

# YCRA RESEARCH BRIEF:

## USING THE SUBSTANCE ABUSE SUBTLE SCREENING INVENTORY- ADOLESCENT FORM (SASSI-A) AS AN OUTCOME MEASURE WITH ADOLESCENT OFFENDERS

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**Summary:** The authors describe a preliminary study using the Substance Abuse Subtle Screening Inventory-Adolescent Form (SASSI-A; F. Miller, 1994) as an outcome measure with adolescent offenders. Results indicate that the SASSI-A can be successfully used as a treatment planning tool as well as a measure to evaluate programs.

### Key points in the Literature Review:

- Juvenile delinquency has long been associated with certain societal ills, such as easy access to alcohol and other drugs (Hawkins et al., 2000).
- To promote the effectiveness of treatment, Hawkins et al. (1992), Hawkins et al. (2000), and Huizinga et al. (2000) noted the importance of accurately assessing the frequency and intensity of AOD use among adolescent offenders so that instead of collapsing all AOD-abusing adolescent offenders into a single broad and clinically impotent category, AOD-abusing offenders can be placed into treatment groups based on the severity of their AOD misuse.
- Hawkins et al. (1992) and Hawkins et al. (2000) suggested assessing the differences between male and female adolescent offenders to promote increased treatment effectiveness.
- Residential treatment is common for AOD-abusing adolescent offenders (LeCroy & Ashford, 1992; Libman, Lyons, Kisiel, &

Shallcross, 1998; Lyons, Kisiel, Dulcan, Cohen, & Chesler, 1997). Libman et al. (1998) asserted that in order to more successfully determine the appropriateness of treatment planning for those in residential settings, the individual needs of recipient children must be assessed in a systematic, reliable, and clinically relevant manner.

- Bauman et al. (1999) posited that the first step in treating adolescent AOD abuse was a thorough assessment. One promising assessment tool for such evaluation is the SASSI-A (F. Miller, 1994).
- The SASSI-A's primary purpose is to evaluate substance abuse irrespective of the adolescent's defensiveness (Rogers et al., 1997).
- Because the SASSI-A is widely used by counselors as a clinical tool, additional validity research has been suggested (Rogers et al. 1997). Bauman et al. (1999) noted that two of the subtle SASSI-A scales are of particular importance for the treatment of adolescents who are at high risk of being AOD abusers. These include the Defensiveness (DEF) and Correctional (COR) scales.

**Methods:** The SASSI-A was administered as the admission screening for participants at the residential facility. Licensed counselors conducted both the SASSI-A and clinical observations/interviews. 147 SASSI-A instruments were administered and completed. 98 adolescents agreed to participate in clinical interviews; 40 of the participants who were interviewed were identified for intensive AOD treatment that required a minimum 6-month stay at the facility. Each of the 40 participants in this intensive AOD treatment facility participated in the pretest and posttest assessment. Within 1 month of admission, the 40 residents who met the selection criteria were directed to a combination of intensive individual counseling; drug education classes, which described the costs of addiction (e.g., physical, cognitive, psychosocial damages caused by AOD use, interpersonal stressors caused by AOD abuse); and AOD groups that followed a rudimentary 12-step process. Licensed counselors co-facilitated the drug education classes and the AOD-abuse groups and conducted individual counseling sessions.

For this intensive AOD-related treatment, the facility adopted the philosophy that AOD-abusing or at-risk residents would be best understood when viewed as incongruent. The counselors who provided the AOD

treatment operationalized this philosophy by encouraging each participant to become more motivated for change using Prochaska and DeClemente's (1992) stages of motivation for change as a conceptual model. Consistent with findings in the current research, the individual and group formats incorporated motivational interviewing and Motivational Enhancement Therapy (MET).

**Participants:** 147 adolescent offenders, who were screened for treatment at a 50-bed treatment facility in a Rocky Mountain state for no fewer than 30 days, completed the SASSI-A. The ages of the participants ranged from 12-18 years. Of these participants 44% were girls and 56% were boys. The ages of the participants receiving 6-month follow-up SASSI-A testing ranged from 12 to 18 years. Of this group of participants, 55% were boys and 45% were girls. The ethnicity of the participants was 85% European Americans, 5% Hispanic, 5% Native American, and 5% African American.

**Instruments used:** The Substance Abuse Subtle Screening Inventory—Adolescent Form (SASSI-A), the Youth Comprehensive Risk Assessment (YRCA).

**Key Results:**

- On the initial SASSI-A screening, 59% (n = 88) of the participants (N = 147) met the criteria for being AOD dependent according to the SASSI-A criteria.
- Of the 98 assessed using both the SASSI-A and the YRCA, residents who were identified as being **AOD dependent** (n = 46) were reported to have significantly more (per t-test analysis) social functioning problems (p = .018), significantly greater need for structure (p = .009), and significantly greater need for supervision in treatment (p = .006) than was reported by the non-AOD-dependent residents (n = 52). In addition, the AOD-dependent residents exhibited significantly more need for family resources (p = .03), significantly higher risk to self (p = .04), and significantly higher risk to others (p = .001), and they were rated much higher in total risk (p = .000).
- Higher substance abuse scores were significantly associated with (a) higher risk to self (p = .00), (b) lower social adaptability (p = .00), (c) higher need for family resources (p = .04), and (d) greater structure needed in treatment (p = .03). Higher AOD use was not significantly associated with higher risk to others.

- On three SASSI-A scales (i.e., Obvious Attributes [OAT], DEF and COR), gender differences were noted between AOD-dependent boys and girls
  - In this study, girls showed significantly more endorsement of negative self-statements per the OAT scale.
  - Elevated DEF scores indicate that clients are typically concealing problems, more prevalent with boys in this study.
  - Elevated COR scores indicate high similarity to a normative group from a correctional setting and behaviors that are often characterized by difficulties with anger management, impulse control, and defiance to authority. In this study, girls showed significantly more similarity to a normative group from a correctional setting compared with the boys in this study.
- In comparing pretest and posttest SASSI-A data using t-test analysis, the adolescents who were in specifically designated AOD treatment (n = 40) reported significantly higher lifetime AOD use, perhaps indicating a greater honesty with self and others after AOD treatment about past AOD use/ abuse. Participants also indicated a perceived reduction in their "character defects," possibly indicating perceived progress on tendencies such as impulsiveness and low frustration tolerance.

**Key Conclusions/Recommendations:** The SASSI-A has significant utility in assessing entering adolescent offenders for AOD abuse. The results also suggest that adolescent offenders who score high on AOD assessments may well have risks that are more severe and that require attention. *Higher AOD abuse is significantly associated with such factors as risk to self and social and adaptive functioning.* These results seem to suggest that it may be that these youths are self-medicating due to very poor coping skills and are in desperate need of help. Hence, *by reducing depression and despair, increasing social skills, and improving family relations, treatment programs can promote greater recovery from AOD addiction.* The gender-related results suggest that girls may initially be more open to admitting AOD use and personal character defects; however, they are more self-critical and act out more. Conversely, boys seem to admit less abuse and are less self-critical.