

## Overview

Insight's "Check Tools" are a series of brief, modular job-aids designed to assist you as a worker to have structured, collaborative conversations with someone about their alcohol and/or non-prescribed drug use. They have been intentionally designed as a mix of 'information brochure' and 'guided brief intervention' all-in-one.

Informed by cognitive behavioural theory, motivational enhancement, and harm reduction principles, the tools are most effective when you use them in a supportive, personalised, and non-judgemental manner. To assist with this, the tools have been written using relaxed, conversational language so you can either use them with a person in a face-to-face conversation, or give them a copy to read through when they are ready.

They have also been designed in a flexible and modular way so that you can choose to only use those tools that are relevant to your work setting and/or align with the person's goals or stage of readiness to make changes.

**It's important to remember that the tools are job-aids.** They are not intended to replace a full, comprehensive assessment or treatment-based intervention. As such, some tools may not be useful if you are already an AOD worker based in a specialist AOD setting.

## Who are they designed to be used with?

The Check Tools are designed to be used with a broad range of audiences, rather than with any specific population group. However, we've included certain suggestions that might relate with young people, Aboriginal and Torres Strait Islanders and parents of young children. Because they are job-aids (rather than structured, validated instruments), you are free to modify, reframe or even skip questions based on how much time you have and your knowledge of the person and their individual circumstances.

They are also designed to be used alongside common screening tools such as the ASSIST.

We recommend that you become familiar with the tools before using them in practice. We also suggest trying them out with a colleague in a role-play format beforehand so that you understand the content and flow of each tool in advance.

## Engagement, consent, and confidentiality

As with any intervention, it is important that you have developed rapport with the person prior to commencing. Additionally, as this tool is designed to facilitate a collaborative discussion, you will need to obtain the person's consent to engage in the process. Please consider this as well as any confidentiality requirements based on your work setting and local policies and procedures.

**Stimulants**  
Brief Assessment  
e.g. Dexamphetamine, Ritalin®,  
Methamphetamine ('Ice'), Cocaine

The purpose of this tool is to provide you with a better understanding of your stimulant use.

This tool is not intended to replace a full assessment. It is designed to be used alongside other Check Tools as part of a tailored brief intervention. Please obtain consent and confidentiality issues before commencing. If no consent is given, other Check Tools can be taken away by the person.

Name: \_\_\_\_\_ Date: \_\_\_\_\_

At what age did you first try stimulants? \_\_\_\_\_ yrs

Over the past 3 months, how often have you used the following? (please tick)

	Never	Once or twice only	Few times a month	Weekly
Dexamphetamine ("dexies")				
Ritalin®				
Ice (crystal methamphetamine)				
Base methamphetamine (oily paste)				
Speed (powdered meth/amphetamine)				
Cocaine				

If using Dexamphetamine or Ritalin®, are they prescribed by a doctor?  
 Yes  Sometimes  No

How are you using your stimulants? (tick all that apply)  
 Swallowing  
 Snorting  
 Smoking  
 Injecting  
 Some other way? \_\_\_\_\_

If using in more than one way, what's the most common way that you use?

## What topics do the tools cover?

There are 5 tool types in total. The 'Brief assessment' and 'Ways to reduce harms' tools are substance-specific with separate versions for alcohol, cannabis, stimulants, opioids, and benzodiazepines.

The remaining tools are generic and can be used to explore any substance the person may be using, including where poly-substance use may be occurring.

Here is a brief overview of each Check Tool:



**Brief Assessment:** These 5 substance-specific tools help the person to evaluate their current pattern of use of alcohol, cannabis, stimulants, opioids and/or benzodiazepines, paving the way for a personalised intervention.



**Understanding your substance use:** This generic tool explores the person's overall relationship with substances in detail, including reasons for use, impact, financial cost, potential for dependence and readiness to change.



**Thinking about cutting back or quitting?:** This tool assists the person to create an individualised plan when their aim is to modify their level or pattern of substance use. It also provides information and advice on managing cravings and sustaining change.



**Ways to reduce harms:** These 5 substance-specific tools provide key information about each substance type alongside an interactive activity designed to increase knowledge of specific harm reduction strategies in order to minimise the risk of harm to self or others, including preventing overdose.



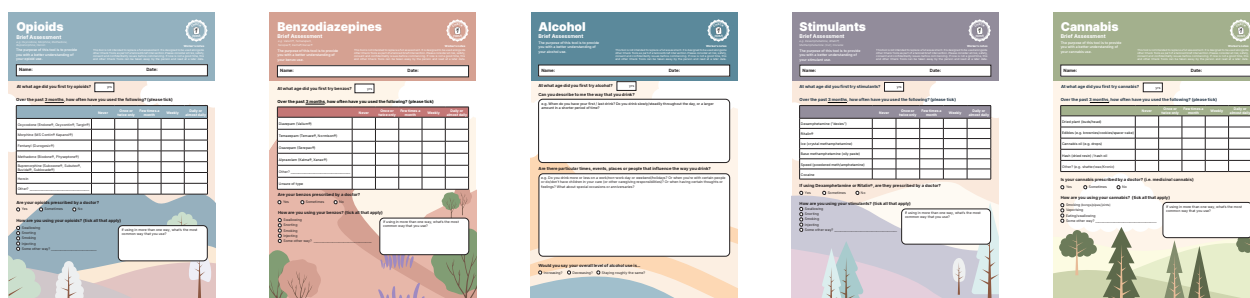
**Unplanned substance use recording tool:** An optional tool for those wanting to track unplanned substance use to better understand the triggers and circumstances that underpin them, thereby supporting the development of strategies for future change.

You can find a more detailed breakdown of each tool below.

**Remember, you can pick and choose which tool/s you want to use depending on your role and the person who you are working with, rather than feeling the need to complete each tool sequentially.**



## Check Tool 1: "Brief Assessment"



The Brief Assessment tools are designed to help you and the person you are working with get a clearer understanding of their substance use. This includes what form of the substance is being used (if relevant), the amount being used, patterns of use, and identifying the particular times, events, places or people that influence the way they consume the substance. It also helps to determine whether their use is increasing, decreasing, or staying roughly the same.

*\*Please note, only use this tool if the person discloses that they drink alcohol, use illicit drugs, or use cannabis, stimulants, opioids, or benzodiazepines in a non-prescribed manner.*

These next three questions use a scoring system to see if you may be experiencing harm from your alcohol use

1. How often do you have a drink containing alcohol? (Please circle the score to the right)

Never	Monthly or less	2-4 times per month	2-3 times per week	4+ times per week
0	1	2	3	4

2. How many standard drinks of alcohol do you drink on a typical day when you are drinking? (We're going to use the table below to help calculate this. NB: The table contains approximate measures only)

Beer / Cider		Wine		Spirits	
Mid-strength beer (330ml)	Full-strength beer / Cider (450ml)	500ml Glass (12%)	750ml Bottle (12%)	250ml Shot (40%)	250ml Shot (50%)
Standard (120ml)	Standard (120ml)	Standard (120ml)	Standard (120ml)	Standard (120ml)	Standard (120ml)

How many drinks, on average, do you drink on a typical day and enter into the boxes underneath

1	2	3	4	5	6	7	8	9	10	11	12
---	---	---	---	---	---	---	---	---	----	----	----

Enter total number of standard drinks here

3. How often do you have 5 or more standard drinks on one occasion? (Please circle the score to the right)

Never	Less than monthly	Monthly	Weekly	Daily or almost daily
0	1	2	3	4

Now add up your score from the 3 questions and write it here: /12

What does your total score mean?

0-3	Low risk	You are either a non-drinker or drink at low risk levels.
4-5	Moderate risk	Your drinking may be causing some harm to your health and wellbeing.
6+	High risk	Your drinking is causing harm to your health and wellbeing.

As mentioned above, there are 5 separate substance-specific tools in this series. They all follow the same format, except for the Alcohol tool which incorporates the validated Alcohol Use Disorders Identification Test - Consumption (AUDIT-C). This is a brief, three-question survey which can help you quickly assess a person's alcohol consumption patterns to identify potential harm.

Together, the information from this brief assessment can guide the future direction of the intervention. For example, you may learn that the person is only using occasionally / opportunistically, or they may be developing (or already has) a dependence from regular use. The conversation may also reveal that a person might be using a particular substance to manage the risk of returning to another one, like smoking cannabis instead of drinking.

**Would you like to explore your relationship with alcohol further?**  
See Check Tool 2 "Understanding your substance use"

If you reach the end of this tool and the person wants to explore their substance use further, you may wish to proceed with their consent to Check Tool 2: "Understanding your substance use".

**Would you like to make changes to your alcohol use?**  
See Check Tool 3 "Thinking about cutting back or quitting?"

If the person states that they want to cut back or quit now and has already been thinking about it or making attempts, then Check Tool 3: "Thinking about cutting back or quitting?" may be the next step

**Would you like information on ways to use alcohol more safely?**  
See Check Tool 4 "Ways to reduce harms"

If neither of these apply, or the person does not feel like they have any problems or concerns at this point in time, then we recommend proceeding to the relevant version/s of Check Tool 4: "Ways to reduce harms".

*Please note: Some services may already use the ASSIST as part of an initial screening process with a client. Whilst there is some overlap between this Brief Assessment Tool and the ASSIST in terms of assessing level of use over the preceding 3 month period, this tool goes into further detail by also asking age of initiation, the specific types or forms of the substance being used, routes of administration, patterns of use, and factors that influence use.*

## Check Tool 2: “Understanding your substance use”

This tool explores the person's overall relationship with substances. It is the largest tool in the collection and so is likely to take more time to complete.

The screenshot shows the top part of a worksheet titled "Understanding your substance use". It includes a header with a logo, a "Name:" and "Date:" field, and a paragraph stating the purpose of the tool. Below this is a section titled "1. Does your substance use cause you any concerns with your..." which contains four large empty boxes for writing. Each box has a heading and a list of examples: "Physical, mental or emotional health?", "What about your relationships/friendship?", "What about your lifestyle?", and "What about legal concerns?".

**Question 1** uses Roizen's 4L's model ("Liver, Lover, Lifestyle, Law"), although these have been described in plain language. Each question includes discussion starters to help prompt the conversation if required.

We recommend taking the time to explore each of these questions with sensitivity and in detail, investigating the potential relationship or impact of the substance across these life areas. This includes what the person sees as the benefits as well as the impacts or harms. We encourage focusing on current or recent experiences and impacts, rather than things that may occur in the distant future.



Our Dovetail team has developed a short video explaining how to use the 4Ls model as it relates to young people, which may assist you with this conversation, regardless of the age of the person you are working with.

You can watch it here:

[https://www.youtube.com/watch?v=\\_1ttOETGb94](https://www.youtube.com/watch?v=_1ttOETGb94)

The screenshot shows the second section of the worksheet, titled "2. Does your substance use cause you any concerns with your...". It contains three large empty boxes for writing. Each box has a heading and a list of examples: "Connection to your community?", "What about your connection to Country or the place you are originally from?", and "What about your culture?".

**Question 2** then builds on the 4L's by exploring 3C's:

- Connection to Community
- Connection to Country (or the place where the person is originally from)
- Connection to Culture

These questions have been specifically included for people who identify as Aboriginal and Torres Strait Islanders or culturally and linguistically diverse, but may also be relevant for other people in the way that it encourages a holistic understanding of social and emotional wellbeing.

The last part of this section asks the question “Is there anything else?” This is to encourage the person to raise anything else that might have been overlooked previously, including specific incidents or events that may indicate harm from substance use that the person may not have recognised or fully appreciated. The suggestions included may help the person to ‘join-the-dots’ as part of this conversation.

The screenshot shows the final section of the worksheet, titled "Is there anything else?". It contains a single large empty box for writing. Above the box is a heading and a list of examples: "Is there anything else?" and "e.g. Embarrassing or harmful incidents or events (making a fool of yourself, regretting sex, getting into fights, getting ripped off, passing out, losing phone/wallet/purse etc.)".

**Question 3** asks how much money the person is spending on substances and how much this would equal over a month and a year. A calculator may be useful here. Working this out in actual dollars - and then exploring other ways this money could be spent - can be a significant motivator for change.

**3. How much do you spend on substances?**  
*TIP: Average out how much you spend on a heavy session or a "big night out" across the week or month (including if it's your shout on pay day)*  
 You may need a calculator for this section:

Per week \$  (enter a dollar amount)

Per month \$  (multiply the weekly number by 4)

Per year \$  (multiply the monthly number by 13 to equal 52 weeks)

Space for calculations

If the person says that they get their substance/s for free, we ask them how much they "would have spent" if they purchased it themselves to get a better picture of their levels of use.

The question then leads to discussion on the impact of this expenditure on other areas of their life, including essentials (such as food, rent, transport, bills etc) as well as what they might like to spend this money on instead. This conversation can help with developing motivation for non-substance related goals and activities, such as hobbies, sport, study, work, or future ambitions. We encourage taking extra time to discuss these items in detail – they are likely to reveal potential protective behaviours, activities and aspirations that could be explored further as part of a future change process.

After buying substances, do you find that you have enough money left over for daily expenses? e.g. food, rent, transport, bills (please tick)

Always  Mostly  Sometimes  Rarely  Never

Is there anything else other than substances that you would like to spend this money on?

**4. This next question is about whether you could be physically or psychologically dependent**  
 Over the past 3 months... (tick all that apply)

Have you experienced cravings or urges to drink/use?  
 Have you felt anxious or worried if you did not have it?  
 Have you felt like you needed more to feel the same effects?  
 Have you tried to cut back or stop but couldn't?  
 Have there been times where you haven't managed to do what was expected of you at home, school or work because of your substance use?

And how soon after waking up do you first drink/use?

If you ticked any of the boxes above, or if you start drinking/using soon after waking up, it could be a sign that you are dependent on (or 'addicted' to) the substance.

**Question 4** helps to determine whether the person may be dependent on a particular substance or substances. The more boxes ticked, the more likely the person is dependent. NB: This is not a validated measure and is intended as a guide only. Some questions point to symptoms of withdrawal and others are symptoms that indicate impaired control over the substance. We suggest you make this section as conversational as possible and use it as an opportunity to help the person develop greater insights into the signs of dependence.

**5. So where are things at for you right now?**

On a scale of 1-5, how worried are you about your substance use? (please tick)

1 2 3 4 5  
 Not worried at all Very worried

Would you like to cut back or quit one or more substances?  Yes  Unsure  No (go to question 6)

Can you specify which substance/s here?

If you're thinking about cutting back or quitting, how confident are you that you can make these changes? (please tick)

1 2 3 4 5  
 Not confident Very confident

**Question 5** uses two 'readiness rulers' to explore the person's level of worry or concern regarding their substance use, as well as their level of confidence in making changes if that is something they are thinking about, with a text box to specify which substance/s they might like to address. NB: It's important we accept the person's decision at this question, and not pressure them to make changes that they are not ready for. This activity can help to work out whether the person is contemplating change, and where extra support may be required if they state that they feel "less confident" in making these changes, for reasons hopefully elicited in **Question 6**.

**Question 7** suggests some future options.

**7. So where to from here?**  
 We could... (please tick)

Talk about some ways to stay safer? (see Check Tool 4: "Ways to reduce harms")  
 We could talk about ways to cut back or quit? (see Check Tool 3: "Thinking about cutting back or quitting?")  
 We could talk about both?  
 We could talk about another substance?  
 Or you're okay for now... If so, would you like to arrange a follow up appointment?  Yes  No  Unsure

Date/time:

Also, is there someone else you feel you can talk to about your substance use if you felt you needed to?  
 Name or service:

Thanks for your honesty. You can take this tool away with you to refer back to in the future.

If the person appears to want to maintain the status quo regarding their substance use, you may wish to seek their consent to proceed to Check Tool 4: "Ways to reduce harms".

If the person is open to change, it might be more appropriate to seek their consent to move on to Check Tool 3: "Thinking about cutting back or quitting?" - either now or at a future session together.

This section also includes prompts to book a follow up appointment or to refer elsewhere. For those who planned to quit or to cut back, a follow up appointment is strongly recommended. This provides an opportunity to review what worked, what didn't, make changes to the plan and encourage the person to keep trying. It also contains a space to list other people who might be able to support the person, especially if making a follow-up appointment is not something the person is interested in at the time.

## Check Tool 3: "Thinking about cutting back or quitting?"

**Thinking about cutting back or quitting?**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Firstly, what would you like to change about your substance use?

You're making a change because...

The people who could support you are... (think about family and friends as well as professional support workers)

The things which might make it hard to reach your goal/s are...

Some strategies to help you reach your goal/s are...

**PLEASE NOTE:**  
Cutting back or quitting can be easy for some people and hard for others. The help experience without using substances like drinking, smoking, using cannabis, taking pills, and/or using drugs...  
...can be difficult. Avoiding things, places or people who make you think about drinking/using, putting your money in a secure account, monitoring your cravings/unplanned use in your phone, reconnecting with people who don't drink/use...  
...can be helpful. Some people find it helpful to have someone to talk to, especially about alcohol and drugs. You can leave behind...  
...certain patterns that are difficult to break, or have someone to help you with your goals. There are also effective long-term substitution...  
...medications available for some substances (e.g. alcohol).  
If you experience a sudden and/or significant change in mood or use, feel or hear things that are not real when withdrawing...  
...from a substance, please seek immediate help by calling triple zero (000) or going to your nearest hospital emergency...  
...department.  
The following page lists some useful craving management strategies you might like to try.

Use this tool with people wanting to quit or make other changes, such as reducing or altering their patterns of substance use. It is largely self-guided using a series of questions designed to clearly identify the person's goals, crystallise the reasons (or motivation) for making the change, identifying the people who could support them and the potential barriers (and corresponding solutions) to making the changes they want.

Encourage the person to lead the discussion and think of their own strategies, offering help only when needed. Also encourage them to develop specific, achievable, and realistic goals. Where it's safe and appropriate to do so, we also recommend you encourage the person to share this plan with people they trust who can help support them in achieving their goals.

This tool may also provide an opportunity to address or reflect on things that may have been discussed previously as being reasons for maintaining their substance use, such as managing stress, anxiety, depression, tricky relationships, grief, loss etc.

### Example responses to the questions on page 1 of the tool:

Firstly, what would you like to change about your substance use?

*Cut back to drinking only on weekends with friends – not drink at home by myself*

You're making a change because...

*I don't want to lose my job, feel less tired and irritable, and I want to spend less money so I can save for a new car.*

The people who could support you are... (think about family and friends as well as professional support workers)

*My best friend Alex, my neighbour, and my counsellor.*

The things which might make it hard to reach your goal/s are...

*My mood (feeling sad, lonely, or bored). It will be hard to say no if one of my friends invites me out for a drink mid-week. Cravings.*

Some strategies to help you reach your goal/s are...

e.g. Avoiding things, places or people who make you think about drinking/using, putting your money in a secure account, monitoring your cravings/unplanned use in your phone, reconnecting with people who don't drink/use...

*Tell my friends I'm cutting back and ask them not to offer me a drink mid-week. When I feel lonely ask to hang out with my neighbour or Alex who doesn't drink. When I feel stressed or bored, I'll go for a walk, watch a movie, or do something creative.*

**Looking after yourself during cravings**

The 2 D's: **Delay** (wait 15-20 minutes) and **Distraction** (do something else). **Delay** (wait 15-20 minutes) and **Distraction** (do something else). **Delay** (wait 15-20 minutes) and **Distraction** (do something else).

**Urges last for 15-30 minutes.** **Urges last for 15-30 minutes.** **Urges last for 15-30 minutes.**

**Self-compassion:** Be kind to yourself. **Self-compassion:** Be kind to yourself. **Self-compassion:** Be kind to yourself.

**Craving management strategies:** **Craving management strategies:** **Craving management strategies:**

**1. Avoidance:** Avoid situations, people, places, or things that trigger your cravings. **1. Avoidance:** Avoid situations, people, places, or things that trigger your cravings. **1. Avoidance:** Avoid situations, people, places, or things that trigger your cravings.

**2. Distraction:** Engage in activities that take your mind off the craving. **2. Distraction:** Engage in activities that take your mind off the craving. **2. Distraction:** Engage in activities that take your mind off the craving.

**3. Delay:** Wait 15-20 minutes before acting on the craving. **3. Delay:** Wait 15-20 minutes before acting on the craving. **3. Delay:** Wait 15-20 minutes before acting on the craving.

**4. Denial:** Remind yourself that the craving is just a feeling and will pass. **4. Denial:** Remind yourself that the craving is just a feeling and will pass. **4. Denial:** Remind yourself that the craving is just a feeling and will pass.

**5. Deterrence:** Think about the negative consequences of using. **5. Deterrence:** Think about the negative consequences of using. **5. Deterrence:** Think about the negative consequences of using.

**6. Denial:** Remind yourself that the craving is just a feeling and will pass. **6. Denial:** Remind yourself that the craving is just a feeling and will pass. **6. Denial:** Remind yourself that the craving is just a feeling and will pass.

**7. Distraction:** Engage in activities that take your mind off the craving. **7. Distraction:** Engage in activities that take your mind off the craving. **7. Distraction:** Engage in activities that take your mind off the craving.

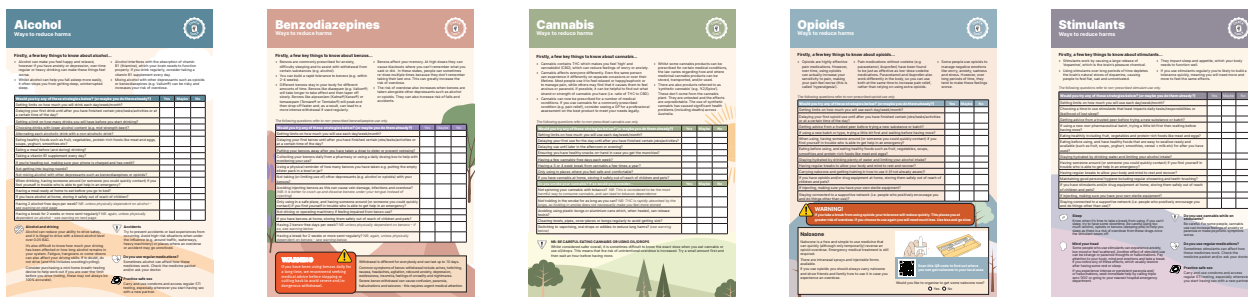
**8. Delay:** Wait 15-20 minutes before acting on the craving. **8. Delay:** Wait 15-20 minutes before acting on the craving. **8. Delay:** Wait 15-20 minutes before acting on the craving.

**9. Denial:** Remind yourself that the craving is just a feeling and will pass. **9. Denial:** Remind yourself that the craving is just a feeling and will pass. **9. Denial:** Remind yourself that the craving is just a feeling and will pass.

**10. Deterrence:** Think about the negative consequences of using. **10. Deterrence:** Think about the negative consequences of using. **10. Deterrence:** Think about the negative consequences of using.

To assist with this discussion, the second page of the tool provide some helpful information and psycho-education principles regarding the process of making changes, including strategies to help with managing cravings which are outlined on the back page. As such, the tool is designed to be taken home by the person to refer to as they attempt to make the desired changes.

## Check Tool 4: "Ways to reduce harms"



These tools accept that some people will continue to use substances in a problematic way and potentially experience related harms. Offering harm reduction advice can be especially useful for people who are not presently considering making changes to their substance use. They can also be helpful for those who are actively planning on making changes until they are at a stage where those changes are enacted and sustained. These five substance-specific resources are designed to be used flexibly. They can either be used to guide a detailed harm reduction conversation / intervention, or if there is insufficient time or opportunity to work through the tool step-by-step, they can be taken away by the person to read later.

Each of the 5 tools follow the same basic format:

- Key information about each substance and its effect profile.
- An interactive table containing a list of strategies that the person might consider (including ones they might be doing already) for them to tick whether they think each one may or may not be doable.
- If relevant, risks of suddenly cutting back or stopping (e.g. for alcohol and benzodiazepines)
- Overdose risks and whether there are any mitigating responses (e.g. using naloxone for an opioid overdose).
- A further series of information boxes discussing potential harms associated with things like driving, accidents, interactions with other drugs or medications, mental health, safer sex etc.
- Insights into common features of withdrawal.
- Specific risks for people who are pregnant, breastfeeding or parenting.
- How to respond to an overdose.

The last question on the back page then encourages the person to consider signs or indicators that their substance use might be becoming more of a problem, including when it might be time to take a break and/or seek help.

**Benzos and Driving**  
Benzos can reduce your ability to drive safely. It's also difficult to know how much your driving skills have been affected or how long benzos remains in your system. Fatigue, hangovers or come-downs from drugs can also affect your driving skills.

**Accidents**  
Try strategies to help prevent accidents or bad experiences from occurring, such as avoiding high-risk environments when under the influence (traffic, waterways, heavy machinery, or areas where an overdose or accident may go unrecognized).

**Do you use regular medications?**  
Sometimes benzos can affect how these medicines work. Check the medicine packet and/or ask your doctor.

**Practice safe sex**  
Carry and use condoms and access regular STI testing, especially whenever you start having sex with a new partner.

**Are you pregnant, breastfeeding or parenting?**  
Using any substance when planning a pregnancy, pregnant, or while breastfeeding can affect your baby's body and brain development. Talk to a medical professional for advice, especially if considering detoxing whilst pregnant. Substance use can affect your children and others around you. Ensure your children remain safe and supervised at all times. Make a plan prior to drinking and be prepared for the hangover in advance.  
**Note:** Sleeping with a child in the same bed while under the influence of benzos poses significant risks and dangers.  
**If you are pregnant, do not detox from benzos until you have spoken to a medical professional as detoxing may harm your baby.**

**Responding to a benzo overdose**  
Signs of a benzo overdose include:

- Extreme confusion / agitation
- Cannot be woken up
- Very slow breathing, choking, snoring or gurgling
- Blue lips, skin or fingertips
- Very low body temperature
- Vomiting, especially while unconscious
- Seizures

If this occurs, seek assistance by calling triple zero (000) and ask for 'AMBULANCE'. If someone is unconscious and breathing, turn them on their side in the recovery position. If they are not breathing, perform CPR if you are able to and wait with them until help arrives. Don't confuse sleep with loss of consciousness. If someone cannot be woken up, it is likely they are unconscious.  
Unfortunately, there's no way to reverse a benzo overdose. The effects have to wear off with time.

**What would be signs that your benzo use is becoming a problem? When would you know it's time to take a break and/or seek help?**

Consumers and / or carers provided feedback on this publication

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**What would be signs that your cannabis use is becoming more of a problem? When would you know it's time to take a break and/or seek help?**

Consumers and / or carers provided feedback on this publication

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## Check Tool 5: “Unplanned substance use recording tool”

**Unplanned substance use recording tool**

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Use this tool to track any unplanned substance use from week to week to help better understand when, where and why it happens.

**My aim for this week:**

Change or reduce my substance use (please describe): \_\_\_\_\_

Not use any substances at all

Date/day	Did you have a craving?	How much used? (in volume or dollar amount)	The situation (place/people) related to the substance use	What happened? What did I learn about myself? And what could I do differently next time?

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This final, optional, tool can be provided as a digital copy or printed in bulk which you can give to someone who may wish to track instances of unplanned substance use to better understand the triggers and circumstances that underpin them, thereby aiding in developing future change strategies. The tool encourages self-reflection and self-awareness raising to help someone better recognise their unconscious thoughts and feelings and associated behavioural responses.

The tool firstly asks the person to identify a weekly goal and then to journal the date/day the unplanned substance use occurred, whether there were cravings that preceded it, the amount used (in volume or dollar amount), the situation when and where it occurred, and lastly - and most importantly - what happened, what the person learned from the experience, and what they could do differently next time.

The tool may be a helpful activity for someone to use in between seeing you (or their regular support person or counsellor / therapist) to review at future sessions.

### A final word

Being brief interventions, these tools do not cover everything that may come up in a conversation on substance use. Therefore, other resources may need to be used in conjunction. We recommend using relevant Australian resources (where possible) that provide factual and well-balanced information. Avoid resources that use fear tactics or exaggerate harms as evidence shows they are ineffective.

### Check Tool feedback

Insight’s Check Tools were developed in consultation with workers from Queensland’s AOD sector along with further advice feedback from health and community professionals in related fields.

Further feedback on this tool is always welcome and encouraged via [insight@health.qld.edu.au](mailto:insight@health.qld.edu.au) or by phoning our office on (07) 3837 5655.

We hope you find them useful in your work!

Regards,

The Insight Team.