**UNCOPE Questions for Concerned Others to Screen for a Substance Abuse Problem**

# The UNCOPE screening test consists of six questions found in existing instruments and assorted research reports. This excellent screening test was first reported by Hoffmann and colleagues in 1999. The six questions provide a simple and quick means of identifying whether the person you are concerned about is at risk for abuse or dependence for alcohol and other drugs. Take the screening test and circle a “yes” or “no” at the end of each of the questions. Answer the questions to the best of your knowledge. You may find it interesting, comforting and necessary to have others in your support network take this screening test as well. It almost always will result in interesting discussion among those who take it because each person may have observed different drinking and drug use behaviors over the past year. The scoring of the screening test is found at the end of the six questions.

**U** “In the past year, have you ever observed the individual you are concerned about drinking or **using** drugs more than he/she meant to?” *Or*  “Have you noticed the person you are concerned about spending more time drinking or **using** than he/she intended to?”

Yes No

**N** “Have you ever seen the individual you are concerned about **neglecting** some of his/her usual responsibilities because of using alcohol or drugs?”

Yes No

**C** “Have you seen the individual you are concerned about wanting or needing to **cut down** on his/her drinking or drug use in the last year?”

Yes No

**O** “Have you or anyone else **objected** to the drinking or drug use of the individual you are concerned about?”

Yes No

**P** “Have you ever found the individual you are concerned about **preoccupied** with wanting to use alcohol or drugs?”*Or* “Have you found the individual you are concerned about thinking and talking a lot about drinking or using?”

 Yes No

**E** “Have you ever observed or been worried that the individual you are concerned about is using alcohol or drugs to relieve **emotional discomfort**, such as sadness, anger, or boredom?”

Yes No

**Scoring:**

**Two** “Yes” answers indicate a strong likelihood of an alcohol and/or drug abuse problem. **Four** or more “Yes” answers strongly indicate an alcohol and/or drug dependence problem.

# UNCOPE Questions to Screen Yourself for a Substance Abuse Problem

# The UNCOPE screening test consists of six questions found in existing instruments and assorted research reports. This excellent screening test was first reported by Hoffmann and colleagues in 1999. The six questions provide a simple and quick means of identifying whether you are at risk for abuse or dependence for alcohol and other drugs. Take the screening test and circle a “yes” or “no” at the end of each of the questions. Answer the questions to the best of your knowledge - it may be difficult to be completely honest because of fears you might have about the outcome of this screening. You may find it interesting, informative and necessary to have others in your support network take the other screening test on this web site, “Alcohol and Drug Abuse - Assess Others” and discuss their answers as they compare to yours. You can be assured, if you do this, it almost always will result in an interesting discussion among yourself and those who take the other screening test because it will compare your observations with those from others who may have observed your drinking and drug use behaviors differently from yourself over the past year. The scoring of the screening test is found at the end of the six questions. *Take the risk and stay as honest as possible when you answer the questions.*

**U** “In the past year, have you ever drank or **used** drugs more than you meant to?” *Or* “Have you spent more time drinking or **using** than you intended to?”

Yes No

**N** “Have you ever **neglected** some of your usual responsibilities because of using alcohol or drugs?”

Yes No

**C** “Have you wanted or needed to **cut down** on your drinking or drug use in the last year?”

Yes No

**O** “Has anyone **objected** to your drinking or drug use?” *Or* “Has your family, a friend, or anyone else ever told you they **objected** to your alcohol or drug use?”

Yes No

**P** “Have you ever found yourself **preoccupied** with wanting to use alcohol or drugs?” *Or* “Have you found yourself thinking a lot about drinking or using?”

Yes No

**E** “Have you ever used alcohol or drugs to relieve **emotional discomfort**, such as sadness, anger, or boredom?”

Yes No

**Scoring:**

**Two** “Yes” answers indicate a strong likelihood of an alcohol and/or drug abuse problem. **Four** or more “Yes” answers strongly indicate an alcohol and/or drug dependence problem.