

July 19, 2016

Superior Court
Snohomish County Courthouse
3000 Rockefeller Avenue M/S 502
Everett, WA 98201-4046

**Re: Clinical Alcohol Assessment and Recommendations for Aaron Hanson
(DOB – 07/20/1977)**

To whom it may concern:

I performed a Clinical Alcohol Assessment for Mr. Hanson in reference to his child custody proceedings in Snohomish County. This assessment included a 60-minute clinical interview by telephone, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- An Alcohol Use Disorders Identification Test (AUDIT)
- A general anxiety/depression screening
- Collateral Information Review -10 signed character reference letters
- A collateral interview with Kinshasha Jackson
- A review of various documents provided by Kinshasha Jackson

The following items provide a summary of the screening results, my diagnostic opinion and professional recommendations:

MAST: score = 1 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use, last use reported as the first 2 weeks of May, 2016

AUDIT: score = 1 / *NEGATIVE SCREEN*; scores of 8 or more indicate *hazardous use*, scores of 15 or more in men indicate *moderate to severe* disorder present

Elevated Alcohol Use Risk Factors Found:

- ☒ previous legal history – one DUI reported 2007
- ☐ severity of incident – no legal records available but 9-year history without new legal incident mitigates risk from a hazardous use/impaired driving perspective
- ☐ anxiety/depression/mental health – unsubstantiated concerns expressed by Ms. Jackson (reported texts with suicidal references and alcohol)
- ☐ other substance use – none found or reported by collateral sources
- ☐ family history – none reported by collateral sources
- ☐ prior treatment history – *Positive Choices* at Alpine Recovery – 2008 for “mild disorder” / given timeframe without new legal incident this history mitigates risk
- ☐ peer influences– Ms. Jackson reports significant factor, unable to substantiate
- ☐ work environment – none found

- ☐ contraindicated prescription use – none found or reported by collateral sources
- ☐ general health problems – none found
- ☐ current family stress – stress over court process and loss of son but unable to substantiate this as a definite alcohol use risk

Summary - 1 of 11 risks/concerns

DSM - 5 Alcohol Use Symptoms:

- ☐ Use beyond intention – not found by direct or indirect questioning
- ☐ Persistent desire or unsuccessful efforts to reduce/quit use – not found
- ☐ Substantial time spent obtaining, using, or recovering from use – not found
- ☐ Strong craving/desire – not found
- ☐ Failure to fulfill a major role (work, home, school) – denies/ not found
- ☐ Use despite recurrent social/interpersonal problems - not found
- ☐ Important social, occupational, recreational activities relinquished – not found
- ☐ Physically hazardous use – 2007 DUI but pattern of hazardous use not found
- ☐ Continued use despite knowledge of contra physical or psychological condition – not found
- ☐ Tolerance – not found by direct or indirect questioning
- ☐ Withdrawal symptoms – not found by direct or indirect questioning

Summary - 0 of 11 symptoms indicated by self-report of Mr. Hanson during clinical interview, Ms. Jackson disputes many of these items but they are difficult to substantiate in an objective manner that clinically confirms a positive symptom

Interview of Ms. Jackson and review of collateral information provided by her:

Ms. Jackson, as the court is probably already aware, is convinced that Mr. Hanson is an “alcoholic” and that he is a “binge drinker”. She stated that he drinks with most of his friends that made the court declarations (character references I reviewed). She also shared a letter written by a friend who knows Mr. Hanson and which confronts Mr. Hanson at a number of points about his excessive use of alcohol. Ms. Jackson also shared four separate text messages which have implied and direct references to Mr. Hanson abusing alcohol. Ms. Jackson’s statements and “evidence” in the form of texts and her friend’s letter raise concern but given the format they were presented in that they do not provide evidence that is of high forensic value. This is not to say the references were necessarily fabricated by Ms. Jackson but they were not captured in a form that most professionals could regard as indisputable.

Ms. Jackson also provided four Facebook photos of Mr. Hanson that appear to be actual images from his Facebook profile. These photos show Mr. Hanson casually using and making references to use of alcohol and associating with others who do. Again, these raise concern, but they are not indisputable signs of any of the 11 signs and symptoms defined by the DSM-5 alcohol use criteria.

Clinical Interview/Summary: Mr. Hanson’s written screenings and clinical interview provided no indication of an alcohol use disorder at any level (mild, moderate or

severe). He reported his normal use of alcohol (prior to abstaining since around May 7, 2016) as 2-3 drinks on 1-2 occasions per week. He reported no difference in the amount consumed if he was attending a special event or celebration.

Mr. Hanson and I discussed his 2007 DUI arrest, his general use of alcohol, and his decision to stop using alcohol. Arresting officer reports are no longer available for corroboration of his 2007 DUI and I did not find any of Mr. Hanson's description providing indications or suspicion of a DSM-5 alcohol use diagnosis at the time. Review of treatment history subsequent to the DUI in 2007 indicates that the program he attended was for the treatment of a *mild* disorder (alcohol). Ultimately his completion of the program may have helped him avoid a recurring impaired driving incident. Attendance at programs for mild disorders are generally considered as a reliable basis to conclude that one had a bona fide alcohol use disorder from a DSM-5 perspective.

Mr. Hanson's decision to quit drinking alcohol this past May was reported simply as a way to simplify the custody proceedings. He denied this choice having anything to do with experiencing negative consequences from his use of alcohol. Further, Mr. Hanson states that he has a number of character witnesses who would be willing to testify in court that he is not inclined to abuse alcohol.

I read over signed letters from 10 individuals who wrote to the court on Mr. Hanson's behalf and found no remarks about him having problem alcohol use. While I would not expect to find such remarks in letters of support sought by Mr. Hanson I believe they are potentially valuable to the court as it tries to draw accurate conclusions about Mr. Hanson's use of alcohol. This is a substantial number of character witnesses and Mr. Hanson says he can produce more and that many would be willing to vouch for him under oath.

In conclusion, Mr. Hanson's true condition is difficult to discern with limited and conflicting information and unsubstantiated collateral claims. One could imagine motives for both sides in this case to be less than truthful.

Fortunately, Mr. Hanson has made relevant claims which I believe should be verified in order to draw a fair conclusion on a difficult case.

DSM-5 DIAGNOSIS in Reference to Substances: Z03.89 (suspected substance use condition not found); condition may be ruled out by alcohol testing as indicated below

Recommendations to the Court:

- 1) Alcohol Testing for Current or Ongoing Use – random use of EtG testing to determine if Mr. Hanson is currently using alcohol, recommend 6 months testing period, any positive test results should be interpreted by a professional laboratory (employs a medical review officer) in order to distinguish between inadvertent environmental offenses and intentional consumption of alcohol; any bona fide determination by a lab that Mr. Hanson has been drinking would cause this

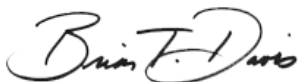
evaluator to conclude that at the very least a *mild alcohol use disorder* probably exists and possibly one of greater severity, which could only be accurately determined through an extended period of treatment and monitoring;

- 2) Alcohol Testing for Use Since May – conduct a one-time EtG hair or fingernail test (90 day look back period) to aid in the verification of Mr. Hanson’s claim that he has not been drinking since early May, 2016; do not use this test until August 20 or later, use a professional lab (employs a medical review officer) that can advise of any bona fide determination Mr. Hanson has been consuming alcohol, such a conclusion would cause this evaluator to conclude that at the very least a *mild alcohol use disorder* probably exists and possibly one of greater severity, which could only be accurately determined through an extended period of treatment and monitoring;
- 3) No formal treatment recommended without substantiation of a current alcohol use order (items #1, #2 above) or other information or occurrence that objectively indicates impaired use of alcohol by Mr. Hanson;
- 4) Obtain Sworn Testimony of Key Individuals (this recommendation may be of limited value to the court as the testimony of friends in child custody cases often lack objectivity and may contain substantial psychological motivations on the part of the individual to consciously or unconsciously distort “facts”)
 - a) Friend of Ms. Jackson’s who purportedly wrote a letter to Mr. Hanson about his alcohol use
 - b) Interview of various individuals who Mr. Hanson states can vouch for his non-problematic use of alcohol
 - confirm that Mr. Hanson has not been observed consuming alcohol since mid-May of 2016.

If the court possesses additional information about Mr. Hanson’s use of alcohol that might impact the outcome of this assessment, I would be happy to review it and consider appropriate modifications or amendments to the present report.

Thank you for the opportunity to assist the court, Mr. Hanson, and yourself in this important matter.

Sincerely,



Brian T. Davis, LISW-S, SAP
LIC# I-7948
cc: Aaron Hanson

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Diagnostic Conclusions / Limitations: Directions Counseling Group provides Clinical Alcohol Assessments based on objective and standardized screenings and interviewing methods as well as self-reported information. Clinical conclusions are made to the best of the professional's ability with data on hand at the time of the assessment. Expanded assessments which involve additional background research, collateral information and third party verification can be provided as an additional service upon request.