

DEFENDANT QUESTIONNAIRE
Confidential Report

NAME: Mrs. Report Example
AGE: 29 SEX : Female
DATE OF BIRTH: 11/23/1985
ETHNICITY/RACE: Caucasian

Last 4 Digits of SSN: 1234
EDUCATION: High school graduate
DATE SCORED: 07/29/2020
MARITAL STATUS: Married

Defendant Questionnaire (DQ) results are confidential and should be considered working hypotheses. No diagnosis or decision should be based solely upon DQ results. The DQ is to be used in conjunction with experienced staff judgment.

INFORMATION PROVIDED BY CLIENT

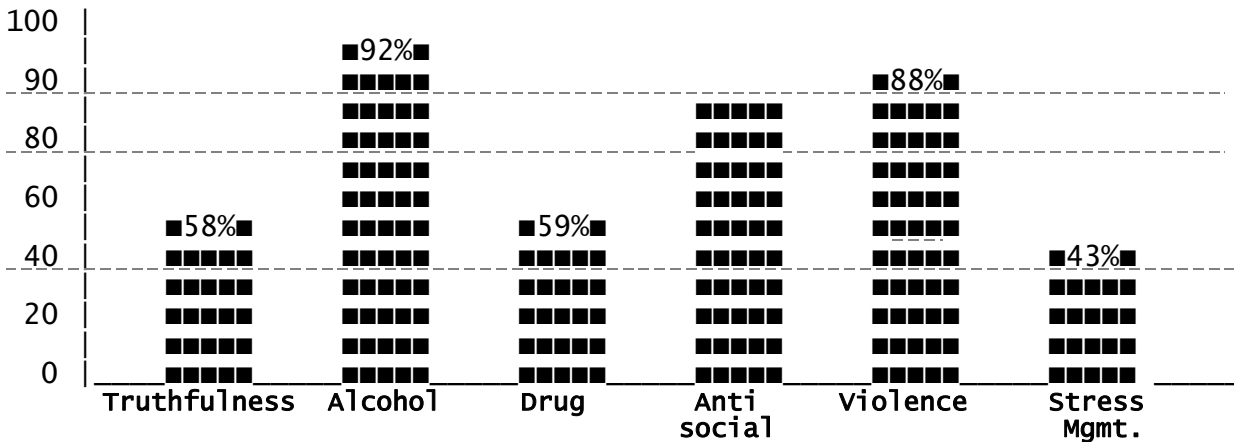
Conviction before age 16: Yes
Times on probation: 2
Probation revocations: 1
Total number of times arrested: 4

Assault/Violence related arrests: 0
Alcohol-related arrests: 1
Drug-related arrests: 0
Months employed in last year: 11
Total number of times incarcerated: 2

TRUTHFULNESS SCALE APPLICATIONS

A Truthfulness Scale score at or below the 89th percentile means all Defendant Questionnaire (DQ) scale scores are accurate. *Mrs. Example's* Truthfulness Scale score is at the fifty-eighth percentile. As a general rule, the lower the Truthfulness Scale score, the more accurate the test results. Marginal scores that are close to the end of a risk range are scored literally but can be interpreted on an individual basis. *Mrs. Example's* DQ results are accurate.

DQ Profile



Note: *Mrs. Example's* Substance Use Disorder Scale scored in the **problem** risk (Category 4) range.

THREE SUBSTANCE-RELATED SCALES

The Defendant Questionnaire (DQ) integrates three substance related scales or measures: Alcohol Scale, Drug Scale and Substance Use Disorder Scale. The specifically focused Alcohol and Drug Scales enable staff to properly match problem severity with commensurate or comparable intervention or treatment intensity (or level of care). On the other hand, the DSM-5 Substance (alcohol/drug) Use Disorder Scale is ubiquitous in clinical substance use diagnosis, reimbursement and treatment. With regard to *Mrs. Example's* substance-related scale scores only one is elevated (70th percentile or higher) and that's the 1 scale, which scored in the problem (70 to 89th percentile) risk range. Problem risk scorers are usually in the early stage of a substance abuse problem, which contributes to their recidivism. Without treatment *her* substance-related problem will likely worsen.

ATTAINED SCALE SCORES

Each Defendant Questionnaire (DQ) scale (Truthfulness Scale, Alcohol Scale, Drug Scale, Substance Use Disorder Scale, Antisocial Scale, Violence Scale and the Stress Management Scale) is represented and discussed. Attained scale scores are presented, explained, and as warranted, attained score-related recommendations are made.

Truthfulness Scale

Moderate Risk 58%

Mrs. Elizabeth Baumiester's Truthfulness Scale score is in the moderate (40 to 69th percentile) risk range. This is an accurate Defendant Questionnaire (DQ) profile and all DQ scale scores are accurate. Nevertheless, there is a noticeable tendency for *Mrs. Example* to be careful or cautious when answer personal questions. This may be situation specific and related to why *she* is being evaluated. However, there is a fine line between caution and recalcitrance or evasiveness. That said, *Mrs. Example's* Truthfulness Scale score is within the acceptable or moderate range and all scales are accurate.

Alcohol Scale - Category 5

Severe Risk 92%

Mrs. Elizabeth Baumiester's Alcohol Scale score is in the Severe Problem (90 to 100th percentile) recidivism range. Treatment recommendations should include residential treatment or inpatient treatment. All interventions are to include continuing care recommendations and mutual support group meetings. Recommendations can be modified with appropriate use of an "override" (written document with supporting information). Interventions can be completed consecutively or concurrently, within 90 days. This Alcohol Scale score represents a serious alcohol problem.

Drug Scale - Category 3

Moderate Risk 59%

Mrs. Elizabeth Baumiester's Drug Scale score is in the Moderate Risk (40 to 69th percentile) recidivism range. A combined chemical and educational intervention is warranted. Recommendations include a twenty-four (24) hour ADSAC course, a Victim Impact Panel (VIP) and substance-related group participation for six (6) weeks. Offenders with higher or lower Drug Scale scores can be placed at this level via clinical override (written document with supporting information). A moderate Drug Scale score could indicate an emerging drug problem.

Substance Use Disorder: Problem

"Severity" of DSM-5 Substance Use Disorder is based upon the number of the eleven (11) substance use criteria that are admitted to or endorsed. *Mrs. Example* admits to **four or five** of the eleven criteria, which is classified as **problem** substance use. This DSM-5 severity classification (problem) is equivalent to the DQ Alcohol Scale and Drug Scale **Problem risk** (70 to 89th percentile) classification. Note that neither tolerance nor withdrawal is necessary for a Substance Use Disorder diagnosis. Problem substance users are often referred to outpatient (individual or group) substance disorder counseling. Among several effective (inpatient/outpatient) psychotherapies is the popular Cognitive Behavior Therapy. Some outpatient groups emphasize alcoholism, others focus on drugs (prescription and nonprescription) and some are more generic (alcohol and drugs). Counseling is often augmented (not replaced by) AA, NA or CA meetings.

Antisocial Thinking Scale

Problem Risk

Mrs. Elizabeth Baumiester's Antisocial Thinking Scale score is in the problem risk range. Problem risk scorers generally manifest a harmful disregard of, or violation of, the rights of others. Deceit (repeated lying and conning) and manipulation (scheming or plotting) are common. Other problematic factors include instigator (provoker), deceitfulness (theft), destruction of property and frequent rule (law) breakers. Consider either outpatient or inpatient Cognitive Behavioral Therapy in an interdisciplinary treatment plan. Rather unique difficulties often include deceitfulness (lying, denial, etc.) and irresponsibility. Antisocial thinking will likely worsen if not included in *Mrs. Example* treatment plan.

Violence Scale

Problem Risk 70-89%

Mrs. Elizabeth Baumiester's Violence Scale score is in the problem (70 to 89th percentile) range. Problem risk scorers can be controlling, inconsiderate, unruly and abusive. They need to learn positive alternatives to anger

and violence. Recommendations: Anger management classes teach participants to recognize, reframe and then manage their anger before it escalates into violence. Psychotherapy (e.g., Cognitive Behavioral Therapy, Couples Therapy or Family Therapy, etc.) is also an effective treatment for aggressive and violent problems. Outpatient group counseling is affordable and effective.

Stress Management Scale

Moderate Risk 43%

Mrs. Elizabeth Baumiesters Stress Management Scale score is in the moderate risk (40 to 69th percentile) range. Mrs. Example’s adequately manages the stress that she experiences in her life. For background, stress management skills, when lacking, are now taught in stress management classes. There are also many good “do it yourself” stress management books and articles in local bookstores and libraries. Without intervention or treatment early stage stress management problems will likely worsen. Bibliotherapy or stress management classes (if available) might be considered.

SIGNIFICANT ITEMS. The following self-report answers help in understating Mrs. Example’s situation.

ALCOHOL

- 13. Family concerned about drinking.
- 46. Needs help to overcome drinking.
- 56. Been told an alcoholic.
- Additional: #2, 7, 26, 42, 49, 71
- 104, 113, 114.

SUBSTANCE USE DISORDER

- 17. Drinks more than intended.
- 23. Desire to control substance use.
- 28. Persistent cravings for substance.
- Additional: #34, 47, 111.33, 72, 75, 78,

DRUG

- 4. Been told has a drug problem.
- 87. Uses and abuses drugs.
- 97. In treatment for drug problem.
- Additional: #9, 15, 32, 44, 76
- 99, 106.

VIOLENCE

- 5. Yell, throw and break things.
- 10. Tries to get even.
- 27. Violent temper tantrums.
- Additional: #22, 33, 40, 53.

SUBSTANCE USE DISORDER SEVERITY

DSM-5 Substance Use Disorder **severity** is determined by the number of the eleven symptom criteria endorsed by Mrs. Example. When “none or one” criteria are endorsed (admissions) the offender **Does not meet substance use disorder criteria**. When “two or three” symptom criteria are endorsed substance use disorder severity is classified **mild**. **Moderate** severity is defined by the endorsement of “four or five” of the symptom criteria. A **severe** substance use disorder is identified by the endorsement of **six or more** of the eleven symptoms or criteria.

Recommendations: _____

Staff Signature

Date

DQ Answers

1- 50 FTTFTTTFFF FFFFFFFFFT FTTTTFTTF FTTFFTTFF FTFFFFTTF
 51-100 FFFFFFFFFT TFFTFFFTF FFFTFTFTT TTF311232 1213322131
 101-137 3211313233 2123243141 4424424444 4143444