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Alcohol and Drug Use Self-Assessment

The following self-assessment tool was developed to determine whether or not you or a loved one might have a drug or alcohol problem. For more information please contact us at (218) 723-8444.

- Y N 1. Do you have unstoppable cravings for drugs or alcohol?
- Y N 2. While under the influence have you ever hurt yourself or others?
- Y N 3. If you have caused harm to people, have you ever promised not to do it again but been unable to keep the promise?
- Y N 4. Have people ever made comments about your drug or alcohol use?
- Y N 5. Does your drinking or using negatively affect the way you perform at work or at school?
- Y N 6. Do you drink or use to numb your feelings?
- Y N 7. Do you drink or use because you feel insecure or self-conscious about yourself?
- Y N 8. Have you been in trouble with the law or any other authority because of the amount you drink or use?
- Y N 9. Have you tried to stop using drugs or drinking but found that you are unable?
- Y N 10. Have you started to drink or use alone because you are ashamed or because you do not want to share what you have with others?
- Y N 11. Do you feel the desire to constantly be drunk or “high”?
- Y N 12. Have you ever been arrested for a DUI, DWI or any drug related offense?
- Y N 13. Are you unable to have a good time with people at places such as parties or clubs if you are not under the influence of drugs or alcohol?
- Y N 14. Have you ever woken up the next morning after drinking or using and been unable to remember what happened the night before?
- Y N 15. Do you ever tell yourself you will just have one or two drinks but find you have several more than you planned?
- Y N 16. Are the people you prefer to hang out with people who use drugs and drink the way you do?
- Y N 17. Have you ever stayed drunk or “high” for multiple days at a time?
- Y N 18. Do you find that you are defensive about what people say concerning your drinking and drug use?
- Y N 19. If so, do you drink and use more because they made you upset?

If you answered “Yes” to 3 or more of the above questions, then it is likely that an alcohol or drug problem exists. Please contact us at (218) 723-8444 or Admissions@CADT.org