**Argosy University**

**Forensic Mental Health Professional Individual Assessment Report**

**Course FP6020**

Name: Mr. P Identification Number: Vignette 2 Date of Birth: 05/31/1989

Tests Date: 05/31/2015 Time Spent: 1 hour

Interview Date: 05/31/2015 Time Spent: 1 hour

Name of Assessment: Substance Abuse

**Introduction**

Mr. P is a 26-year-old male with a history of alcohol abuse. He is charged with his fourth Driving Under the Influence (DUI) violation. When he was arrested, he was not observed driving and his blood alcohol content was just above the legal limit. He was also forthright with the arresting officer when he admitted that he had drank alcohol prior to the arrest. However, he did not consider himself intoxicated. This was believed to be true from the arresting officer, but due to the history of offense, he was arrested. Currently, Mr. P is facing a 90-day substance abuse treatment program in a correctional facility. Mr. P admits that his father was an alcoholic and his mother was schizophrenic. Mr. P, himself, also suffered from depression while in college. His drinking largely started at age 14 to deal with the stress of caring for his schizophrenic mother. The drinking escalated with his depression in college. It has been eight years since his last DUI and if he is incarcerated, Mr. P may lose his job in which he has been relatively successful. As such, Mr. P has been referred for a substance abuse assessment.

The purpose of the substance abuse assessment is to determine the needs to the person in regard to substance abuse (Center for Substance Abuse Treatment, 2009). This is then used to form an effective treatment plan for the individual. The report is first used to identify if a problem is present. If a problem is present, the report will describe the nature of the problem, determine a diagnosis, and provide recommendations for treatment for the given diagnosis.

**Reason for Referral**

Mr. P is being referred for a substance abuse evaluation. Mr. P has a history of alcohol abuse. His first two DUIs were the result of his drinking to cope with his depression. His third DUI was due to drinking at a celebration for passing a difficult exam. Eight years have passed since his last DUI. Upon his fourth arrest, he did not appear intoxicated and was just over the legal limit. Mr. P also does not communicate any current urge to use alcohol due to his immediate stress and denies the seriousness of his charge.

With this assessment, the evaluator hopes to determine the presence and degree of Mr. P’s chemical dependency. In doing so, the most effective treatment plan can be utilized with Mr. P. Currently Mr. P is facing a 90-day substance abuse treatment program and incarceration. Mr. P has shown himself to be legally sober for eight years, and in this case, he was not a notable risk to himself or others due to his substance use. Therefore, this assessment aims to evaluate if incarceration will be effective for Mr. P.

**Mock Interview Questions (examples)**

In the past 12 months how often have you drank alcohol?

Do you ever use alcohol as a means to relax, fit in, feel better about yourself?

Do you ever feel the need to hide your alcohol use?

Do you ever forget things you did while using alcohol?

Do any of your close friends or family drink regularly?

How often do you feel depressed?

Have you used any other drugs recreationally?

Have you received any treatment for substance use in the past?

Have you ever tried to stop using alcohol?

**Referral Questions (examples)**

What is the purpose of this assessment?

What are the assessment options for this case?

What impressions are gained by Mr. P’s family history?

What impressions are gained by Mr. P’s current behaviors?

How will I recognize malingering or deception?

What are the treatment options for Mr. P?

What treatment options have been administered in the past?

Can Mr. P’s 90-day incarceration be deferred?

Who is using this assessment?

**Presentation**

During the interview with Mr. P, Mr. P was cooperative and pleasant. He answered questions openly and seemingly honestly. He was even vocal about problem areas in his life and admitted to drinking the night of his most recent arrest. Prior to receiving his potential sentence, Mr. P was fearful, but confident that he had a defensible case. Afterwards, he appeared less confident and more fearful. This is most likely due to his report that his job may be in jeopardy if he were incarcerated.

Mr. P also made multiple mentions to depressive episodes that manifested in college due to stress about caring for his mother. He allegedly had no previous mental defects prior to this; although, he admitted to the emergence of his alcohol use when he was 14. Despite this Mr. P’s current mental status does not seem to be significantly impaired. He may be at risk of a depressive episode due to the stress of his potential sentence. Despite this, Mr. P appears convincing that his alcohol use –or lack thereof- is not a significant influence on his mental state.

Furthermore, Mr. P’s appearance is not largely defined within the vignette, but one can infer that he has relatively sufficient hygiene based on his professional status as an operations manager and his convincingly sober appearance upon his arrest. In addition to this, Mr. P seemed to pass the standard mental status elements. He maintained focus throughout the assessment, he provided relevant answers to questions, his memory was accurate, he understood the nature of his situation, he was not defensive, and he possessed reasoning skills, judgement, and insight.

**Current Life Situation**
 Mr. P is currently facing a 90-day substance abuse treatment program at a correctional institution. He works as an operations manager at a successful software company and will potentially soon become a shareholder for this company. However, if he is incarcerated, he may lose his job. Mr. P has friends, but made no mention of active family involvement. It is unclear if his parents are still alive, but they seem to be a source of stress and contributing factors for Mr. P’s alcohol use. Furthermore, Mr. P probably has a college degree, but does not appear to still attend school. He is also not apparently in any community groups outside of his job at the software company.

 Mr. P does not consider his actions to be a significant offense. Upon his arrest, he was confident that he would not face a harsh penalty (if any at all). He recalls the time of the offense accurately as corroborated by the arresting officer. Furthermore, Mr. P recognizes the contributing factors of his alcohol use; usually stress has been the major factor, but celebrations have also been the cause most recently. As Mr. P becomes more depressed due to his stress, he has drank excessively in the past as a way to cope. However, it has been eight years since his last arrest. Therefore, one can assume that Mr. P has found a new method of coping, although specific methods were not addressed in the vignette. Following his sentence, he is aware of the gravity of his situation. He is cooperative with this assessment as he is likely aware that it may help him maintain his job. It should also be noted that Mr. P has been cooperative with all involved parties within this case.

**Background Information**
 Mr. P is a 26-year-old, single male with a college education. He works at a software company and has worked with this company since an early age starting as an operations manager. He has risen through the company and will presumably become a shareholder soon.

 Growing up, Mr. P’s father was an alcoholic and drug abuse was common within his family. His mother was also indicated to be schizophrenic. As such, Mr. P was her primary care giver growing up. At the age of 14, Mr. P began his alcohol consumption due to the stress of caring for his mother. The drinking became more excessive as Mr. P went into college. During this time, his mother was placed in a nursing home. This was difficult for Mr. P and consequently two of his four DUIs were the result of his drinking during this time. His third DUI occurred following the success of a difficult examination in school. He has not had a DUI in eight years. His most recent one occurred following a going-away party for a friend of his.

 Little more information is given about Mr. P’s community ties. He is seemingly close with his mother, but he does not address his father, siblings, or other family except in passing. He makes no mention of a romantic interest, but does maintain a relationship with at least one friend. There are also no other indications about the activities Mr. P may be involved in outside of his work.

**Psychological History**

Mr. P reported that he suffered from depression throughout college. This was due to the placement of his mother in a nursing home. Mr. P was his mother’s primary care giver during his formative years and he had difficulty coping with this transition. Mr. P also reported a co-occurring substance abuse disorder. He drank alcohol to cope with the stress of his mother. He started drinking at age 14 and increased his drinking into his 20s. Despite this, Mr. P states that he was not depressed prior to college. Mr. P has been charged with three previous DUIs, but his past treatments are not discussed other than a lack of incarceration.

Mr. P’s family has a long history of drug abuse. His father was a notable alcoholic and his mother was schizophrenic. Mr. P cared for his mother, until he went to college. At this point, his mother was eventually placed in a nursing home which affected Mr. P greatly. The vignette does not address the current statuses of Mr. P’s family or friends other than this.

**Substance Use History**

Mr. P started consuming alcohol at the age of 14 due to the stress of caring for his mother. His drinking accelerated as he became older and the stress of his mother became greater. He received his first two DUIs in college following the placement of his mother into a nursing home. His father was also an alcoholic which likely contributed to his inclination to drink. His family has a history of drug abuse, but Mr. P makes no mention of the use of other drugs.

Mr. P drinks to cope with stressors. He started drinking due the stress of his mother’s schizophrenia and likely due to his father’s alcoholism. It has been over eight years since Mr. P’s last offense. He did not describe any new coping strategies, but he presumably has been able to control his drinking. Despite this, if Mr. P is forced to complete a 90-day stance abuse program in a correctional facility, he will lose his job, and his depression will likely reemerge. Mr. P states that he does not feel depressed, but he may be lying to protect himself. Other areas of concern for Mr. P’s alcohol use come from his social circle. His two most recent DUIs were the result of celebrating with friends.

Mr. P recognizes his risk factors for abuse and has not had an incident in over eight years. He has likely attended treatment programs in the past and has evidently relapsed each time. In this fourth charge, Mr. P seems open to obtaining help, he has a stable living condition, and he understands the nature and consequences of his drinking. This indicates that he is probably amenable to treatment even if he was not in the past.

**Medical History**

Mr. P has no apparent medical conditions. His mother was presumably diagnosed with schizophrenia and only received treatment through a nursing home following Mr. P’s transition to college. No other medical conditions were addressed among the rest of Mr. P’s family.

**Objective Testing**
Tests administered

Beck Depression Inventory (BDI)

The BDI is a short list of 21 items in which a person rates the items in order to evaluate that person’s attitudes and symptoms of depression (Beck, Ward, Mendelson, Mock, & Erbaugh, 1961). Mr. P has admitted to feeling depressed in the past. He has also stated that his drinking is largely due to coping with his depression and stress. By assessing his depression, one can infer his likelihood of relapse.

Substance Abuse Subtle Screening Inventory, 3rd ed. (SASSI-3)

The SASSI-3 is a short self-report assessment used to determine the degree of a person’s chemical dependence (Miller, 1983). It uses 93 items and can be completed in around 15 minutes. Mr. P is suspected of being addicted to alcohol. The SASSI-3 would provide an objective measure to support a clinical interview and determine if a substance abuse disorder is truly present.

Findings

The vignette does not address the results of any administered assessments. Based, on the provided information, Mr. P may be at risk for depression. He has admitted stress has caused depression in the past for him. As he is at risk of incarceration and unemployment, he will undoubtedly face stress and assumedly depression. He most likely does not currently suffer from a substance abuse disorder as he has had no major incidents in over eight years, and his most recent incident was relatively minor. However, it should be noted that his depression has led to alcohol consumption in the past. Therefore, it is possible that his alcohol use may reemerge following his sentence.

**Diagnostic Impressions**

Mr. P does not seem to have a significant alcohol abuse disorder. While he does have numerous arrests for DUI, he has not offended in eight years. His drinking seems to be determined by either significant stress (e.g. his schizophrenic mother’s care, depression), or celebration (e.g. completing a difficult exam, going away party for a friend). Mr. P was also not significantly over the legal limit for intoxication; he did not even consider himself intoxicated (a notion supported by the arresting officer). That being said, Mr. P likely did drive while intoxicated, potentially due to a resurgence of stress from the risk of losing his job. His father’s alcoholism also makes him more prone to an alcohol use disorder (American Psychiatric Association, 2013). Therefore, Mr. P may require treatment, but this treatment likely does not need to be done through a correctional facility.

Potential Diagnoses

305.00 (F10.10) Mild Alcohol Use Disorder – This is Mr. P’s fourth DUI which indicates a significant impairment due to alcohol use. In the past, Mr. P met more criteria of a severe disorder; however, he now only meets two symptoms (APA, 2013). He has continued use despite recurring problems regarding alcohol use, and he continues to use alcohol in situation where it is hazardous.

296.36 (F33.42) Major Depressive Disorder in full remission – Mr. P identified himself as depressed during his time in college (APA, 2013). However, he does not address any specific symptoms. He also states that he does not currently feel depressed and made no indication that he felt depressed recently. Therefore, his depression seems to be in remission.

Mr. P may be at risk of schizophrenia (295.90 (F20.9)) or a different substance abuse disorder (305.90 (F19.10)) based on his family history and the increased likelihood of inheritance (APA, 2013). Both of these disorders are more common when close family members possess the disorder. As Mr. P’s mother and father both have these respective disorders (schizophrenia with his mother and alcoholism with his father), it is probably that Mr. P could have these disorders. However, Mr. P does not present any of the common symptoms for these disorders and made no statements about other substance use.

**Conclusion**

Mr. P’s mental status seems sufficient. He is aware of the nature of his situation and the potential consequences of his actions. He was open and cooperative with all involved parties, and he seems amenable to treatment. This notion was supported by the arresting officer. It should also be noted that Mr. P has not had an arrest in eight years, and his most recent arrest was based on an a relatively low blood-alcohol content and no apparent impairments. In the past, Mr. P has increased his consumption due to stress. It is likely that Mr. P’s pending sentence for incarceration will increase this stress and may exacerbate Mr. P’s alcohol use disorder which is likely in remission.

**Recommendations**

As stated above, Mr. P’s alcohol use may not merit such a severe sentence as a 90 day substance abuse treatment program in a correctional facility. It is likely that Mr. P’s usage is due to stress. As this type of program would likely cause unnecessary stress due to the incarceration and the possibility of losing a promising career, the treatment may paradoxically exacerbate Mr. P’s future substance abuse. That being said, Mr. P may be benefited from a substance abuse treatment program of a less severe nature. Upon his sentencing, Mr. P did not express remorse for his action and was confident he would not receive a harsh sentence. While incarceration may be unnecessary, Mr. P would likely benefit from a program in which he can understand the gravity of his actions and learn how to avoid consumption in the future.

An alternative treatment option that may work better for Mr. P is an outpatient treatment program. This would allow Mr. P to maintain his job and receive education on alcohol use through individual and group counseling. Based on Mr. P’s eight year span incident free, a low intensity program would be sufficient. He can learn how to cope with stressors, avoid situations with alcohol, and use better judgment in regards to alcohol use.

**Sign your name and credentials Date your report**

References

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders: DSM-5*. Washington, D.C: American Psychiatric Association.

Beck, A.T., Ward, C. H., Mendelson, M., Mock, J., & Erbaugh, J. (1961) An inventory for measuring depression. *Archives of General Psychiatry,* 4, 561-571.

Center for Substance Abuse Treatment. (2009). Substance abuse treatment: Addressing the specific needs of women. *Treatment improvement protocol (TIP) Series*, No. 51. Rockville, MD: Substance Abuse and Mental Health Services Administration (US). Retrieved from http://www.ncbi.nlm.nih.gov/books/NBK83253/

Miller, G. A. (1983). Substance Abuse Subtle Screening Inventory–3. *Mental Measurments Yearbook with Tests in Print*. Ipswich, MA: SASSI Institute.