

MY RELATIONSHIP WITH..... Handout

Someone (e.g. wife, partner, parent, child, friend, etc.)

Name

OR something e.g. car, computer, drugs, alcohol, music, etc.

Name

What have I received from this relationship?

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What have I given to this relationship?

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Has it been good for me or harmful?

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Do I need to change anything about it? If so. What?

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What will I have to do to make this change?

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