# Summary of Measures

**Screening Session**

* Demographics
* Alcohol Use History
* DSM-5 Checklist
* Young Adult Alcohol Problems Test
* WHO-The Alcohol, Smoking and Substance Involvement Screening Test
* Symptom Checklist-90-Revised
* Intolerance of Uncertainty Scale
* Anxiety Sensitivity Index
* Distress Tolerance Questionnaire
* McMaster Family Assessment Device
* Multidimensional Personality Questionnaire Brief Form

**Intake**

* Recovery Environment Interview
* Penn Alcohol Craving Scale
* Alcohol Abstinence Self-Efficacy Scale
* Monthly Addiction Monitor
* Depression Anxiety Stress Scale-21
* Perceived Stress Scale
* Quality of Life Questions
* Dyadic Adjustment Scale
* Multidimensional Scale of Perceived Social Support

**Follow-up visit #1**

* Recovery Environment Interview-Check for Updates
* Penn Alcohol Craving Scale
* Alcohol Abstinence Self-Efficacy Scale
* Monthly Addiction Monitor
* WHO-The Alcohol, Smoking and Substance Involvement Screening Test
* Depression Anxiety Stress Scale-21
* Perceived Stress Scale
* Quality of Life Questions
* Dyadic Adjustment Scale
* Multidimensional Scale of Perceived Social Support
* Burden measure

**Follow-up visit #2**

* Recovery Environment Interview-Check for Updates
* Penn Alcohol Craving Scale
* Alcohol Abstinence Self-Efficacy Scale
* Monthly Addiction Monitor
* WHO-The Alcohol, Smoking and Substance Involvement Screening Test
* Depression Anxiety Stress Scale-21
* Perceived Stress Scale
* Quality of Life Questions
* Dyadic Adjustment Scale
* Multidimensional Scale of Perceived Social Support
* Burden measure

**Final visit #3**

* Burden Measure

**Real-time Data**

* Morning Daily Ecological Momentary Assessment Survey
* 3x Daily Ecological Momentary Assessment Survey
* 1x Daily 15-30 sec. Audio Survey via voice note messaging
* Phone Call Logs (Incoming and Outgoing)
* Text Message Logs (Incoming and Outgoing)
* Text Message Content (Incoming and Outgoing)
* GPS Location via MOVES Activity Diary Smartphone Application
* Sleep Quality via Beddit 3 Sleep Tracker
* Movement (Accelerometer) via Empatica E4 wristband & MOVES Activity Diary Smartphone Application
* Heart Rate via Empatica E4 wristband
* Galvanic Skin Response (GSR) via Empatica E4 wristband
* Skin Temperature via Empatica E4 wristband

**Locations Log**

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| Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  City: Madison Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Type:   * Work * School * Volunteer * Health Care * Home of Friend * Home of Family Member * Liquor Store * Errands (Ex: Grocery Store, Post Office, etc.) * Coffee Shop/Cafe * Restaurant * Park * Bar * Gym/Fitness center * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Check If Applicable:   * I’ve drank alcohol here before. * Alcohol is available here.   For Staff Only: E: P U M N  R: H M L N |  |

**RISKY LOCATIONS**

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| These are places participant is trying to avoid while in recovery because they are high risk. |
| **Location name:**  **Address:**  **Type of Place:**   * Home of Friend * Home of Family Member * Liquor Store * Coffee Shop/Cafe * Restaurant * Park * Bar * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   Check If Applicable:   * I’ve drank alcohol here before. * Alcohol is available here.   This place is…  Pleasant Unpleasant Mixed Neutral |

**Monthly Contacts**

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| **Phone Number:**  **Type of Relationship:**   * Spouse/Significant Other * Family- Parent Sibling Child Aunt/Uncle Cousin Other: * Friend * Co-Worker * Other: |
| **Have you drank alcohol with this contact?** Never/Almost Never Occasionally Almost Always/Always  **Would you expect them to drink in your presence?** Yes Uncertain No  **Drinking Status:** Drinker Non-Drinker Don’t Know    **Currently In Recovery from Alcohol/Other Substances:** Yes No Don’t Know  **Support Status:** Supportive Unsupportive Mixed Neutral  **Participant’s experiences with contact are typicall**y…….. Pleasant Unpleasant Mixed Neutral |

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| Emotionally Important Days-Recurrent |
| **Ask the participant to identify “emotionally important” days that put them at-risk to begin drinking again. The days participant identifies are recurrent days. Have participant identify days that will occur during their participation in the study (Next 90 Days).**  **Example Days:**   * **Holidays** * **Birthdays** * **Anniversaries (In particular, anniversaries that mark traumatic events-death of a loved one, major car accident, etc.…)** * **Sobriety Anniversary (milestones for alcohol or other drugs)** |
| **List Type of Day and Date Identified by Participant**  **Type:**   * Holiday: * Birthday: * Anniversary: * Sobriety Anniversary: * Other:   Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

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| Weekly Time-Periods |
| **Ask the participant to think about their typical week. Have the participant list each time-period during the day that puts them at increased risk to drink. These times are “risky” time-periods. In turn, are there any specific time-periods during the participant’s week that they can identify as protective, meaning they are confident that they would not drink during this time. Be sure to specify the time-period and day of the week that it occurs.** |
| **Type of Time-Period:**   * Work Hours * After Work Hours * School Hours * Weekends * Volunteer Activities * Fitness Activities * Church/Other Weekly Religious or Spiritual Event * Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   **Day of the week:**  **Time Period:**  **Is this time-period…**   * Risky * Protective |