Contextual variables for GPS, Voice, and SMS logs and Day/Time

Locations Log:

Locations visited weekly (updated monthly as needed) and locations that will be avoided

Address: _____
 	
Type:
   ☐   Work
   ☐   School
   ☐   Volunteer
   ☐   Health Care
   ☐   Home of Friend
   ☐   Home of Family Member
   ☐   Liquor Store
   ☐   Errands (Ex: Grocery Store, Post Office, etc.)
   ☐   Coffee Shop/Cafe
   ☐   Restaurant
   ☐   Park
   ☐   Bar
   ☐   Gym/Fitness center
   ☐   Other _____
 	
Check If Applicable:
   ☐   I've drank alcohol here before.
   ☐   Alcohol is available here.
 	
For Staff Only:
Experience: Pleasant   Unpleasant   Mixed   Neutral
Risk: High Medium Low None	

People log:

People that are contacted via phone or SMS at least monthly (updated monthly)

Phone Number:

Type of Relationship:
- ☐ Spouse/Significant Other
- ☐ Family- Parent   Sibling   Child   Aunt/Uncle   Cousin   Other:
- ☐ Friend
- ☐ Co-Worker
- ☐ Other:

Have you drank alcohol with this contact?   Never/Almost Never   Occasionally   Almost Always/Always

Would you expect them to drink in your presence?   Yes   Uncertain   No

Drinking Status: Drinker   Non-Drinker   Don't Know

Currently In Recovery from Alcohol/Other Substances: Yes   No   Don't Know

Support Status: Supportive   Unsupportive   Mixed   Neutral

Participant's experiences with contact are typically…….. Pleasant   Unpleasant   Mixed   Neutral

Risky Dates

"Emotionally important" days that put them at-risk to begin drinking again

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List Type of Day and Date Identified by Participant

Type:
- ☐ Holiday:
- ☐ Birthday:
- ☐ Anniversary:
- ☐ Sobriety Anniversary:
- ☐ Other:

Date: _____

Risk/Protective Times

Ask the participant to think about their typical week. Have the participant list each time-period during the day that puts them at increased risk to drink. These times are "risky" time-periods. In turn, are there any specific time-periods during the participant's week that they can identify as protective, meaning they are confident that they would not drink during this time.

Type of Time-Period:
- ☐ Work Hours
- ☐ After Work Hours
- ☐ School Hours
- ☐ Weekends
- ☐ Volunteer Activities
- ☐ Fitness Activities
- ☐ Church/Other Weekly Religious or Spiritual Event
- ☐ Other: _____

Day of the week:

Time Period:

Is this time-period
- ☐ Risky
- ☐ Protective