

manual for use and scoring of the MATE-Q 2.2

gerard schippers theo broekman



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MATE: Measurements in the Addictions for Triage and Evaluation

http://www.mateinfo.eu

Reference

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Preface

The MATE (Measurements in the Addictions for Triage and Evaluation) was developed because of the need for a set of assessment instruments that was developed specifically for use in Europe, is up-to-date, is conceptually and empirically supported, and can be soundly integrated into existing healthcare practice with regard to the terminology used and the constructs measured.

The first version of the MATE was evaluated in the Netherlands in 2007. This study was published in Addiction in 2010 (Schippers et al., 2010). In the most recent version (2.2) Modules 1 and 4 are made up-to-date with the DSM-5.

The MATE has been the subject of additional research in Germany, among other places. There are editions in Dutch, German, English, Italian, Danish, French and Brasilian-Portuguese.

The MATE family has extended to include additional instruments, such as the MATE-Crimi, for measuring the nexus between substance use and criminal behaviour, and the MATE-Outcomes, for measuring the treatment outcomes. and the MATE-Y and MATE-Y-Outcomes, for young people.

The MATE family is the intellectual property of Gerard M. Schippers and Theo G. Broekman. They provide it free of charge for anyone who wants to use it for non-profit purposes.

This manual is about the self-report questionnaire version of the MATE 2.2: the MATE-Q 2.2. The development of the MATE-Q is mainly prompted by the rise of registration and treatment via the internet. About the comparability of the MATE-Q and the MATE was reported in 2020 (Oudejans et al. 2020).

The most recent editions and translations of the MATE manuals, forms, and publications can be found on the website: http://www.mateinfo.eu

Gerard M. Schippers Theo G. Broekman Amsterdam/Nijmegen January 2021

The MATE-Q in brief

- 1. The MATE-S and the MATE-Q are compatible with the MATE.
- 2. The MATE-S and the MATE-Q can be used for registration and treatment via the internet, also for low treshold assessment in primary health care and to shorten the intake interview in addiction care.
- 3. The MATE-Q can be used as an intake and is therefore part of the treatment process.
- 4. The MATE-S can be filled in anonymously without barriers and can serve as the first step to the MATE-O.
- 5. The MATE-Q also measures the motivation for treatment.
- 6. The MATE-S provides one MATE-2.1 score and two MATE-2.2 scores, the MATE-Q results in 17 MATE-2.1 scores and a Validity index. See https://www.mateinfo.eu/pubs/boi.22101 for a complete overview of MATE Scores by Form
- 7. The MATE-S can be completed in about 2 minutes.
- 8. The MATE-Q can be completed in about 20-25 minutes.

Manual

Introduction

The treatment of mental disorders including substance-related disorders and pathological gambling must be based on a professional assessment at the beginning of the treatment. That assessment includes characteristics of the person and his circumstances. The MATE was developed to record the necessary information for this type of assessment. The MATE is also an assessment instrument in the sense that a number of characteristics are evaluated by the MATE assessor. Therefore, the MATE is was developed as an interview that is taken in personal contact between the person and the assessor.

However, there are situations in which it is desirable to collect information with a questionnaire without personal contact with an interviewer. An example of this is online registration for treatment.

The MATE-Q is designed for collection of personal information in the form of a questionnaire. As far as possible, the same information is recorded in the MATE-Q as in the MATE. Collecting data with an interview or with a questionnaire does not alter the fact that the assessment and advice for professional help must be given by an expert professional.

The answers to questions in a questionnaire are not automatically identical to the same questions in an interview. Some questions cannot be asked in a questionnaire. Moreover, an interview makes it possible to collect data that is not possible with a questionnaire, for example on the basis of observations during the interview. The results of the MATE-Q are therefore not automatically identical to the MATE. About the comparability of the MATE-Q and the MATE was reported in 2020 (Oudejans et al. 2020).

In this manual we describe the MATE-Q and also of the preceding selection instrument: the MATE-S, which is also part of the MATE-Q. We give instructions how both instruments can be used and how incorrect and inefficient use can be averted.

Short description of the MATE-Q and the MATE-S

The Q in the MATE-Q stands for Questionnaire. The MATE-Q consists of nine modules of the MATE in the from of self-report questionnaires. This includes the questionnaire components Q1. Craving and Q2. Depression, anxiety, and stress .To this has been added the motivation questionnaire module Q3. Motivation for treatment that is part of the MATE-Crimi. Module 4 of the MATE, that is used to assess the severity of the addiction, is designed as a separate instrument, the MATE-S. Furthermore, the module 6. Personality to indication personality disorder has not been included in the MATE-Q. Of modules 7. Activities and participation; care and support (MATE-ICN) and 8. Environmental factors influencing recovery (MATE-ICN). not all elements can be used in a self-report questionnaire. The MATE-Q also contains a few starting questions and some open questions at the end. The order has been adjusted to make smooth answer possible.

The MATE-Q consists of a total of around 125 questions. It can be filled in in 20-30 minutes. Mostly it concerns multiple choice questions, some modules have yes/no questions. The questions are offered in the form of one questionnaire, with the questions arranged in modules that mostly coincide with the modules of the MATE. Each module has its own instructions.

The S in MATE-S stands for selection. The MATE-S is equal to Module 4 of the MATE 2.2, with which the severity of the disorder can be determined.

A complete picture of the person requires both the MATE-S and the MATE-Q. The following schedule provides an overview of the parts and the coherence with the MATE Modules.

MATE-S	MATE Module
o. o. MATE-S: Problem substance or gambling	1. Substance use and excessive behavior
4. Substance use disorders and addictive disorders	4. Substance use disorders and addictive disorders
MATE-Q	MATE Module
1a. Substance use and gambling lifetime	1. Substance use and excessive behavior
1b. Substance use and gambling past 30 days	
2. Craving for substances or gambling	Q1. Craving
3. Physical and psychological complaints	5. Physical complaints
	2. Indicators for psychiatric or medical consultation
4. Depression, anxiety, and stress	Q2. Depression, anxiety, and stress
5. 5. Previous treatment and prescribed medications	3. History of treatment for substance use disorders
	2. Indicators for psychiatric or medical consultation
6. Motivation for treatment	Q3. Motivation for treatment
7. Difficulties and problems	7. Activities and participation (MATE-IC)
8. Circumstances	8. Environmental factors influencing recovery (MATE-IC)
9. Final questions	

MATE-S: Description

The MATE-S is derived from Module 1 and Module 4 from the MATE 2.2. From Module 1, the categories of the Primary-problem substance/behaviour have been taken over with the exception of Other addictive behaviors. Module 4a and 4b are the same as the Modules 4a and 4b of the MATE 2.2. The MATE-S is designed, because there is not a good existing instrument available for advice to people looking for treatment. Although instruments have been developed that advise on help, these are mostly screening instruments, aimed at not-help-seeking populations. Examples are the AUDIT (Babor et al., 2001) and the ASSIST (Humeniuk et al. 2010). The amount of substance use plays an important role in these instruments. For triage to different forms of help, however, the amount of subtance use is less relevant than the extent to which the person experiences problems with addiction. The MATE-S is therefore intended for people who consider (professional) help.

In the MATE 2.1, Module 4 was not only used to assess dependenc and/or abuse in the person, but also to compute a severity score. Therefore we followed the suggestion of Langenbucher et al. (2004) who propose a severity score that consists of the sum of nine out of the eleven items.

The MATE-S has 11 yes/no in Module 4a that includes these 9 items. So, the MATE score *Severity of dependence/abuse* [S4.3] can be calculated. This score has a range from 0-9.

The DSM-5 (American Psychiatric Association, 2013) now also uses the concept of severity of a disorder in the use of a substance based on the number of endorsed criteria. With the MATE-S, this score can also be calculated: *DSM-5: Severity of the Disorder in the use of the Primary-problem substance*[S4a.1]

Also for gambling, the DSM-5 uses a severity score that is calculated from the MATE-S Module 4b as *DSM-5: Severity of Gambling disorder* [S4b.1] The DSM-5 also makes a classification in severity: for substance use disorders: 2-3: mild, 4-5: moderate, 6 or more: severe, and for gambling disorder: 4-5: mild, 6-7: moderate, 8-9: severe.

For the three recommendations that can be given after completing the MATE-S, we make since MATE version 2.2, use of this DSM-5 classification in severity.

Advice	Severity	DSM-5: Severity of the Disorder in the use of the Primary-problem substance [S4a.1]	DSM-5: Severity of Gambling disorder [S4b.1]
No tweeter out		0 - 1	0 - 3
No treatment	mild	2 - 3	4 - 5
Fill in the MATE-Q	moderate	4 - 5	6 - 7
Personal contact, MATE interview	severe	6 - 11	8 - 9

The use of a severity score to give advice on whether or not treatment, whether or not after personal contact, as well as the chosen cut-off points have been chosen based on common sense and the DSM-5 classification in severity, and has not been investigated empirically. We therefore present these cut-off points as a guideline whose usability must be further investigated.

Module 4 of the MATE consists of standardized questions that are helpful in an interview to establish a diagnosis. In the MATE-S, these questions are incorporated into a self-report questionnaire that is filled in without personal contact with an assessor. The result cannot therefore be used as a diagnosis. A diagnosis can be made only on the basis of personal contact with a qualified professional.

MATE-Q: Description

1a. Substance use and gambling lifetime

Modules 1a and 1b of the MATE-Q ask for the use of substances and gambling. The same list of substances and gambling is used as in the MATE 2.2, albeit that complex or less well-known names of substances were left out. Module 1a asks which substances are used lifetime with the options: *Never used* or *Did use, but no periods of regular use* or *Did use, with periods of regular use*. Regular is for alcohol: *Did use, with periods of more than 28 (for male) or 21 (for female) glasses in a week*, for tobacco: *Did use, with periods of daily use*, for all the other substances: *Did use, with periods of at least 1 time a week* and for gambling: *Did gamble, with periods of at least 1 time a week*. If there is regular use, then it is asked how long the regular use has lasted in total. In the MATE that can be filled precisely in years (and months). In the MATE-Q the period is limited to five categories: Less than 1 year; 1 to 5 years; 6 to 10 years; 11 to 20 years,

These questions are asked both for the MATE dimension score Severity of the addiction (p. 17, Schippers, Broekman & Buchholz, 2011), which is important for determining the level of care that the person needs, and for measuring changes in the use across time.

1b. Substance use and gambling past 30 days

Module 1b of the MATE-Q asks for the use of substances and gambling in the past 30 days The answer categories for all substances are: *Not*; 1 time; A few times; 1 or 2 times a week; 3 or 4 times a week; 5 or 6 times a week, and Every day. In the case of alcohol and tobacco, the quantity is also asked. For tobacco, the number of units per day is recorded. For alcohol, in the MATE a distinction is made between general use and higher use. That seems too be too complicated to use in a self-report questionnaire. Therefore it has been chosen to ask for the numbers of glasses on each day of a usual week in the past 30 days. The vast majority of people use multiple substances and/or gamble. In the MATE, the assessor and the person together determine what should be considered the most important problem. In the MATE-Q, the Primary-problem substance/behaviour is taken from module 0. MATE-S: Probleem substance or gambling where that the person marks what causes the most problems.

2. Craving for substances or gambling

The questionnaire. Q1. Craving of the MATE is included in its entirety in the MATE-Q. The instruction states that the person must keep the substance or the gambling in mind that he has indicated that it causes the most problems, the Primary-problem substance/behaviour.

3. Physical and psychological complaints

Module 3 consists of the complete Module 5. Physical complaints of the MATE and a part of Module 2. Indicators for psychiatric or medical consultation

Module 2. Indicators for psychiatric or medical consultation of the MATE consists of questions about treatment and medication and about nine characteristics that cannot be overlooked because they may require special attention in a treatment for addiction. These are partly questions and partly observations. For all nine characteristics, questions have been formulated in the MATE-Q that can be answered with yes or no. As in the MATE, a further description can be filled in in case of a serious disease.

4. Depression, anxiety, and stress

Module Q2. Depression, anxiety, and stress of the MATE is completely part of the MATE-Q

5. Previous treatment and prescribed medications

In this Module, questions about treatments and medication from Module 2. Indicators for psychiatric or medical consultation of the MATE are combined with the MATE Module 3. History of treatment for substance use disorders. The questions were only slightly changed and taken from the MATE. Medicines are recorded with individual open questions.

6. Motivation for treatment

This is Module Q3. Motivation for treatment that is also part of the MATE-Crimi (Schippers & Broekman, 2012). This module is included in the MATE-Q because the MATE-Q will also be used by persons who doubt the usefulness of professional help, just like that applies to those for whom the MATE-Crimi is intended.

7. Difficulties and problems

Under this heading, the MATE-Outcomes Module 7. Activities and participation (MATE-IC) is transformed into a self-report questionnaire.

For each of the 19 different domains, Module 7 in the MATE-ICN assesses the following:

- 1. The degree to which the person's activities and participation are limited (ranging from *not at all* to *completely*).
- 2. The amount of support that is provided to the person (from *none* to *completely*).
- 3. Whether or not the assessor feels that the person is in need of care.
- 4. Whether or not the person himself or herself feels in need of care.
- 5. Whether or not the agency in question is willing and able to provide the care that is needed.

As in the MATE-Outcomes, the MATE-Q only asks about (1) the limitations in performance or the difficulties the person has with the activity or participation involved. The main reason is that about the need for help in domains other than addiction, in addition to the opinion of the person himself, a judgment must also be given by the triagist.

For each of the domains, a question has been formulated that is identical to the questions that are suggested as sample questions. The anchor points in the MATE that are used as guidelines in determining the degree of limitation are not yet manageable in a self-report questionnaire. That is why the answers to this questionnaire must be carefully weighed and, if in doubt, further investigated in a subsequent MATE interview.

8. Circumstances

Under this heading, the MATE-Outcomes Module 8. Environmental factors influencing recovery (MATE-IC) is transformed into a self-report questionnaire.

For each of the four selected environmental factors, Module 8 in the MATE-ICN assesses the following:

- 1. The degree (from *none* to *profound*) of positive or negative effect that each factor that has occurred during the past 30 days will now have on the recovery; the nature of the factor must be clarified.
- 2. Whether or not the assessor feels that the person is in need of care.
- 3. Whether or not the person himself or herself feels in need of care.
- 4. Whether or not the agency in question is willing and able to provide the care that is needed.

Also in this Module, only (1) the extent of influence of the factor is asked. In addition, positive factors are not asked because they play no part in the triage decision that is made based on the MATE-Q

9. Final questions

At the end of the MATE-Q, some open questions are asked. These questions serve primarily to evaluate the questionnaire. There is a questionabout the time it took to complete it. It is also asked whether the perosn had difficulties filling in the questionnaire and, if so, what these were.

There are some questions that may be helpful in interpreting the answers: whether the questions have been understood and whether all important topics have been sufficiently covered to assess what help the person needs. In the advice version, it is asked whether the person agrees with the processing of the data to make a treatment recommendation.

Use of the MATE-Q and the MATE-S

The MATE-Q provides as much as possible the same information in the form of MATE scores as the Mates, so that both can be used for treatment decisions, e.g. for the level of c are. As already mentioned, the interpretation of the data collected from the MATE and the advice based on it must be given by a trained professional as an entrance to an addiction care facility. Interpretation can therefore not be automated and obtaining care advice based on the MATE-Q therefore implies registraton at the care facility. This can often not be done anonymously.

For that reason, the MATE-Q must only be made available within the context of a care institution. Moreover, the MATE-Q is a comprehensive instrument and it is not effective and efficient for a care institution to make it available to fill in for everyone.

That is why the MATE-S is designed as a selection instrument. The aim of the MATE-S is to advice the person automatically and anonymously about whether professional help seems to be necessary, and if so, wether the person has to vsist the care facility or could first fill in the MATE-Q for personalised advice.

The relationship between the MATE-S and the MATE-Q is shown schematically in Figure 1. The correct use of the MATE-S and MATE-Q and the processes required for this are described below (see also Figure 2).

De MATE-S is offered anonymously and is accessible to everyone who is interested in the possibility of treatment of substance-related disorders or pathological gambling. The result is calculated automatically and reported back to the person without intermediate steps. One of three recommendations can be given: 1) With no or mild severity: currently no treatment necessary (without making this impossible); 2) If hard drugs is the Primary-problem substance or the addiction is severe or there are difficulties in filling in: appointment for a personal intake interview; 3) Otherwise: fill in the MATE-Q. Some example texts are inserted in Figure 1.

For those who subsequently fill in the MATE-Q, at the end it asked whether the person agrees with further processing of the data and whether the person wants to receive an personalised recommendation for addiction treatment. If the person agrees, the triagist of the care facility interprets the MATE-Q scores. Therefore, the assessor will use the decision-making algorithm, which is implemented in his addiction care facility. The answers to the open questions in the MATE-Q have also to be taken into consideration. It has also to be assessed whether the questions have been answered sufficiently reliably and interpretable. Finally, the can check whether the person already has a treatment history at the treatment facility. Based on the assessment of all this data, the triagist comes to an advice that either 1) the person is offered a short-term treatment (with or without face-to-face contacts). The person is invited for a first treatment appointment; or 2) the person is invited to a personal intake with the MATE. When conducting the MATE interview, the information from the MATE-Q can be of use.

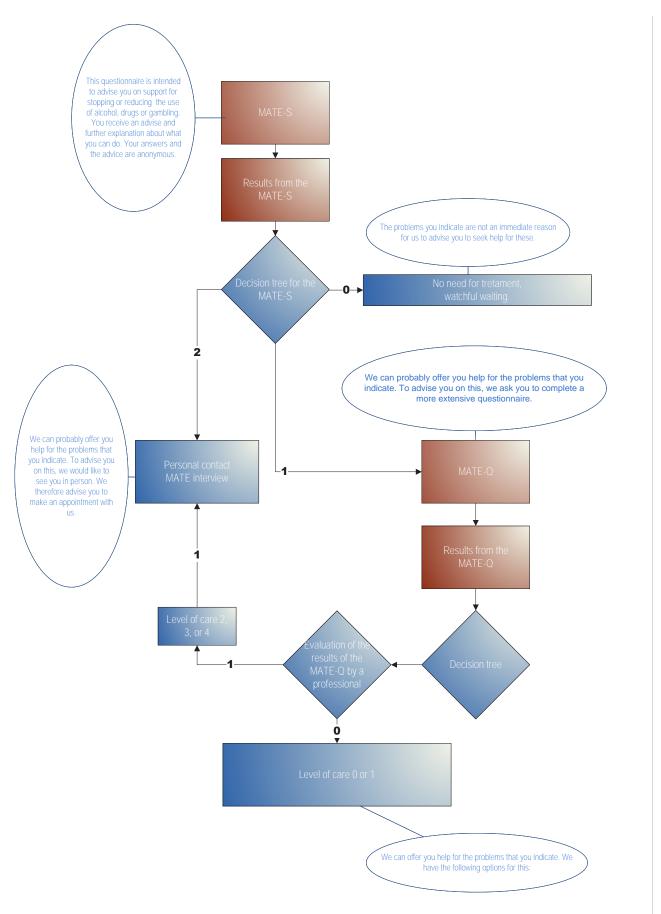


Figure 1. Use of the MATE-Q and the MATE-S

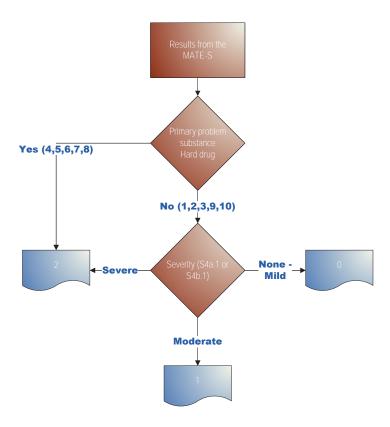


Figure 2. Results of the MATE-S

Protocol for scoring

MATE Module	MATE-Q Module	Score	Scoring and calculation	Range min-max	Threshold value [MD]: used in the MATE dimension scores (p. 17, Schip- pers, Broekman & Buchholz, 2011)	
	3. Physical and psychological complaints	Characteristics of physical comorbidity [S2.1]	1 point for each Yes on physical health (b#3), intoxication (b#4), physical disease (b#2), pregnancy (b#1). Total.	0 – 4		
2. Indicators for psychiatric or medical consultation	5. 5. Previous treatment and prescribed medications	Undergoing psychiatric or psychological treatment [S2.2]	1 point for medication for psych. problems (b#2), 1 point for recent psych. treatment (a#2). Total.	0 – 2	= 2[MD]	
	3. Physical and psychological complaints	Characteristics of psychiatric comorbidity [S2.3]	2 points for suicide plan/attempt (b#7), 1 point for each Yes on hallucinations (b#8), delusions (b#9), confusion (b#5). Total.	0 – 5	≥ 2[MD]	
Expl	anation	For Characteristics of phys answer to be a No.	ical comorbidity [S2.1], give 1 point for each Yes. If an item has no	t been filled	in, consider the	
If no more than 2 items are missing of Characteristics of psychiatric comorbidity [S2.3], an estimate of the Total can be me by computing the mean of all items that are filled in (2 points for suicide plan/attempt, 1 point for each Yes on hallucinating delusions, confusion) and multiplying the mean by 4. If the sum exceeds 5, the total is 5.						
			orithm for the MATE dimension scores, the threshold value 2 is used for Undergoing psychiatric or psychological t [S2.2] and for Characteristics of psychiatric comorbidity [S2.3].			
4. Substance use disorders and addictive Disorder in the use the Primary-prob substance [S4a.1] MATE-S Disorder in the use the Primary-prob substance [S4a.1] DSM-5: Severity of the Primary-prob substance [S4a.1]		DSM-5: Severity of the Disorder in the use of the Primary-problem substance [S4a.1]	Module 4a: 1 point for each Yes. Total.		2-3: mild, 4-5: moderate, 6 or more: severe	
		DSM-5: Severity of Gambling disorder [S4b.1]	Module 4b: 1 point for each Yes. Total.		4-5: mild, 6-7: moderate, 8-9: severe	
		Severity of dependence/ abuse [S4.3]	Module 4a: 1 point for each Yes, except for Item 1 and Item 4 (they don't count). Total.	0 – 9	≥ 8[MD]	
Expl	anation	of the items that are filled i	missing for these scores, an estimation of the scores total can be in and multiplying the mean by 9 for DSM-5: Severity of Gambling and by 11 for DSM-5: Severity of the Disorder in the use of the Prin	g disorder [S	64b.1] or Severity of	
		The threshold value 8 of Se	everity of dependence/abuse [S4.3] is used in the algorithm for the	MATE dime	nsion scores.	
5. Physical complaints	3. Physical and psychological complaints	Physical complaints [S _{5.1}]	Sum of the 10 item values of part a.	0 – 40		
Explanation			missing for Physical complaints [S _{5.1}], an estimation of the total illed in and multiplying the mean by 10.	can be mad	e by computing the	
		Limitations - Total [S7.1]	Sum of the values of the 19 limitation items.	0 – 76		
	7. Difficulties and problems	Limitations - Basic [S7.2]	Sum of the values of these 8 items: #10; #11; #12; #13; #14; #15; #16; #17.	0 - 32	≥ 12[MD]	
7+8 MATE-ICN		Limitations - Relationships [S7.3]	Sum of the values of these 5 items: #1; #2; #3; #4; #5.	0 - 20		
	8. Circumstances	Negative external influences [S8.2]	Sum of the values of 5 items: e310-e325- Partner etc.; Loss of relationship; e460- Societal attitudes; e550- Legal factors; e598- Other factors.	0 – 20	≥ 10 [MD]	

MATE Module	MATE -Q Module	Score	Scoring and calculation	Range min-max	Threshold value [MD]: used in the MATE dimension scores (p. 17, Schip- pers, Broekman & Buchholz, 2011)		
Expl	In case values are missing in computing the scores for Limitation, Care and support, and external influences, an est the total scores can be made by computing the mean of all items that are filled in and multiplying that mean by the items. The maximum number of items for each score that can be estimated is shown within parentheses: Limitation [S7.1]: 19(7), Limitations - Basic [S7.2]: 8(3), Limitations - Relationships [S7.3]: 5(2), Care and support [S7.4]S7.4: 8(3) external influences [S8.1]: 3(1) Negative external influences [S8.2]: 5(2).			nean by the number of :: Limitations - Total 7.4] S7.4: 8(3), Positive			
		- C	r the MATE dimension scores, Limitations - Basic [S7.2] is used with a threshold value of 12 and Negative [S8.2] with a threshold value of 10.				
Q1. Craving	2. Craving for substances or gambling	Craving [SQ1.1]	Sum of the 5 item values.	0 - 20	≥ 12[MD]		
Expl	anation		nissing for Craving [SQ1.1], an estimate of the score can be made by plying the mean by 5. The threshold value of 12 is used in the algo-				
		Depression [SQ2.1]	Sum of the 7 item values (#3,#5,#10,#13,#16,#17,#21). Multiply the sum by 2.	0 - 42	≥ 21		
Q2. Depression,	4. Depression,	Anxiety [SQ2.2]	Sum of the 7 item values (#2,#4,#7,#9,#15,#19,#20). Multiply the sum by 2.	0 - 42	≥ 15		
anxiety, and stress anxiety, and stress		Stress [SQ2.3]	Sum of the 7 item values (#1,#6,#8,#11,#12,#14,#18). Multiply the sum by 2.	0 - 42	≥ 26		
		Depression Anxiety Stress - Total [SQ2.4]	Sum of SQ2.1, SQ2.2, and SQ2.3	0 - 126	≥ 6o[MD}		
Expl	lanation	the sum of the 7 item value by 7 and multiply by 2 to g values 21, 15, and 26 mean Depression Anxiety Stress	computing the scores for Depression [SQ2.1], Anxiety [SQ2.2], and es can be made by computing the mean of all items that are filled et the total score. The maximum number of missing items is 3 for 'serious'. - Total [SQ2.4] can be computed by adding the scores Depression Id value of 60 for Depression Anxiety Stress - Total [SQ2.4] is used	in, and mult each of the	iplying that mean scores. The threshold xiety [SQ2.2], and		
		Scoring of the items	Score the items #11,#12,#17,#19,#20 from 5 (strongly disagree) to Score all the other items from 1 (strongly disagree) to 5 (strongly		agree).		
		Problem Recognition General [SQ3.1]	Sum of the 4 item values (#1,#2,#8,#9). Divide by 4.	1 – 5	≤ 2.25		
Q3. Motivation for	6. Motivation for treatment	Problem Recognition Specific [SQ3.2]	Sum of the 5 item values (#3,#4,#5,#6,#7). Divide by 5.	1 – 5	≤ 2.25		
treatment		Desire for Help [SQ3.3]	Sum of the 7 item values (#10,#13,#15,#16,#19,#21,#23). Divide by 7.		≤ 3.0		
		Treatment Readiness Sum of the 8 item values (#11,#12,#14,#17,#18,#20,#22,#24). Divide by 8.		1 – 5	≤ 3.0		
	6. Motivation for treatment	Validity index	Score the items #10,#17,#19,#22 from 1 (strongly disagree) to 5 (strongly agree). Total.	4 - 20	<=6 of >=18		
Expl	lanation	In case of missing values, a more than 4 responses are	chosen on the bases of previous research with offenders (20th per				

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Questionnaire MATE-Q 2.2

Questionnaire





Measurements in the Addictions for Triage and Evaluation Version: MATE-Q-en 2.2

The purpose of this questionnaire is to get a picture of your use of alcohol and drugs (and gambling) and of a number of related topics.

Your answers make it possible to advise you on possible treatment.

The following will be addressed: the use of alcohol and drugs (and gambling), problems you have with this, treatment you have (had), complaints and problems in a range of other areas and whether you want to start treatment.

Many questions are of a personal nature. In order to provide you with the best possible service, it is important that you answer the questions honestly.

It takes about 20 to 25 minutes to fill in.

Sometimes you can fill in a num	ber on a dotted	line
•		
or write text on this dotted line	Æ	

For most questions, you can circle the answer that applies to you.

To get started, answer the following questions.

1. My age is	years
2. I am	Male □ Female □ Divers □
3. Fill-in date	d d m m y y

Module	p.
o. MATE-S: Problem substance or gambling	2
1a. Substance use and gambling lifetime	3
1b. Substance use and gambling past 30 days	4
2. Craving for substances or gambling	5
3. Physical and psychological complaints	6
4. Depression, anxiety, and stress	7
5. Previous treatment and prescribed medications	8
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	MATE Q 0. MATE-S: P	roble	m substance or gambling			
oa	Mark what causes the most problems. If several apply, mark <i>only</i> what causes the most problems now.					
	1 Alcohol		6 Ecstacy/XTC (MDMA or others, like MDEA, MDA	or 2CB)		
	2 Tobacco (cigarettes, cigars, pipes, chews)		Hallucinogens (PCP, ketamine, mescaline, psilocyb, LSD	in, DMT,		
At present	3 Cannabis (hashish, marijuana, weed)		Other drugs (GHB, inhalants, 8 laughing gass, poppers) Write down what drug			
	Opioids (heroin, methadone, buprenorphine, morfine, codeine, oxycodone, fentanyl)		9 Sedatives (tranquilizers, sleeping pills, benzodiazepine.	s)		
	Stimulants (cocaine, amphetamines, others, like methylphenidate, khat)		Gambling Write down what type:			
4a	For the next questions, keep the substance in mind that causes the most problems for you.					
	«In the past 12 months,			Circle Yes or	r No.	
	1did you regularly have a strong desire to use the	substa	nce?	Yes	No	
hs	2have you regularly wanted to stop the substance	use?		Yes	No	
12 months	3 have you spent a lot of your time using, getting, or gettir	ng over	the effects of the substance?	Yes	No	
12	4did you find you began to need much more of the su	ıbstan	ce to get the same effect?	Yes	No	
,	5 did stopping or cutting down the use of substance make			Yes	No	
	6 have you often used the substance in larger amou			Yes	No	
			hat it was causing you health problems or emotional	168		
	or psychological problems?			Yes	No	
	at work, or at school?		hat it was causing problems with your family, friends,	Yes	No	
	have you given up or greatly reduced important a like sports, work, or associating with friends or re	activit elative	ies in order to get or to use the substance— activities es?	Yes	No	
	10did using the substance frequently interfere with	your	work at school, on a job, or at home?	Yes	No	
	have there been times when you used the substance participating in traffic, or operating a machine, or a	in siti nythir	uations where you could get hurt, — for example, while ng else?	Yes	No	
4b	If gambling is causing the most problems, fill in the next of	uestio	ons. If not, continue with section 1a.			
	«In the past 12 months,	100010	200 20 200 00 00 00 00 00 00 00 00 00 00	Circle Yes o	r No.	
	1have you often been preoccupied with thoughts a	bout	gambling?	Yes	No	
12 months	2did you need to gamble with more and more mo	ney to	get the excitement that you desired?	Yes	No	
12 m	3have you regularly tried to stop or cut down gam	bling	but without success?	Yes	No	
	4did stopping or cutting down gambling make you	ı feel	restless or irritable?	Yes	No	
	5have you often gambled while feeling stressed (e.	g., hel	pless, guilty, anxious, depressed)?	Yes	No	
	6after losing money by gambling, did you often re	turn a	nother day to try to win back your losses?	Yes	No	
	7did you lie to hide your gambling?			Yes	No	
	have you put at risk or lost a significant relations your gambling?	hip, jo	b, or educational or career opportunity because of	Yes	No	
	9did you rely on others to provide money to reliev	e desp	perate financial situations caused by your gambling?	Yes	No	

1a. Substance use and gambling lifetime



Lifetime

1a. Substance use and gambling lifetime					etime			MA	ALF IQ		
The next questions are about use of alcohol, tobacco, drugs and gambling.											
In your <i>whole life</i> have there been periods when you did use:											
	1	Alcohol	normally dr † A glass of standard gla	unk. They are also known beer is a little more than a	a standard glass, namely 1.2 s 2 standard glasses. A bottle	If there were periods of regular use, has the regular use been in your life					
			Never used	Did use, but no periods of more than 28 (for male) or 21 (for female) glasses in a week	Did use, with periods of more than 28 (for male) or 21 (for female) glasses in a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
	2	Tobacco (cigarettes, cigars, pipes, chews)	Never used	Did use, but no periods of daily use	Did use, with periods of daily use	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
	3	Cannabis (hashish, marijuana, weed)	Never used	Did use, but no periods of at least 1 time a week	Did use, with periods of at least 1 time a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
	4	Opioids (heroin, methadone, buprenorphine, morfine, codeine, oxycodone, fentanyl)	Never used	Did use, but no periods of at least 1 time a week	Did use, with periods of at least 1 time a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
	5	Stimulants (cocaine, amphetamines, others, like methylphenidate, khat)	Never used	Did use, but no periods of at least 1 time a week	Did use, with periods of at least 1 time a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
	6	Ecstacy/XTC (MDMA or others, like MDEA, MDA or 2CB)	Never used	Did use, but no periods of at least 1 time a week	Did use, with periods of at least 1 time a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
	7	Hallucinogens (PCP, ketamine, mescaline, psilocybin, DMT, LSD	Never used	Did use, but no periods of at least 1 time a week	Did use, with periods of at least 1 time a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
-	8	Other drugs (GHB, inhalants, laughing gass, poppers) Write down what drug	Never used	Did use, but no periods of at least 1 time a week	Did use, with periods of at least 1 time a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
	9	Sedatives (tranquilizers, sleeping pills, benzodiazepines)	Never used	Did use, but no periods of at least 1 time a week	Did use, with periods of at least 1 time a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
	10	Gambling Write down what type:	Did not gamble	Did gamble, but no periods of at least 1 time a week	Did gamble, with periods of at least 1 time a week	Less than 1 year	1 to 5 years	6 to 10 years	11 to 20 years	More than 20 years	
L			<u> </u>			l					

amphetamines, others,

like methylphenidate,

Ecstacy/XTC (MDMA

or others, like MDEA,

Hallucinogens (PCP,

ketamine, mescaline,

psilocybin, *DMT*, *LSD*Other drugs (*GHB*,

inhalants, laughing gass,

Sedatives (tranquilizers,

MDA or 2CB)

poppers)

sleeping pills,

Gambling

benzodiazepines)

Not

Not

Not

Not

Not

Not

1 time

1 time

1 time

1 time

1 time

1 time

1b. Substance use and gambling past 30 days

30 days

How often in the past 30 days did you use: 1 or 2 times a 3 or 4 times a 5 or 6 times a Alcohol A few times Every day 1 time week week † A glass of beer is a little more than a standard glass, namely 1.2 † The next question refers to the glasses from which the drink is normally drunk. They standard glasses. Half a liter of beer is 2 standard glasses. A bottle of are also known as standard glasses. wine is 8 standard glasses. Monday Wednesday Thursday Friday Saturday Sunday Tuesday For each day, write down the number of glasses you drank in the past 30 days in an usual week. Write 'o' if you didn't drink on glasses glasses glasses glasses glasses glasses glasses that day. Tobacco (cigarettes, 1 or 2 times a 3 or 4 times a 5 or 6 times a Not 1 time A few times Every day week week week cigars, pipes, chews) Write down how much you usually smoked in 2b cigarettes/cigars/pipes/chews etc per day a day. Cannabis (hashish, 1 or 2 times a 3 or 4 times a 5 or 6 times a Not 1 time A few times Every day marijuana, weed) week week week Opioids (heroin, methadone, 1 or 2 times a 3 or 4 times a 5 or 6 times a buprenorphine, morfine, Not 1 time A few times Every day week week week codeine, oxycodone, fentanyl) Stimulants (cocaine,

A few times

1 or 2 times a

week

3 or 4 times a

week

5 or 6 times a

5 or 6 times a

week

5 or 6 times a

week

Every day

Every day

Every day

Every day

Every day

Every day

The questions below ask you about your thoughts and feelings about using alcohol or drugs or gambling. Keep the substance in mind that causes the most problems for you.

If gambling is causing the most problems, read "gambling" instead off "use the substance".

The questions concern only the past 7 days. Answer the questions based on what you thought, felt, and did during the past week. Circle the number before the answer that best applies to you.

- 1 How much of your time when you're not using is occupied by ideas, thoughts, impulses, or images related to using?
 - None.
 - Less than 1 hour a day.
 - 1-3 hours a day.
 - 3 4-8 hours a day.
 - More than 8 hours a day.
- 2 How frequently do these thoughts occur?

 - No more than 8 times a day.
 - 2 More than 8 times a day, but most hours of the day are free of these thoughts.
 - More than 8 times a day and during most hours of the day.
 - These thoughts are too numerous to count, and an hour rarely passes without several such thoughts occurring.
- 3 How much distress or disturbance do these ideas, thoughts, impulses, or images related to using cause you when you're not using?
 - o None.
 - Mild, infrequent, and not too disturbing.
 - Moderate, frequent, and disturbing, but still manageable.
 - Severe, very frequent, and very disturbing.
 - Extreme, nearly constant, and disabling distress.
- How much of an effort do you make to resist these thoughts or try to disregard or turn your attention away from 4 these thoughts as they enter your mind when you're not using? (Rate your effort made to resist these thoughts, not your success or failure in actually controlling them.)
 - My thoughts are so minimal that I don't need to actively resist them. If I do have thoughts, I always make an effort to resist them.
 - I try to resist them most of the time.
 - 2 I make some effort to resist them.
 - I give in to all such thoughts without attempting to control them, but I do so with some reluctance.
 - I completely and willingly give in to all such thoughts.
- 5 How strong is the drive to use the substance?
 - o No drive to use the substance.
 - Some pressure to use the substance.
 - 2 Strong pressure to use the substance.
 - Very strong drive to use the substance.
 - The drive to use the substance is completely involuntary and overpowering.

The following questions are about physical complaints.

In the past 30 days, how often did you experience:	Never	Rarely	Sometimes	Often	Always
1 Poor appetite	0	1	2	3	4
2 Tiredness/fatigue	O	1	2	3	4
3 Nausea (feeling sick)	0	1	2	3	4
4 Stomach pains	0	1	2	3	4
5 Difficulty breathing	0	1	2	3	4
6 Chest pains	0	1	2	3	4
7 Joint/bone pains	0	1	2	3	4
8 Muscle pains	O	1	2	3	4
9 Numbness/tingling	0	1	2	3	4
10 Tremors/shakes	0	1	2	3	4

3b

Please indicate if the following applies to you

lowing applies to you.	Ci	itcic ics (31 110.	
		Yes	No	

Do you have a severe or contagious disease, such as heart problems, diabetes, hepatitis, or HIV? Write down which disease(s)

> Yes No

1 Are you pregnant?

Yes No

	Do you suffer from intoxication or withdrawal symptoms, such as: trembling, incoordination, slurred
4	speech, staggering gait, psychomotor retardation or agitation, insults, severe sweating, vomitting, pupillary
	anomalies?

Yes No

No

No

5 Do you ever feel confused or forg	getful?
-------------------------------------	---------

Yes

6 In the past month, did you think that you would be better off dead or wish that yo	ou were dead?
--	---------------

Yes No

7 In the past month, did you make plans to commit suicide or make a suicide	e attempt?
---	------------

Yes No

Yes

8	In the past month,	, did you see or hear	r things that other	people couldn't see or hear?

Yes No

9 In the past month, did you think that other people were conspiring against you?

4. Depression, anxiety, and stress



The following questions are about depression, anxiety and stress.

Please read each statement and circle a number 0, 1, 2 or 3 which indicates how much the statement applied to you over the past week.

There are no right or wrong answers. Do not spend too much time on any statement.

Ί.	he	rat	ting	sca	le:	İS	as	tol	lows:	
----	----	-----	------	-----	-----	----	----	-----	-------	--

o = Did not apply to me a	at all
---------------------------	--------

	 1 = Applied to me to some degree, or some of the time 2 = Applied to me to a considerable degree, or a good part of the time 3 = Applied to me very much, or most of the time 	Did not apply to me at all	Applied to me to some degree, or some of the time	Applied to me to a consider- able degree, or a good part of the time	Applied to me very much, or most of the time	
l	I found it hard to wind down	0	1	2	3	

2 I was aware of dryness of my mouth

absence of physical exertion)

3	I couldn't seem to experience any positive feeling at all
1	I experienced breathing difficulty (e.g., excessively rapid breathing, breathlessness in the

5 I found it difficult to work up the initiative to do this	ngs
---	-----

6 I tended to over-react to situ	ations

7	I experienced trembling (e.g., in the hands)
8	I felt that I was using a lot of nervous energy

10	I felt that I had nothing to look forward to

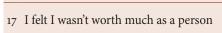
10	I found it difficult to rolay

11 I found myself getting agitated

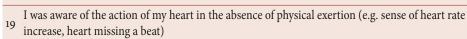


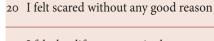


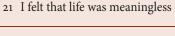








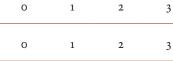


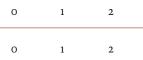


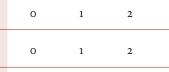
DASS: Depression Anxiety Stress Scales

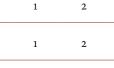
MATE-Q-en 2.2

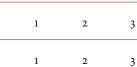


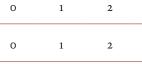


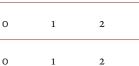


















6. Motivation for treatment



The following questions are about how you feel about your substance use or gambling.

Circle the answer that shows how much	you agree or disagree each	item describes you or the wa	y you have been feeling lately.

In your opinion, your (drug/alco	ohol) use is	Strongly disagree	Disagree	Not sure	Agree	Strongly agree
1 A problem for you						
2 More trouble than it's w	vorth					
3 Causing problems with	the law					
4 Causing problems in th	inking or doing your work					
5 Causing problems with	your family or friends					
6 Causing problems in fir	nding or keeping a job					
7 Causing problems with	your health					
8 Making your life becom	ne worse and worse					
9 Going to cause your de	ath if you do not quit soon					
*	nt your views on treatment and other kinds r gambling. If you are already in a treatment about your current treatment.	Strongly disagree	Disagree	Not sure	Agree	Strongly agree
10 You need help in dealing wi	th your drug/alcohol use					
11 You have too many outside	responsibilities to go into treatment now.					
12 Undergoing treatment seem	s too demanding for you.					
13 It is urgent that you find hel	p immediately for your drug/alcohol use					
Going into treatment may b problems.	e your last chance to solve your drug/alcohol					
15 You are tired of the problem	as caused by drug/alcohol					
You will give up your friend problems	s and hangouts to solve your drug/alcohol					
17 Going into treatment will no	ot be very helpful to you.					
18 You plan to stay in treatmen	at for a while.					
19 You can quit using drugs/ald	cohol without any help					
20 You will go into treatment b	ecause someone else is making you do it.					
21 Your life has gone out of cor	ntrol					
22 Treatment can really help yo	ou.					
23 You want to get your life stra	aightened out					
24 You want to be in a treatmen	nt programme.					



7. Difficulties and problems

The questions below ask you about how many difficulties or how much difficulty you had with life domains. Consider the *past 30 days* in answering each question.

The rating scale is as follows:

- o = No difficulties or n/a
- 1 = Rarely difficulties or mild limitation
- 2 = Occasionally difficulties or moderate limitation
- 3 = Frequently difficulties or severe limitation
- 4 = Constantly difficulties or extreme limitation
- Did you have difficulties with your partner (or did you find it difficult not having a partner)?
- ² Were there any difficulties in your relationship with your child(ren)?
- 3 Did you have difficulties with your family or friends?
- Did you have difficulties relating to your employer, professionals, service providers, or health-care workers?
- health-care workers?

 5 Did you find it difficult to make contacts with other people or to get along with others?
- 6 Did you have difficulties acquiring or keeping a job or with educational activities?
- Did you have difficulties with economic self-sufficiency; were you short of money for your everyday expenses?
- Was it difficult for you to find free time or to engage in free-time activities, for example, relaxation or sport?
- 9 Did you have difficulties participating in religious or spiritual activities or organizations that might help you find self-fulfilment, meaning, or religious or spiritual value?
- Were you without a place to live, or did you have other problems with housing?
- Did you find it difficult to do household chores, such as shopping, preparing meals, or doing housework?
- Did you have difficulty with self-care, such as washing, caring for parts of your body, or dressing?
- 13 Did you have difficulty finding a safe place to sleep, or with wearing protective clothing?
- Did you find it difficult to eat or drink healthily or to look after your physical condition?
 Did you have difficulties following medical advice or cooperating with your treatment?
- Have you put your health at risk because of your risky behaviour? Did you have unprotected sexual contacts with casual partners; did you drive or walk in traffic while under the influence? If you are using drugs, did you use unsterile needles?
- 17 Did you find it difficult to plan, manage, or complete your daily routine?

Did you avoid visiting a doctor, even when you really needed to go?

- Did you find it difficult to cope with stress in difficult situations or with tasks that required a lot of responsibility?
- 19 Did you find it difficult to learn new things, or to solve problems or make decisions?

30 days

Occa-

Moder-

ate

Frequent

/ Severe

Constant /

Extreme

No /not /

n/a

O

Rare

Mild

8. Circumstances



Substan-

tial

3

3

3

3

3

2

Profound

4

4

4

4

4

Moder-

No / Not

Present

0

0

0

Mild

The following questions ask you about circumstances that might have a negative effect on your recovery, your health, or on changing your alcohol or drug use or gambling.

Consider the past 30 days in answering each question.

The rating scale is as follows:

- o = No negative influence or not present
- 1 = Mildly negative influence
- 2 = Moderately negative influence
- 3 = Substantially negative influence
- 4 = Profoundly negative influence

Are there people in your environment who are having a negative your recovery?	influence on you and
---	----------------------

During the past year, did you lose an important relationship (for example, because of
death or divorce) that resulted in a negative influence on you and your recovery?

	Are you in contact with						in any	legal	l matter t	hat is
4	having a negative influ	ence on y	ou ar	ıd your 1	recovery	?				

Are there any other environmental factors that are having a negative influence on you and
your recovery? If so, write it down. Circle the extent of the negative influence. If there are no
other negative conditions, circle 'o'

ici negative conditions, chele o
)

9. Final questions

The last questions are about completing the questionnaire and about possible further steps.	Strongly disagree	Disagree	Not sure	Agree	Strongly agree
1 I understood the questions well.					
2 Filling in was easy for me.					
3 I think the questions are important for identifying the problem.					
4 I think there are too many questions.					
5 How many minutes did it take you to complete the form?		minutes			
6 If you had any difficulties filling in, what were they?	£.				
Are there other matters that have not been addressed but that are important in order to be able to give you advice? Yes Which?					

_	Are there other matters that have not been addressed but
7	that are important in order to be able to give you advice?

Yes .	→
7	Which?
No	

	days
	30
H	



Measurements in the Addictions for Triage and Evaluation Version MATE-Q MATE 2.2

Scoring Form

			assessment	d	d	m	m	у	у	Person no			
MATE Module	MAT Mod	7	Score		Scoring and calculation						Range min- max	Re-	Threshold value [MD]: used in the MATE dimension scores
2. Indicators for psychiatric or medical consultation	3. Physical and psychological complaints		Characteristics of physica comorbidity [S2.1]		1 point for each Yes on physical health (b#3), intoxication (b#4), physical disease (b#2), pregnancy (b#1). Total.							Juit	
	5. Previous treatment and prescribed medications		Undergoing psychiatric or psychological treatment [S2.2]	1	1 point for medication for psych. problems (b#2), 1 point for recent psych. treatment (a#2). Total.								= 2[MD]
	3. Physical and psychological complaints		Characteristics of psychiatric comorbidity [S2.3]		2 points for suicide plan/attempt (b#7), 1 point for each Yes on hallucinations (b#8), delusions (b#9), confusion (b#5). Total.								≥ 2[MD]
4. Substance use disorders and addictive disorders			ity of the Disorder in the use ry-problem substance[S4a.1]	N	Module 4a: 1 point for each Yes. Total.				0 - 11		2-3: mild, 4-5: moderate, 6 of meer: severe		
	MATE-S	DSM-5: Severity of Gambling disorde: [S4b.1			Module 4b: 1 point for each Yes. Total.								4-5: mild, 6-7: moderate, 8-9: severe
		Severity of dependence/abuse [S4.3]			Module 4a: 1 point for each Yes, except for Item 1 and Item 4 (they don't count). Total.						0 – 9		≥ 8[MD]
5. Physical complaints	3. Physical and psychological complaints		Physical complaints [S _{5.1}]	S	Sum of the 10 item values of part a.								
7+8 MATE-ICN	7. Difficulties and problems		Limitations - Total [S7.1]	S	Sum of the values of the 19 limitation items.								
			Limitations - Basic [S _{7.2}]	a o a o d	Sum of the values of these 8 items: #10 Acquiring and maintaining a place to live; #11 Household tasks; #12 Self-care; #13 Ensuring one's physical comfort; #14 Managing diet and fitness; #15 Seeking and following advices and treatment by healthcare; #16 Protecting oneself from health risks due to risky behaviour; #17 Carrying out daily routine.								≥ 12[MD]
			Limitations - Relationship [S7.3]	os #	Sum of the values of these 5 items: #1 intimate relationships; #2 parent—child relationships; #3 informal social relationships and family relationships; #4 formal relationships; #5 General interpersonal interactions.								
	8. Circumstances		Negative external influences [S8.2]	S	Sum of the values of 5 items: e310-e325- Partner etc.; Loss of relationship; e460- Societal attitudes; e550- Legal factors; e598-Other factors.								≥ 10[MD]
Q1. Craving	2. Craving for substances or gambling		Craving [SQ1.1]	S	Sum of t	he 5 ite	m valu	0 - 20		≥ 12[MD]			
Q2. Depression, anxiety, and stress	4. Depression, anxiety, and stress		Depression [SQ2.1]		Sum of the 7 item values (#3,#5,#10,#13,#16,#17,#21). Multiply the sum by 2.								≥ 21
			Anxiety [SQ2.2]		Sum of the 7 item values (#2,#4,#7,#9,#15,#19,#20). Multiply the sum by 2.								≥ 15
			Stress [SQ2.3]		Sum of the 7 item values (#1,#6,#8,#11,#12,#14,#18). Multiply the sum by 2.								≥ 26
			Depression Anxiety Stress - Total [SQ2.4]	s s	Sum of S	Q2.1, S	Q2.2, a	0 – 126		≥ 6o[MD}			
Q3. Motivation for treatment	6. Motivation for treatment		Scoring of the items		Score the items #11,#12,#17,#19,#20 from 5 (strongly disagree) to 1 (strongly agree). Score all the other items from 1 (strongly disagree) to 5 (strongly agree).								
			Problem Recognition General [SQ3.1]	S	Sum of the 4 item values (#1,#2,#8,#9). Divide by 4.								≤ 2.25
			Problem Recognition Specific [SQ3.2]	S	Sum of the 5 item values (#3,#4,#5,#6,#7). Divide by 5.								≤ 2.25
			Desire for Help [SQ3.3]		Sum of the 7 item values (#10,#13,#15,#16,#19,#21,#23). Divide by 7.								≤ 3.0
			Treatment Readiness [SQ3	4 II	Sum of the 8 item values (#11,#12,#14,#17,#18,#20,#22,#24). Divide by 8.								≤ 3.0
			Validity index		Score the items #10,#17,#19,#22 from 1 (strongly disagree) to 5 (strongly agree). Total.						4 - 20		<=6 of >=18

