



A RESOURCE GUIDE FOR ENGAGING CLIENTS WHO USE SUBSTANCES IN THE PERINATAL PERIOD

HALIBURTON, KAWARTHA, PINE RIDGE DISTRICT HEALTH UNIT

Table of Contents

Purpose	2
Background	2
Substance Use and Substance Use Disorder	2
Stigma and Discrimination.....	2
Guiding Frameworks	2
Pathway	2
Practice Recommendations	3
Motivational Interviewing.....	3
1.0 Screening and Assessment.....	3
Pathway 1.....	3
2.0 Intervention.....	4
Pathway 2.....	4
Pathway 3.....	5
3.0 Recommendations	5
Referrals	5
Ontario.....	5
Northumberland.....	6
City of Kawartha Lakes.....	6
Haliburton	7
Additional Resources.....	7
Healthcare Providers	8
Client Facing.....	8
References	8
Appendix A.....	9
Appendix B	10
Appendix C	11
Appendix D.....	17

Purpose

This document is designed for primary healthcare providers, including OB/GYNs, midwives, and nurses, offering recommendations and steps to engage and support clients who use substances during the perinatal period. The goal is to enhance client care through evidence-based practices and promote a compassionate, non-judgemental approach. This document has been adapted from the Registered Nurses' Association of Ontario (RNAO) Engaging Clients Who Use Substances Best Practice Guideline and the World Health Organization (WHO), summarizing key recommendations tailored for substance use care during the perinatal period, while maintaining alignment with RNAO's evidence-based standards.

Background

Substance Use and Substance Use Disorder

Substance Use Disorder (SUD) is a reoccurring pattern of using substances such as alcohol, opioids, cannabis, stimulants, tobacco, and others, leading to significant impairment or distress. According to the DSM-5-TR, SUD is defined as a loss of control over substance use, persistent cravings, and continued use despite harmful consequences (American Psychiatric Association, 2022).

Stigma and Discrimination

Health-care providers must be aware of their own biases, understand the legal and ethical implications of discrimination, and practice reflective care to ensure fair treatment for all clients.

Guiding Frameworks

Guiding frameworks provide a foundation for best practices in healthcare. They aim to enhance the quality and safety of care by emphasizing principles such as cultural competence, trauma-informed practice, and client-centred care. For a comprehensive guideline and in-depth guidance on these on the frameworks, refer to the RNAO Engaging Clients Who Use Substances Best Practice Guideline.

Pathway

The step-by-step pathway (Appendix A) is designed to guide HCPs through the screening process for perinatal clients who use substances. It incorporates practice

recommendations that can be implemented across all settings to ensure consistent and effective care.

Practice Recommendations

Motivational Interviewing

Motivational interviewing is a client-centered counseling approach that helps individuals explore and resolve their ambivalence about making positive behavior changes by engaging them in a collaborative, empathetic dialogue that enhances their intrinsic motivation and commitment to change.

1.0 Screening and Assessment

Pathway 1

Recommendation 1.1 - Initial Screening

Screen all clients to determine whether they use substances.

Begin with Question 1 of the ASSIST tool (Appendix C) to determine if the client has used substances in their lifetime, including tobacco, alcohol, cannabis, or other substances.

If no substance use is identified, the screening can be concluded. Provide health education, positive validation for healthy behaviours, and continue to re-screen at every antenatal visit.

Recommendation 1.2 – Continue Screen if Substance Use is Identified

For clients who identified they use substances, further screening is required utilizing an appropriate screening tool to determine the level of support required.

If the initial screening (Question 1 of the ASSIST tool) indicates substance use, proceed with the remaining questions to assess the frequency and impact of substance use.

Guide to Using the ASSIST Tool (Appendix B):

Administer the Tool

- **Question 1: Lifetime Use**
 - Confirm if the client has ever used substances. If the answer is “Yes”, continue with the following questions.
- **Questions 2-5: Use in the Past Three Months**
 - Ask the client about substance use in the past three months for each substance identified in question 1 (e.g. frequency, dependency, impact, failure to control).
- **Question 6: Concerns from Others**

- Ask whether anyone has express concern about the client's substance use in the past three months.
- Inquire if the client has experienced any health, social, legal, or financial problems related to their substance use.
- **Question 7: Failed Attempts to Control Use**
 - Determine if the client has tried to stop using substances.
- **Question 8: Injection Drug Use**
 - Determine if the client has ever injected substances and how recently.

Scoring Interpretation

- Scoring is completed by adding scores of questions 2 to 7. Utilize the scoring guide (Appendix C) to interpret the risk level.
 - **Low Risk:** Provide general health education.
 - **Moderate Risk:** Offer a 3–15-minute brief intervention using motivational interviewing and provide further support.
 - **High Risk:** Offer brief intervention and refer to specialized services.

2.0 Intervention

Pathway 2

Recommendation 2.1 - Brief Intervention

Use brief intervention to collaborate with clients identified at risk for substance use.

Guide for Brief Intervention:

- 1. Share Results**
 - Share the results of the screening with the client.
- 2. Feedback Report Card**
 - Explain potential risk associated with each substance that was identified. Utilize the Feedback Report Card in Appendix C.
- 3. Provide Education**
 - Give advice about how to reduce risk associated with substance use. Collaborate with the client to set realistic and specific goals for reducing or stopping substance use.
- 4. Encourage Responsibility**
 - Allow the client to take responsibility for their decisions.
- 5. Ask About Concerns**
 - Ask the client about how concerned they are about their scores.
- 6. Additional Resources**
 - Offer the client their Feedback Report Card and any additional resources and take-home materials.

Recommendation 2.2 - Referral

Advocate for and provide referral for support it required.

See the list of specialized service providers for referral on page...

Pathway 3

This pathway is managed by the referring agency. Healthcare providers should coordinate with the referring agency to ensure clients receive appropriate follow-up and support according to their specific needs.

3.0 Recommendations

Recommendation 3.1 – Reassessment

Reassess the effectiveness of the plan of care until the client’s goals are met.

Recommendation 3.2 – Rescreen

HCP’s screening for substance use should be performed as early as possible in pregnancy and at every antenatal visit.

Referrals

Ontario

[Connex Ontario](#)

Connects individuals to local treatment programs, counselling, and support services.

[Health811](#)

Free and confidential health advice and support 24/7 from registered nurses who can help you with any health matters, including addiction concerns or find health services or information.

[211 Ontario](#)

Telephone, text, and online chat support that connects individuals to social services and community programs across Ontario. Call 24-hours/day. Live chat and text available Monday to Friday 7am – 9pm.

[Stop on the Net](#)

Online program to help individuals to quit cigarettes. Anyone in Ontario who meet the criteria can sign up for free nicotine replacement therapy (NRT) for patches and gum/lozenges which will be mailed to you home

[Smokers Helpline](#)

Smokers' Helpline is a free, confidential service operated by the Canadian Cancer Society offering support and information about quitting smoking, vaping and tobacco use

Northumberland

[Canadian Mental Health Association \(CMHA\) The Road Ahead](#)

CMHA's The Road Ahead program offers specialized support for individuals with mental health and substance use challenges. It provides counselling, case management, and recovery planning.

[Peterborough AIDS Resource Network \(PARN\)](#)

Offers harm reduction services, including access to safer drug use supplies, needle exchange programs, naloxone distribution, and support for individuals affected by HIV.

[Rapid Access Addiction Medicine \(RAAM\) Clinic](#)

RAAM clinics offer low barrier access for clients seeking treatment for alcohol or opioid use.

[Fourcast](#)

Offers harm reduction services for individuals experiencing substance use challenges, including counselling and treatment programs.

City of Kawartha Lakes

[Fourcast](#)

Offers harm reduction services for individuals experiencing substance use challenges, including counselling and treatment programs.

[Peterborough AIDS Resource Network \(PARN\)](#)

Offers harm reduction services, including access to safer drug use supplies, needle exchange programs, naloxone distribution, and support for individuals affected by HIV.

[John Howard Society](#)

Offers counselling, reintegration programs, and harm reduction services to promote well-being.

[Canadian Mental Health Association \(CMHA\) The Road Ahead](#)

CMHA's The Road Ahead program offers specialized support for individuals with mental health and substance use challenges. It provides counselling, case management, and recovery planning.

[Rapid Access Addiction Medicine \(RAAM\) Clinic](#)

RAAM clinics offer low barrier access for clients seeking treatment for alcohol or opioid use.

Haliburton

[Canadian Mental Health Association \(CMHA\) The Road Ahead](#)

CMHA's The Road Ahead program offers specialized support for individuals with mental health and substance use challenges. It provides counselling, case management, and recovery planning.

[Fourcast](#)

Offers harm reduction services for individuals experiencing substance use challenges, including counselling and treatment programs.

[John Howard Society](#)

Offers counselling, reintegration programs, and harm reduction services to promote well-being.

[Rapid Access Addiction Medicine \(RAAM\) Clinic](#)

RAAM clinics offer low barrier access for clients seeking treatment for alcohol or opioid use.

Additional Resources

[Green Wood Coalition](#)

Offers harm reduction services, and support for individuals experiencing substance use, homelessness, and mental health challenges.

Health Canada Information Sheets

Thinking about using cannabis before or during pregnancy?

[cannabis-before-pregnancy-eng.pdf \(canada.ca\)](#)

Your guide to a Healthy Pregnancy

[healthy-pregnancy-guide.pdf \(canada.ca\)](#)

Healthy Pregnancy

[Your pregnancy – Pregnancy Info](#)

[Substance use in pregnancy – Pregnancy Info](#)

Taking Care – A Short Guide to Breastfeeding and Substance Use

[CWH Document Template Reference \(cewh.ca\)](#)

Best Practice Guidelines for Mental Health Disorders in the Perinatal Period: Substance Use Disorder

[BC RMH PPSUP PSBC Best Practice Guideline Substance Use Disorder Perinatal Management FINAL.pdf \(bcwomens.ca\)](#)

Mother to Baby: Fact Sheets

[Fact Sheets - Pregnancy and Breastfeeding Exposures | MotherToBaby](#)

Healthcare Providers

[Best Practice Guideline Mental Health Disorders in the Perinatal Period Perinatal Services BC](#)

[WHO Substance use and substance use disorders in pregnancy](#)

[The ASSIST-linked brief intervention for hazardous and harmful substance use \(who.int\)](#)

Client Facing

[Your Guide to a Healthy Pregnancy - Canada.ca](#)

[Substance use in pregnancy – Pregnancy Info](#)

[Thinking about using cannabis before or during pregnancy? - Canada.ca](#)

Contact your healthcare provider for personalized support. Community resources are available through. [211 Ontario](#).

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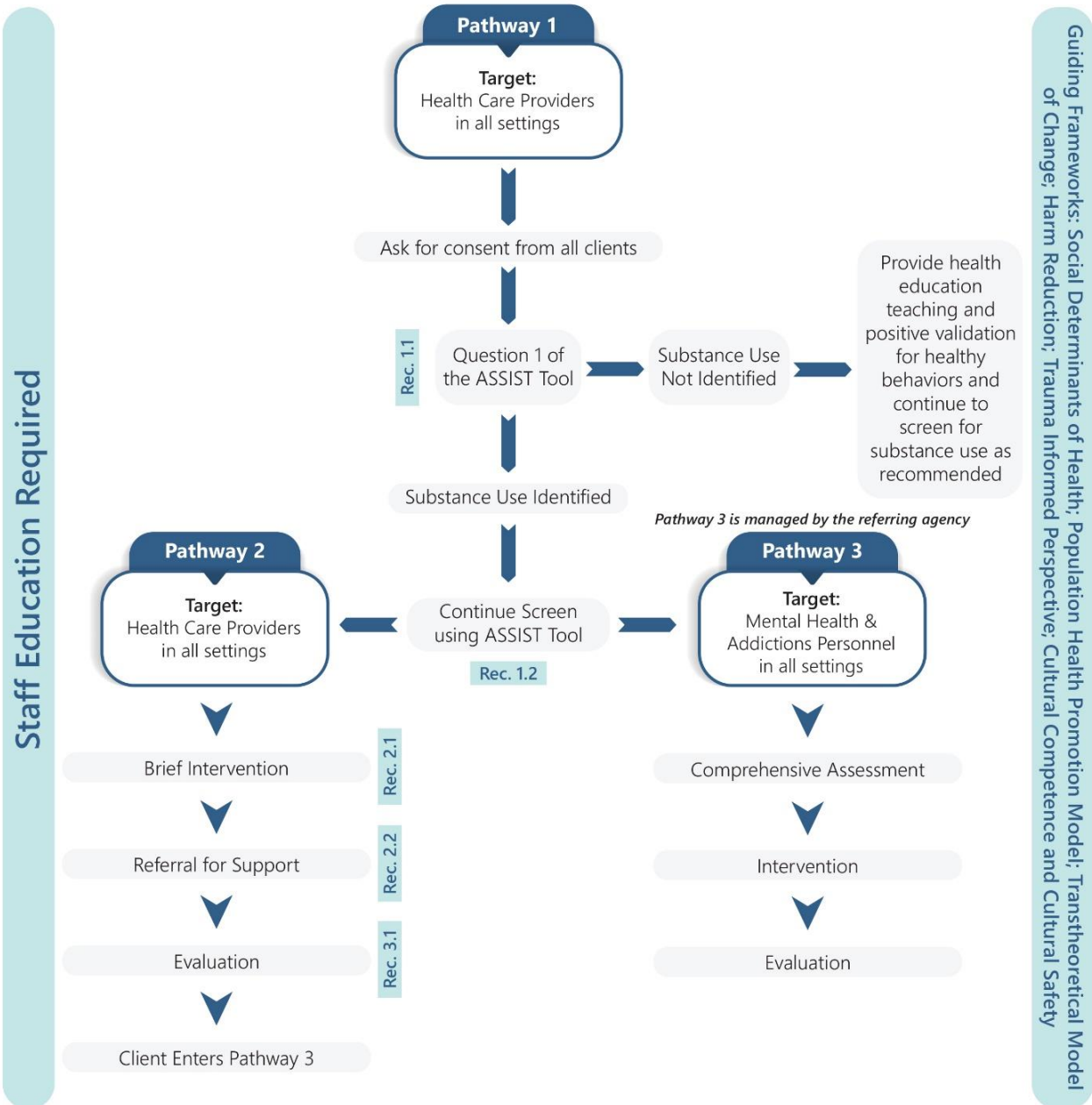
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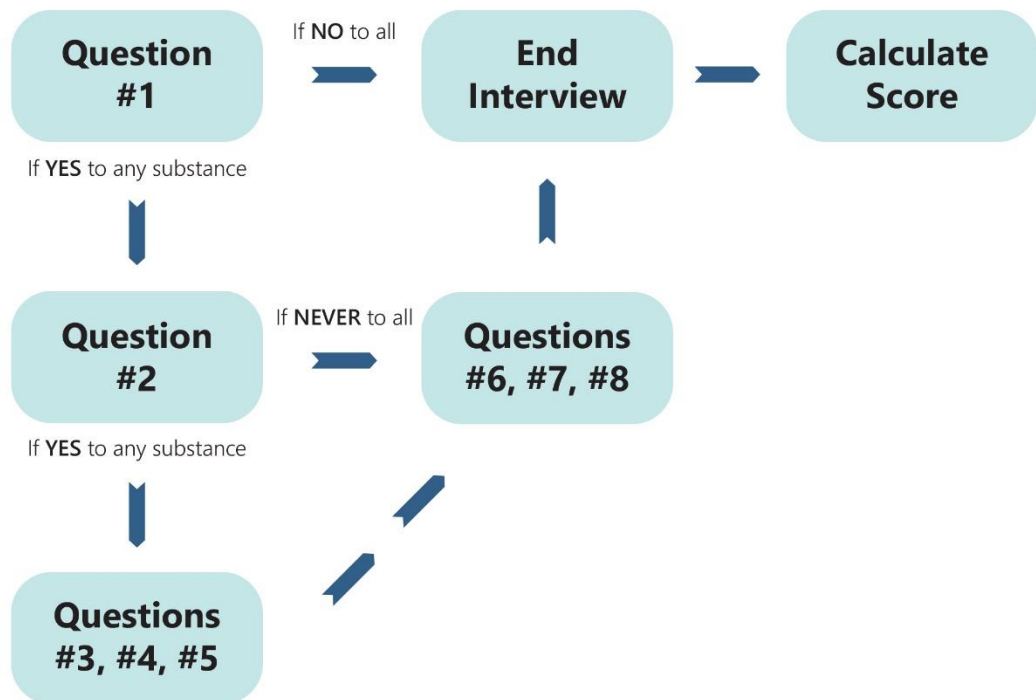
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Appendix A



Appendix B

Administering the ASSIST Screening Tool



Appendix C

The Alcohol, Smoking, and Substance Involvement Screening Test (ASSIST)

Clinician Name: _____

Clinic: _____

Client ID or Name: _____

Date: _____

Introduction

(Please read to client or adapt for local circumstances)

The following questions ask about your experience of using alcohol, tobacco products and other drugs across your lifetime and in the past three months. These substances can be smoked, swallowed, snorted, inhaled or injected (show response card).

Some of the substances listed may be prescribed by a doctor (like amphetamines, sedatives, pain medications). For this interview, we will not record medications that are used as prescribed by your doctor. However, if you have taken such medications for reasons other than prescription or taken them more frequently or at higher doses than prescribed, please let me know.

While we are also interested in knowing about your use of various illicit drugs, please be assured that information on such use will be treated as strictly confidential.

Before asking questions, give ASSIST response card to the client

Question 1: In your life, which of the following substances have you ever used (non-medical use only)?

A: Tobacco Products (Cigarettes, chewing tobacco, cigars, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
B: Alcoholic beverages (Beer, wine, spirits, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
C: Cannabis (Marijuana, pot, grass, hash, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
D: Cocaine (Coke, crack, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
E: Amphetamine-type stimulants (Speed, meth, ecstasy, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
F: Inhalants (Nitrous, glue, petrol, paint thinner, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes

A Resource Guide for Engaging Clients Who Use Substances in the Perinatal Period

G: Sedatives or sleeping pills (Diazepam, alprazolam, flunitrazepam, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
H: Hallucinogens (LSD, acid, mushrooms, trips, ketamine, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
I: Opioids (Heroin, morphine, methadone, buprenorphine, codeine, etc.)	<input type="checkbox"/> No	<input type="checkbox"/> Yes
J: Other – Specify:	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Probe if all answers are negative: “Not even when you were in school?”	If “No” to all items, stop interview. If “Yes” to any of these items, ask Q2 for each substance used.	

Question 2: In the past three months, how often have you used the substances you mentioned?	Never	Once or twice	Monthly	Weekly	Daily
A: Tobacco Products (Cigarettes, chewing tobacco, cigars, etc.)	0	2	3	4	6
B: Alcoholic beverages (Beer, wine, spirits, etc.)	0	2	3	4	6
C: Cannabis (Marijuana, pot, grass, hash, etc.)	0	2	3	4	6
D: Cocaine (Coke, crack, etc.)	0	2	3	4	6
E: Amphetamine-type stimulants (Speed, meth, ecstasy, etc.)	0	2	3	4	6
F: Inhalants (Nitrous, glue, petrol, paint thinner, etc.)	0	2	3	4	6
G: Sedatives or sleeping pills (Diazepam, alprazolam, flunitrazepam, etc.)	0	2	3	4	6
H: Hallucinogens (LSD, acid, mushrooms, trips, ketamine, etc.)	0	2	3	4	6
I: Opioids (Heroin, morphine, methadone, buprenorphine, codeine, etc.)	0	2	3	4	6
J: Other – Specify:	0	2	3	4	6
If “Never” to all items in Q2, skip to Q6. If any substances in Q2 were used in the past three months, continue to Q3, Q4, & Q5					

A Resource Guide for Engaging Clients Who Use Substances in the Perinatal Period

Question 3: During the <i>past three months</i>, how often have you had a strong desire or urge to use?	Never	Once or twice	Monthly	Weekly	Daily
A: Tobacco Products (Cigarettes, chewing tobacco, cigars, etc.)	0	3	4	5	6
B: Alcoholic beverages (Beer, wine, spirits, etc.)	0	3	4	5	6
C: Cannabis (Marijuana, pot, grass, hash, etc.)	0	3	4	5	6
D: Cocaine (Coke, crack, etc.)	0	3	4	5	6
E: Amphetamine-type stimulants (Speed, meth, ecstasy, etc.)	0	3	4	5	6
F: Inhalants (Nitrous, glue, petrol, paint thinner, etc.)	0	3	4	5	6
G: Sedatives or sleeping pills (Diazepam, alprazolam, flunitrazepam, etc.)	0	3	4	5	6
H: Hallucinogens (LSD, acid, mushrooms, trips, ketamine, etc.)	0	3	4	5	6
I: Opioids (Heroin, morphine, methadone, buprenorphine, codeine, etc.)	0	3	4	5	6
J: Other – Specify:	0	3	4	5	6

Question 4: During the <i>past three months</i>, how often has your use of (first drug, second drug, etc.) led to health, social, legal, or financial problems?	Never	Once or twice	Monthly	Weekly	Daily
A: Tobacco Products (Cigarettes, chewing tobacco, cigars, etc.)	0	4	5	6	7
B: Alcoholic beverages (Beer, wine, spirits, etc.)	0	4	5	6	7
C: Cannabis (Marijuana, pot, grass, hash, etc.)	0	4	5	6	7
D: Cocaine (Coke, crack, etc.)	0	4	5	6	7
E: Amphetamine-type stimulants (Speed, meth, ecstasy, etc.)	0	4	5	6	7
F: Inhalants (Nitrous, glue, petrol, paint thinner, etc.)	0	4	5	6	7
G: Sedatives or sleeping pills (Diazepam, alprazolam, flunitrazepam, etc.)	0	4	5	6	7
H: Hallucinogens (LSD, acid, mushrooms, trips, ketamine, etc.)	0	4	5	6	7

A Resource Guide for Engaging Clients Who Use Substances in the Perinatal Period

I: Opioids (Heroin, morphine, methadone, buprenorphine, codeine, etc.)	0	4	5	6	7
J: Other – Specify:	0	4	5	6	7

Question 5: During the <i>past three months</i>, how often have you failed to do what was normally expected of you because of your use of (first drug, second drug, etc.)?	Never	Once or twice	Monthly	Weekly	Daily
A: Tobacco Products (Cigarettes, chewing tobacco, cigars, etc.)					
B: Alcoholic beverages (Beer, wine, spirits, etc.)	0	5	6	7	8
C: Cannabis (Marijuana, pot, grass, hash, etc.)	0	5	6	7	8
D: Cocaine (Coke, crack, etc.)	0	5	6	7	8
E: Amphetamine-type stimulants (Speed, meth, ecstasy, etc.)	0	5	6	7	8
F: Inhalants (Nitrous, glue, petrol, paint thinner, etc.)	0	5	6	7	8
G: Sedatives or sleeping pills (Diazepam, alprazolam, flunitrazepam, etc.)	0	5	6	7	8
H: Hallucinogens (LSD, acid, mushrooms, trips, ketamine, etc.)	0	5	6	7	8
I: Opioids (Heroin, morphine, methadone, buprenorphine, codeine, etc.)	0	5	6	7	8
J: Other – Specify:	0	5	6	7	8

Question 6: Has a friend or relative or anyone else ever expressed concern about your use of (first drug, second drug, etc.)?	No Never	Yes, in the past three months	Yes, but not in the past three months
A: Tobacco Products (Cigarettes, chewing tobacco, cigars, etc.)	0	6	3
B: Alcoholic beverages (Beer, wine, spirits, etc.)	0	6	3
C: Cannabis (Marijuana, pot, grass, hash, etc.)	0	6	3
D: Cocaine (Coke, crack, etc.)	0	6	3
E: Amphetamine-type stimulants (Speed, meth, ecstasy, etc.)	0	6	3

A Resource Guide for Engaging Clients Who Use Substances in the Perinatal Period

F: Inhalants (Nitrous, glue, petrol, paint thinner, etc.)	0	6	3
G: Sedatives or sleeping pills (Diazepam, alprazolam, flunitrazepam, etc.)	0	6	3
H: Hallucinogens (LSD, acid, mushrooms, trips, ketamine, etc.)	0	6	3
I: Opioids (Heroin, morphine, methadone, buprenorphine, codeine, etc.)	0	6	3
J: Other – Specify:	0	6	3

Question 7: Have you ever tried to cut down on using (first drug, second drug, etc.) but failed?	No Never	Yes, in the past three months	Yes, but not in the past three months
A: Tobacco Products (Cigarettes, chewing tobacco, cigars, etc.)	0	6	3
B: Alcoholic beverages (Beer, wine, spirits, etc.)	0	6	3
C: Cannabis (Marijuana, pot, grass, hash, etc.)	0	6	3
D: Cocaine (Coke, crack, etc.)	0	6	3
E: Amphetamine-type stimulants (Speed, meth, ecstasy, etc.)	0	6	3
F: Inhalants (Nitrous, glue, petrol, paint thinner, etc.)	0	6	3
G: Sedatives or sleeping pills (Diazepam, alprazolam, flunitrazepam, etc.)	0	6	3
H: Hallucinogens (LSD, acid, mushrooms, trips, ketamine, etc.)	0	6	3
I: Opioids (Heroin, morphine, methadone, buprenorphine, codeine, etc.)	0	6	3
J: Other – Specify:	0	6	3

Question 8: Have you ever used any drug by injection (non-medical use only)?	No Never	Yes, in the past three months	Yes, but not in the past three months

(Please tick the appropriate box)			
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IMPORTANT NOTE

Clients who have injected drugs in the last three months should be asked about their pattern of injecting during this period, to determine their risk levels and the best course of intervention.

Pattern of Injecting

Intervention Guidelines

4 days per month, on average, over the last three months of less



Brief intervention including the risks of injecting card

Further assessment and more intensive treatment

More than 4 days per month, on average, over the last three months



How to Calculate Score

For each substance identified (A-J), add up the scores received from questions 2 through 7. For Example, cannabis would be calculated as: **Q2c + Q3c + Q4c + Q5c + Q6c + Q7c = Total Score.**

Please note: Question 5, tobacco is not included and should be calculated as: **Q2a + Q3a + Q4a+ Q6a + Q7a = Total Score.**

Type of intervention is determined by the patient's specific substance involvement score				
	Record Client Score Here	No Intervention	Brief Intervention	More Intensive Treatment
A: Tobacco Products		0-3	4-26	27+
B: Alcohol		0-10	11-26	27+
C: Cannabis		0-3	4-26	27+

A Resource Guide for Engaging Clients Who Use Substances in the Perinatal Period

D: Cocaine		0-3	4-26	27+
E: ATS		0-3	4-26	27+
F: Inhalants		0-3	4-26	27+
G: Sedatives		0-3	4-26	27+
H: Hallucinogens		0-3	4-26	27+
I: Opioids		0-3	4-26	27+
J: Other:		0-3	4-26	27+
Now use the ASSIST Feedback Report Card to give the client brief intervention				

Appendix D

Feedback Report Card

Substance Identified	Client Score	Risk Level
A: Tobacco Products	<input type="checkbox"/> 0-3 <input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High
B: Alcohol	<input type="checkbox"/> 0-10 <input type="checkbox"/> 11-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High
C: Cannabis	<input type="checkbox"/> 0-3 <input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High
D: Cocaine	<input type="checkbox"/> 0-3 <input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High
E: Amphetamine-type stimulants	<input type="checkbox"/> 0-3 <input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High
F: Inhalants	<input type="checkbox"/> 0-3	<input type="checkbox"/> Lower

A Resource Guide for Engaging Clients Who Use Substances in the Perinatal Period

	<input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Moderate <input type="checkbox"/> High
G: Sedatives	<input type="checkbox"/> 0-3 <input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High
H: Hallucinogens	<input type="checkbox"/> 0-3 <input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High
I: Opioids	<input type="checkbox"/> 0-3 <input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High
J: Other:	<input type="checkbox"/> 0-3 <input type="checkbox"/> 4-26 <input type="checkbox"/> 27+	<input type="checkbox"/> Lower <input type="checkbox"/> Moderate <input type="checkbox"/> High

What do your scores mean?

Lower: You are at lower risk of health and other problems from your current pattern of use.

Moderate: You are at moderate risk of health and other problems from your current pattern of use.

High: You are at high risk of experiencing severe problems (health, social, financial, legal, relationship) as a result of your current pattern of use and are likely to be dependent.

