Peer Pressure Coping Skills

Date:

Name:

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	What are my core values and beliefs, and how can I stay true to them when faced with peer pressure?		How can I assertively say "no" to activities or behaviors that make me uncomfortable?	
	Who are the supportive people in my life that I can turn to when I feel pres- sured by my peers?		What strategies can I use to remove myself from situations where I feel pressured?	
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