Below you will find a list of problems related to alcohol. The total score should decrease with successful treatment.

Not all of the questions may apply to you, but try to answer the ones that do. Please circle YES or NO depending on whether you have had similar problems.

The questions apply to the last SIX MONTHS.

A1. Have you tended to drink on your own more than you used to? YES NO
A2. Have you worried about meeting your friends again the day after a drinking session? YES NO
A3. Have you spent more time with drinking friends than other kinds of friends? YES NO
A4. Have your friends criticised you for drinking too much? YES NO

B5. Has your partner complained about your drinking? YES NO
B6. Has your partner tried to stop you from having a drink? YES NO
B7. Has he/she refused to talk to you because you have been drinking? YES NO
B8. Has he/she threatened to leave you because of your drinking? YES NO
B9. Has he/she had to put you to bed after you have been drinking? YES NO
B10. Have you shouted at him/her when you have been drinking? YES NO
B11. Have you injured him/her after you have been drinking? YES NO
B12. Have you been legally separated from your spouse? YES NO
B13. Has he/she refused you have sex with you? YES NO

C14. Have your children criticised your drinking? YES NO
C15. Have you had rows with your children about your behaviour? YES NO
C16. Do your children tend to avoid you when you have been drinking? YES NO
C17. Have you hit any of your children after you have been drinking? YES NO
C18. Have your children tried to stop you from having a drink? YES NO
C19. Have your children refused to lend you money? YES NO
D20. Have you found your work less interesting than you used to?    YES  NO
D21. Have you been unable to arrive on time for work?      YES  NO
D22. Have you missed a whole day at work after a drinking session?   YES  NO
D23. Have you been less able to do your job because of your drinking?    YES  NO
D24. Has anyone at work complained about you being late or absent?    YES  NO
D25. Have you had any formal warnings from your employers?       YES  NO
D26. Have you been suspended or dismissed from work?     YES  NO
D27. Have you had any accidents at work after drinking?   YES  NO
E28. Have you had any debts?        YES  NO
E29. Have you pawned any of your belongings?       YES  NO
E30. Do you find yourself making excuses about money?     YES  NO
E31. Have you been caught out lying about money?       YES  NO
F32. Have you been in trouble with the police due to your drinking?   YES  NO
F33. Have you lost your driving license for drinking and driving?   YES  NO
F34. Have you been in prison?       YES  NO
G35. Have you been physically sick after drinking?    YES  NO
G36. Have you had any diarrhoea after a drinking session?   YES  NO
G37. Have you had pains in your stomach after a drinking session?    YES  NO
G38. Have you had "pins and needles" in your fingers or toes?   YES  NO
G39. Have you had any accidents, needing hospital treatment after drinking?   YES  NO
G40. Have you lost any weight?   YES  NO
H41. Have you been neglecting yourself physically?  YES NO
H42. Have you failed to wash for several days at a time? YES NO
H43. Have you felt depressed for more than a week? YES NO
H44. Have you felt so depressed that you have felt like doing away with yourself? YES NO
H45. Have you given up any hobbies you once enjoyed because of your drinking? YES NO
H46. Do you find it hard to get the same enjoyment from your usual interests? YES NO
J47. Have you ever felt in need of forgiveness because of the things your drinking has led you to do? YES NO
J48. Have you ever felt that only a great outside power, like God, could help you regain some of the things drinking has caused you to lose? YES NO
J49. Have you ever worried that your behaviour under the influence of alcohol might affect what happens to you after you have died? YES NO

Please list any other problems you have had due to alcohol which are not included in the questionnaire:

1. ______________________________________________________________________
2. ______________________________________________________________________
3. ______________________________________________________________________

Total APQ Score = ____________________________

APQ subscores

A friendships ___ (0–4)
B partner/spouse ___ (0–9)
C children ___ (0–6)
D work ___ (0–8)
E money ___ (0–4)
F legal ___ (0–3)
G physical ___ (0–6)
H psychological ___ (0–6)
J spiritual ___ (0–3) not included in original APQ.