

Integrity Counseling Inc.

Alcoholism Assessment

Circle the number for which the answer is "yes"

1. Do you use alcohol in times of stress to help alleviate your feelings?
2. Have you ever experience severe anxiety after a night of drinking?
3. Have you ever broken promises to yourself or others regarding your drinking?
4. Do you ever limit your use of alcohol on purpose?
5. Have your friends or relatives expressed concern about your drinking?
6. Has anyone asked you to stop drinking?
7. Has your drinking played a part in relationship problems?
8. Is there a history of problems around drinking in your family? -Grandparents, parents, uncles, aunts, brothers, sisters or children.
9. Does your use of alcohol affect your ability to do your work well?
10. Have you ever been in trouble at work because of drinking?
11. Do you get into fights or arguments when drinking?
12. Do you sometimes drink more than you intended to drink?
13. Have you ever sought help from a doctor, counselor, treatment center or AA (Alcoholics Anonymous) about your drinking?
14. Have you ever experienced legal problems as a result of drinking? (i.e., arrested for a DUI?)
15. Even if you've never gotten a DUI, have you deserved to receive a DUI?
16. Have you ever quit drinking for a period of time, because of problems related to drinking, only to resume drinking?
17. Have you ever decided to stop drinking, but only lasted for a few days?
18. Do you ever wish people would mind their own business about your drinking - stop telling you what to do?
19. Have you ever switched from one kind of drink to another in the hope that this would keep you from getting as drunk?
20. Have you had to have an eye-opener upon awakening during the past year?
21. Do you ever try to get extra drinks at a party because you do not get enough?-or bring extra with you?
22. Do you tell yourself you can stop drinking any time you want to, even though you keep getting drunk when you don't mean to get drunk?
23. Have you missed time from work or school because of drinking?
24. Have you ever had a blackout? (Meaning you couldn't remember a period of time and what you were doing, even though others reported to you that you were conscious, walking, talking, etc.)
25. Does alcohol make you feel energized/stimulated?
26. Have you ever experienced financial problems related to drinking?
27. Have you ever experienced any health problems related to drinking?
28. Have you ever felt that your life would be better if you did not drink?

How did you do?

If you answered "yes" to 4 or more of these questions, you probably have a problem with alcohol and need to seek further assessment and possibly treatment.

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