Weekly Goal Planning continued

Lifestyle Record – Family/relationships/friends

List important people in your life including friends partners	Of each person listed are they able to support your recovery (Y) Yes (N)	If (N) & (NS) identify reasons why (if known)	If (Y) Identify the reasons why	Identify the Risk of this person being in your life (1) being supportive (5) being a high risk				
& family members	No, Not sure (NS)			1	2	3	4	5