

Chestnut Health Systems GAIN-SS Overview

General Overview

The 3- to 5-minute GAIN-Short Screener (GAIN-SS) is designed for three primary purposes:

- To serve as a screener in general populations to quickly and accurately identify clients whom the full 1.5- to 2-hour GAIN-Initial would identify as having 1 or more behavioral health disorders (e.g., internalizing or externalizing psychiatric disorders, substance use disorders, or crime/violence problems), which would suggest the need for referral to some part of the behavioral health treatment system. It also rules out those who would not be identified as having behavioral health disorders.
- 2) To serve as an easy-to-use quality assurance tool across diverse field-assessment systems for staff with minimal training or direct supervision.
- 3) To serve as a periodic measure of change in behavioral health over time.

The GAIN-SS is designed for self- or staff administration with paper and pen, on a computer, or on the web (for more information on the web application, please contact gaininfo@chestnut.org.). It can be easily converted to a scannable form or incorporated into existing instrument batteries or systems. Versions in different languages (such as Spanish) are also available.

Format

GAIN-SS responses are given in terms of the recency of the problem described in the questions: 3 = past month; 2 = 2 to 12 months ago; 1 = 1 + years ago; 0 = never. The number of past-month symptoms (number of 3s) is used as a measure of change; the number of past-year symptoms (number of 3s or 2s) is used to identify who is likely to have a current diagnosis; and the number of lifetime symptoms (number of 3s, 2s, or 1s) is used as a covariate measure of lifetime severity. The recency measures can also be combined to create course specifiers (e.g., early remission means having a lifetime problem but not in the past month; sustained remission means having a lifetime problem but not in the past year).

The GAIN-SS and related materials, including a Spanish-language version, are available for review on the internet at http://www.chestnut.org/LI/gain/GAIN_SS. Other translations are currently in progress and will be added to the website as they become available.

Summary of Psychometrics

Dennis, Chan, and Funk (2006) found that for both adolescents and adults the 20-item total disorder screener (TDScr) and its 4 5-item sub-screeners (internalizing disorders, externalizing disorders, substance disorders, and crime/violence) have good internal consistency (alpha of .96 on the total screener), were highly correlated (r = .84 to .94) with the 123-item scales in the full GAIN-I, had excellent sensitivity (90% or more) for identifying people with a disorder, and excellent specificity (92% or more) for correctly ruling out people who did not have a disorder.

A confirmatory factor analysis of the structure of the GAIN-SS (figure 1) shows that it is also consistent with the full GAIN model after allowing adolescent and adult path coefficients to vary and cross-loading paths between conduct disorder items with crime/violence items. The confirmatory factor analysis was slightly less accurate than the full-scale version in terms of the confirmatory fit index (CFI; .87 for the GAIN-SS vs. .92 for the full GAIN, where as the CFI approaches 1 the model fits the data better) and slightly more precise in terms of the root mean square error of approximation (RMSEA; .05 for GAIN-SS vs. .06 for the full GAIN, where as the RMSEA goes down there is less unexplained variance). This suggests that each of the subscreeners has good discriminant validity and that the total structure is consistent with the model used with the full GAIN.

Licensing

Licensing for any of the GAIN family of instruments, including the GAIN-SS, is \$100 for 5 years of use. To obtain a license please contact <u>gaininfo@chestnut.org</u> to request the necessary paperwork

Training Requirements

No formal training is required to use the GAIN-SS. Those who will be using and interpreting the screener can do so after reading the GAIN-SS Manual, available at http://www.chestnut.org/LI/gain/GAIN_SS/GAIN-SS_Manual_122006.pdf. CHS can also provide web training to interested organizations or individuals. For information on this web training and associated costs, please contact gaininfo@chestnut.org.

Users

The GAIN-SS is used by agencies that have a need for screening in a general population to quickly identify who is likely to have an internal, external, or substance use diagnosis. Current licensed users include probation and parole programs, welfare and human services departments, Student Assistance Programs, and Employee Assistance Programs. The GAIN-SS is also used as a part of a larger system of screening, referral, and treatment planning at specific behavioral health agencies focusing on treatment for substance use, mental health, or co-occurring disorders.

For additional information on the GAIN-SS, please contact <u>gaininfo@chestnut.org</u> or visit <u>http://www.chestnut.org/LI/gain/GAIN_SS/index.html</u>.