

Is Alcohol A Problem In Your Life?

For each question circle the answer that best describes your alcohol behavior. Then total your scores

| Points | 0 | 1 | 2 | 3 | 4 |
|--|--------|----------------------|-------------------------------------|---------------------|--------------------------|
| 1. How often do you have a drink containing alcohol? | Never | Monthly or less | 2-4 times monthly | 2-3 times a week | 4 or more a week |
| 2. How many drinks do you have on a typical day when you are drinking? | 1 or 2 | 3 or 4 | 5 or 6 | 7-9 | 10 or more |
| 3. How often do you have six or more drinks on one occasion? | Never | Less than monthly | Monthly | Weekly | Almost daily |
| 4. How often during the last year have you found that you were not able to stop drinking once you started? | Never | Less than monthly | Monthly | Weekly | Almost daily |
| 5. How often during the last year have you failed to do what was normally expected of you because of drinking? | Never | Less than monthly | Monthly | Weekly | Almost daily |
| 6. How often during the last year have you needed a drink first thing in the morning to get yourself going after heaving drinking? | Never | Less than monthly | Monthly | Weekly | Almost daily |
| 7. How often during the last year have you had a feeling of guilt or remorse after drinking? | Never | Less than monthly | Monthly | Weekly | Almost daily |
| 8. How often during last year have you been unable to remember what happened the night before because you had been drinking? | Never | Less than monthly | Monthly | Weekly | Almost daily |
| 9. Have you or someone else been injured as a result of your drinking? | No | | Yes, but not in the last year | | Yes, in the last year |
| 10. Has a relative or friend or doctor or health worker been concerned about your drinking? | No | | Yes, but not in the last year | | Yes, in the last year |
| Add the totals for each column | | | | | |
| TOTAL SCORE <i>(sum of all columns):</i> | | | | | |

SCORING

A score of **8 or more** strongly indicates a likelihood of hazardous or harmful alcohol consumption. Even if your score is below 8 and you are encountering drinking-related problems with job performance or attendance, relationships, health, or with the law you should consider seeking help. The **COAST GUARD EMPLOYEE ASSISTANCE PROGRAM** provides confidential and free assessment. The EAP can be reached at (800) 222-0364