

Alcohol Dependence Scale (ADS)

BRIEF DESCRIPTION

The ADS provides a quantitative measure of the severity of alcohol dependence consistent with the concept of the alcohol dependence syndrome. The 25 items cover alcohol withdrawal symptoms, impaired control over drinking, awareness of a compulsion to drink, increased tolerance to alcohol, and salience of drink-seeking behavior. The ADS is widely used as a research and clinical tool, and studies have found the instrument to be reliable and valid. The printed instructions for the ADS refer to the past 12-month period. However, instructions can be altered for use as a outcome measure at selected intervals (e.g., 6 months, 12 months, 24 months) following treatment. Use of the ADS has been reported mostly for clinical adult samples, however, studies have used the instrument in general population and correctional settings. A French language translation is available. The ADS has been found to have excellent predictive value with respect to a DSM diagnosis. Moreover, the ADS yields a measure of the severity of dependence that is important for treatment planning, especially with respect to the intensity of treatment. In addition to the questionnaire version of the ADS, a computer-administered version is available as part of the Computerized Lifestyle Assessment (Alcohol Module).

TARGET POPULATION

- Adults
- Adolescents

Groups for which this instrument might be especially helpful?

The ADS can be used in wide variety of settings for screening and assessment of alcohol dependence. Several studies have used the ADS with adolescents.

ADMINISTRATIVE ISSUES

Number of items: 25

- Format(s): Pencil-and-paper self-administered
- Interview
 - Observation
 - Computer self-administered
 - Other

Time required for administration: 5 minutes

Administered by: *Self*

Training required for administration? yes no

Comments: *Only basic training needed*

SCORING

Time required to score/interpret: *5 minutes*

Scored by: *Administrator or by computer*

Computerized scoring or interpretation available? yes no
(*as part of the Computerized Lifestyle Assessment*)

Norms available? yes no

Instrument normed on subgroups? yes no

Which groups? *Various treatment samples*

PSYCHOMETRICS

Have reliability studies been done? yes no

What measure(s) of reliability was used?

Test-retest

Split half

Internal consistency

Have validity studies been done? yes no

What measures of validity have been derived?

Content

Criterion (predictive, concurrent, "postdictive")

Construct

Comments: *Factor analysis has been done.*

CLINICAL UTILITY OF INSTRUMENT

Since the ADS can be completed in approximately 5 minutes, it can be used for screening and case finding in a variety of settings including health care, corrections, general population surveys, workplace, and education. A score of 9 or more is highly predictive of DSM diagnosis of alcohol dependence. Guidelines are given for using the ADS with respect to treatment planning, particularly with respect to the level of intervention (e.g., American Society of Addiction Medicine Placement Criteria).

RESEARCH APPLICABILITY

The ADS can be used for basic research studies where a quantitative index is required regarding the severity of alcohol dependence. For clinical research, the ADS is a useful screening and case-finding tool. It is also of value with respect to matching clients with the appropriate intensity of treatment, and for treatment outcome evaluations.

SOURCE, COST AND COPYRIGHT ISSUES Copyright: yes no
Cost: \$15.00 for kit with users guide and questionnaires

Source: Harvey Skinner
Department of Public Health Sciences
McMurrich Building
University of Toronto
Toronto, Ontario
Canada M5S 1A8
Phone: 416-978-8989
E-mail: harvey.skinner@utoronto.ca

Cost/Source of computerized scoring:
*Contact Multi-Health Systems regarding the
Computerized Lifestyle Assessment:*
1-800-456-3003 (US)
1-800-268-6011 (Canada)

SOURCE REFERENCES Skinner, H.A. & Horn, J.L. (1984). *Alcohol Dependence Scale: Users Guide*. Toronto, Canada: Addiction Research Foundation.

Skinner, H.A. & Allen, B.A. (1982). Alcohol dependence syndrome: Measurement and validation. *Journal of Abnormal Psychology*, 91, 199-209.

SUPPORTING REFERENCE Connors, J.P., Young, R.McD., Williams, R.J. & Ricciardelli, L.A. (2000). Drinking restraint versus alcohol expectancies: Which is the better indicator of alcohol problems? *Journal of Studies on Alcohol*, 61(2), 352-359.