

August 4, 2016

Cathinea Daniels, Probation Officer
775 N. Ferdon Blvd,
Crestview, FL 32536

**Re: Clinical Alcohol and Drug Assessment for Saxon Brooks Babin
(DOB – 03/07/1998)**

Dear Ms. Daniels:

I performed a Clinical Alcohol and Drug Assessment for Mr. Babin in reference to his June 2016 paraphernalia charge in Okaloosa County. This assessment included a 45-minute clinical interview by telephone, and the administration of:

- A Michigan Alcohol Screening Test (MAST)
- A Drug Abuse Screening Test (DAST-10)
- A general anxiety/depression screening

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

MAST: score = 0 / *NEGATIVE SCREEN*; no direct or indirect indication of problem alcohol use,

DAST-10: score = 1 / *LOW LEVEL SCREEN*; scores of 1-2 suggest low-level problem substance use; point incurred was for drug use outside of a medical context (screen relative to life-long time frame of substance use)

Alcohol & Substance Use Risk Factors:

- ☐ legal history – denies previous history
- ☐ severity of incident – NA
- ☐ anxiety/depression/mental health – NA
- ☐ general health issues – NA
- ☐ exposure to trauma – NA
- ☐ use of liquor – NA
- ☐ other substance use – NA
- ☐ contraindicated prescription use – NA
- ☐ family history – none reported
- ☐ prior treatment history – NA
- ☐ negative peer influence – NA
- ☒ at-risk work environment – works as a bartender 3 days a week
- ☐ current stress (relational, work, etc.) – NA

Summary - 1 of 13 concerns

Clinical Interview/Summary: ALCOHOL – Mr. Babin's written screenings provided no indication of an alcohol use disorder at any level (mild, moderate or severe). He reported the extent of his drinking as being limited to 3-5 special occasions in the average year (holidays, celebrations). He reports that when he chooses to drink alcohol, he generally does not consume liquor and quantities cited are within NIAAA men's recommendations for "low-risk" drinking. After careful interview, his report seemed credible and I was unable to find any problem alcohol use signs or symptoms warranting diagnosis of an alcohol use disorder.

NON-PRESCRIPTION DRUG – Mr. Babin acknowledged only minimal use of marijuana on "a couple" of occasions in the average year (concerts, vacation). He was articulate regarding his reasons for not using cannabis on a more regular basis, citing financial reasons, fitness goals, and his commitment to overall personal advancement as deterrents. He denied experimentation or use of all other non-prescription substance use categories including: stimulants, hallucinogens, inhalants, and opiates. I found no part of Mr. Babin's report about non-prescription drug use suspect of minimization or deception.

PRESCRIPTION DRUGS COMMONLY MISUSED/ABUSED – Mr. Babin denied any recreational use of prescription medications which are prone to abuse including stimulant/ADD medications, narcotic painkiller medications, and benzodiazepines and sleeping medications. Furthermore, the interview did not reveal hesitation or discrepancy with written screenings which would suggest a problem with prescription medications.

SUMMARY – Following Mr. Babin's June 26 charge, he decided to discontinue the use of all cannabis products indefinitely. He made this decision referencing the current legal expense and stress of his current situation as main motives for abstaining. This, in the context of previously infrequent use, has proved to be an easy transition for him as he reports no cravings or relapses since making this decision.

DSM-5 DIAGNOSIS in Reference to Substances: Z03.89 (suspected substance use condition not found)

Treatment Recommendations: Having found no basis for a DSM-5 alcohol or drug use disorder, I am only recommending that Mr. Babin provide a urine drug screen analysis that is consistent with his reported abstinence. The screening should be provided alongside this assessment and should only be considered valid if it has been completed within 3 days of today's date.

If you or the probation office possess additional information about Mr. Babin's use of alcohol or drugs 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. Babin, and yourself in this important matter.

Sincerely,



Trevor C. Davis, CDCA

Cert.# 150427

Reviewed by Brian T. Davis, LISW-S, SAP LIC# I-7948

cc: Saxon Babin

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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.