



ADOLESCENT CHEMICAL DEPENDENCY INVENTORY



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Adolescent Chemical Dependency Inventory

Scale Description

Scale Interpretation

Test Features

Applications

- Juvenile assessment in school systems and troubled youth programs.
- Intake screening in juvenile counseling and treatment programs.
- Juvenile substance (alcohol and other drugs) abuse intake screening.
- Assist in identifying appropriate intervention, counseling or treatment alternatives.

The **Adolescent Chemical Dependency Inventory (ACDI)** is a brief (105 items, 20 minutes) juvenile substance (alcohol and other drugs) abuse screening instrument or test. The ACDI measures the truthfulness of the adolescent while completing the test. In addition to substance (alcohol and other drugs) abuse the ACDI assesses the juvenile's life adjustment as well as their ability to handle stress.

Five Scales (Measures)

The five ACIDI scales are described as follows:

1. **Truthfulness Scale:** Measures the truthfulness of the youth while completing the test. This scale identifies defensive youths that minimize their problems or even try to fake good.
2. **Alcohol Scale:** Measures the severity of alcohol use and abuse. Alcohol refers to beer, wine and other liquor.
3. **Drugs Scale:** Measures illicit drug use and the severity of abuse. Drugs refer to marijuana, crack, cocaine, amphetamines, barbiturates, heroin, etc.
4. **Adjustment Scale:** Measures home, school and relationship adjustment. Quality of peer, family and authoritarian relationships are also explored.
5. **Distress Scale:** Measures anxiety and depression. The term dysthymic combines symptoms of anxiety and depression in the same disorder.

Test Features

Truthfulness Scale measures how truthful and open the juvenile was while completing the ACIDI. This scale identifies denial, problem minimization and faking. Many troubled youth attempt to minimize their problems. A Truthfulness Scale is a necessary component in contemporary juvenile assessment. The ACIDI Truthfulness Scale has been validated with other tests, truthfulness studies and the Minnesota Multiphasic Personality Inventory (MMPI) L and F scales. It consists of a number of items that most juveniles agree or disagree with. This important scale has been demonstrated to be reliable, valid and accurate. Much of this normative research is reported in the document titled “ACIDI: An Inventory of Scientific Findings.”

Truth-Corrected Scores have proven to be very important in enhancing assessment accuracy. This proprietary truth-correction program is comparable to the MMPI K-Scale correction methodology. The ACIDI Truthfulness Scale has been correlated with the other four ACIDI scales. The Truth-Correction equation then converts raw scores to truth-corrected scores. Truth-Correction scores are more accurate than raw scores. Raw scores reflect what the juvenile wants you to know. Truth-Corrected scores reveal what the juvenile is trying to hide.

Cost. Once an account is established at www.online-testing.com, tests can be purchased at \$9.95 each (U.S. currency) and may be bought in any quantities desired. Our website is operational 24 hours a day, 7 days a week. The \$9.95 test fee includes free test booklets, answer sheets, test-related manuals, upgrades, annual reports, research and support services. There are no concealed costs and no startup fees. Volume discounts are available to states, provinces, departments, professional associations and state-wide testing contracts. Volume is defined as 800+ tests administered a year. Discounts are also available to members of selected associations, coalitions and other affiliations or organizations. For more information email us at info@online-testing.com.

More than just another alcohol or drug test. In addition to alcohol and drugs the ACIDI assesses other important areas of inquiry like truthfulness, distress, adjustment along with alcohol and drugs. The ACIDI is designed specifically for juvenile (male and female) assessment. It provides the information needed for understanding juvenile attitudes and behavior.

Advantages of Screening

Screening or assessment instruments filter out individuals with serious problems that may require referral for a more comprehensive evaluation and/or treatment. This filtering system works as follows:

Adolescent Chemical Dependency Inventory		
Risk Category	Risk Range Percentile	Total Percentile
Low Risk	0 - 39%	39%
Medium Risk	40 - 69%	30%
Problem Risk	70 - 89%	20%
Severe Problem	90 - 100%	11%

Reference to the above Risk Range table shows that a problem is not identified until a scale score is at the 70th percentile or higher. These risk range percentiles are based upon the thousands of troubled youth that have taken the ACDI. This procedure is eminently fair and it avoids extremes, i.e., over-identification and under-identification of problems and risk.

Budgetary savings (dollars) are large with no compromises in needy youth receiving appropriate evaluation and/or treatment services. Indeed, more needy youth would receive help. Without a screening program there is usually more risk of over or under utilization of additional professional services.

Confidentiality: Users are strongly encouraged to delete client names after they have completed a client assessment. This proprietary "name deletion" procedure involves a few keystrokes and insures juvenile confidentiality. Once juvenile's names are deleted, they are gone and cannot be retrieved. Deleting juvenile names does not delete demographics or test data, which is downloaded into the tests database for subsequent analysis. This "name deletion" procedure insures confidentiality and compliance with **HIPAA (federal regulation 45 C.F.R. 164.501) requirements.**

Test Data Input Verification: This proprietary program allows the person that inputs the test data from the answer sheet into the computer to verify the accuracy of their data input. In brief, test data is input twice and any inconsistencies between the first and second data entry are highlighted until corrected. When the first and second data entry match or are the same the staff person may continue. Use of this data entry verification procedure is optional, yet it is strongly recommended.

Database. The ACDI system contains a proprietary built-in database. All ACDI test data is downloaded into the ACDI database. This expanding database allows ongoing research and test program summary features that were not readily available before. Ongoing research insures quality control. Testing program summaries provide for program self-evaluation.

Adolescent Chemical Dependency Inventory Interpretation

There are several levels of ACDI interpretation ranging from viewing the ACDI as a self-report to interpreting scale elevations and inter-relationships.

The following table is a beginning point for interpreting ACDI scores.

SCALE RANGES

Risk Category	Risk Range Percentile	Total Percentage
Low Risk	0 - 39%	39%
Medium Risk	40 - 69%	30%
Problem Risk	70 - 89%	20%
Severe Problem	90 - 100%	11%

With reference to the above table, a problem is not identified until a scale score is at the 70th percentile or higher. Elevated scale scores refer to percentile scores that are at or above the 70th percentile. Severe (serious) problems are identified by scale scores at or above the 90th percentile. Severe problems represent the highest 11 percent of juveniles evaluated with the ACDI. The ACDI has been normed on over 15,000 troubled youth. And this ACDI II sample continues to expand with each ACDI test that is administered.

SCALE INTERPRETATION

1. **Truthfulness Scale:** measures how truthful the juvenile was while completing the test. It identifies guarded and defensive youth who attempt to “fake good.” Scores at or below the 89th percentile mean that all ACDI scales are accurate. Scores in the 70 to 89th percentile are accurate because they have been Truth-Corrected. Truthfulness Scale scores at or above the 90th percentile mean that all ACDI scales are inaccurate (invalid) because the juvenile was overly guarded, manifesting denial, read things into ACDI test items that aren’t there, was minimizing problems, or was caught attempting to fake answers. Youth’s with a reading impairment might also invalidate their test with a Truthfulness Scale score in the severe problem (90 to 100th percentile) range. The reason for invalidation can usually be determined with a few questions regarding the juvenile’s schooling, reading ability and motivation. If not consciously deceptive, youth with elevated Truthfulness Scale scores are uncooperative, fail to understand test items or have a need to appear in a good light.

Truthfulness Scale scores at or below the 89th percentile indicate that all other scale scores are accurate. When reviewing an ACDI report one of the first things to check is the Truthfulness Scale score. A Truthfulness Scale score at or above the 90th percentile does not occur by chance.

2. **Alcohol Scale:** measures alcohol use and/or abuse. Alcohol refers to beer, wine and other liquors. An elevated (70 to 89th percentile) Alcohol Scale is indicative of an emerging drinking problem. An Alcohol Scale score in the severe problem (90 to 100th percentile) range identifies serious alcohol-related problems.

When both the Alcohol and Drugs Scales are elevated, the highest score usually represents the juvenile’s substance of choice. When both are in the severe problem range explore polysubstance abuse. An elevated Distress Scale with an elevated Alcohol Scale could reflect emerging suicidal ideation or a frustration - aggressive explosive acting out. A higher Alcohol Scale score may be a focal issue, whereas a higher Distress Scale might be indicative of a troubled youth’s attempt to “self-medicate.” An elevated Adjustment Scale in combination with an elevated Alcohol Scale helps identify codeterminants. In summary, the Alcohol Scale can be interpreted independently or in combination with other ACDI scales.

3. **Drugs Scale:** measures illicit drug use and abuse. The Drugs Scale measures the severity of drug abuse. Drugs refer to marijuana, crack, cocaine, ice, LSD, amphetamines, barbiturates and heroin. This scale is independent of the Alcohol Scale described above. An elevated (70 to 89th percentile) Drugs Scale score is indicative of an emerging drug problem. Elevated Drugs Scale scores do not happen by chance. A Drugs Scale score in the severe problem (90 to 100th percentile) range identifies severe drug-related problems.

In intervention and treatment settings the youth’s Drugs Scale score helps work through denial. And an elevated Drugs Scale score in conjunction with other elevated ACDI scores magnifies the severity of the other elevated scores.

When both the Drugs and Alcohol Scales are elevated, the higher score represents the youth’s substance of choice. When both of these scores are in the severe problem range poly-substance abuse is indicated.

An elevated Distress Scale in combination with an elevated Drugs Scale reflects a troubled youth on the verge of being overwhelmed. The height of the Distress Scale is important as scores in the severe problem range can be indicative of suicidal/homicidal ideation. As noted earlier with alcohol, an elevated Adjustment Scale in combination with an elevated Drugs Scale helps identify codeterminants. In this case (severe problem) drug use/abuse is likely a part of the symptomatology. In summary, the Drugs Scale can be interpreted independently or in combination with other ACDI scales. In most cases a drug problem (elevated scale score) magnifies the risk associated with other elevated ACDI scale scores.

4. Distress Scale: measures the youth's pain, suffering, anxiety and depression. Distress incorporates unhappiness, dissatisfaction, worry and pain. Distress is the most common reason for juveniles to voluntarily seek counseling. Distress has broad applications in adjustment, intervention, counseling and outcome. And it often serves as the beginning point in clinical inquiry. The magnitude (or severity) of the Distress Scale is important. Elevated scores indicate something is wrong. The youth is concerned, bothered and upset. Distress Scale scores in the severe problem (90 to 100th percentile) range indicate the youth is hurting, on the verge of being overwhelmed and is becoming desperate.

A severe problem Distress Scale in conjunction with any other ACDI scale in the severe problem range is a malignant sign and needs to be dealt with carefully. This is the profile of a suicidal/homicidal prone individual. The Distress Scale can be interpreted independently or in combination with other ACDI scales.

5. Adjustment Scale: measures the youth's ability to adapt, conform and function. This scale recognizes personal and social stressors at home, school and in one's peer group relationships. Juvenile adjustment requires modification of the youth's attitudes and behavior. Stressors vary widely from the home and school environment (along with anxiety, frustration and competition) to a myriad of emotion provoking events. When the Adjustment Scale is elevated -- carefully review other ACDI scales.

An elevated Adjustment Scale suggests one level of intervention (e.g., lifestyle adjustment), whereas a score in the severe problem (90 to 100th percentile) range suggests other more fundamental intervention options. An elevated Distress Scale score with an elevated Adjustment Scale score is suggestive of poor emotional morale in a problem prone environmental milieu, e.g., school, home and/or peer group. In this case the youth might benefit most from stress management training, emotional support of endeavor and lifestyle adjustment. The Adjustment Scale can be interpreted independently or in combination with other ACDI scales.

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In conclusion it was noted that there are several "levels" of ACDI interpretation ranging from viewing the ACDI as a self-report to interpreting scale elevations and interrelationships. Scale scores can be interpreted individually. Staff can then put ACDI findings within the context of the juvenile's life.

For more information

Some evaluator's want more test-related information than others. If you want more in depth ACDI information visit www.bds ltd.com. Upon entering this site there are navigational links in the left margin. Click on "Tests Alphabetically Listed" and scroll down to the Adolescent Chemical Dependency Inventory. Click on the tests name and you will go directly to its webpage, which contains a lot of test-related (description, unique features, research, example report and more) information.

For more in-depth ACDI information visit www.bds ltd.com