

AI Use Clinical Screening Worksheet

Healthy use vs. emotional dependency vs. compulsive sexual/relational use

Use this worksheet to explore how a client uses AI, what needs it serves, and whether the pattern appears integrated, avoidant, dependent, or compulsive. Complete collaboratively in session.

Client

Date

Clinician

1. Basic Use Pattern

Primary AI formats used

- | | |
|--|---|
| <input type="checkbox"/> General chatbot | <input type="checkbox"/> AI for emotional support |
| <input type="checkbox"/> AI companion / relational AI | <input type="checkbox"/> AI for productivity / information only |
| <input type="checkbox"/> Roleplay / Character AI | <input type="checkbox"/> Other <input type="text"/> |
| <input type="checkbox"/> AI for sexual content / erotic dialogue | |

Frequency Less than weekly 1-3 days/week 4-6 days/week Daily Multiple times daily Nearly constant

Average duration per session Under 10 min 10-30 min 30-60 min 1-2 hr 2+ hr

Highest-risk times or contexts

- | | |
|---|---|
| <input type="checkbox"/> Morning | <input type="checkbox"/> Late at night |
| <input type="checkbox"/> During work/school | <input type="checkbox"/> During substance use |
| <input type="checkbox"/> After conflict | <input type="checkbox"/> After sexual urges |
| <input type="checkbox"/> During loneliness | <input type="checkbox"/> When distressed / dysregulated |

Primary reasons for use

- | | |
|---|---|
| <input type="checkbox"/> Entertainment | <input type="checkbox"/> Escape from stress |
| <input type="checkbox"/> Advice / information | <input type="checkbox"/> Avoiding people |
| <input type="checkbox"/> Emotional comfort | <input type="checkbox"/> Reducing loneliness |
| <input type="checkbox"/> Feeling understood | <input type="checkbox"/> Practicing conversations |
| <input type="checkbox"/> Sexual arousal | <input type="checkbox"/> Replacing partner intimacy |
| <input type="checkbox"/> Fantasy / roleplay | <input type="checkbox"/> Other <input type="text"/> |

Clinical Domains Rating Scale

Rate each item for the last 30 days: 0 = Not at all, 1 = Rarely, 2 = Sometimes, 3 = Often, 4 = Very often / almost always

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Enter one score (0-4) in each box.

A. Control / Compulsion

Score

1. I use AI longer than I intend to.

2. I tell myself I will cut back, but I do not follow through.

3. I feel pulled to check or return to AI conversations.

4. I have trouble stopping once I begin.

5. My use has increased over time in frequency, intensity, or explicitness.

Subtotal

B. Emotional Dependency

Score

6. I rely on AI to calm down when upset.

7. I feel especially drawn to AI when lonely, rejected, ashamed, or anxious.

8. AI feels easier or safer than turning to real people.

9. I feel emotionally attached to a specific AI or character.

10. I feel distressed, empty, or irritable when I cannot access it.

Subtotal

Clinical Domains Rating Scale

Rate each item for the last 30 days: 0 to 4

C. Relational Displacement

Score

11. My AI use reduces how much I engage with real relationships.

12. I withdraw from my partner, friends, or family because of AI use.

13. I prefer AI interaction over vulnerable human interaction.

14. I use AI instead of addressing conflict or relational discomfort.

15. My use creates secrecy, dishonesty, or tension in relationships.

Subtotal

D. Sexual / Erotic Compulsivity

Score

16. I use AI for sexual arousal, fantasy, or erotic roleplay.

17. My AI sexual use has become more frequent or more intense over time.

18. I use AI sexually even when I feel it conflicts with my values or goals.

19. I return to AI sexual content after shame, stress, boredom, or triggers.

20. My AI use fits a cycle of urge, ritual, acting out, regret, and repetition.

Subtotal

E. Impairment / Consequences

Score

21. AI use interferes with sleep.

22. AI use interferes with work, school, parenting, or responsibilities.

23. AI use negatively affects my mood, focus, or energy.

24. I hide the extent or nature of my AI use.

25. I feel guilt, shame, or internal conflict about my AI use.

Subtotal

Total Score

Qualitative Interview and Red Flags

Use this page to understand the function, meaning, and consequences of AI use.

Qualitative Interview Prompts

Attachment / emotional meaning

What does AI provide that feels hard to get from people? When do you feel most drawn to it? Does it feel like a tool, a habit, a companion, or a relationship?

Relational functioning

Has AI use changed how you relate to a partner, friends, family, or your willingness to address conflict or vulnerability?

Sexual behavior cycle

How does AI use connect to arousal, fantasy, masturbation, pornography, or erotic roleplay? What is the usual sequence before, during, and after use?

Loss of control / consequences

Have you tried to stop, limit, or change the way you use AI? What costs or consequences have shown up?

Clinical Red Flags - check any that apply

- | | |
|--|---|
| <input type="checkbox"/> Uses AI in secrecy or deletes chats/history | <input type="checkbox"/> Uses AI during work, school, or caregiving responsibilities |
| <input type="checkbox"/> Uses AI late at night with significant sleep disruption | <input type="checkbox"/> Returns to AI use after shame, distress, or triggers despite negative consequences |
| <input type="checkbox"/> Reports emotional reliance on AI for soothing or attachment | <input type="checkbox"/> Experiences irritability, anxiety, or emptiness when unable to access AI |
| <input type="checkbox"/> Describes AI as the only thing that understands me | <input type="checkbox"/> Values conflict: I know this is not healthy, but I keep doing it |
| <input type="checkbox"/> Increasing time, intensity, or explicit sexual content | <input type="checkbox"/> Uses AI in combination with substances, arousal, or isolation |
| <input type="checkbox"/> Substitutes AI for relational repair, social support, or partnered in | <input type="checkbox"/> AI use appears to function as a primary emotion regulation strategy |

Number of red flags checked

Clinical Formulation and Initial Treatment Planning

Synthesize the pattern, primary function, attachment style, and next-step interventions.

Case Formulation Summary

Primary function of AI use

Most activated triggers / high-risk contexts

Attachment presentation suggested by use pattern

Secure Anxious Avoidant Disorganized Mixed / unclear

Stage of concern Healthy / integrat Monitor Problematic reliance Likely compulsive / depend Needs further assessment

Current consequences / impairment

Initial Treatment Planning

Immediate goals, boundaries, and accountability steps

Attachment work, relational repair, relapse prevention, and follow-up plan