A conversation about triggers

Participant name: _____   Date: _____

Instructions: List people. places, times, objects, emotions or situations below according to their likelihood to be a trigger for your substance use. You may want to review this to monitor changes.

0%
chance of using ⟵——————————————————⟶ **100%**
chance of using

Never use	Almost never use	Almost always use	Always use

✱ ✱ ✱ ✱