

Addiction Severity Index - Crime module**ASI-crime**ACA Institution code

ACB Name:

ACC Date for interview
(YYYY-MM-DD)ACD Client code ACE Age ACF Sex (male=1 female =2)ACG Country of birth ACH Interviewer code Country code

Signature

Version 1.1 © 1999 Öberg, D., Sallmén, B., Kaplan, C., McMurphy, S.,
Ackerson, T., Krantz, L., Martens, P., Schlyter, F. & Turner, T.
The ASI-crime Module is free to be duplicated and used without alteration.The ASI-Crime module has been developed with support from the National Prison and
Probation Administration, the National Council on Crime Prevention and the National Board
of Institutional Care in Sweden. 1999-10-04**AC1 Background**

- How many times, if ever, have you done the following
(0=never, 1=1 time, 2=2-5, 3=6-25, 4=26-100, 5=101-1000,
6=more than 1000 times)
 - Which year did you do the following the first time (yyyy)
 - When was the last time you did the following (yyyy//mm)

Motive for last crime
- | | | | |
|---|------------------|---------------------|----------------|
| 4 | 1 = Impulse | 2 = Intention | 3 = Plan |
| 5 | 1 = Urgent needs | 2 = Safety | 3 = Acceptance |
| | 4 = Status | 5 = Self-fulfilment | |

Category**Code**

1	No. of times	2	Year of debut	3	Last time	Motive	4	-	5
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A Nuisance crimes

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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B Driving while intoxicated

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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C Major driving violations

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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Code

1	No. of times	2	Year of debut	3	Last time	Motive	4	-	5
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D Possession of drugs

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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E Dealing/trafficking of drugs

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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F Prostitution

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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G Forgery

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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H Economic/white collar crimes

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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I Shoplifting or other minor property crimes

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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J Burglary or other major property crimes

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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K Domestic violence crimes

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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L Sex crimes

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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Code

1	No. of times	2	Year of debut	3	Last time	Motive	4	-	5
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M Arson

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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N Weapons offense

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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O Property crimes including violence

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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P Serious violence resulting in death

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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Q Other violence against person

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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R Computer Crimes/Hacking

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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S* Environmental crime

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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T* Parole/probation violation

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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U* Contempt of court

1	<input type="text"/>	2	<input type="text"/>	3	<input type="text"/>	4	<input type="text"/>	5	<input type="text"/>
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V Other crimes

1 2 3 4 5

If other, specify

AC2a

What type of offense do you consider to be the main problem
(If unclear, ask the client)

Considering such a crime: 0 = No 1 = Yes

b Do you feel now that you are personally responsible for what you did

c Do you feel now that you had a right to do what you did

d Faced with the same situation today, would you have committed the same crime.

e Do you feel now that it is right for you to be punished for such a crime

AC3 0 = No 1 = Yes

Do you live with someone that:

A Uses illegal drugs

B Is involved in illegal activities

AC4

Of 5 closest friends how many (exclude family)

A Use illegal drugs

B Are involved in illegal activities

C Do **not** use illegal drugs and are **not** involved in any illegal activities

D If the client reports less than 5 people, indicate here the actual number of people that the client considers

AC5

How troubled and bothered are your family/relatives by your illegal activities
(0 = Not at all, 1 = Slightly, 2 = Moderately, 3 = Considerably, 4 = Extremely)

AC6

How important is it to your family/relatives that you get treatment or counselling for your illegal activities
(0 = Not at all, 1 = Slightly, 2 = Moderately, 3 = Considerably, 4 = Extremely)

AC7

How many days in the past **30** have you engaged in illegal activities

AC8

How many days in the past **30** have you experienced problems caused by your illegal activities

AC9

How many weeks in the past **year** have you been engaged in illegal activities

AC10

How many weeks in the past **year** have you experienced problems caused by your illegal activities

AC11

How much have you been troubled and bothered by these problems with illegal or criminal activities in the past 30 days

AC12

How important to you **now** is treatment or counselling for these problems with illegal or criminal activities

INTERVIEWER SEVERITY RATING

AC13

How would you rate the patient's need for treatment or counselling concerning illegal or criminal activities

CONFIDENCE RATING

AC14

Is the above information significantly distorted by:

A Patient's misrepresentation

B Patient's inability to understand

Comments: