



ADULT SASSI-4 GUIDELINES

A. *PROFILE VALIDITY*

SASSI-4 has a 92% overall accuracy rate in identifying individuals who have a high or low probability of having a substance use disorder (SUD). There are three ways to check on the utility of individual profiles.

1. If the paper and pencil version was used, check to determine if the client skipped or double-marked any items. If possible, ask the client to clarify any such items. If the client is not available to clarify ambiguously marked items, determine if a clear response would change the results of the decision rules (see SASSI-4 User Guide and Manual, p. 22). If so, do not use the decision rules as the only basis of further clinical decisions.
2. If the RAP score is two or greater, the client may not have been responding to the SASSI-4 items in a meaningful manner, and therefore the results may not be clinically useful. In some instances an elevated RAP score may be due to misunderstanding the directions, literacy problems, or other test administration factors that can be corrected if SASSI-4 is administered again. Elevated RAP scores may also reflect noncompliance, which can be addressed as a clinical issue.
3. A DEF score of T-60 or greater suggests defensive responding on the SASSI-4. Elevated DEF scores increase the possibility of the SASSI-4 missing individuals with SUD. Elevated DEF may also reflect situational factors. Depending on the needs of the individual and the available resources, a more comprehensive assessment may be advisable. The defensiveness can also be addressed as a clinical issue. In some instances it may be valuable to re-administer the SASSI after rapport with a clinician has been established.

B. *INTERPRETATION*

Clients who are test positive on the SASSI-4 have a high probability of having an SUD. Clients who have a low probability on the SASSI-4 Decision Rule have a low probability of having an SUD.

Clients who score three or more on the SASSI-4 Prescription Drug (Rx) scale have a high probability of prescription medication abuse.

C. *TREATMENT CONSIDERATIONS*

1. Depending on recency of usage, clients who have FVA or FVOD scores of T-70 or greater may need more structure and support in their treatment plan.
2. Clients who do not score as “high probability” on the SASSI-4 but who show moderate elevations on FVA, FVOD, SYM, OAT and/or SAT may be experiencing some problems related to substance misuse. Depending on the needs of the individual and available resources, educational programs related to substance use may be valuable. If there is collateral evidence of a substance abuse, clients should be considered for further evaluation.
3. Clients who are classified as “high probability” only on the basis of the FVA and/or FVOD scores (Rule 1) may do well in education and outpatient programs.
4. Clients whose screening result is “high probability” and have very elevated scores (T greater than 70) on OAT, SAT or DEF may need relatively intensive treatment. Clients in this category who do not have elevated scores on FVA or FVOD may require help in recognizing ways in which substance misuse impacts their lives.

D. ADDITIONAL CLINICAL CONSIDERATIONS

Individual scale scores provide a source of information that can be used in generating ideas for further evaluation and treatment. Elevated or depressed scale scores should not, however, be automatically interpreted as a sign of pathology.

- 1. FVA and FVOD (Face Valid Alcohol and Other Drug Scales):** The higher the score on either scale, the more the clients are acknowledging usage, consequences of usage, and/or loss of ability to control their alcohol/drug use. Examination of clients' responses on the face valid items gives a sense of the types of substance misuse issues they are facing - Are they using to cope with stress? Are they using to deal with social anxiety? Are they experiencing negative consequences? Are they experiencing loss of control? Etc. It is relatively easy for clients to control the impression they create when responding to the face valid items. Clients who are motivated to conceal evidence of a substance use disorder may under-report on FVA and FVOD; clients who are motivated to demonstrate that they have a substance use disorder may over-report on FVA and FVOD.
- 2. SYM (Symptoms):** Examination of the individual SYM items suggests that it is a measure of common causes, consequences and correlates of substance use disorders.
- 3. OAT (Obvious Attributes):** Clinical experience has shown that elevated scores on OAT reflect a tendency to acknowledge behaviors and personality characteristics commonly associated with substance misuse, e.g., impulsiveness, low frustration tolerance, impatience, resentment, self-pity. Clients with elevated OAT scores are often readily able to relate to and identify with other individuals who have SUD, including those in recovery (for example, in addictions films and self-help groups). They tend to be open to feedback, although they are not always receptive to the idea that it is in their best interests and within their capabilities to change.
- 4. SAT (Subtle Attributes):** Clinical experience has shown that elevated scores on SAT are associated with individuals who are detached from their feelings and who have relatively little insight into the basis and causes of their problems. People who have a substance use disorder and high SAT scores often find it difficult to fully accept the significance of substance usage in their lives. Particularly when SAT is the highest elevated scale, the client may be successful in presenting as well functioning, with few symptoms.
- 5. DEF (Defensiveness):** Elevated scores on DEF indicate that the individual has not endorsed items addressing personal limitations and faults, and may therefore find it difficult to fully engage in a treatment process. Individuals with low DEF scores have endorsed several items indicating personal limitations and faults. A DEF score below T-40 may not simply reflect low defensiveness, but rather a tendency to be overly self-critical and in emotional pain.
- 6. SAM (Supplemental Addiction Measure):** SAM is used in the decision rules to increase the accuracy of the screening results. When an elevated SAM score is accompanied by an elevated DEF score this is an indicator that the client's responses are similar to those given by defensive people who have SUD.
- 7. COR (Correctional):** The COR Scale can be used to identify clients whose responses are similar to individuals who have a history of involvement with the legal/judicial system (e.g., arrests, incarceration). Clients who have a T score of 60 or greater on COR are at relatively high risk of having problems with the legal/judicial system.
- 8. FAM (Family vs. Controls):** Clinical experience suggests that FAM scores can be useful in identifying individuals who tend to focus on other people's needs rather than their own. Clients who have elevated scores on FAM are likely to have problems in such areas as establishing a sense of personal power and setting limits with others.

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