#### Intervention in Lieu of Conviction Evaluation

For The Honorable Judge Kathleen A. Aubry The Wyandot County Court of Commons Pleas

**Client: Dominic J. Lohry** 

Case #: 16 CR 0082 (DOB - 12/30/1991)

Prepared by Ryan P Smith MSW, LISW-S, LICDC, SAP August 31, 2016

# **Referral & Charges**

Dominic J. Lohry is a twenty-four-year-old, single male who was referred to Directions Counseling Group by his attorney, Eric W. Dysert, for an Intervention in Lieu of Conviction Evaluation. Mr. Lohry is charged with one count of aggravated possession of a controlled substance, a felony of the fifth degree.

Mr. Lohry has no prior record of felony or misdemeanor convictions except for his charges of misdemeanor possession, paraphernalia, and reckless operation charges which he received concurrent to his aggravated possession of a controlled substance charge. He is currently released on bond and residing at 710 Mount Auburn Court, Worthington, Ohio, while he awaits further court proceedings. This case is in the court of the Honorable Kathleen A. Aubry, Judge in the Wyandot County Court of Common Pleas.

This evaluation is pursuant to Section 2951.041 of the Ohio Revised Code. Accordingly, the purpose of this evaluation is to determine whether the defendant had a substance use disorder and:

- That substance use was a factor in the commission of the alleged offense;
- Whether the granting of an intervention in lieu of conviction status would demean the seriousness of the crime;
- Whether rehabilitation with treatment would substantially reduce the likelihood of future crime.

(In the case that an ILC is recommended an intervention treatment plan is also required as part of Section 2951.041 ORC and will be supplied.)

#### **Evaluation Procedure, Release of Information, & Informed Consent**

On August 22, 2016, I had a 120-minute session with Mr. Lohry to conduct a comprehensive ILC assessment. The purpose of the evaluation was explained to Mr. Lohry, and he signed consent for this evaluation and consent for the release of this information to his attorney and to the court. He is fully aware that by signing this he has waived his right to keep the evaluation information confidential and that his attorney and the court will be reviewing this evaluation.

For the occasion of his evaluation, Mr. Lohry was on time, was appropriately dressed, was alert, and oriented to person, place, and time. Mr. Lohry appeared to be a reliable historian regarding the events surrounding his case. His mental status exam found no delusional, psychotic or other psychological features that are likely to inhibit his ability to give an accurate account of his personal history and events surrounding his current charge.

### **Background & Family Relationships**

Mr. Lohry was born on December 30, 1991 near Youngstown, Ohio, to parents, Frank (father) and Sonya (mother). Mr. Lohry shared that his father was 18 years old and his mother 16 years old when he was born. His parents separated 3 years later. He lived with his mother during elementary school and shared that he never felt close to her. Beginning at age 12, Mr. Lohry lived with his maternal grandparents, Phil and Tonya. Mr. Lohry has one half-sister, age 13. Mr. Lohry stated his father owned and operated a construction company, and his mother worked in a GM factory. Mr. Lohry stated: "As a child I was very aware of how strange my parents' situation was because my grandparents were the ones who showed up at all school functions. I wished I had had a more normal childhood, and I think I grew up faster than peers because he was surrounded/raised by people much older."

### **Academic History & Extracurricular Activities**

Mr. Lohry attended Bonham elementary school in Niles, Ohio and shared that he had what he considered a "pretty typical" experience. Mr. Lohry appears to have excelled at school and in academic settings in general. He reported having friends throughout elementary school, but shared that he "never had really close friends".

Mr. Lohry attended Niles' Junior High School for grades 6<sup>th</sup> through 8<sup>th</sup>. He shared that his interest in school was minimal except for his involvement in band which was the one thing to which he looked forward and that his school had air conditioning.

Mr. Lohry attended high school at Niles High school. He began taking college classes at Kent State University his sophomore year and his senior year of high school he was taking all college courses and returned to high school only to participate in band activities.

Mr. Lohry graduated from Niles high school in 2010 and enrolled in The Ohio State University in September 2010. Mr. Lohry's original plan was to study veterinarian science as a pre-vet major. He did well academically his freshman year of college and was heavily involved in social/recreational programming through the veterinarian department. Toward the end of his freshman year and into his sophomore year, he discovered that there was aspect to the veterinarian program that he found uncomfortable, and he switched his major to philosophy and Chinese language. He graduated from The Ohio State University in 2014 with a bachelor in philosophy and Chinese language.

# **Employment History**

Mr. Lohry began working at age 14 helping his father on various construction projects during the summer. Mr. Lohry shared that he would work with his father when school was not in session but that he did not hold any employment while in school or while at college. Following his graduation from college in 2014, he moved home for several months due to the lack of employment. He returned to Columbus, Ohio, to live with friends and was hired as picker for Abercrombie & Fitch. He worked three 13-hour days (Fridays, Saturdays, and Sundays) for 5 weeks before being hired by True World Foods, LLC to pack products. He was then offered to transfer to sales which he readily took. Mr. Lohry stated that once in the sales position he found it "difficult to meet the stretch goals...I would be so worried that it would keep me up at night." Then in March 2016 the company's accountant left unexpectedly, and he moved into that role. His current schedule is Monday thru Friday from 7:00am to 3:30pm.

# **Recreational/Social History**

Mr. Lohry shared that he has always spent his free time painting, drawing, and playing music. He was spent significant amount of time as a disc jockey in which companies have flown him to Manhattan for a week at a time to DJ and showcase music. He described himself as having "a compulsive need to be artistic" and that leaving college

was stressful because he wasn't sure how to have an artistic outlet not being in school. Mr. Lohry stated that he had been "a part of the rave scene since 14". Most of his friends are into rave/club music as well, and he acknowledged that drug use had always been a part of that past-time and peer group. He summarized his experience and past beliefs as: "I had always had myself convinced that I needed to smoke pot in order to be in the right headspace to do music well."

### **Medical & Mental Health History**

Mr. Lohry is 5'10" tall and weighs 240 pounds at present. In April 2016 he estimated that he weighed 185 pounds but has gained weight due to increased alcohol use and food after abstaining from drug use. Over the past 3 weeks he has begun walking more, packing work lunches, and eating more conscientiously in order to lose weight. He denied having any known medical problems, diseases, or allergies. Mr. Lohry reported that there is a family history on both sides of gastrointestinal problems and denied knowledge of any other conditions.

Mr. Lohry is not taking any prescription medication at present time and denied having a recent history of doing so. He received speech therapy as a young child and has some mild speech difficulties at present, especially when feeling moderate to severe stress. He began experiencing symptoms of depression in 9<sup>th</sup> grade, experimented with different medications before ultimately prescribed Trazadone. He reported taking his medication regularly and as prescribed until his senior year of high school when he abruptly stopped. He did not take any prescription medication throughout college. More recently, Mr. Lohry has been experiencing symptoms of depression. From April 2016 thru July 2016, Mr. Lohry found himself sleeping all day when not working, returning home and sleeping right after working, and having a moderately depressed mood. "Looking back now I think that depression has always been with me just that in college I was so busy and using drugs that I didn't realize it."

# **Legal History**

Aside from the current charge being considered by the court and the misdemeanor charges acquired at the same time, Mr. Lohry has no other history of legal charges or convictions of any kind.

# **Substance Abuse History**

Alcohol – Mr. Lohry's first use of alcohol occurred at age 18 right after his high school graduation. Mr. Lohry shared that he "got drunk at a bonfire" and that the experience was "so awful" that he did not drink again until he was at college that fall. In college, Mr.

Lohry shared a dorm with 9 other people, half of whom were a year older. He reported drinking socially at parties on a Friday or Saturday evening and his alcohol use became regular during his sophomore year. He did share, however, that his overall alcohol use decreased in frequency and intensity once he began smoking cannabis. He denied that alcohol use had ever caused any personal problems with school, family, or close friendships. He also denied ever experiencing alcohol-related memory impairment.

Over the past two years and prior to being stopped, Mr. Lohry described his alcohol use as being 5-6 standard drinks on 2-4 occasions per month. His drinks of choice were wine or lemonade flavored alcohol. Subsequent to being stopped, his alcohol use increased to 5-6 standard drinks on Fridays and Saturdays every weekend. He also began drinking 2 glasses of wine every day after work. He acknowledged that his increased alcohol use was to deal with the emotional stress from work and his legal charges and to replace his drug use from which he was abstaining.

Mr. Lohry stated that he has not consumed alcohol since his arraignment on August 1, 2016. He denied experiencing any withdrawal symptoms after stopping, and I did not notice any post-acute withdrawal symptoms during our 120-minute interview.

Cannabis – Mr. Lohry was 17-18 years old when he first experimented with cannabis. His use of cannabis became regular during his freshman year of college and increased to daily use during his sophomore year of college when he discovered that a suite mate sold it. Mr. Lohry stated that he found that cannabis helped "to quiet my racing thoughts" and eased emotional distress as well as being enjoyable. He described his experience as follows: "I never enjoyed drinking nearly as much as I enjoyed the high that came from smoking."

Mr. Lohry shared that during his sophomore year he began smoking cannabis every day before going to sleep. Within the month or two his use increased to "all the time, anytime I was at home". He first experimented with hash and "dabs" during his junior year of college and shared that butane oil hash (commonly referred to as "dabs") became his preferred method of cannabis consumption after moving in with friends in the fall of 2014.

Mr. Lohry shared that after experimenting with concentrated cannabis, his tolerance increased such that it was too expensive to use regular marijuana because of the amount needed to reach the same experience of intoxication. On an average day he would vaporize dabs on 4-5 occasions, his use more frequent on weekends. He acknowledged experiencing some loss/impairment in his short-term memory, problems

in tracking conversations, and increased difficulty with emotional distress as cannabis was a primary coping strategy.

Following his initial receipt of charges, he abstained from using cannabis experiencing psychological withdrawal symptoms: increased agitation, difficulty sleeping, and increased mood disturbance. Mr. Lohry's last use of cannabis (i.e. dabs) was during the first week of July during which while DJing a party he became drunk and consumed cannabis offered by a friend who was unaware of his legal charges. He reported increased feelings of depression and increased sleep problems since abstaining from cannabis use and acknowledged that he replaced his cannabis use with increased alcohol use. Mr. Lohry also acknowledged experiencing infrequent desires for cannabis since abstaining.

MDMA – Mr. Lohry acknowledged first trying MDMA during his sophomore year of college. At his peak he never used more than twice monthly. Peaks times tended to occur during February and March along with October thru November when music concerts became prominent in Ohio and nearby states. Mr. Lohry denied ever finding himself being preoccupied with or craving ecstasy but shared that he never planned to stop using it either. He shared that he found the euphoria enjoyable and that the drug would help him overcome his anxiety of being around a crowd. Mr. Lohry did acknowledge that after ingesting ecstasy he would feel "miserable" for the next two days which would impair his ability to be functional in his day-to-day life for that period of time. His last use of between February and March 2016.

LSD – Mr. Lohry experimented with LSD for the first time between his sophomore and junior year of college. He would use approximately 2-4 hits at a time on one occasion every other month. Mr. Lohry stated, "I used LSD as a reset switch…whenever I'd get really stressed about a bunch of things." He clarified that he would use LSD to deal with any sort of emotional distress or stress that would stem from social situations. His last use of LSD was January or February 2016.

Psychedelic mushrooms – Mr. Lohry experimented with psychedelic mushrooms on one occasion and denied any subsequent use.

Other Substance Use – Mr. Lohry denied ever experimenting with cocaine, heroin, opioid medication, anxiolytic prescription medication or use of any inhalants. He shared that he did take a friend's Adderall medication to stay awake to study or function without sleep. He denied ever consuming stimulant medication in order to be intoxicated or experience euphoria.

### **Substance Abuse Screening Results & Explanation**

SASSI-3 - Mr. Lohry was administered the SASSI-3 to assess for substance abuse and substance dependence disorders. Mr. Lohry's SASSI-3 test results indicated a high probability for a substance dependence disorder. His scores were positive for rule #2 resulting in an overall *high probability* of a moderate to severe substance abuse disorder diagnosis. The SASSI-3 screening was administered with a lifetime frame of reference.

Mr. Lohry was also administered the DUDIT (Drug Use Disorders Identification Test) with a score of 26 which indicated severe substance use. This screening instrument was administrated with a past 12-month frame of reference.

Mr. Lohry was also administered the AUDIT (Alcohol Use Disorders Identification Test) with a score of 13. Scores of 8 or more indicate hazardous alcohol use. Scores of 15 or more in men indicate a moderate to severe alcohol use disorder. This screening instrument was administered with a past 12-month frame of reference.

# **Defendant's Account of the Alleged Offense**

Mr. Lohry reported that the alleged offense is one count of aggravated possession of a controlled substance, a felony of the fifth degree. His account of this offense is as follows:

On April 12, 2016, Mr. Lohry and two friends were pulled over for marked lanes on State Route 23 on route to Detroit, Michigan for a concert. Mr. Lohry stated that his car was searched and that the officer discovered dabs, an electronic vaporizer, and MDMA. Mr. Lohry stated that he had smoked dabs earlier that day in the car while waiting for a friend.

On August 1, 2016 Mr. Lohry agreed to a plea deal in regards to his misdemeanor charges. Mr. Lohry pled guilty to possession of a controlled substance and possession of paraphernalia and that his alcohol-related OVI charge was reduced to reckless operation. He was arraigned later that same day for the charge presently being considered.

#### Consideration of Each ILC Criteria in Section 2951.041

Mr. Lohry was evaluated pursuant to court order and to Section 2951.041 of the Ohio Revised Code, Intervention in Lieu of Conviction. Accordingly, I will interact with and comment on the following criteria:

 As to: whether Mr. Lohry's use of substances was a factor in the commission of the alleged offense

It appears clear to this evaluator that Mr. Lohry's abuse of alcohol, cannabis, and MDMA was directly tied to his charge of aggravated possession of a controlled substance. Mr. Lohry was engaged in daily abuse of cannabis, binge pattern of alcohol use, and had an extended pattern of abusing MDMA at musical concerts. His clinical interview makes clear that his regular substance abuse was causing clinically significant impairment to his role functioning and decision-making skills. At the time of his charges Mr. Lohry was engaging in daily cannabis use and abused alcohol on a weekly basis. Mr. Lohry's clinical interview, written screenings and substance use history reveals a clear psychological and even physical dependence upon cannabis and an abuse pattern of alcohol as well as an overall positive and accepting attitude toward and willingness to use of other illicit substances. It is clear that Mr. Lohry's substance use was a factor in the commission of the alleged offense.

 As to: whether or not the granting of an intervention in lieu of conviction would demean the seriousness of the crime

In his clinical interview, Mr. Lohry was able to discuss with some awareness of the negative impact his substance use has had on his life and present functioning. At the same time, Mr. Lohry appeared to maintain a favorable attitude toward his past substance use and appears to have just recently begin to gain insight into the abusive nature of his recent alcohol use and the impact his substance use has had on his overall mood.

It is my clinical judgment that the granting of an intervention in lieu of conviction would not demean the seriousness of the crime. In all likelihood the granting of an intervention in lieu of conviction and engagement with the treatment that will follow would serve to increase Mr. Lohry's awareness of the seriousness of his actions and the harmful nature of his substance abuse.

 As to: whether rehabilitation with treatment would substantially reduce the likelihood of future crime

Mr. Lohry meets DSM-5 criteria for multiple substance use disorder diagnoses. While he is presently abstaining from cannabis use, Mr. Lohry's present abstinence from cannabis appears to be primarily externally motivated. Additionally, he has experienced recent relapses to cannabis use (July 2016), has experimented with other illicit substances in the past 12 months, and has only recent abstained from alcohol use

which appeared to be excessive and abuse as well. All of these factors point to a high risk of future substance-related negative consequences. Mr. Lohry did express a desire to gain ongoing sobriety from illicit substance use, and it is my judgment that while his desire is genuine, Mr. Lohry does not have the necessary skills to maintain long-term sobriety from substance abuse as evidenced by his switching from cannabis to alcohol after being charge in April 2016.

Rehabilitation with treatment could provide Mr. Lohry with the necessary skills to gain and maintain a long-term sobriety from substance use as well as assess and address the role of depression which is likely to be a trigger to resumption of substance use. It is in that sense that rehabilitation with treatment would serve to substantially reduce the likelihood of future crime. It is clear to this evaluator that Mr. Lohry's level of awareness and insight into the harmful nature of his past substance abuse is at present insufficient to provide sufficient motivation, behavioral skills training, and relapse prevention to fully recover from his substance abuse.

Ongoing professional treatment is advised in order to assist Mr. Lohry acquire and practice new adaptive behaviors, work to end or change high risk peer relationships, and identify and pursue meaningful activities that are a replacement for drug using behaviors. It is this evaluator's professional judgment that substance abuse treatment would substantially reduce the likelihood of future criminal activity by introducing Mr. Lohry into a recovery program and providing him the skills training to be successful in pursuing prosocial and personally meaningful life goals.

#### **Summary of Professional Opinion**

Mr. Lohry meets all three criteria necessary per Section 2951.041 of the Ohio Revised Code to qualify for the granting of Intervention in Lieu of Conviction.

At present Mr. Lohry meets DSM-5 criteria for:

- F12.20 cannabis use disorder, severe
- F10.10 alcohol use disorder, mild; Rule out moderate alcohol use disorder
- F16.10 hallucinogen use disorder, mild

Provided an opportunity to engage in professional substance abuse treatment, it is this evaluator's clinical judgment that Mr. Lohry has a good prognosis of gaining necessary skills to continue and sustain his present abstinence from psychoactive substances. In summary Mr. Lohry meets full criteria for the granting of an Intervention in Lieu of Conviction status. The following items recommend a long term treatment plan outline corresponding to the ILC recommendation.

#### **Treatment Recommendations**

Accordingly, I recommend Mr. Lohry obtain the following services:

- Recommend Mr. Lohry participate in twice monthly outpatient substance abuse counseling with a licensed professional whose scope of practice includes substance abuse treatment and behavioral therapy for depression; outpatient counseling is recommended for a minimum of 9 months; recommendation includes agreement to sign a release of information for counselor(s) to contact Mr. Lohry's probation officer with treatment updates;
- 2. After completion of initial counseling, recommend Mr. Lohry attend monthly to quarterly follow-up monitoring sessions with the same professional substance abuse counselor until the counselor deems it appropriate to terminate counseling; frequency of monitoring may be tapered at counselor's discretion;
- 3. Random drug tests supplied to the court and the professional counselor
- 4. 4 meetings/month of SMART Recovery, AA or NA 12 step meeting attendance for duration of outpatient counseling; attendance should be documented and sent to court and counselor.
- Any subsequent substance-related legal charge or positive drug screen would be reason for the substance abuse counselor to consider an increased treatment recommendation of *Intensive Outpatient Treatment or Inpatient Treatment* at a substance abuse rehabilitative facility.

#### **Evaluator Credentials and Brief Professional History**

Ryan P. Smith, LISW-S, LICDC, SAP SW Lic. #I.1000155-S; CD Lic. #101182 cc: Eric W. Dysert, Attorney at Law

I am a Licensed Independent Social Worker performing direct services for individual clients as well as providing counseling for couples and families. My education was at The Ohio State University where I obtained a Bachelor of Arts in (2005) and Master of Social Work (2008). In 2010 I obtained an IC&RC (International Certification and Reciprocity Consortium) certificate as a Substance Abuse Professional (SAP) and IC&RC certification and a licensed independent chemical dependency counselor (LICDC). SAP certified providers are uniquely qualified to provide substance abuse assessments and recommendations for safety sensitive employees under Federal DOT rules (pilots, freight carriers, marina workers, pipeline workers, and transporters/handlers of hazardous materials). As such, I evaluate numerous employer-referred individuals as well as court referred individuals (commonly OVI charges) on a weekly basis. A resume and scope of practice will be provided at the court's request.