

Healthy

Living in Recovery

Drug and Alcohol Use Self-Assessment

Welcome to our Drug and Alcohol Use Self-Assessment. This online tool is designed to help you reflect on your substance use and identify potential issues. Your responses are completely confidential. Please answer each question with a simple "Yes" or "No."

Question	Yes	No
Do most or all of your social activities include drinking, smoking marijuana, or using drugs?		
Have you had regrets about your behavior after drinking or using drugs?		
Do you drink or use more to get the same effect you used to?		
Have you ever forgotten all or part of an evening after drinking?		
Have you ever missed work, school, or other obligations because of drinking or using?		
Have you ever had personal, legal, or financial problems related to drinking or using but didn't alter your use patterns?		
Do you have any family members with an alcohol or other drug problem?		
Have you ever tried to stop or cut down but weren't always successful?		

If you answered "Yes" to two or more questions, you may be developing unhealthy drinking or substance use habits. It may be helpful for you to speak with a peer or professional.

Remember, we are here to help. Call us at 401-608-3322 or 888-344-4045.

This assessment is not a substitute for professional advice but can be a starting point for seeking further help and understanding your substance use disorder.

Mental Health Self-Assessment

Welcome to our Mental Health Self-Assessment. This tool is designed to help you evaluate your emotional well-being. Your answers will remain confidential, and you can use them to understand better how you've been feeling over the past two weeks. Please rate each statement according to the following scale:

Not at all:	0
Several days:	1
More than half the days:	2
Nearly every day:	3

Assessment Questions:

Question	Scale
Little interest or pleasure in doing things.	
Feeling down, depressed, or hopeless.	
Trouble falling or staying asleep, or sleeping too much.	
Feeling tired or having little energy.	
Poor appetite or overeating.	
Trouble concentrating on things, such as reading the newspaper or watching television.	

Question	Scale
Feeling bad about yourself, or that you are a failure or have let yourself or your family down.	
Moving or speaking so slowly that other people could have noticed. Or the opposite – being so fidgety or restless that you have been moving around a lot more than usual.	
Thoughts that you would be better off dead, or of hurting yourself.	
<p>If you checked off any problems, how difficult have these problems made it for you to do your work, take care of things at home, or get along with other people?</p> <p>Score 0 for Not difficult at all</p> <p>Score 1 for Somewhat difficult</p> <p>Score 2 for Very difficult</p> <p>Score 3 for Extremely difficult</p>	

Add your score. A Score 10 or higher may indicate that you are struggling with mental health issues.

Remember, we are here to help. You can speak with a peer or professional by calling us at 401-608-3322 or 888-344-4045.

Important Safety Information:

If you feel unsafe or have thoughts of harming yourself, please call 911 immediately. For additional support, contact the National Suicide Prevention Lifeline at 800-273-TALK (8255).

This assessment is not a substitute for professional advice but can be a starting point for seeking further help and understanding your mental health better.