My Recovery Goals Planner

Choose my direction

A useful goal fits your life and can be broken into small steps.

Name / initials (optional): _____ Date: _____

What matters most to me right now - and why

My goal for the next 7 days

My goal for the next month

A longer-term direction I want to work towards

Alcohol and other drug support: ADIS 1800 177 833 (24/7)

Not medical, psychological, legal or financial advice, treatment or emergency care.

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From goal to next step

Progress includes learning, adjusting and asking for support.

Name / initials (optional): _____ Date: _____

The goal I am choosing to focus on

My first small step and when I will take it

Support, resources or changes that could help

How I will recognise progress and my review date

Alcohol and other drug support: ADIS 1800 177 833 (24/7)