YOUR ANSWERS. YOUR PERSPECTIVE.

Alcohol

Personal everyday reflection

A wholly fictional example. The values illustrate a report and say nothing about you.

ANSWERED: 20 / 20 | 4 PROFILE AREAS

1

Alcohol as a habit

You describe alcohol as an established part of certain situations or an expected end to demanding days. This shows a reported habitual association, not established dependence.

2

Room for choice

You describe prior intentions about drinking receding in actual situations. Persuasion or postponing a decision may influence your choice more than you initially want. Some responses differ substantially from this direction.

3

Individual responses matter

Room for choice: Scored responses range from 2 to 5/5 (items 9 & 10).

Your first small step

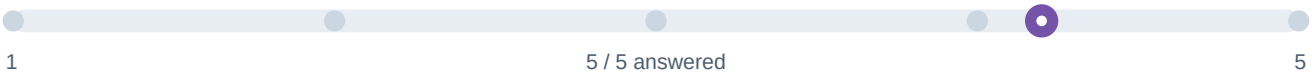
Which decision about alcohol would you like more clarity or support with? Record it for a conversation without planning an unsupported withdrawal.

02 / YOUR REPORT

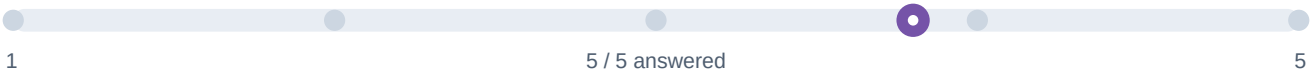
Your profile at a glance

Each dot shows an area response average on a scale of 1 to 5. Only your own responses are compared.

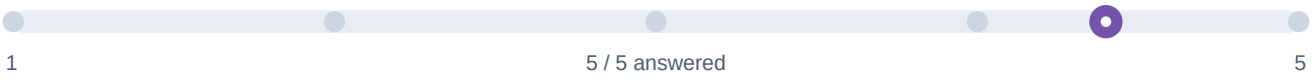
Alcohol as a habit — 4.2 / 5



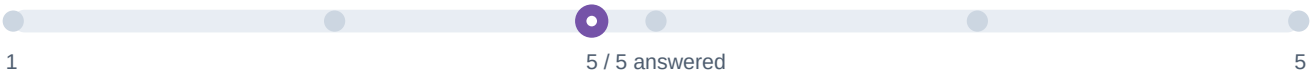
Room for choice — 3.8 / 5



After-effects in daily life — 4.4 / 5



Speaking openly about drinking — 2.8 / 5



How to read the chart

1 = low, 3 = midpoint, 5 = high agreement in the scored direction. Higher is not automatically better. The midpoint is not the average of other people; small differences are not necessarily meaningful.

No area value is shown if fewer than 80% of its items are answered. This is a display rule for incomplete data, not a performance or health threshold.

03 / YOUR REPORT

Connecting your responses

Observations from your responses, not fixed characteristics.

You receive an overview of habits, decision-making room, after-effects and barriers to discussion. A low value does not mean safe drinking; dependence and physical risks are not assessed here.

Your result in words

Alcohol as a habit: You describe alcohol as an established part of certain situations or an expected end to demanding days. This shows a reported habitual association, not established dependence.

Room for choice: You describe prior intentions about drinking receding in actual situations. Persuasion or postponing a decision may influence your choice more than you initially want.

Room for choice: take a closer look

The average combines different responses. These two items show why one number alone does not capture your whole perspective:

Item 9: I could stand by my wish for an alcohol-free drink without a prolonged inner debate. | Mostly true

Item 10: After a drinking situation, I noticed that I had lost sight of my own intention. | Very true

Consider a possible everyday situation

Which decision about alcohol would you like more clarity or support with? Record it for a conversation without planning an unsupported withdrawal.

04 / YOUR REPORT

Alcohol as a habit

Trace your responses and connect them with everyday situations.

This area concerns how automatic alcohol use becomes in particular situations. It measures neither consumption quantity nor the risk of illness.

Your response value **4.2 / 5**



1 5 / 5 answered 5

What this means in practice

You describe alcohol as an established part of certain situations or an expected end to demanding days. This shows a reported habitual association, not established dependence.

Scale direction: less reported attachment to routine / more reported attachment to routine.

Two concrete responses

Item 3: When planning free time, I thought early on about whether alcohol would be part of it.

Your response: Partly true

Item 5: I expected alcohol to help me mentally leave a demanding day behind more quickly.

Your response: Very true

A prompt for further reflection

Note one recurring situation in which alcohol plays a part and what you hope for from that moment. Begin with observation only.

When does this fit me - and when does it not?

05 / YOUR REPORT

Room for choice

Trace your responses and connect them with everyday situations.

These statements concern the fit between your decisions and what you actually do. Individual responses do not establish loss of control or dependence.

Your response value **3.8 / 5**



1 5 / 5 answered 5

What this means in practice

You describe prior intentions about drinking receding in actual situations. Persuasion or postponing a decision may influence your choice more than you initially want.

Your individual responses differ substantially. The interpretation describes their average direction only; it does not apply to every statement. The following responses show both sides.

Scale direction: less reported pressure around choices / more reported pressure around choices.

Two concrete responses

Item 9: I could stand by my wish for an alcohol-free drink without a prolonged inner debate.

Your response: Mostly true (reverse-scored in the calculation)

Item 10: After a drinking situation, I noticed that I had lost sight of my own intention.

Your response: Very true

> **A prompt for further reflection**
>
> Which decision about alcohol would you like more clarity or support with? Record it for a conversation without planning an unsupported withdrawal.

When does this fit me - and when does it not?

06 / YOUR REPORT

After-effects in daily life

Trace your responses and connect them with everyday situations.

This area concerns connections you notice between alcohol and your daily routine. The questionnaire does not establish causation or assess physical safety.

Your response value **4.4 / 5**



1 5 / 5 answered 5

What this means in practice

You describe after-effects of alcohol on plans, attention or recovery. These are concrete consequences you report; consumption amount and medical risks are not measured here.

Scale direction: fewer reported after-effects / more reported after-effects.

Two concrete responses

Item 15: A situation involving alcohol led to a conversation or clarification that I otherwise would not have needed.

Your response: Partly true

Item 14: I could attend to my usual commitments without interruptions from alcohol or its after-effects.

Your response: Not at all true (reverse-scored in the calculation)

A prompt for further reflection

Note one specific after-effect you would like to discuss, such as on rest, arrangements or concentration. Medical symptoms require medical assessment.

When does this fit me - and when does it not?

07 / YOUR REPORT

Speaking openly about drinking

Trace your responses and connect them with everyday situations.

This area describes barriers to discussing your relationship with alcohol. Greater agreement with these barriers says nothing about the amount consumed.

Your response value **2.8 / 5**



1 5 / 5 answered 5

What this means in practice

Your answers fall between “fewer reported conversation barriers” and “more reported conversation barriers”. This can reflect differing experiences or tentative agreement. The particular statements you endorse or reject are more informative here than the average alone.

Scale direction: fewer reported conversation barriers / more reported conversation barriers.

Two concrete responses

Item 16: I changed the subject when my own relationship with alcohol came up.

Your response: Mostly untrue

Item 18: Expecting to be judged kept me from seeking information for myself.

Your response: Mostly true

A prompt for further reflection

What factual question would you like to ask an advice service or medical professional? You do not need to justify your drinking or describe it in detail here.

When does this fit me - and when does it not?

08 / YOUR REPORT

Your values clearly explained

Alcohol as a habit

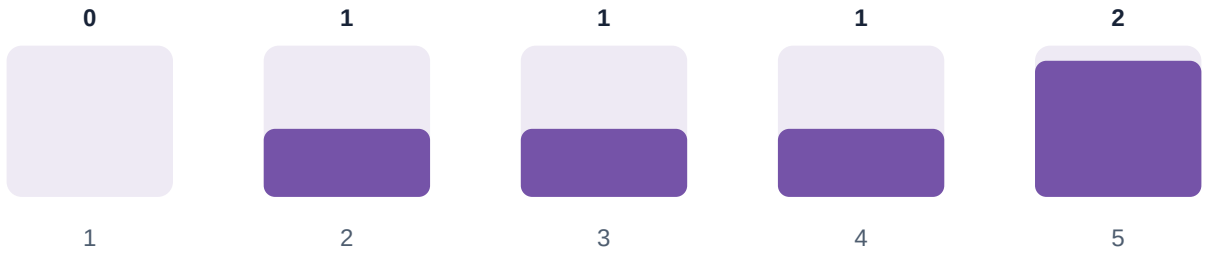
Response positions are counted from 1 to 5. The sum is divided by the number of answered statements in this area.

For reverse-scored statements, 1 becomes 5, 2 becomes 4 and vice versa; 3 stays 3. This aligns values with the stated scale direction. Your selected response remains unchanged in the appendix.

Calculated from your actual responses

4 + 5 + 3 + 4 + 5 = 21. 21 / 5 = 4.2 / 5.

The distribution of your selected responses



The columns count your selected response positions 1 to 5 before any reverse scoring. The same average can come from very different responses.

For the wording, response averages below 2.5 are described as lower agreement, above 3.5 as higher agreement, and those between as middle agreement. These are editorial response-scale bands, not scientifically validated cutoffs. Identical averages can arise from different responses.

A profile without a ranking

We assign no population rank or fixed type. The scales describe responses to particular statements. Choose your own priorities; a high or low value does not require change.

09 / YOUR REPORT

Your own next step

An optional everyday idea, without a performance target.

1

Today: note one situation

Starting point: Room for choice. Choose a response in this area and note when it last fitted. A counterexample is just as useful.

2

This week: explore a perspective

Which decision about alcohol would you like more clarity or support with? Record it for a conversation without planning an unsupported withdrawal.

3

Afterwards: decide for yourself

What fits you and what does not? Record one insight and decide whether to keep anything. You do not need a higher score or another purchase.

My situation and what matters to me:

My optional idea and a suitable time:

What I would like to take from this:

10 / YOUR REPORT

Method and limitations

What the report is based on

These original statements have not been clinically validated. Averages describe agreement, not dependence, an individual health risk or a safe amount to drink. They do not reproduce the AUDIT or another established screener. Seek medical help if physical symptoms occur when reducing or stopping alcohol. Alcohol withdrawal can be dangerous and should be medically supported when dependence may be present. This questionnaire provides no withdrawal instructions.

Your responses are summarised according to the fixed rules explained here. Examples refer to the item numbers shown. No automated detection or assessment of a medical condition takes place.

Keeping the limitations in mind

Screening and self-reflection do not replace a medical or psychological assessment. Original reflection questions are not clinically validated. Each test page explains its method and limitations.

A profile does not cover every aspect of a person. It is a snapshot of your responses. Important relationship, career or other life decisions should not depend on it alone.

> **If you would like support**
>
> If symptoms are affecting you, seek support from a qualified health professional. In immediate danger, contact your local emergency services or nearest emergency department. Help information is available without an email address or payment.

Open general support information

Questionnaire version: 2026-10-29.27 | Report format: 2026-10-29.28

APPENDIX / YOUR REPORT

Your responses in full

Every scored response remains traceable. Skipped items are explicitly identified.

1 **In a familiar situation, I reached for alcohol without consciously considering it.**
Alcohol as a habit | Mostly true

2 **Certain transitions in the day felt closely tied to an alcoholic drink.**
Alcohol as a habit | Very true

3 **When planning free time, I thought early on about whether alcohol would be part of it.**
Alcohol as a habit | Partly true

4 **I could comfortably enjoy a social or relaxed moment independently of alcohol.**
Alcohol as a habit | Mostly untrue | reverse-scored

5 **I expected alcohol to help me mentally leave a demanding day behind more quickly.**
Alcohol as a habit | Very true

6 **A decision I had made about drinking faded into the background in the actual situation.**
Room for choice | Partly true

7 **I was persuaded to drink alcohol even though that was not what I originally wanted.**
Room for choice | Very true

8 **I postponed a decision about my relationship with alcohol even though it mattered to me.**
Room for choice | Mostly true

9 **I could stand by my wish for an alcohol-free drink without a prolonged inner debate.**
Room for choice | Mostly true | reverse-scored

10 **After a drinking situation, I noticed that I had lost sight of my own intention.**
Room for choice | Very true

11 **After an occasion involving alcohol, I had to plan the next day differently than intended.**
After-effects in daily life | Very true

12 **After drinking, I felt less attentive during an ordinary task than I wanted.**
After-effects in daily life | Mostly true

13 **I felt that alcohol interfered with the rest I wanted rather than supporting it.**
After-effects in daily life | Very true

14 **I could attend to my usual commitments without interruptions from alcohol or its after-effects.**
After-effects in daily life | Not at all true | reverse-scored

Your responses in full / CONTINUED

15 **A situation involving alcohol led to a conversation or clarification that I otherwise would not have needed.**

After-effects in daily life | Partly true

16 **I changed the subject when my own relationship with alcohol came up.**

Speaking openly about drinking | Mostly untrue

17 **I found it difficult to tell an appropriate person about an uncertainty I had about drinking.**

Speaking openly about drinking | Partly true

18 **Expecting to be judged kept me from seeking information for myself.**

Speaking openly about drinking | Mostly true

19 **I could ask a factual question about alcohol without tying my personal worth to it.**

Speaking openly about drinking | Partly true | reverse-scored

20 **I did not know how to put a wish for support around alcohol into words.**

Speaking openly about drinking | Mostly untrue