

# Substance Use Consequences Recall Worksheet

Client's Name \_\_\_\_\_ Date \_\_\_\_\_

## **Negative Consequences of Substance Use:**

*List as many as you can that are important to you.*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

## **Positive Consequences of Substance Use:**

*List as many as you can that are important to you.*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_

## **Positive Consequences of Not Using a Substance:**

*List as many as you can that are important to you.*

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_