

SUBSTANCE USER'S RECOVERY CHECKLIST AND WORKSHEET

Name: _____ DOB: _____

*Please answer each question with an "X" in the column to the right that best fits.
If a question does not pertain to you, place "N/A" in the column headed "NEVER"*

| I MANAGE/ELIMINATE SUBSTANCE USE <i>(If you continue to use substances [drugs/alcohol] start here)</i> | NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS |
|--|--------------|----------|----------|----------|----------|----------|---------------|
| 1. Able to place a limit on my use and not exceed that limit | | | | | | | |
| 2. Able to consistently reduce my use of substances | | | | | | | |
| 3. Able to eliminate my use for specific time periods | | | | | | | |
| 4. Able to avoid situations where I might abuse substances | | | | | | | |
| <i>(If you have decided to stop, start here)</i> | | | | | | | |
| 5. Able to avoid situations where I might be tempted to use substances again | | | | | | | |
| 6. Accepted my substance-free lifestyle | | | | | | | |
| 7. Able to enjoy life without substances | | | | | | | |
| 8. Able to recognise my substance-related lifestyle | | | | | | | |
| 9. Comfortable socialising where substances are available without using and /or | | | | | | | |
| 10. Able to leave situations (to protect my recovery) where substances are being used | | | | | | | |
| II EMOTIONAL, PSYCHOLOGICAL & PHYSICAL WELL-BEING | NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS |
| 1. Able to practice personal hygiene skills | | | | | | | |
| 2. Able to relax without using substances | | | | | | | |
| 3. Able to attend to physical health problems | | | | | | | |
| 4. Able to put past problems in a positive perspective | | | | | | | |
| 5. Able to express my feelings appropriately | | | | | | | |
| 6. Able to admit mistakes to myself and others | | | | | | | |
| 7. Participate in regular exercise | | | | | | | |
| 8. Able to cope with stress (without substance use) | | | | | | | |
| 9. Able to experience a positive self-image | | | | | | | |
| III SOCIAL AND FAMILY WELL-BEING | NEVER | 1 | 2 | 3 | 4 | 5 | ALWAYS |
| 1. Able to maintain interest in welfare of others | | | | | | | |
| 2. Able to maintain interest in family matters | | | | | | | |
| 3. Able to engage in social/family activities without substances | | | | | | | |
| 4. Able to help with household chores | | | | | | | |
| 5. Able to participate in child-rearing chores | | | | | | | |
| 6. Able to communicate with significant other | | | | | | | |
| 7. Able to solve problems with people | | | | | | | |
| 8. Able to seek the support of family/friends | | | | | | | |

Continued