What does your Section B score mean?

0–7: Low risk – While there are no completely safe levels of alcohol, the amount you drink is low risk.
What can I do? You could aim to keep your drinking at low-risk levels.

8–15: Hazardous – Your drinking is putting you at increased risk of harm, including damage to your physical and mental health.
What can I do? You could reduce your drinking to a healthier level – this may be as simple as having one less drink a day, or drinking on one less night a week.

16–19: High risk – Drinking at this level will result in damage to your physical and mental health. You are also at risk of being alcohol dependent.
What can I do? You could cut down on your drinking or consider stopping, even for a while.

20+: Highest risk – Your drinking is seriously harming you and you are likely to be alcohol dependent.
What can I do? You could see your GP and ask for advice and support, or ask to be referred to a specialist service.

Other questions you might want to think about

How important is it for you to do something about your drinking?

1	2	3	4	5	6	7	8	9	10
Not important	→	→	→	→	→	→			Very important

How confident do you feel about being able to cut down your drinking?

1	2	3	4	5	6	7	8	9	10
Not at all confident	→	→	→	→	→	→			Very confident

For further information about being referred to a specialist service please contact:

South Eastern Health and Social Care Trust Community Addiction Service
Shimna House, Downshire Hospital, Ardglass Road, Downpatrick BT30 6RA.
Tel: 028 4461 3311, Ext: 3263.

For more information, go to **www.knowyourlimits.info**

HSC Public Health Agency

DHSSPS Department of Health, Social Services and Public Safety www.dhsspsni.gov.uk

Public Health Agency
12-22 Linenhall Street, Belfast BT2 8BS. Tel: 028 9032 1313.
www.publichealth.hscni.net

This Alcohol MOT has been adapted from the Alcohol MOT developed by the Health Development Department, South Eastern Trust, and the Screening and brief intervention (sbi) resource originally developed in 2006 at the Institute of Health & Society, Newcastle University.

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Alcohol MOT part one

Section A

Is your drinking putting you at risk?

Most adults who live in Northern Ireland drink some alcohol. Many drink at a level that does not put their health at risk, and if you drink, you may think you are one of them. To find out for sure, answer the three questions below.

Please enter your score for each question and then add up your total score at the bottom.

	Score
1. How often do you have a drink containing alcohol? Never (0) Less than monthly (1) 2-4 times a month (2) 2-3 times a week (3) 4 or more times a week (4)	
2. How many standard drinks (eg small glass of wine, half a pint of beer, single measure of spirits) containing alcohol do you have on a typical day when you are drinking? 1 or 2 (0) 3 or 4 (1) 5 or 6 (2) 7 to 9 (3) 10 or more (4)	
3. How often do you have six or more drinks on one occasion? Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily or almost daily (4)	
Total score	

What does your Section A score mean?

If you are a man and scored four or less, or if you are a woman and scored three or less, you are a low-risk drinker. Aim to keep your drinking at these low levels.

If you are a man and scored five or more, or if you are a woman and scored four or more, your drinking may be putting your health at risk. Now complete the next questionnaire to find out more.

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Section B

What health risks are you taking?

Please enter your score in the column and then add up your total score at the end.

	Score
1. How often do you have a drink containing alcohol? Never (0) **(skip to questions 9 and 10)** Monthly or less (1) 2 to 4 times a month (2) 2 to 3 times a week (3) 4 or more times a week (4)	
2. How many drinks containing alcohol (eg small glass of wine, half a pint of beer, single measure of spirits) do you have on a typical day when you are drinking? 1 or 2 (0) 3 or 4 (1) 5 or 6 (2) 7, 8 or 9 (3) 10 or more (4)	
3. How often do you have six or more drinks on one occasion? Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily or almost daily (4) **(Skip to questions 9 and 10 if your total score for questions 2 and 3 is zero).**	
4. How often during the last year were you unable to stop drinking once you had started? Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily or almost daily (4)	
5. How often during the last year have you failed to do what was expected of you because of drinking? Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily or almost daily (4)	

	SCORE
6. How often during the last year have you needed a drink in the morning to get yourself going after a heavy drinking session? Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily or almost daily (4)	
7. How often during the last year have you had a feeling of guilt or remorse after drinking? Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily or almost daily (4)	
8. How often during the last year have you been unable to remember what happened the night before because you had been drinking? Never (0) Less than monthly (1) Monthly (2) Weekly (3) Daily or almost daily (4)	
9. Have you or someone else been injured as a result of your drinking? No (0) Yes, but not in the last year (2) Yes, during the last year (4)	
10. Has a relative, friend, doctor or another health worker been concerned about your drinking or suggested you cut down? No (0) Yes, but not in the last year (2) Yes, during the last year (4)	
Total score:	

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