). This has been labeled as the criminalization of mental illness. In fact, some studies have reported that those at risk for dual disorder tend to be arrested for less serious offenses. Harry and Steadman (1988) found that arrest rates for mentally ill individuals were .76 to 1.96 times higher than for the general population. Teplin and Pruett (1992) report that mentally ill suspects had arrest rates nearly double those of suspects without mental illness. These authors observed that the dual risk clients were more likely to end up in the criminal justice system since they did not fit psychiatric programs reluctant to accept someone under the influence of a substance or detoxification programs reluctant to accept someone with a psychiatric disorder.

Currently, there are no universally agreed upon standards of evaluation for dual diagnosis (Kanwischer, 2001) so it is difficult to criticize jails for not implementing screening programs. Further, due to the heterogeneity of the population, effective screening practices have been difficult to implement (Lehman, 1996). Even so, Minkoff (1998) has suggested that dual diagnosis should be the expectation rather than the

exception. Once identified as in need of mental health services, there is often little to no treatment available in jails (Teplin, Abram and McClelland, 1997). This is further complicated by reports that, even with effective screening and linkage to treatment, individuals with comorbid substance abuse or dependence and psychiatric disorders have a poor prognosis (Drake, McHugo, and Noordsy, 1993).

There is a clear need to examine the profile of offenders presenting with dual symptoms. The purpose of this supplemental study was to identify characteristics of arrestees presenting with risk factors for current mental illness and/or current substance abuse or dependence.

Methodology

This study was conducted as a supplemental study to the Cleveland/Cuyahoga County ADAM (Arrestee Drug Abuse Monitoring) program (NIJ, 2003) in the second quarter of 2003 (April-June). The ADAM program collects interview and urine data on anonymous arrestees within 48 hours of arrest. Data include detailed demographic information, criminal justice involvement, personal drug use, treatment history and market use. Cleveland/Cuyahoga County was one of 35 jurisdictions across the United States participating in the ADAM program until the program was ended in 2003. In Cleveland, the ADAM sampling process included dividing booking facilities into two strata including the city of Cleveland and the other 65 booking sites located throughout Cuyahoga County, Ohio. The second strata were further divided into east side and west side booking facilities. Two sites were selected from each geographical area making for a total of 6 sites. In addition, data for female arrestees was collected at the Cuyahoga

County Jail. A detailed plan to access both stock and flow of arrestees was implemented to address the 24-hour representativeness of the sample.

A risk screening instrument developed within a previous study (Alemagno and Dickie, 2002) was implemented to classify Cleveland/Cuyahoga County arrestees into four analytical groups: arrestees at no risk for substance abuse or dependence or mental disorder; arrestees at risk for substance abuse or dependence with no risk for mental disorder; arrestees at risk for mental disorder with no risk for substance abuse or dependence; and arrestees at risk for both mental disorder and substance abuse or dependence. The risk screening instrument consists of twelve questions that have been derived by factor analysis. These questions are shown in Exhibit 1. Copies of the ADAM instrument and dual diagnosis supplement are attached in Appendix 1.

Exhibit 1: Risk Screening Instrument

(MENTAL DISORDER RISK)

1. Do your thoughts go so fast you are unable to think clearly about things or plan activities?
2. Do people tell you that they can't understand what you are saying even though it makes sense to you?
3. Are you hearing or seeing things that people say they cannot see or hear?
4. Do your emotions or feelings make it hard for you to do the normal day to day activities that you need or want to do?
5. Do you feel depressed and hopeless most of the time?
6. Have you been thinking about hurting yourself or committing suicide?

(SUBSTANCE ABUSE RISK)

1. Do you feel that you drink too much too much alcohol or use too much drugs?
2. Has drinking or drug use recently caused problems between you and your family or friends?
3. Have you recently been arrested due to your alcohol or drug use?
4. Have you needed to drink more or use more drugs to get the effect that you want?
5. Do you spend a lot of time thinking about or trying to get alcohol or drugs?
6. Do you feel bad or guilty about your drinking or drug use?

Note: A positive response to one ore more mental disorder risk AND one or more substance abuse risk questions indicates a risk for dual disorder.

Results

A total of 311 arrestees were interviewed and provided a urine sample submitted for testing. The Enzyme Multiplied Immunoassay Test (EMIT) screens for 10 drugs: amphetamines, barbiturates, benzodiazepines, marijuana, cocaine, methadone, opiates,

phencyclidine (PCP), methaqualone and propoxyphene (Darvon). All positive results for amphetamines are confirmed by gas chromatography (GC) to eliminate any over-the-counter medications. Of the respondents, 65% were male, 81% African-American, 87% had a previous arrest history, and 12% had no stable housing. About one-third (35%) reported having had previous substance abuse treatment and 26% reported having had previous mental health treatment. In terms of offense (primary offense), 35% were under arrest for a drug charge (drug possession or drug sale), 16% for a property crime, 14% for flight or probation violation, 10% for a violent crime, and 9% for domestic violence.

Examining risks related to current substance abuse or dependence and mental disorder using the risk screening instrument, about one third (n=93) of the sample scored at no risk. Seventeen percent (n=53) scored at risk for substance abuse or dependence with no current symptoms of active mental disorder. Eighteen percent (n=57) scored at risk for active mental disorder without substance abuse or dependence. Finally, about one third (n=108) scored at risk for both active mental disorder and substance abuse or dependence.

First, a series of bivariate contingency table analyses were conducted using chi-square on each of the predictor variables with the categorical variables indicating risk classification. Table 1 presents data by gender, race and education. Females were significantly more likely to be at risk for dual disorder (40.7% vs. 31.5%) or for mental disorder only (23.1% vs. 15.8%), while males were more likely to be classified as substance abuse risk only (19.2% vs. 13%) or no risk (33.5% vs. 23.1%). Differences in proportions by race and education are non-significant.

Table 1
Demographics by Risk Classification
(n= 311)

	Gender*				Race/Ethnicity				High School (GED)			
	Female		Male		Nonwhite		White		No		Yes	
	%	(n)	%	(n)	%	(n)	%	(n)	%	(n)	%	(n)
Dual Risk	40.7	(44)	31.5	(64)	32.7	(82)	42.2	(25)	39.6	(57)	30.5	(51)
Mental Disorder Risk Only	23.1	(25)	15.8	(32)	17.9	(45)	20.3	(12)	18.1	(26)	18.6	(31)
Substance Abuse Risk Only	13.0	(14)	19.2	(39)	16.3	(41)	20.3	(12)	14.6	(21)	19.2	(32)
No Risk	23.1	(25)	33.5	(68)	33.1	(83)	16.9	(10)	27.8	(40)	31.7	(53)

Note: All percentages adjusted for missing data
*p<.05

Table 2 presents data related to employment, insurance and housing. Those who were employed full-time were more likely to be classified as no risk (33% vs. 26%) or at risk for mental disorder only (22.3% vs. 13%). Unemployed individuals, on the other hand, were at greater risk for substance abuse only (20.6% vs. 14.5%) or for dual risk (40.5% vs. 30.2%). Those who lacked insurance were more likely to be classified as substance abuse risk only (22.4% vs. 9.4%) or for dual risk (37.7% vs. 29.9%). The greatest proportional differences were observed related to housing, with those without stable far more likely to be classified as at risk for dual disorder (68% vs. 31.8%).

Table 2
Employment, Housing and Health Insurance by Risk Classification
(n= 311)

	Employed Full Time*		Stable Housing**		Health Insurance**	
	No	Yes	No	Yes	No	Yes
	% (n)	% (n)	% (n)	% (n)	% (n)	% (n)
Dual Risk	40.5 (53)	30.2 (54)	68.0 (17)	31.8 (91)	37.7 (69)	29.9 (38)
Mental Disorder Risk Only	13.0 (17)	22.3 (40)	12.0 (3)	18.9 (54)	15.8 (29)	22.0 (28)
Substance Abuse Risk Only	20.6 (27)	14.5 (26)	12.0 (3)	17.5 (50)	22.4 (41)	9.4 (12)
No Risk	26.0 (34)	33.0 (59)	8.0 (2)	31.8 (91)	24.0 (44)	38.6 (49)

Note: All percentages adjusted for missing data
*p<.05
**p<.01

This study also examined treatment history and family history of mental disorder or substance abuse. These results are presented in Table 3. Those who reported a history of treatment for mental health disorder were more likely to be classified as at risk only for mental disorder risk (23.8% vs. 16.5%) or dual risk (63.8% vs. 24.8%). The same relationship was true for those reporting a family history of mental disorder; however, the differences are not as pronounced for the dual risk classification (48.1% vs. 30.4). Those reporting a personal history of substance abuse treatment were more likely to be classified as being at risk for either substance abuse only (28.4% vs. 11.1%) or dual risk (50.5% vs. 26.6%). Those reporting a family history of substance abuse were more likely to be classified as at risk for dual diagnosis (43.8% vs. 22.7%) and less likely to be classified as a risk for substance abuse only (12.4% vs. 23.4%).

Table 3
Personal and Family Treatment by Risk Classification
(n=311)

	Ever Treated for Mental Problems**		Family History of Mental Problems**		Ever Treated for Substance Abuse**		Family History of Substance Abuse**	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Dual Risk	24.8 (57)	63.8 (51)	30.4 (68)	48.1 (38)	26.6 (53)	50.5 (55)	22.7 (29)	43.8 (78)
Mental Disorder Risk Only	16.5 (38)	23.8 (19)	15.6 (35)	25.3 (20)	22.1 (44)	11.0 (12)	17.2 (22)	19.1 (34)
Substance Abuse Risk Only	20.0 (46)	8.8 (7)	20.1 (45)	10.1 (8)	11.1 (22)	28.4 (31)	23.4 (30)	12.4 (22)
No Risk	38.7 (89)	3.8 (3)	33.9 (76)	16.5 (13)	40.2 (80)	10.1 (11)	36.7 (47)	24.7 (44)

Note: All percentages adjusted for missing data
** p<.01

Results for criminal history and for urine testing for the two most prevalent drugs in our sample- marijuana and cocaine- are shown in Table 4. Individuals reporting having been in jail for more than 24 hours in the past were more likely to be classified as at risk for dual disorder (37.8% vs. 14.6%) or at risk only for substance abuse (18.9% vs. 4.9%). Additionally, those testing positive for cocaine were more likely to be classified as at risk for dual disorder (49.7% vs. 21%) or at risk for substance abuse (20.8% vs. 13.6%).

Table 4
History of Incarceration, Positive Marijuana and Positive Cocaine by Risk Classification
(n= 311)

	Ever in Jail > 24 Hours**		Positive for Marijuana		Positive for Cocaine**	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Dual Risk	14.6 (6)	37.8 (102)	31.3 (61)	40.5 (47)	21.0 (34)	49.7 (74)
Mental Disorder Risk Only	31.7 (13)	16.3 (44)	20.5 (40)	14.7 (17)	24.1 (39)	12.1 (18)
Substance Abuse Risk Only	4.9 (2)	18.9 (51)	18.5 (36)	14.7 (17)	13.6 (22)	20.8 (31)
No Risk	48.8 (20)	27.0 (73)	29.7 (58)	30.2 (35)	41.4 (67)	17.4 (26)

Note: All percentages adjusted for missing data
**p<.01

Examining primary offense by risk classification, there were no significant relationships. These results are presented in Table 5.

Table 5
Primary Offense by Risk Classification
(n=311)

	Violence Offense		Property Offense		Drug Offense		Domestic Violence	
	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)	No % (n)	Yes % (n)
Dual Risk	35.4 (97)	29.7 (11)	35.0 (91)	33.3 (17)	31.1 (59)	40.5 (49)	34.6 (98)	35.7 (10)
Mental Disorder Risk Only	17.2 (47)	27.0 (10)	18.8 (49)	15.7 (8)	21.6 (41)	13.2 (16)	17.0 (48)	32.1 (9)
Substance Abuse Risk Only	18.2 (50)	8.1 (13)	15.8 (41)	23.5 (12)	17.9 (34)	15.7 (19)	18.4 (52)	3.6 (1)
No Risk	29.2 (80)	35.1 (13)	30.4 (79)	27.5 (14)	29.5 (56)	30.6 (37)	30.0 (85)	28.6 (8)

Note: All percentages adjusted for missing data

In a final analysis, significant predictors (presented in the tables above) were entered into a multinomial logistic regression model (using the SPSS for Windows 11.5 application) with the four risk classifications as the outcome variables. The no risk classification is designated as the reference category for this analysis, therefore significance tests, betas and odds ratios are interpreted as the difference between the no risk group and the group with the reported value. The summary table is presented in Table 6.

Membership in the classification of dual risk is predicted by lack of stable housing (b=-2.520; p=.024) and insurance (b=-916; p=.014). Also, those in the dual risk category are more likely to have a history of mental health treatment (b=3.329;p=.000), more likely to have a family history of substance abuse treatment (b=.849;p=.025), and

more likely to test positive for cocaine (b=1.432; p=.000). Classification into the mental risk only classification is predicted by a greater likelihood of having a personal history (b=2.851; p=.000) and family history (b=.925; p=.038) of treatment for mental illness. Finally, members of the substance abuse only risk group were less likely to have health insurance (b=-1.228; p=.004) and more likely to have a personal history of substance abuse treatment (b=1.941; p=.000).

Table 6. Multinomial Logistic Regression Model Predicting Risk Classification

	Risk for Dual Diagnosis†				Risk for Only Mental Illness Diagnosis†				Risk for Only Substance Abuse Diagnosis†			
			95% CI for Exp(B)				95% CI for Exp(B)				95% CI for Exp(B)	
	B	Exp(B)	Lower	Upper	B	Exp(B)	Lower	Upper	B	Exp(B)	Lower	Upper
Intercept	.461				.898				-.642			
Stable Housing	-2.520*	.080	.009	.719	-1.702	.182	.017	1.909	-.932	.394	.035	4.378
Currently Insured	-.916*	.400	.193	.828	-.357	.700	.335	1.460	-1.228**	.293	.126	.680
Personal History of Mental Health Problems	3.329**	27.921	6.166	126.433	2.851**	17.307	3.677	81.451	1.478	4.383	.812	23.664
Family History of Mental Health Problems	.643	1.901	.774	4.668	.925*	2.521	1.054	6.034	.054	1.055	.345	3.232
Family History of Substance Abuse	.849*	2.337	1.110	4.921	.264	1.303	.615	2.757	-.453	.636	.283	1.427
Personal History of Substance Abuse Treatment	.788	2.199	.899	5.377	.214	1.239	.434	3.539	1.941**	6.965	2.706	17.926
Served More than 24 Hours in Jail	.408	1.504	.480	4.712	-.368	.692	.276	1.737	.767	2.152	.436	10.628
Positive for Cocaine	1.432**	4.186	1.964	8.919	-.015	.986	.431	2.253	.589	1.802	.789	4.116

†*Compared to No Risk Reference*
*p<.05
**p<.01

FINDINGS AND DISCUSSION

There are several important limitations to the work presented here. The supplement was conducted during one ADAM quarter only; therefore, there may be concerns regarding the seasonal variation of substance abuse or mental disorder. The data is based on self-report of respondents. Further, this study does not report on

diagnoses, but instead on risk factors for mental disorder and substance abuse that have discriminated these clients in previous studies. To support the results of this study, a more extensive study would be required that would allow for comprehensive diagnostic assessment and a more detailed examination of the temporal order of variables.

Nevertheless, there are important policy implications of this study. First, it is clear that the overlap between substance disorder and mental disorder is substantial. For clients at risk, jails may be well advised to consider dual risk to be the norm, rather than the exception as recommended by Minkoff (1998). In this pilot, we find one-third of arrestees indicating at least one risk factor for mental disorder and one risk factor for substance disorder. Given that there are no accepted standards for evaluation for dual diagnosis (Kanwischer, 2001), the system may be misdiagnosing a substantial number of clients who are disproportionately sent to either mental health services or substance abuse services that are not prepared for clients with dual diagnosis.

Furthermore, in this study several factors distinguished those at dual risk. Given that dual risk clients tended to be significantly more likely to be homeless, unemployed or uninsured, sending an offender back to the community with a script for outpatient treatment may be insufficient. Dual risk clients are in need of comprehensive and coordinated case management, with linkage to appropriate housing and resources to achieve positive treatment outcomes. Yet, there is a reliance on outpatient services for the majority of clients.

This study supports previous research indicating the importance of family history as a potential risk factor. Since those at dual risk are more likely to have family histories of mental disorder and substance abuse, this may be important information for early

intervention programs. Programs that target children of those with mental disorder and substance abuse should be considered. Waiting for these children to enter the juvenile system may be too late, given that by this time these juveniles already have manifested addiction and mental disorder.

This study supports a strong link between cocaine use and dual risk. In this sample, almost half of the cocaine users scored at dual risk. If this relationship is supported in future diagnostic research, the implication is that effective treatment for cocaine addiction will likely need to include comprehensive services for dual disorder.

Finally, in this sample, the majority of dual risk clients reported previous treatment history. Half of the dual risk group reported previous substance abuse treatment and almost two-thirds reported previous mental health treatment. Clearly, this group represents the treatment segment which is using the greatest portion of public treatment services while cycling through the criminal justice system as well.

A draft dual risk screening instrument is presented in Exhibit 2. Future research will be dedicated to examining the predictive validity of the proposed instrument. With the preliminary indication that up to one third of arrestees may be at dual risk, it will be critical to develop effective and efficient means to link these clients to appropriate diagnostic and treatment services.

Cleveland Dual Diagnosis Screening Instrument

I am going to ask you a few questions about how you have been feeling recently. By recently, I mean the past 30 days or past month.

Need for Mental Health Services		Score
Do your thoughts go so fast that you are unable to think clearly about things or plan activities?	Yes = 1 No = 0	
Do people tell you that they can't understand what you are saying, even though it makes sense to you?	Yes = 1 No = 0	
Are you hearing or seeing things that people say they cannot see or hear?	Yes = 1 No = 0	
Do your emotions or feelings make it hard for you to do the normal day to day activities that you need or want to do?	Yes = 1 No = 0	
Do you feel depressed and hopeless most of the time?	Yes = 1 No = 0	
Have you been thinking about hurting yourself or committing suicide?	Yes = 1 No = 0	
Mental Health Services Need Total		

Need for Alcohol or Drug Addiction Services		Score
Have you felt that you drink too much alcohol or use too much drugs?	Yes = 1 No = 0	
Has drinking or other drug use caused problems between you and your family or friends?	Yes = 1 No = 0	
Have you been arrested due to your alcohol or drug use?	Yes = 1 No = 0	
Have you needed to drink more or use more drugs to get the effect that you want?	Yes = 1 No = 0	
Do you spend a lot of time thinking about or trying to get alcohol or drugs?	Yes = 1 No = 0	
Do you feel bad or guilty about your drinking or drug use?	Yes = 1 No = 0	
Alcohol and Drug Addiction Services Total		

If this Total is 1 or more AND **If this Total is 1 or more**

Additional Questions		Score
Has anyone in your family ever had a mental illness?	Yes = 1 No = 0	
Has anyone in your family ever had a drinking or drug problem?	Yes = 1 No = 0	
Have you ever been treated by a counselor, social worker or doctor for a mental health problem?	Yes = 1 No = 0	
Have you ever been treated for alcohol or drug abuse or for detox?	Yes = 1 No = 0	
Do you have health insurance?	Yes = 0 No = 1	
Have you been living on the street or in a shelter?	Yes = 1 No = 0	
Other than this time, have you ever been in jail?	Yes = 1 No = 0	
In the past 30 days, have you been unemployed?	Yes = 1 No = 0	
Additional Total		

Mental Health Services Need Total

Alcohol and Drug Addiction Services Need Total

Need for Additional Services Total

Dual Services Need Total

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APPENDIX

ADAM FACESHEET

INTERVIEW IDENTIFICATION

ID1.	Respondent ID#	[LABEL]
ID2.	ADAM site ID#	_____
ID3.	Booking facility ID#	_____
ID4.	ADAM data collection quarter	_____
ID5.	Data collection date	_____/_____/ 20___ ___

ARREST RECORD

AR1.	Arrest Date	_____/_____/ 20___ ___
AR2.	Arrest time	_____ a.m. | p.m. | military **[CIRCLE ONE]**
AR3.	Arrest precinct	_____
AR4.	Arresting agency ID#	_____
AR5.	a) Arrest location and b) ZIP	a)_____ b)_____
AR6.	Respondent birthdate	_____/_____/ 19___ ___
AR7.	Gender [1= **MALE**, 2= **FEMALE**, 3= **OTHER**]	_____
AR8.	Race/Ethnicity 1= WHITE 2= BLACK OR AFRICAN-AMERICAN 3= HISPANIC/LATINO 4= AMERICAN INDIAN OR ALASKAN NATIVE 5= ASIAN, HAWAIIAN OR OTHER PACIFIC ISLANDER 6= OTHER **[SPECIFY]** 7= MULTIRACIAL **[SPECIFY]**	_____ _____ _____
AR9.	Respondent address ZIP	_____

AR10. 3 Most serious arrest charges: **SEVERITY:** 1= Felony, 2= Misdemeanor, 3= Traffic Violation, 4= Municipal/Summary, 5= Probable Cause, 6= OTHER **[SPECIFY]** **WARRANT:** 0=No, 1=Yes

	a) PENAL CODE	b) OFFENSE	c) CODE	d) SEVERITY	e) WARRANT
1					
2					
3					

AR11.	Booking date	_____/_____/ 20___ ___
AR12.	Booking time	_____ a.m. | p.m. | military **[CIRCLE ONE]**
AR13.	Sample source [1= **STOCK**, 2= **FLOW**, 3= **OTHER**]	_____
AR14.	Supervisor/Lead Interviewer ID#	_____

Verbal Consent Script

Hello, my name is _____ [first name only].

This is a Federally funded project designed to collect information about drug use, illegal activities, and service needs among individuals who have been arrested. Your participation is voluntary. I work for [specify research organization] and the information you provide is confidential, unavailable to anyone outside the research project, and will not help or hurt your case. I will ask you a series of questions that will take approximately 20 to 30 minutes. You may find some questions embarrassing or distressing, and you can refuse to answer any question. At the end of the interview, I will ask you to provide a urine sample. If you listen to all my questions and provide the urine sample, you will be given a [incentive]. Can we begin now?

Interview Status

IN1. a) Interviewer initials and b) ID# a) _____ b) _____

IN2. a) Interview status a) _____

1= AGREED TO INTERVIEW [SKIP TO IN3]
2= DECLINED INTERVIEW
3= NOT AVAILABLE
4= NOT APPROACHED

[RECORD IN2b]

b) Reason b) _____

1= DID NOT WANT TO
2= TAKEN TO COURT
3= RELEASED
4= TRANSFERRED
5= MEDICAL UNIT
6= VIOLENT OR UNCONTROLLED BEHAVIOR
7= PHYSICALLY ILL
8= LANGUAGE [SPECIFY] _____
9= SHIFT ENDED
10= OTHER [SPECIFY] _____

[IF DID NOT AGREE, DISCONTINUE INTERVIEW]

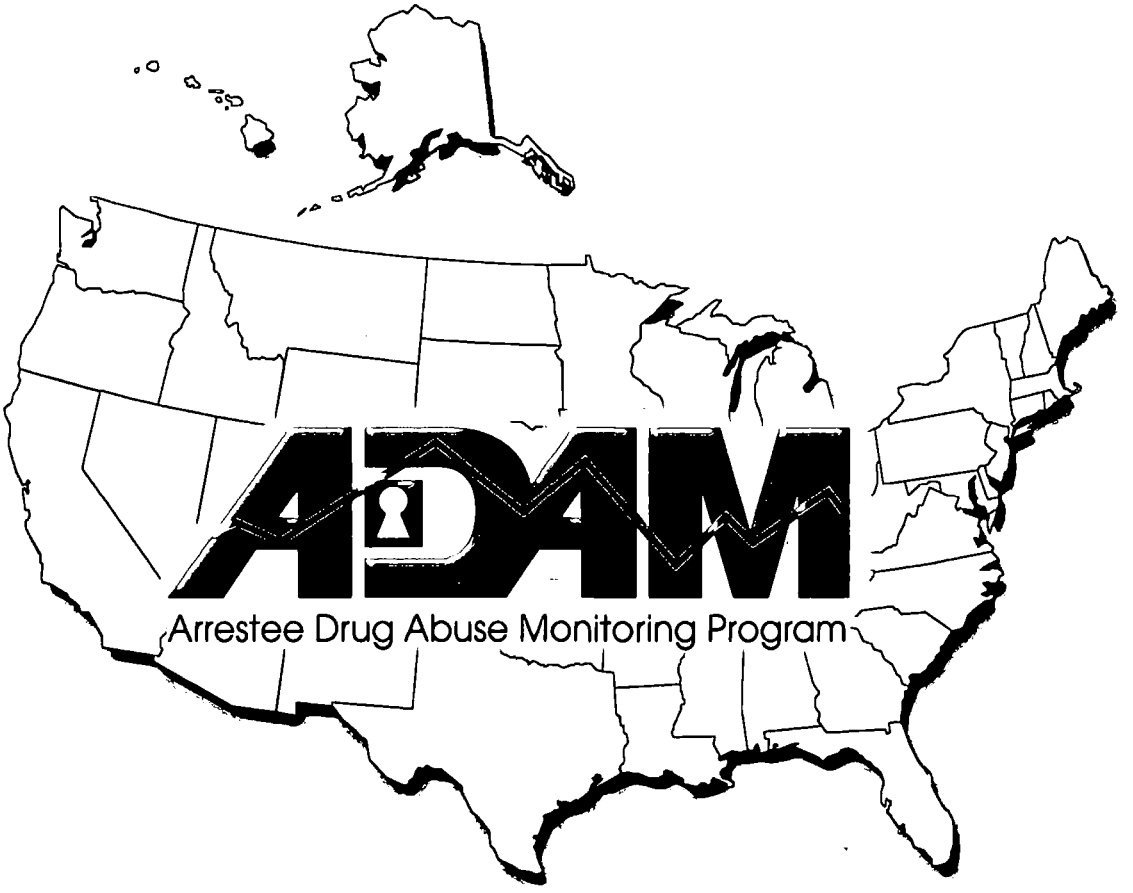
IN3. Language form [1= ENGLISH, 2= SPANISH] _____

IN4. How many hours ago were you arrested? [RECORD NUMBER OF HOURS] _____

[IF GREATER THAN 48 HOURS, DISCONTINUE INTERVIEW]

IN5. Interview start time _____ a.m. | p.m. [CIRCLE ONE]

[LABEL]



NOTICE– The ADAM interviews, specimens, and data are protected by Title 42 of the United States Code, Subsection 3789g (42 U.S.C. §3789g), and Title 28 of the Code of Federal Regulations, Part 22 (28 CFR Part 22), which provides that no officer or employee of the Federal Government, and no recipient of assistance shall use or reveal any research or statistical information furnished by any person and identifiable to any specific private person other than for research and statistical purposes. Furthermore, 28 CFR §22.29 provides that such information and copies thereof shall be immune from legal process, and shall not, without the consent of the person furnishing the information, be admitted as evidence or used for any purpose in any action, suit, or other judicial, legislative, or administrative proceedings. The regulations also indicate that any person violating these provisions can be fined up to $10,000 in addition to any other penalty imposed by law. Send comments regarding any other aspect of this collection of information to Director, National Institute of Justice, 810 Seventh Street, NW, Washington, DC 20531; and to the Office of Management and Budget, Paperwork Reduction Project, Washington, DC 20530.

OMB No. 1121-0137

Approval Expires 5/31/05

DEMOGRAPHICS

D1. How old are you? _____

D2. a) Are you of Hispanic or Latino/a origin or background? [0= NO, SKIP TO D3; 1= YES] _____

b) Which background describes you best: _____

1= Mexican, Mexican American, Chicano/a;
2= Puerto Rican;
3= Cuban; or,
4= Other Hispanic or Latino/a background? [SPECIFY] _____
5= MULTIETHNIC [SPECIFY] _____

D3. a) How would you describe your racial background; that is, which group or groups describe you best: _____

1= White;
2= Black or African-American;
3= American Indian or Alaska Native;
4= Native Hawaiian or Pacific Islander; or,
5= Asian? [ASK D3b]
6= OTHER [SPECIFY] _____
7= MULTIRACIAL [SPECIFY] _____

[IF NON-ASIAN, SKIP TO D4]

b) How would you describe yourself: _____

1= Asian Indian or Pakistani;
2= Chinese;
3= Filipino/a;
4= Japanese;
5= Korean;
6= Vietnamese; or,
7= Other? [SPECIFY] _____
8= MULTIETHNIC [SPECIFY] _____

D4. a) Were you born in the United States or U.S. Territories? [0= NO; 1= YES, SKIP TO D5] _____

b) In what country were you born? [SPECIFY] _____

c) Are you now a United States citizen? [0= NO; 1= YES, SKIP TO D5] _____

d) What is your current status: _____

1= Permanent resident with green card;
2= Work or other visa;
3= Other legal documents; or,
4= No legal documents?

D5. a) What is the highest educational degree you have: _____

1= High school or GED;
2= Vocational or trade school;
3= Some college or two-year associate degree, including nursing and teaching certification; or,
4= Four-year college degree or higher?

[IF DEGREE, SKIP TO D6]

5= [NO DEGREE] [ASK D5b]

b) What is the last grade or year that you completed in school? _____
[0= NO SCHOOLING, 1-12= FIRST-TWELFTH GRADES]

D6. What is your current work status: _____

1= Working full-time; that is, 35 or more hours per week in one or more jobs, including self-employment;
2= Working part-time;
3= Currently on active military status;
4= Have a job, but out due to illness/leave/furlough/strike;
5= Have seasonal work, but currently not working;
6= Unemployed or laid off and looking for work;
7= Unemployed and not looking for work;
8= Full-time homemaker;
9= In school only;
10= Retired; or,
11= Disabled for work?
12= OTHER **[SPECIFY]** _____

D7. a) Are you currently covered by health insurance? [0= NO, SKIP TO D8; 1= YES] _____

b) What type: _____

1= Individually purchased;
2= Employer or union funded, this includes state employee benefits;
3= State government funded, this includes welfare or Medicaid;
4= Retirement Medicare; or,
5= Disability Medicare?
6= MULTIPLE TYPES **[SPECIFY]** _____

D8. What is your most recent legal marital status: _____

1= Single, never been married;
2= Divorced;
3= Legally separated;
4= Widowed; or,
5= Married, this includes common law marriages?

D9. During the past 30 days, where have you lived most of the time: _____

1= House, mobile home, or apartment;
2= Residential hotel, rooming house, dormitory, group home, student housing, or military base;
3= Hospital, treatment facility, or extended care facility;
4= Jail, prison, or correctional boot camp;
5= Shelter; or,
6= No fixed residence or homeless?

[SKIP TO CALENDAR; TURN PAGE]

7= OTHER **[SPECIFY]** _____

D10. How many different telephone numbers are there in the place that you lived most of the time in the past thirty days? Don't count business numbers, payphones, cell phones, or extensions of the same number. **[RECORD NUMBER]** _____

CALENDAR

H1	H2	H3	H4	H5	H6	H7	H8	H9	H10	H11	

START HERE

This is completely confidential so no information will be used to identify you in any way. I will ask you questions about your housing situation and contact with different health care providers—including substance abuse treatment programs—as well as about arrests, times in jail or prison, and use of alcohol and other drugs. You do not need to tell me anything specific about what happened or why.

[TURN PAGE, COMPLETE ALL EVER QUESTIONS]

ANCHORS:

Next we're going to talk about your experiences month-by-month in the past year. To help organize this information, we're going to use this calendar, which allows us to record your answers according to when something occurred. We'll start with the first month [*month 1*] and move forward by month through today [*date*], but please feel free to go back if you recall something we missed along the way.

[SHOW CALENDAR TO RESPONDENT]

To begin, let's note some dates that may help you remember things. For example, there's New Year's Day in winter, the Fourth of July in summer, Thanksgiving in fall, and your birthday.

When is your birthday?

Are there other dates associated with birthdays, anniversaries, or significant events that we can note on the calendar? You don't need to tell me anything that you think is too pe[illegible]al.

OK, let's start with where you have lived. We'll use the cale .r to record where you lived each month over the last 12 m ıs.

H1. Starting in [*month 1*], where did you live most of the time:

1= House, mobile home, or apartment;
2= Residential hotel, rooming house, dormitory, group home, student housing, or military base;
3= Hospital, treatment facility, or extended care facility;
4= Jail, prison, or correctional boot camp;
5= Shelter; or,
6= No fixed residence or homeless?
7= OTHER

H2-H11. Did your housing situation change between [*month 1*] and [*1st anchor*]?
[RECORD HOUSING SITUATION; CODE 1-7 FOR MONTHS 2-11]

1	T4	T5	T6	T7	T8	T9	T10	T11	T12	T13	T14	T15	T16	T17
2	T18	T19	T20	T21	T22	T23	T24	T25	T26	T27	T28	T29	T30	T31
3	T32	T33	T34	T35	T36	T37	T38	T39	T40	T41	T42	T43	T44	T45

EVER [0=NO, 1=YES]

T1. Did you ever stay at least overnight in an inpatient or residential drug or alcohol treatment program, for example, detox, rehab, a therapeutic community, or a hospital?

[IF NO HEALTHCARE/TREATMENT (T1-T3), FLIP PAGE]
Using the calendar, now let's look at your health care and treatment experiences, month-by-month over the last twelve months.

T4-T15. **[IF EVER INPATIENT]** Between [*month 1*] and today, did you stay at least overnight in an inpatient or residential drug or alcohol treatment program, for example, detox, rehab, a therapeutic community, or a hospital? **[IF NO, CODE 0 IN EACH CELL AND SKIP TO T17]**

- When? **[FOR EACH MONTH INPATIENT]**
- **How many nights** did you stay overnight? **[RECORD 0=NONE, 1-30=NIGHTS]**

T16. How many different times were you admitted into an inpatient drug or alcohol treatment program over the past twelve months?
[RECORD NUMBER OF ADMISSIONS]

T17. Before [*month 1*], did you stay at least overnight in an inpatient drug or alcohol treatment program, for example, detox, rehab, a therapeutic community, or a hospital?
[IF NO, CODE 0 AND SKIP TO T18]

- Please tell me your best estir of the number of nights you spent in inpatient programs altogether prior to [*month 1*] **[RECORD NUMBER OF NIGHTS]**

FOLD OUT

	C3	C4	C5	C6	C7	C8	C9	C10	C11	C12	C13	C14	C15
	C16	C17	C18	C19	C20	C21	C22	C23	C24	C25	C26	C27	C28

EVER **[0=NO, 1=YES]**

C1. Before this arrest, have you ever been arrested—that is, charged on a criminal offense or picked up on a warrant and booked at a holding facility like this one? Please do not include juvenil[illegible] ests.

[IF NO ARRESTS/JAIL (C1-C2), FLIP PAGE]

Now let's talk about your experiences with the criminal justice system before this arrest.

C3-C14. **[IF EVER ARRESTED]** Between [*month 1*] and this arrest, were you arrested and booked? Please do not include juvenile arrests. **[IF NO, CODE 0 AND SKIP TO C15]**

- When? **[FOR EACH MONTH ARRESTED]**
- Please tell me your best estimate of the **number of times** you were arrested that month. **[RECORD 0=NONE, OR NUMBER OF ARRESTS]**

C15. Before [*month 1*], were you arrested at any time, not including juvenile arrests? **[IF NO, CODE 0 AND SKIP TO C16]**

- Please tell me your best estimate of the total number of times in your life you were arrested prior to [*month 1*], not including juvenile arrests. **[RECORD NUMBER OF ARRESTS]**

T2. Have you ever been admitted to an outpatient drug or alcohol treatment program, not including meetings like AA or NA? By "outpatient program" I mean a drug or alcohol treatment program where you do not stay overnight.

T18-T29. **[IF EVER OUTPATIENT]** Between [*month 1*] and today, were you **in** any outpatient drug or alcohol treatment programs? By outpatient, I mean a drug or alcohol treatment program where you do not stay overnight. Do not include AA or NA.

[IF NO, CODE 0 IN EACH CELL AND SKIP TO T31]

- When? **[CODE 0=NO, 1=IN PROGRAM FOR EACH MONTH]**

T30. How many different times were you admitted into an outpatient drug or alcohol treatment program over the past twelve months?
[RECORD NUMBER OF ADMISSIONS]

T31. Before [*month 1*], were you in any outpatient drug or alcohol treatment programs, not including meetings like AA or NA? **[IF NO, CODE 0 AND SKIP TO T32]**

- Please tell me your best estimate of the number of times you were admitted to an outpatient drug or alcohol treatment program before [*month 1*].
[RECORD NUMBER OF ADMISSIONS]

T3. Have you ever stayed at least overnight for mental health treatment –not for drug or alcohol use– at a psychiatric unit of a hospital or other facility?

T32-T43. **[IF EVER MENTAL HEALTH]** Between [*month 1*] and today, were you in mental health treatment–not for drug or alcohol use– in a psychiatric unit of a hospital or other facility for at least one overnight stay? **[IF NO, CODE 0 IN EACH CELL AND SKIP TO T45]**

- When? **[FOR EACH MONTH IN PSYCH UNIT]**
- **How many nights** did you stay overnight?
[RECORD 0=NONE, 1-30=NIGHTS]

T44. How many different times were you admitted for mental health treatment–not for drug or alcohol use–over the past twelve months?
[RECORD NUMBER OF ADMISSIONS]

T45. Before [*month 1*], were you admitted for mental health treatment–not for drug or alcohol use–to a psychiatric unit of a hospital or other facility?

[IF NO, CODE 0 AND SKIP TO NEXT PAGE]

- Please tell me your best estimate of the number of nights you spent in a psychiatric unit of a hospital or other facility– not for drug or alcohol use– altogether before [*month 1*].
[RECORD NUMBER OF NIGHTS]

C2. Were ever held in jail for at least 24 hours, or did you serve time in a jail, prison, juvenile detention facility, or boot camp?

C16-C27. **[IF EVER JAIL/PRISON]** Between [*month 1*] and today, were you held in jail for at least 24 hours, or did you serve time jail, prison, juvenile detention facility, or boot camp?

[IF NO, CODE 0 IN EACH CELL AND SKIP TO C28]

- When? **[FOR EACH MONTH INCARCERATED]**
- Please tell me your best estimate of the **number of days** you were in jail, prison, juvenile detention facility or boot camp that month. **[RECORD 0=NONE, 1-30=DAYS]**

C28. Before [*month 1*], were you held in jail, or did you serve time in a jail, prison, juvenile detention facility, or boot camp? **[IF NO, CODE 0 AND SKIP TO NEXT PAGE]**

- Please tell me your best estimate of the total number of days in your life you were in jail or correctional facilities before [*month 1*]. **[RECORD NUMBER OF DAYS]**

S1	S2	S3	S22	S23	S24	S25	S26	S27	S28	S29	S30	S31	S32
S4	S5	S6	S33	S34	S35	S36	S37	S38	S39	S40	S41	S42	S43
S7	S8	S9	S44	S45	S46	S47	S48	S49	S50	S51	S52	S53	S54
S10	S11	S12	S55	S56	S57	S58	S59	S60	S61	S62	S63	S64	S65
S13	S14	S15	S66	S67	S68	S69	S70	S71	S72	S73	S74	S75	S76
S16	S17	S18	S77	S78	S79	S80	S81	S82	S83	S84	S85	S86	S87
S19	S20b	S21	S88	S89	S90	S91	S92	S93	S94	S95	S96	S97	S98
	S20a												

LEVELS:

ALCOHOL
(5+ DRINKS/DAY)

DRUGS
(ANY USE)

0 = NONE
1 = 1 DAY/WK
(1-7 DAYS/MO)
2 = 2-3 DAYS/WK
(8-12 DAYS/MO)
3 = >3 DAYS/WK
(13-30 DAYS/MO)

0=NO, 1=YES EVEI	YEARS OLD AGE	0=NO, 1=YES 12 MO
S1. IF YES — Have you ever had 5 or more drinks of beer, wine, or any other type of alcohol on the same day?	S2. How old were you the first time you had at least 5 or more drinks on the same day?	S3. Did you have 5 or more drinks on the same day any time in the past 12 months—that is, between [*month 1*] and today?
S4. IF YES — Have you ever used any Marijuana or Hashish?	S5. How old were you the first time you used Marijuana or Hashish?	S6. Did you use Marijuana or Hashish in the past 12 months—that is, between [*month 1*] and today?
S7. IF YES — Have you ever used any Crack or Rock Cocaine?	S8. How old were you the first time you used Crack or Rock Cocaine?	S9. Did you use Crack or Rock Cocaine in the past 12 months—that is, between [*month 1*] and today?
S10. IF YES — Have you ever used any Powder Cocaine?	S11. How old were you the first time you used Powder Cocaine?	S12. Did you use Powder Cocaine in the past 12 months—that is, between [*month 1*] and today?
S13. IF YES — Have you ever used any Heroin?	S14. How old were you the first time you used Heroin?	S15. Did you use Heroin in the past 12 months—that is, between [*month 1*] and today?
S16. IF YES — Have you ever used any Methamphetamine like Crystal Meth?	S17. How old were you the first time you used Crystal Meth?	S18. Did you use Crystal Meth in the past 12 months—that is, between [*month 1*] and today?
S19. IF YES — Not including alcohol and these five drugs, have you ever used any other drug, not counting drugs for which you have a prescription or over the counter drugs? [IF NO, SKIP]	S20a. Which drug did you use most often? **[RECORD DRUG]** S20b. How old were you the first time you used that drug?	S21. Did you use [*drug*] in the past 12 months— that is, between [*month 1*] and today?

IF NO

GO TO DRUG GATEWAY

Now let's talk about your use of alcohol or other drugs. You can use this showcard, which shows the different levels for your answer.
[REVIEW LEVELS WITH RESPONDENT]

[IF NO PAST 12 MONTHS ALCOHOL (S3), SKIP TO S33-S98]

S22-S32. Please tell me your best estimate of the level that represents the number of days you had **five or more drinks**–including wine, beer, or any type of alcohol on the same day in [*month 1*].

How about between [*month 1*] and [*1st anchor*]?
[RECORD LEVELS 0-3 FOR ALL MONTHS]

S33-S98. Please tell me your best estimate of the level that represents the number of days you used [*drug*] in [*month 1*].

How about between [*month 1*] and [*1st anchor*]?
[FOR EACH DRUG USED PAST 12 MONTHS (S6 – S18)]

- **Marijuana or Hashish**
- **Crack or Rock Cocaine**
- **Powder Cocaine**
- **Heroin**
- **Methamphetamine like Crystal Meth**

[IF ANY 12-MONTH PRIMARY DRUG USE, TURN PAGE]

- **Other Drug** [IF OTHER DRUG (S21) ONLY]

[TURN PAGE]

DRUG GATEWAY

[IF ANY 12 MONTH DRUG USE (S6 – S21), GO TO ANCHORS (TOP OF CALENDAR)]

[IF NO TWELVE MONTH DRUG USE]

[IF EVER ARRESTED (C1=YES)]

[IF C1=NO; TURN PAGE]

C0. You said you were arrested before this arrest. Please give me your best estimate of the number of times you were arrested in the past 12 months; that is, between [*month 1*] and this arrest. Do not include juvenile arrests.

[RECORD NUMBER OF ARRESTS, TURN PAGE]

C0.

DEPENDENCE AND ABUSE

[REFER TO CALENDAR AOD 12 MONTH USE (S3-S21)]

	ALCOHOL		DRUGS
ALCOHOL USE PAST 12 MONTHS	DA0a. ☐	[0=NO, 1=YES]	DRUG USE PAST 12 MONTHS DA0b. ☐

[IF NO 12 MONTH ALCOHOL OR DRUG USE, SKIP TO MARKET AND USE]

Now I would like to ask you about experiences related to alcohol or drug use that you may have had in the past 12 months. [0= NO, 1= YES]

		IF YES → ALCOHOL		IF YES → DRUGS
DA1.	In the past 12 months, have you spent more time: a) drinking than you intended?	☐	b) using drugs than you intended?	☐
DA2.	Have you neglected some of your usual responsibilities: a) because of using alcohol?	☐	b) because of using drugs?	☐
DA3.	Have you wanted to cut down: a) on your drinking?	☐	b) on your drug use?	☐
DA4.	In the past 12 months, has anyone objected to: a) your use of alcohol?	☐	b) your drug use?	☐
DA5.	Have you frequently found yourself thinking about: a) drinking?	☐	b) using drugs?	☐
DA6.	Have you: a) used alcohol to relieve feelings such as sadness, anger, or boredom?	☐	b) used drugs to relieve feelings such as sadness, anger, or boredom?	☐

[IF NO ALCOHOL USE (DA0a=0), SKIP TO DA7b]

[IF NO TO ALL ALCOHOL DA1a -DA6a, SKIP TO DA7b]

DA7a. You said that, in the past 12 months, you **[READ ALL ALCOHOL ITEMS CODED YES]**. ☐
When was the last time any of these things happened:
1=Within the past 7 days;
2=Within the past 8 to 30 days;
3=Within the last six months but more than one month ago; or,
4=More than six months ago but within the last 12 months?

[IF NO DRUG USE (DA0b=0), SKIP TO MARKET AND USE]

[IF NO TO ALL DRUGS DA1b-DA6b, SKIP TO DA8]

DA7b. You said that, in the past 12 months, you **[READ ALL DRUG ITEMS CODED YES]**. ☐
When was the last time any of these things happened:
1=Within the past 7 days;
2=Within the past 8 to 30 days;
3=Within the last six months but more than one month ago; or,
4=More than six months ago but within the last 12 months?

DA8. In the past 12 months, did you inject any drug in order to get high? **[0= NO, 1= YES]** ☐

MARKET AND USE

MU1. In the past 30 days, regardless of whether or not you used it yourself:
[0= NO, 1= YES]

Did you get any Marijuana or Hashish? This could include harvesting Marijuana you grew yourself.	
Did you get or make any Crack or Rock Cocaine?	
Did you get any Powder Cocaine?	
Did you get any Heroin?	
Did you get or make any Methamphetamine like Crystal Meth?	

[FOR EACH DRUG, TURN PAGE AND RECORD 1=YES FOR DRUGS OBTAINED AND 0=NO FOR NO DRUGS OBTAINED]

[IF ALL 0= NO, SKIP TO PRIMARY USE (MU 30) Page 19]

•••CASH•••

ASK BOTH MU2 AND MU3 FOR EACH DRUG OBTAINED BEFORE ASKING MU4

The next several questions deal with drugs that you paid cash for in the last 30 days.

Think about the last time you paid any cash for [*drug*]. This could include any you were fronted to sell or received on credit, and paid for at a later time.

MU2. **[0=NO, 1=YES]**

In the past 30 days, did you pay any cash for [*drug*]?

MU3.

In the past 30 days, did you get any [*drug*] without paying cash for it?

- **[IF MARIJUANA]** This could include Marijuana you grew yourself.
- **[IF CRACK OR ROCK COCAINE]** This could include making it yourself.
- **[IF CRYSTAL METH]** This could include making it yourself.

MU4.

Did you pay cash only, or did you pay cash and something else?

1=CASH
2=COMBINATION

[IF MU4=1, SKIP TO MU6]

MU5.

What else, besides cash, was exchanged or traded the last time you bought [*drug*]? Did you also:

1= Trade other drugs;
2= Trade property/ merchandise;
3= Transport drugs;
4= Steal the drug; or,
5= Trade sex?
6= OTHER [SPECIFY]
7= MULTIPLE [SPECIFY]

MU6.

That last time you bought [*drug*], did you:

1= Buy it directly yourself; or,
2= Give someone the cash to buy it for you?

[IF MU6=1, SKIP TO MU8]

MU7.

Is the person you gave the cash t

1=Someone working with a dealer; or,
2=Someone not working with a dealer?

[IF MU7=2, SKIP TO MU12, TURN PAGE

MARIJUANA OR HASHISH	Cash MA2	IF YES	MA4	MA5 SPECIFY / SPECIFY	MA6	MA7
☐ **OBTAINED**	Noncash MA3	IF YES ASK NONCASH				
CRACK OR ROCK COCAINE	Cash CC2	IF YES	CC4	CC5 OTHER SPECIFY / MULTIPLE SPECIFY	CC6	CC7
☐ **OBTAINED**	Noncash CC3	IF YES ASK NONCASH				
POWDER COCAINE	Cash PC2	IF YES	PC4	PC5 SPECIFY / SPECIFY	PC6	PC7
☐ **OBTAINED**	Noncash PC3	IF YES ASK NONCASH				
HEROIN	Cash HE2	IF YES	HE4	HE5 OTHER SPECIFY / MULTIPLE SPECIFY	HE6	HE7
☐ **OBTAINED**	Noncash HE3	IF YES ASK NONCASH				
METHAMPHETAMINE LIKE CRYSTAL METH	Cash ME2	IF YES	ME4	ME5 SPECIFY / SPECIFY	ME6	ME7
☐ **OBTAINED**	Noncash ME3	IF YES ASK NONCASH				

•••CASH•••

MU8. the person you bought it m: Your regular source; An occasional source; or, A new source for [*drug*]?	MU9. The last time you bought [*drug*], how did you contact the person you bought from? Did you first: 1= Page the person on a beeper; 2= Call the person on a telephone and speak with the person directly; 3= Go to a house or apartment; 4= Approach the person in public such as on the street, in a store, or park; or, 5= Were you with the person already at work or in a social setting? 6= OTHER [SPECIFY]	MU10. That last time you bought [*drug*], at what type of place did you get it: 1= In a house or apartment; 2= In a public building such as a store, bus station, gas station, or restaurant; 3= In an abandoned building; 4= On a street, alley, or road; or, 5= Other outdoor area such as a park, lot, etc.? 6= OTHER [SPECIFY]	MU11. Did you buy it: 1= In the neighborhood where you live; or, 2= Outside your neighborhood?
MA8	MA9 SPECIFY	MA10 SPECIFY	MA11
CC8	CC9 SPECIFY	CC10 SPECIFY	CC11
PC8	PC9 SPECIFY	PC10 SPECIFY	PC11
HE8	HE9 SPECIFY	HE10 SPECIFY	HE11
ME8	ME9 SPECIFY	ME10 SPECIFY	ME11

•••CASH•••

MU12. How much cash did you pay for [*drug*] that last time you bought it?	MU13. How much [*drug*] did you get for that amount of cash? a) # OF UNITS b) TYPE OF UNITS CODES: 1= BAG OR BALLOON 2= CAPSULE 3= FOIL PACKET 4= GRAM 5= JOINT 6= LINE 7= OUNCE 8= POUND 9= ROCK 10= VIAL 11= OTHER [SPECIFY]	MU14. How much of the [*drug*] you bought was for you to use yourself?	MU15. How many times did you buy [*drug*] on that same day?	MU16. Thinking about this last week, on how m f the past 7 days did you buy [*drug*]?
MA12 $	MA13a / MA13b SPECIFY	MA14 %	MA15	MA16 /7
CC12 $	CC13a / CC13b SPECIFY	CC14 %	CC15	CC16 /7
PC12 $	PC13a / PC13b SPECIFY	PC14 %	PC15	PC16 /7
HE12 $	HE13a / HE13b SPECIFY	HE14 %	HE15	HE16 /7
ME12 $	ME13a / ME13b SPECIFY	ME14 %	ME15	ME16 /7

•••CASH•••

MU17.	MU18.	MU19.	MU20.	MU21.	MU22.
On how many of [illegible]st 30 days did you buy [*drug*]?	In the past 30 days, how many different people did you buy [*drug*] from?	Was there a time in the past 30 days when you tried to buy [*drug*] and had the cash, but you did not buy any? 0= NO 1= YES [IF 0=NO, SKIP TO NON-CASH, **TURN PAGE**]	The last time that happened, why didn't you buy [*drug*]: 1= No dealers were available; 2= Dealers did not have any; 3= Dealers did not have the quality you wanted; or, 4= Police activity kept you from the dealers? 5= OTHER [SPECIFY]	Did you buy another drug or alcohol instead? 0= NO 1= YES [IF 0=NO, SKIP TO NON-CASH, **TURN PAGE**]	What did you buy instead? 1= ALCOHOL 2= MARIJUANA OR HASHISH 3= CRACK OR ROCK COCAINE 4= POWDER COCAINE 5= HEROIN 6= METHAMPHETAMINE 7= OTHER [SPECIFY] 8= MULTIPLE [SPECIFY]
MA17 /30	MA18	MA19	MA20 [illegible]	MA21	MA22 [illegible] [illegible]
CC17 /30	CC18	CC19	CC20 SPECIFY	CC21	CC22 OTHER SPECIFY MULTIPLE SPECIFY
PC17 /30	PC18	PC19	PC20 [illegible]	PC21	PC22 [illegible] [illegible]
HE17 /30	HE18	HE19	HE20 SPECIFY	HE21	HE22 OTHER SPECIFY MULTIPLE SPECIFY
[illegible]7 /30	ME18	ME19	ME20 [illegible]	ME21	ME22 [illegible] [illegible]

•••NONCASH•••

These next questions deal with the last time you got [*drug*] without paying any cash in the last 30 days.

MU23.

Think about the last time you got [*drug*] without paying any cash for it. Did you:

1= **[IF MARIJUANA]** harvest Marijuana you grew yourself; **[IF CRACK]** make it yourself; **[IF CRYSTAL METH]** make it yourself;
2= Get it on credit and will pay cash later;
3= Get it fronted to sell;
4= Trade other drugs;
5= Trade property/merchandise;
6= Transport drugs;
7= Steal the drug;
8= Trade sex; or,
9= Receive it as a gift?
10= OTHER [SPECIFY]
11= MULTIPLE [SPECIFY]

[IF 1, SKIP TO MU25]

MU24.

The last time you got [*drug*] without cash, how did you contact the person who gave it to you? Did you:

1= Page the person on a beeper;
2= Call the person on a telephone and speak with the person directly;
3= Go to a house or apartment;
4= Approach the person in public such as on the street, in a store, or park; or,
5= Were you with the person already at work or in a social setting?
6= OTHER [SPECIFY]

MU25.

How much [*drug*] did you [*get/make/harvest*] that last time?

a) # OF UNITS
b) TYPE OF UNITS

CODES:
1= BAG OR BALLOON
2= CAPSULE
3= FOIL PACKET
4= GRAM
5= JOINT
6= LINE
7= OUNCE
8= POUND
9= ROCK
10= VIAL
11= OTHER [SPECIFY]

IF NO SKIP TO USE	MA23	MA24	MA25a MA25b
IF YES	SPECIFY SPECIFY	SPECIFY	SPECIFY
IF NO SKIP TO USE	CC23	CC24	CC25a CC25b
IF YES	SPECIFY OTHER SPECIFY MULTIPLE	SPECIFY	SPECIF
IF NO SKIP TO USE	PC23	PC24	PC25a PC25b
IF YES	SPECIFY SPECIFY	SPECIFY	SPECIFY
IF NO SKIP TO USE	HE23	HE24	HE25a HE25b
IF YES	SPECIFY OTHER SPECIFY MULTIPLE	SPECIFY	SPECIF
IF NO SKIP TO USE	ME23	ME24	ME25a ME25b
IF YES	SPECIFY SPECIFY	SPECIFY	SPECIF

•••NONCASH•••

MU26.	MU27.	MU28.	MU29.
How much of the [*drug*] y[illegible] [*not /made/harvested*] [illegible] [illegible]r you to use yourself?	On that same day, how many times did you get [*drug*] in any way without paying cash for it?	Thinking about this last week, on how many of the past 7 days did you get [*drug*] without paying any cash?	On how many of the past 30 days did you get [*drug*] without paying any cash?
MA26 %	MA27	MA28 /7	MA29 /30 →
CC26 %	CC27	CC28 /7	CC29 /30 →
PC26 %	PC27	PC28 /7	PC29 /30 →
HE26 %	HE27	HE28 /7	HE29 /30 →
ME26 %	ME27	ME28 /7	ME29 /30 →

•••PRIMARY DRUG USE••

MU30. We talked about this earlier, but please remind me; regardless of how or when you got it, did you use [*drug*] in the past 30 days? 0= NO 1= YES [IF 0=NO, GO TO NEXT DRUG OBTAINED; IF LAST DRUG, GO TO STOP SIGN]	MU31. On how many days did you use [*drug*] in the past 7 days?	MU32. On how many of the past 30 days did you use [*drug*]?	MU33. During the past 3 days, on how many days did you use [*drug*]?	MU34. Think about the last time you used [*drug*]. How did you use it? Did you: 1= Smoke it; 2= Sniff it through your nose or snort it; 3= Inject it by needle; or, 4= Eat it or swallow it? 5= OTHER [SPECIFY] [GO TO NEXT DRUG OBTAINED; IF LAST DRUG SKIP TO STOP SIGN]
MA30	MA31 /7	MA32 /30	MA33 /3	MA34
CC30	CC31 /7	CC32 /30	CC33 /3	CC34 SPECIF
PC30	PC31 /7	PC32 /30	PC33 /3	PC34
HE30	HE31 /7	HE32 /30	HE33 /3	HE34 SPECIF
ME30	ME31 /7	ME32 /30	ME33 /3	ME34

PRIMARY DRUG USE SECTION MUST BE COMPLETED FOR ALL 5 DRUGS;

IF 30 DAY PAST USE (MU30) BLANK FOR ANY DRUG OBTAINED OR NOT OBTAINED, ASK MU30-MU34 AS APPROPRIATE

ALCOHOL USE

MU35.

a) In the past 30 days, did you have five or more drinks of beer, wine, or any other type of alcohol on the same day? [ ]

[0=NO, SKIP TO SECONDARY DRUG USE; 1=YES]

b) Please tell me your best estimate of the number of days you had five or more drinks on the same day in the past 30 days. **[RECORD NUMBER OF DAYS (1-30)]** [ ]

SECONDARY DRUG USE

Finally, I'd like to ask you about your use of other drugs, including prescription drugs.
As I read down the list, please tell me if you used any of these drugs in the past 3 days.

MU36.

In the past 3 days, did you use any:

	DRUG:	0=NO 1=YES, PRESCRIBED 2=YES, NOT PRESCRIBED
a)	Methadone;	
b)	Amphetamines like Benzedrine, Dexedrine, or Ritalin, sometimes called "bennies" or "dex," not including methamphetamine;	
c)	Barbiturates like Seconal, sometimes called "blues" or "reds";	
d)	Tranquilizers or sedatives like Xanax, Valium, Rohypnol, sometimes called "tranqs" or "roofies";	
e)	Any of the following painkillers: Codeine, Dilaudid, Vicodin, or Percocet;	
f)	Darvon;	
g)	Demerol, Fentanyl;	
h)	Ecstasy, MDMA;	
i)	PCP, Angel Dust;	
j)	LSD, Acid;	
k)	Any other hallucinogen like mescaline or magic mushrooms;	
l)	Inhalants like glue, paint, aerosols, "poppers";	
m)	Anti-depressants like Zoloft, Prozac, or Paxil; or,	
n)	Any other drugs?	
	OTHER [SPECIFY] _____	

IN6. Interview end time _____ a.m. | p.m. [CIRCLE ONE]

NOTES

[IF INTERVIEW COMPLETED, SKIP TO URINE SAMPLE REQUEST]

IN7. **[IF PARTIAL INTERVIEW, RECORD END TIME AND REASON]**

a) Partial interview end time — a) _____ a.m. | p.m. **[CIRCLE ONE]**

b) Reason not completed — b) _____

1= DID NOT WANT TO
2= TAKEN TO COURT
3= RELEASED
4= TRANSFERRED
5= MEDICAL UNIT
6= VIOLENT OR UNCONTROLLED BEHAVIOR
7= PHYSICALLY ILL
8= LANGUAGE **[SPECIFY]** _____
9= SHIFT ENDED
10= OTHER **[SPECIFY]** _____

Urine Sample Request

●●●

As I mentioned at the start of the interview, we are also collecting urine specimens. Again, this is completely confidential and unavailable to anyone else, so it cannot affect your case. (I am going to ask the officer to take you to a restroom for me. After you've finished, I can give you a [*incentive*] for participating in the study.) Thank you.

U1.

Urine specimen status

0= RESPONDENT REFUSED

1= SPECIMEN PROVIDED

2= RESPONDENT ATTEMPTED BUT NO SPECIMEN PROVIDED

3= RESPONDENT NOT AVAILABLE, e.g., TAKEN TO COURT

4= OTHER [SPECIFY] _____

ADAM ID #_____ Start Time_____

Dual Diagnosis Supplement

1. Are you being treated by a doctor for a medical problem?

   ( ) Yes: For what problem? _____
   ( ) No

2. Are you taking medication given to you or prescribed for you by a doctor?

   ( ) Yes: What do you take?_____
   ( ) No

3. Are you currently taking any over-the-counter medications, that is medicine that you buy for yourself at the drug store or health store?

   ( ) Yes: What do you take?_____
   ( ) No

4. Have you ever been told by a counselor, social worker, or a doctor that you have a mental illness or emotional problem?

   ( )Yes: What was the diagnosis (What did they tell you)? _____
   Past 6 months? ( ) Yes ( ) No
   Past 30 days? ( ) Yes ( ) No

   ( )No

5. Have you ever been treated by a counselor, social worker or doctor for a mental health problem? ( ) Yes ( ) No
   Past 6 months? ( ) Yes ( ) No
   Past 30 days? ( ) Yes ( ) No

6. Have you ever been hospitalized for a mental health problem? ( ) Yes ( ) No
   Past 6 months? ( ) Yes ( ) No
   Past 30 days? ( ) Yes ( ) No

7. Have you ever been given or prescribed medication for a mental health, emotional, or psychiatric problem? ( ) Yes ( ) No
   Past 6 months? ( ) Yes ( ) No
   Past 30 days? ( ) Yes ( ) No

Now, I am going to do a quick screening for mental health problems.

8. Do you think people are watching you, spying on you, or following you?
   ( ) Yes Who? _____
   ( ) No

9. Do you think people are trying to kill you?
   ( ) Yes Who ? _____
   ( ) No

10. Do your thoughts go so fast that you are unable to think clearly about things or plan activities?
    ( ) Yes
    ( ) No

11. Do people tell you that they can't understand what you are saying, even though it makes sense to you?
    ( ) Yes
    ( ) No

12. Are you hearing or seeing things that people say they cannot see or hear?
    ( ) Yes
    ( ) No

13. Do your emotions / feelings make it hard for you to do the normal day to day activities that you need or want to do?
    ( ) Yes
    ( ) No

14. Do you feel depressed and hopeless most of the time?
    ( ) Yes
    ( ) No

15. Have you ever thought about hurting yourself or committing suicide?
    ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

16. Have you ever tried to hurt or kill yourself?
    ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

17. Has anyone in your family ever had a mental illness?
    ( ) Yes
    ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

Now, I would like to talk to you about use of alcohol and drugs.

18. Have you ever felt that you use too much alcohol or other drugs?
( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

19. Have you ever felt sick, shaky, or depressed when you stopped drinking or using drugs ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

20. Have you ever felt "coke bugs," or a crawling feeling under your skin, after you stopped using drugs ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

21. Have you ever used needles to shoot drugs ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

22. Has drinking or other drug use ever caused problems between you and your family or friends? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

23. Has drinking or other drug use ever caused problems at school or at work?
( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

24. Have you ever been arrested due to your alcohol or drug use? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

25. Have you ever lost your temper or gotten into arguments or fights while drinking or using drugs? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

26. Has there ever been a time when you needed to increase the amount you drink or you needed to use more drugs to get the effect your want? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

27. Has there ever been a time when you spent a lot of time thinking about or trying to get alcohol or other drugs? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

28. Has there ever been a time when you felt bad or guilty about your drinking or drug use? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

29. Have you ever used alcohol or street drugs to relieve a hang-over or to help you sleep? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

30. Have you ever used alcohol or drugs even though you had been told to stop due to a physical or mental health problem? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

31. Have you ever been diagnosed with alcohol abuse/dependence or drug abuse/dependence? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

32. Have you ever gone to anyone for help because of your drinking or drugs use? (Such as Alcoholics Anonymous, Narcotics Anonymous, Cocaine Anonymous, counselors, or a treatment program.) ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

33. Have you ever received treatment for alcohol or drug abuse or for detox? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

34. Have you received outpatient care for alcohol or drug abuse? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

35. Have any of your family members ever had a drinking or drug problem? ( ) Yes ( ) No
    Past 6 months? ( ) Yes ( ) No
    Past 30 days? ( ) Yes ( ) No

This is the end of the interview. Now that we have finished, I am going to give you a list of how you can get help for an alcohol, drug, or mental health problem when you leave here. I will also give you the name of the person to talk to on this shift here at the jail if you want immediate attention.

End Time_____ Interviewer Initials _____

NOTES:

Q4B If yes, was the problem diagnosed within the last 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	57	18.3	80.3	80.3
	1 Yes	14	4.5	19.7	100.0
	Total	71	22.8	100.0	

Q5 Have you been treated by a counselor/doctor for a mental health problem?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	230	74.0	74.2	74.2
	1 Yes	80	25.7	25.8	100.0
	Total	310	99.7	100.0	

Q5A If yes, have you been treated in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	52	16.7	65.0	65.0
	1 Yes	28	9.0	35.0	100.0
	Total	80	25.7	100.0	

Q5B If yes, have you been treated in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	56	18.0	70.0	70.0
	1 Yes	24	7.7	30.0	100.0
	Total	80	25.7	100.0	

Q6 Have you ever been hospitalized for a mental health problem?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	262	84.2	84.5	84.5
	1 Yes	48	15.4	15.5	100.0
	Total	310	99.7	100.0	

Q6A If yes, have you been hospitalized in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	35	11.3	74.5	74.5
	1 Yes	12	3.9	25.5	100.0
	Total	47	15.1	100.0	

Q6B If yes, have you been hospitalized in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	40	12.9	85.1	85.1
	1 Yes	7	2.3	14.9	100.0
	Total	47	15.1	100.0	

Q7 Have you ever been given of prescribed medication for a mental health/emotional/psyc prob?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	253	81.4	81.9	81.9
	1 Yes	56	18.0	18.1	100.0
	Total	309	99.4	100.0	

Q7A If yes, has it been given to you in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	24	7.7	43.6	43.6
	1 Yes	31	10.0	56.4	100.0
	Total	55	17.7	100.0	

Q7B If yes, has it been given to you in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	30	9.6	52.6	52.6
	1 Yes	27	8.7	47.4	100.0
	Total	57	18.3	100.0	

Q8 Do you think people are watching/following/spying on you?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	241	77.5	78.0	78.0
	1 Yes	68	21.9	22.0	100.0
	Total	309	99.4	100.0	

Q9 Do you think people are trying to kill you?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	269	86.5	87.1	87.1
	1 Yes	40	12.9	12.9	100.0
	Total	309	99.4	100.0	

Q10 Do you thoughts go so fast that you are unable to think clearly/plan activities?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	218	70.1	70.3	70.3
	1 Yes	92	29.6	29.7	100.0
	Total	310	99.7	100.0	

Q11 Do people tell you they can't understand what you are saying even though it makes sense to you?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	219	70.4	71.1	71.1
	1 Yes	89	28.6	28.9	100.0
	Total	308	99.0	100.0	

Q12 Are you hearing or seeing things that people say they cannot see or hear?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	272	87.5	88.3	88.3
	1 Yes	36	11.6	11.7	100.0
	Total	308	99.0	100.0	

Q13 Do your emotions/feelings make it hard for you to perform normal day-to-day activities?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	220	70.7	71.4	71.4
	1 Yes	88	28.3	28.6	100.0
	Total	308	99.0	100.0	

Q14 Do you feel hopeless most of the time?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	195	62.7	63.3	63.3
	1 Yes	113	36.3	36.7	100.0
	Total	308	99.0	100.0	

Q15 Have you ever thought about hurting yourself or committing suicide?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	224	72.0	72.7	72.7
	1 Yes	84	27.0	27.3	100.0
	Total	308	99.0	100.0	

Q15A If yes, have you felt this way in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	32	10.3	38.6	38.6
	1 Yes	51	16.4	61.4	100.0
	Total	83	26.7	100.0	

Q15B If yes, have you felt this way in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	43	13.8	51.8	51.8
	1 Yes	40	12.9	48.2	100.0
	Total	83	26.7	100.0	

Q16 Have you ever tried to hurt or kill yourself?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	254	81.7	82.2	82.2
	1 Yes	55	17.7	17.8	100.0
	Total	309	99.4	100.0	

Q16A If yes, have you tried in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	35	11.3	66.0	66.0
	1 Yes	18	5.8	34.0	100.0
	Total	53	17.0	100.0	

Q16B If yes, have you tried in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	42	13.5	79.2	79.2
	1 Yes	11	3.5	20.8	100.0
	Total	53	17.0	100.0	

Q17 Has anyone in your family ever had a mental illness?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	224	72.0	73.9	73.9
	1 Yes	79	25.4	26.1	100.0
	Total	303	97.4	100.0	

Q17A If yes, have they had it in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	44	14.1	56.4	56.4
	1 Yes	34	10.9	43.6	100.0
	Total	78	25.1	100.0	

Q17B If yes, have they had it in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	47	15.1	60.3	60.3
	1 Yes	31	10.0	39.7	100.0
	Total	78	25.1	100.0	

Q18 Have you ever felt that you use too much alcohol or other drugs?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	140	45.0	45.3	45.3
	1 Yes	169	54.3	54.7	100.0
	Total	309	99.4	100.0	

Q18A If yes, have you felt that way in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	28	9.0	16.9	16.9
	1 Yes	138	44.4	83.1	100.0
	Total	166	53.4	100.0	

Q18B If yes, have you felt that way in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	50	16.1	30.1	30.1
	1 Yes	116	37.3	69.9	100.0
	Total	166	53.4	100.0	

Q19 Have you felt sick, shaky, or depressed when you stopped drinking/using drugs?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	216	69.5	69.9	69.9
	1 Yes	93	29.9	30.1	100.0
	Total	309	99.4	100.0	

Q19A If yes, have you felt that way in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	16	5.1	17.6	17.6
	1 Yes	75	24.1	82.4	100.0
	Total	91	29.3	100.0	

Q19B If yes, have you felt that way in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	22	7.1	24.2	24.2
	1 Yes	69	22.2	75.8	100.0
	Total	91	29.3	100.0	

Q20 Have you ever felt coke bugs or a crawling feeling under your skin after you stopped using drugs?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	279	89.7	90.3	90.3
	1 Yes	30	9.6	9.7	100.0
	Total	309	99.4	100.0	

Q20A If yes, have you felt them in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	6	1.9	20.0	20.0
	1 Yes	24	7.7	80.0	100.0
	Total	30	9.6	100.0	

Q20B If yes, have you felt them in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	6	1.9	20.0	20.0
	1 Yes	24	7.7	80.0	100.0
	Total	30	9.6	100.0	

Q21 Have you ever used needles to shoot drugs?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	282	90.7	91.3	91.3
	1 Yes	27	8.7	8.7	100.0
	Total	309	99.4	100.0	

Q21A If yes, have you used needles in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	13	4.2	50.0	50.0
	1 Yes	13	4.2	50.0	100.0
	Total	26	8.4	100.0	

Q21B If yes, have you used needles in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	14	4.5	53.8	53.8
	1 Yes	12	3.9	46.2	100.0
	Total	26	8.4	100.0	

Q22 Has drinking or other drug use ever caused you problems between you and your family/friends?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	173	55.6	56.0	56.0
	1 Yes	136	43.7	44.0	100.0
	Total	309	99.4	100.0	

Q22A If yes, have the problems occurred in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	36	11.6	26.9	26.9
	1 Yes	98	31.5	73.1	100.0
	Total	134	43.1	100.0	

Q22B If yes, have the problems occurred in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	50	16.1	37.3	37.3
	1 Yes	84	27.0	62.7	100.0
	Total	134	43.1	100.0	

Q23 Has drinking or other drug use ever caused problems at school or at work?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	236	75.9	76.4	76.4
	1 Yes	73	23.5	23.6	100.0
	Total	309	99.4	100.0	

Q23A If yes, have problems occurred in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	34	10.9	47.2	47.2
	1 Yes	38	12.2	52.8	100.0
	Total	72	23.2	100.0	

Q23B If yes, have problems occurred in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	47	15.1	65.3	65.3
	1 Yes	25	8.0	34.7	100.0
	Total	72	23.2	100.0	

Q24 Have you ever been arrested due to you alcohol or drug use?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	161	51.8	52.1	52.1
	1 Yes	148	47.6	47.9	100.0
	Total	309	99.4	100.0	

Q24A If yes, have you been arrested in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	68	21.9	46.6	46.6
	1 Yes	78	25.1	53.4	100.0
	Total	146	46.9	100.0	

Q24B If yes, have you been arrested in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	76	24.4	52.1	52.1
	1 Yes	70	22.5	47.9	100.0
	Total	146	46.9	100.0	

Q25 Have you ever lost your temper or gotten into arguments/fights while drinking?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	163	52.4	52.8	52.8
	1 Yes	146	46.9	47.2	100.0
	Total	309	99.4	100.0	

Q25A If yes, has this happened in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	54	17.4	37.2	37.2
	1 Yes	91	29.3	62.8	100.0
	Total	145	46.6	100.0	

Q25B If yes, has this happened in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	78	25.1	53.8	53.8
	1 Yes	67	21.5	46.2	100.0
	Total	145	46.6	100.0	

Q26 Has there ever been a time when you needed to increase amount of drink/drugs to get effect?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	202	65.0	65.4	65.4
	1 Yes	107	34.4	34.6	100.0
	Total	309	99.4	100.0	

Q26A If yes, did this occur in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	21	6.8	19.8	19.8
	1 Yes	85	27.3	80.2	100.0
	Total	106	34.1	100.0	

Q26B If yes, did this occur in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	31	10.0	29.2	29.2
	1 Yes	75	24.1	70.8	100.0
	Total	106	34.1	100.0	

Q27 Has there ever been a time when you spent a lot of time thinking about/trying to get drugs/alcohol?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	228	73.3	73.8	73.8
	1 Yes	81	26.0	26.2	100.0
	Total	309	99.4	100.0	

Q27A If yes, did you feel this way in the last 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	9	2.9	11.1	11.1
	1 Yes	72	23.2	88.9	100.0
	Total	81	26.0	100.0	

Q27B If yes, did you feel this way in the last 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	20	6.4	24.7	24.7
	1 Yes	61	19.6	75.3	100.0
	Total	81	26.0	100.0	

Q28 Has there ever been a time when you felt bad or guilty about your drinking/drug use?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	135	43.4	43.7	43.7
	1 Yes	174	55.9	56.3	100.0
	Total	309	99.4	100.0	

Q28A If yes, have you felt guilty in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	27	8.7	15.8	15.8
	1 Yes	144	46.3	84.2	100.0
	Total	171	55.0	100.0	

Q28B If yes, have you felt guilty in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	44	14.1	25.7	25.7
	1 Yes	127	40.8	74.3	100.0
	Total	171	55.0	100.0	

Q29 Have you ever used alcohol or street drugs to relieve a hang-over or to help you sleep?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	238	76.5	77.0	77.0
	1 Yes	71	22.8	23.0	100.0
	Total	309	99.4	100.0	

Q29A If yes, has this occurred in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	8	2.6	11.3	11.3
	1 Yes	63	20.3	88.7	100.0
	Total	71	22.8	100.0	

Q29B If yes, has this occurred in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	16	5.1	22.5	22.5
	1 Yes	55	17.7	77.5	100.0
	Total	71	22.8	100.0	

Q30 Have you ever used alcohol or other drugs even though you have been told to stop due to health?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	240	77.2	77.7	77.7
	1 Yes	69	22.2	22.3	100.0
	Total	309	99.4	100.0	

Q30A If yes, has this occurred in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	24	7.7	34.8	34.8
	1 Yes	45	14.5	65.2	100.0
	Total	69	22.2	100.0	

Q30B If yes, has this occurred in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	29	9.3	42.0	42.0
	1 Yes	40	12.9	58.0	100.0
	Total	69	22.2	100.0	

Q31 Have you ever been diagnosed with alcohol abuse/dependence or drug abuse/dependence?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	228	73.3	73.8	73.8
	1 Yes	81	26.0	26.2	100.0
	Total	309	99.4	100.0	

Q31A If yes, have you been diagnosed in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	54	17.4	66.7	66.7
	1 Yes	27	8.7	33.3	100.0
	Total	81	26.0	100.0	

Q31B If yes, have you been diagnosed in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	64	20.6	79.0	79.0
	1 Yes	17	5.5	21.0	100.0
	Total	81	26.0	100.0	

Q32 Have you ever gone to anyone for help because of drinking or drug use?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	167	53.7	54.0	54.0
	1 Yes	142	45.7	46.0	100.0
	Total	309	99.4	100.0	

Q32A If yes, have you gone in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	84	27.0	59.6	59.6
	1 Yes	57	18.3	40.4	100.0
	Total	141	45.3	100.0	

Q32B If yes, have you gone in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	104	33.4	73.2	73.2
	1 Yes	38	12.2	26.8	100.0
	Total	142	45.7	100.0	

Q33 Have you ever received treatment for alcohol or drug abuse or for detox?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	198	63.7	64.5	64.5
	1 Yes	109	35.0	35.5	100.0
	Total	307	98.7	100.0	

Q33A If yes, have you received care in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	82	26.4	75.9	75.9
	1 Yes	26	8.4	24.1	100.0
	Total	108	34.7	100.0	

Q33B If yes, have you received care in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	99	31.8	91.7	91.7
	1 Yes	9	2.9	8.3	100.0
	Total	108	34.7	100.0	

Q34 Have you ever received outpatient care for alcohol or drug abuse?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	232	74.6	75.3	75.3
	1 Yes	76	24.4	24.7	100.0
	Total	308	99.0	100.0	

Q34A If yes, have you received care in the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	55	17.7	73.3	73.3
	1 Yes	20	6.4	26.7	100.0
	Total	75	24.1	100.0	

Q34B If yes, have you received care in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	68	21.9	90.7	90.7
	1 Yes	7	2.3	9.3	100.0
	Total	75	24.1	100.0	

Q35 Have any of your family members ever had a drinking or drug problem?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	128	41.2	41.8	41.8
	1 Yes	178	57.2	58.2	100.0
	Total	306	98.4	100.0	

Q35A If yes, have they had a problem over the past 6 months?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	91	29.3	53.2	53.2
	1 Yes	80	25.7	46.8	100.0
	Total	171	55.0	100.0	

Q35B If yes, have they had a problem in the past 30 days?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 No	99	31.8	58.2	58.2
	1 Yes	71	22.8	41.8	100.0
	Total	170	54.7	100.0	

FINANCIAL STATUS REPORT

(Short Form)

(Follow instructions on the back)

1. Federal Agency and Organizational Element to Which Report is Submitted	2. Federal Grant or Other Identifying Number Assigned By Federal Agency	OMB Approval No.	Page	of
National Inst. of Justice--Justice Program	2002-IJ-CX-0028	0348-0038	1	1 pages

3. Recipient Organization (Name and complete address, including ZIP code)

The University of Akron, Office of the Controller
Akron, OH 44325-6205

4. Employer Identification Number	5. Recipient Account Number or Identifying Number	6. Final Report	7. Basis
346002924	5-34255	☐ Yes ☑ No	☑ Cash ☐ Accrual

8. Funding/Grant Period *(See instructions)* From: (Month, Day, Year)	To: (Month, Day, Year)	9. Period Covered by this Report From: (Month, Day, Year)	To: (Month, Day, Year)
9/1/2002	7/31/2004	9/1/2002	6/30/2004

10. Transactions:	I Previously Reported	II This Period	III Cumulative
a. Total outlays	25,557.07		25,557.07
b. Recipient share of outlays			0.00
c. Federal share of outlays	25,557.07		25,557.07
d. Total unliquidated obligations			
e. Recipient share of unliquidated obligations			
f. Federal share of unliquidated obligations			
g. Total Federal share *(Sum of lines c and f)*			25,557.07
h. Total Federal funds authorized for this funding period			26,761.00
i. Unobligated balance of Federal funds *(Line h minus line g)*			1,203.93

11. Indirect Expense	a. Type of Rate *(Place "X" in appropriate box)* ☐ Provisional ☐ Predetermined ☐ Final ☑ Fixed			
	b. Rate	c. Base	d. Total Amount	e. Federal Share
	47.0%	17385.76	8,171.31	8,171.31

12. *Remarks: Attach any explanations deemed necessary or information required by Federal sponsoring agency in compliance with governing legislation.*

13. Certification: **I certify to the best of my knowledge and belief that this report is correct and complete and that all outlays and unliquidated obligations are for the purposes set forth in the award documents.**

Typed or Printed Name and Title	Telephone (Area code, number and extension)
Brett Riebau, Interim Controller	330-972-6570
Signature of Authorized Certifying Official	**Date Report Submitted**
Brett Riebau	September 1, 2004

National Criminal Justice Reference Service (NCJRS)