

Do I Have an Addiction?

Substances: alcohol, drugs, or food? **Processes:** gambling, work, internet, gaming, relationships, etc.?

Ask & Answer – HONESTLY:

1. Have I ever been arrested or hospitalized after drinking alcohol, using drugs, or food?
2. Have I ever used more than I intended? Did I do it more than once ... twice ... three times?
3. Have I ever made a resolution to control my use of alcohol, drugs, or food? Was I unable to, consistently?
4. Have I ever quit on a voluntary basis? More than once ... twice ... three times?
5. For how long did I stop? Did I stay stopped? What was I thinking or feeling just before I began using again?
6. Have I ever been asked to quit or cut down? By spouse/significant other? By family member? By employer? By clients? By court? By attorney? By doctor? By therapist/counselor? By friends?
7. Have I ever experienced lapses in memory (blackouts) while drinking alcohol, using drugs, or food?
8. Have I ever had an accident (car, falls, etc.) or need medical help after drinking, using drugs, or food?
9. Have I ever lost a job or a relationship related to use of alcohol, drugs, or food?
10. Have I ever been embarrassed by my behavior when drinking, using drugs, or food?
11. Do I ever hide my drinking, drug, or food use from anyone: significant other? Doctor? Employer? Therapist?
12. Do I ever drink alcohol, use drugs, or misuse food in the morning?
13. After drinking/drugging/eating heavily the day before, have I ever begun drinking/drugging/eating the next day to feel better?
14. Do I ever use alcohol, drugs, or food to wake up, go to sleep, increase or decrease my energy?
15. Do I ever feel a need for alcohol, drugs, or food to feel OK, especially in social situations?
16. Have I ever hurt or threatened anyone when drinking alcohol, using drugs, or food?
17. Do I ever have a strong physical or emotional craving for alcohol, drugs, or food?
18. Do I ever drink alcohol, use drugs, or eat food excessively, alone?
19. Does using alcohol, drugs, or food ever interfere with the quality of **any** aspect of my life?
20. Does my drinking, drug use, or eating **ever** make me unhappy or remorseful?

If you answered “Yes” to any question, you may need a professional assessment for possible addiction disorder.