The AC-OK COD Adolescent Screen
(Mental Health, Trauma Related Mental Health Issues & Substance Abuse):
What a Difference 5 Minutes can Make

Developed By:
Andrew L. Cherry, DSW, ACSW
Oklahoma Endowed Professor of Mental Health
University of Oklahoma, School of Social Work, Tulsa Campus,
OU OK-COSIG Project Evaluator
4502 E. 41st St. Suite 3J08
Tulsa, OK 74135-2512
Office 918-660-3363
ALCHERRY@OU.EDU

Mary E. Dillon, Ed.D, MSW
Adjunct Faculty
University of Oklahoma, School of Social Work, Tulsa Campus
OU OK-COSIG Associate Evaluator
Tulsa, OK
Background on the AC-OK-COD Adolescent Screen.

As you are aware, psychosocial scale development is a long and slow process. To develop a set of questions that can be used as a screen that are theoretically based on the symptoms associated with mental health and substance abuse especially among children and adolescents can take years, if done right. Currently the GAIN and the T-ASI are the best assessment available. But, as you know there are no screens available other than the AC-OK Adolescent COD Screen. This adolescent screen is based on an adult version which has high psychometric properties (the AC-OK Screen for Co-Occurring Disorders—Mental Health, Trauma Related Mental Health Issues & Substance Abuse).

In terms of validity, the AC-OK Adolescent COD screen does elicit responses from children and adolescents that reveals mental health, substance use disorders, and trauma. It also elicits the similar response patterns in children and adolescents from different locations in the U.S.

At this point in its development, the AC-OK Adolescent COD screen is usable as a screen in an evaluation or clinical setting. The data gather from children and adolescents here in Oklahoma, Florida, and the study by Hornby Zeller Associates in Maine, suggests the screen has been shown to be useful in clinical settings. Based on clinician feedback and a review of the screens completed with the children, the AC-OK Adolescent COD screen seems to be an effective way to screen and explore these issues with children. The screen used with 128 adolescents. The reliability for the substance abuse subscale was very good (Alpha = .82) and the mental health subscale was also very good (Alpha = .83).

It is reported that children and staff have respond positively to the use of the screen. Even so, there is a great deal of work that needs to be done before I have the confidence in the AC-OK Adolescent COD Screen that I have in the much better tested adult version of the screen.

I need to continue to test the screens psychometrics. If you could help in this process I would appreciate it. Let me know if you can help, alcherry@OU.edu.
AC-OK-COD Adolescent Screen

Gender: _____          Age: _____________           Last grade completed_____________

Read as: During the past year have you:

1. Felt really sad, lonely, hopeless; stopped enjoying things, wanted to eat more or less,
had problems sleeping, or doing what you need to at home or at school.? □ Yes □ No
2. Heard voices or seen things that others don't hear or see? □ Yes □ No
3. Drink alcohol or used other drugs more than you meant to? □ Yes □ No
4. Burned or cut yourself? □ Yes □ No
5. Have you experienced a very bad thing happen (a traumatic event) where you continue to feel scared, worried, or nervous or even had nightmares that bothered you after it was all over? □ Yes □ No
6. Tried to stop drinking alcohol or using other drugs, but couldn't? □ Yes □ No
7. Been prescribed medication for your feelings? □ Yes □ No
8. Got in trouble with the law, school, or parents, or lost friends because of your drinking alcohol or using other drugs, and continued to use? □ Yes □ No
9. Drink alcohol or used other drugs to change the way you feel? □ Yes □ No
10. Had thoughts about hurting yourself or wanting to die? □ Yes □ No
11. Tried to kill yourself? □ Yes □ No
12. Have you ever been afraid of your parent, caretaker or a family member? □ Yes □ No
13. Have you ever been hit, slapped, kicked, touched in a bad way, cursed at, yelled at or threatened by someone? □ Yes □ No
14. Changed your friends or planned your free time to include drinking alcohol or using other drugs? □ Yes □ No
15. Needed to drink more alcohol or use more drugs to get the same buzz or high as when you first started using? □ Yes □ No
**Instructions:** OK Adolescent Screen

“I’m glad you called (or came in); let’s see how I can help. In your own words, what is going on, OR can you tell me a little about why you called (or came in) today?”

“In order to find the best services for you, I’d like to ask you a few short yes or no questions to see if there is anything we may have missed. There are no right or wrong answers and these questions may or may not apply to your situation. Is this okay with you?”

- This screen should be used when a person first contacts the agency for services.
- This screen is only a tool to help identify potential problem areas which may need further assessment. Please note: **This is NOT a diagnostic tool and should not be used as an assessment.**
- Please read each question *exactly* as written in the *order* provided.
- If a potential crisis is identified during the screening, please follow your agency protocols immediately to assess for lethality and provide appropriate intervention.
- Positive indicators (one “YES” answer), in any of the three (3) domains indicates that an additional assessment(s) is needed in that domain.

**Scoring:** Remember, one (1) “Yes” answer on any of the three (3) domains (Substance Abuse, Mental Health, and Trauma) indicates that an additional assessment(s) is needed in that domain.

Substance Abuse: 3, 6, 8, 9, 14, 15

Mental Health: 1, 2, 4, 7, 10, 11

Trauma  5, 12, 13

**Reading level of Screen:**

Flesch Reading ease: .76

Flesch—Kincaid Grade Level: 6

*The AC-OK-COD Adolescent Screen is copyrighted scale. Commercial use of the AC-OK-COD Adolescent Screen is prohibited. The screen is available without charge to researchers, clinicians and agencies serving people with a co-occurring disorder with the compliments of the author. Contact me at alcherry@OU.edu to receive a copy.*