

Breaking Free of Addiction

by Deborah Sosin, LICSW



42 Therapeutic Tools to Help You
Recover from Problem Drug and Alcohol Use

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from Problem Drug and Alcohol Use

Between Sessions Resources
Norwalk, CT

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Disclaimer: This book is intended to be used as an adjunct to psychotherapy. If you are experiencing serious psychological symptoms or problems in your life, you should seek the help of an experienced mental health professional. Before you embark on any program designed to help you recover from problem drug or alcohol use, please make an appointment with your primary care physician for a thorough medical examination and consultation about what course of action is best for you. The vignettes included in this workbook are fictional, based on the author's clinical experience. Any resemblance to an actual person is purely coincidental.

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About the Series

Between Sessions Resources publishes a variety of worksheets and other tools designed to be used as therapeutic homework. *Breaking Free of Addiction* is one of a series of workbooks designed to help people practice the psychological skills they learn in therapy.

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BREAKING FREE OF ADDICTION

Introduction

Breaking free of drug and alcohol addiction is one of the bravest things you'll ever do. While some experts might claim to know “the answer,” there is no right answer. In other words, one size does not fit all. Some people who follow a rigid model end up relapsing. Some who try on their own do just fine.

Research shows that one of the greatest markers of success in recovery is being connected to a group, a community, or a team of supporters—people who understand the unique challenges of problem drug and alcohol use. Self-help groups such as Alcoholics Anonymous (AA) and SMART Recovery are powerful, accessible resources to help people feel less isolated and more motivated to change. As you'll see, this book draws on some of AA's concepts as well as other approaches to recovery, with an emphasis on mindfulness, self-compassion, and cognitive-behavioral strategies.

If you don't currently have a therapist, you'll certainly find the exercises in this book helpful; however, it is recommended that you work with a therapist to help you explore which strategies work best for you. The treatment of addiction is complex, so having a trained professional to guide you will make your journey to recovery more direct.

This workbook is intended for people who are concerned about the negative consequences of their substance use and are looking for helpful therapeutic exercises to guide them toward recovery and health. You'll learn practical tools for relapse prevention. You'll learn how to be more compassionate to yourself; how to better manage your thoughts and feelings; how to set limits and deal with difficult situations and people; and how to chart a course for a happier, healthier life—the life you really want.

Note: Throughout this book, we use the term *substance use* as opposed to *substance abuse*, which has a negative, punitive connotation. By introducing less pejorative terminology, we aim to break through the historical stigma associated with drug and alcohol addiction and bring more compassion and understanding to both the discussion and the treatment of this devastating problem in our culture.

What Is Addiction?

When we think of substance addiction, we often think of the chemical-based factors that compel someone to use, marked by increased tolerance (needing more to get the same effect); and withdrawal symptoms such as nausea, vomiting, shakes, and so on, that users might

experience upon cutting back or quitting. In those cases, inpatient detox is considered the treatment of choice.

But not everyone with problem substance use shows such signs of physical addiction. People who are not chemically dependent can also struggle with cravings, mental obsessions, or other compulsive behaviors that can lead to relapse. Research shows that the brain can, over time, hijack one's sense of control, perhaps because of damage to certain brain receptors. To understand addiction better, neuroscientists are also investigating the highly complex interactions among the brain's reward and control systems; and studying how behaviors are influenced not only by chemicals but by habit, repetition, reinforcement, and so on.

In this book, we'll define addiction as *ongoing, often compulsive use of a harmful substance despite negative consequences, with or without chemical dependence*. If you think you might have a chemical dependence and are not yet ready to seek professional help, you might want to check out some self-assessment tools available online, such as the MAST (Michigan Alcohol Screening Test) and the DAST (Drug and Alcohol Screening Test) for more information.

Related Mental Health Issues

People with problem substance use often suffer from underlying, and often untreated, psychiatric or psychological problems such as depression, anxiety, PTSD, bipolar disorder, ADHD, and so on. If you suspect, or if you have been told, that you have a co-occurring disorder, please consult with a mental health professional for a thorough evaluation. In addition, research shows that people with substance-use problems have often experienced adversity during childhood: abuse, neglect, exposure to violence, bullying, parental divorce, racism, and so on. Sorting out the variables of your particular history will be important to your recovery.

Professional Treatment Options

The professional treatment of problem substance use and addiction can range from acute medical intervention to less intensive outpatient programs. A trained professional can help you assess the best options for you. Most programs are covered by health insurance, but some require self-pay. Please check with your insurance company to find out about your mental health and substance-use benefits.

Depending on your medical status, you might also seek an evaluation for medications to assist with your recovery, including those that reduce cravings or block the effects of certain substances. Please consult with an experienced, compassionate specialist in addictions to find out if medication is an appropriate treatment for you.

Some programs include:

Inpatient Detox

These hospital- or clinic-based programs are for clients who require medical attention to treat the dangerous and/or uncomfortable physical effects of withdrawal from alcohol and/or drugs such as benzodiazepines (for example, Xanax, Klonopin, or Ativan) or opiates (for example, heroin, Vicodin, or Percocet). The length of an inpatient detox program is usually short-term— from twenty-four hours to a few days.

Residential Treatment/Rehab

In these rehabilitation programs, clients live on-site at a treatment facility, usually for twenty-eight or thirty days (and sometimes for ninety days or more). They attend groups and individual therapy during the day and, often, self-help meetings off-site.

Day Treatment (Intensive Outpatient/IOP)

Most day treatment programs, or IOPs, are offered at hospital-based settings. They usually run five days a week from about 9:00 to 3:00 for two or three weeks, and sometimes longer. Some clients go from long-term rehab or hospitalization to an IOP as a “step-down” model of gaining ongoing support and skills training.

Outpatient

Outpatient addictions treatment can range from once-weekly individual psychotherapy in an office or clinic setting to individual therapy plus one or more group therapy meetings per week. Some programs also require (or suggest) family meetings. Family therapy or family members’ participation in Al-Anon or similar programs can be a crucial part of one’s recovery. Parents, spouses, and children are deeply affected when a family member is struggling with drug or alcohol use. When loved ones learn facts and strategies to deal with a recovering family member, everyone benefits.

Mindfulness-Based Relapse Prevention (MBRP)

Using a group model with trained facilitators, this relatively recent approach draws from the practice and philosophy of mindfulness and mindfulness-based cognitive therapy to address relapse prevention. MBRP groups are now offered around the United States and overseas, primarily as an aftercare program for people who want to maintain their progress and learn more about the mind-body connection.

Community-Based Programs

Twelve-Step Programs: Alcoholics Anonymous (AA), Marijuana Anonymous (MA), or Narcotics Anonymous (NA)

Most people are familiar with the AA model of recovery, which emphasizes total abstinence from mind-altering substances. It is a free group program that is available worldwide, in person and online, and includes twelve specific steps toward recovery. The AA (or MA, NA) model emphasizes that addiction is a disease. AA also has a spiritual basis, offering the idea of asking God or a higher power for help and encouraging members to “surrender” or “let go” in order to break free from the compulsion to use. Meetings offer a safe, anonymous fellowship, where attendees can hear about others’ experiences and share their own, if desired. There are different types of meetings: for example, discussion, open, speaker, women’s, men’s, teens, LGBTQ, and so on. Members can ask for a sponsor, someone also recovering from addiction who is sober.

SMART Recovery

SMART stands for Self-Management and Recovery Training and draws on theories and strategies from cognitive-behavioral psychology. People are taught skills to understand how their thoughts and feelings influence their choices and how they can learn to make better choices about addictive behaviors in general. Free meetings facilitated by volunteers are offered worldwide, in person and online.

At <http://www.betweenessionsresources.com/breaking-free-of-addiciton.html> you’ll find links to websites where you can learn more about these programs.

How to Use This Workbook

This workbook offers forty-two therapeutic exercises that will help you learn about your substance use, make healthy choices, practice new skills, and try strategies to prevent relapse. There is a logical sequence to the exercises in this book, but you may also jump around and do the ones you find the most relevant and useful. Typically, a therapist will explain why each skill is important and demonstrate how it can best be learned. Doing the exercises will help you sustain your momentum and practice new skills between sessions. The book is geared toward those who wish to stop their problem drug and alcohol use, that is, refrain from using any mind-altering substances; however, those who continue to use or choose to cut back can also benefit from the exercises.

At <http://www.betweenessionsresources.com/breaking-free-of-addiciton.html>, you’ll find links to multimedia tools, both audio and video, that can help enhance your learning.

There are nine sections of exercises. Each section will help you learn a specific set of skills. For each exercise, there is an objective and a brief overview of the topic. Then you'll find a short vignette called *Does This Sound Like You?*, followed by the exercise itself. A section called *Reflections on This Exercise* follows, where you can jot down notes, insights, memories, goals, or any other thoughts. Each exercise ends with a feedback section, where you'll rate how much the exercise helped you and write about what else you could do to progress in your recovery.

The nine sections include:

Start on the Path to Recovery

This section consists of two activities to help you start exploring your problem substance use. First is a discussion of mindfulness—what it means and how it can be a useful anchor for not only your recovery but also your entire life. You'll write your first vision statement, which gives you the opportunity to look forward and create a picture of what you want your life to be.

Get Ready

This section will help you start the process of deciding what to do about your problem substance use by identifying and exploring your pros and cons for both using and not using. You'll learn about the Stages of Change model and begin a conversation with the different parts of yourself through a guided letter-writing exercise.

Know Your Triggers

In this section, you'll begin to identify your internal and external triggers and how to manage urges and cravings. You'll also learn the P.L.A.N. strategy for attending potential triggering events such as family reunions, holidays, weddings, and parties.

Take Action

The exercises in this section will help you identify specific things you can do in the early stages of recovery, including limiting your access to substances, getting clear about your reasons for wanting to stop, and identifying and practicing alternatives to using.

Build a Safety Net

Most experts agree that working a recovery program is nearly impossible to do alone. Creating a safe network of supportive people can help you set the stage for long-term success. In this section, you'll work on identifying specific people, places, actions, and activities to enhance your recovery efforts. You'll also learn strategies for asking for help and setting up accountability, and how to stretch outside your comfort zone despite any fears and doubts.

Know Your Feelings

What is the range of human emotions and feelings, and how can you learn to experience, and even accept, all those feelings without picking up? In this section, you'll work on identifying pleasant and unpleasant feelings, then practice noticing and recording the different feelings you might experience on a given day, such as fear, anger, anxiety, boredom, sadness, shame, guilt, and loss, as well as happiness and serenity. You'll also learn the difference between "reacting" and "responding" to events and experiences and write a letter to your substance of choice.

Know Your Thoughts

In this section, you'll learn about the powerful relationship between your thoughts and feelings and how to use that awareness to prevent a relapse. Drawing from the world of cognitive-behavioral therapy, one exercise will help you notice and label your thoughts. Then you'll practice techniques for creating a new inner dialogue—noticing old, habitual negative messages and building a repertoire of new go-to thoughts that will drive you toward positive, healthy choices. You'll learn about the power of self-compassion as a key to good recovery—and a good life.

The Mind-Body Connection

The exercises in this section offer you the opportunity to explore new, healthy ways of treating your body, mind, and spirit, including breathing exercises, relaxation exercises, mindful movement, and mindful eating. You'll also learn some strategies for eating well and sleeping better. Finally, you'll have the opportunity to learn about the formal practice of mindful meditation as well as informal mindfulness practices.

Look Back and Look Ahead

There's a lot to be said for taking one day at a time, but sometimes it's useful to look back and review where you've come from and how your past can inform your future. In this section, you'll review your current and past relationships and assess how they might be supportive or unsupportive in your recovery efforts. You'll write another letter to yourself, identify your strengths and passions, learn about H.O.P.E., and write a second vision statement to support a lifetime of recovery.

At the end of the book, you'll find a section of daily exercises and two additional resources:

Daily Exercises

This section includes reproducible exercises that you may use daily for setting goals, acknowledging challenges, practicing gratitude, and celebrating accomplishments.

Relapse Prevention Checklist

To chart your progress, you may check off which exercises you have completed toward your recovery.

Words of Wisdom

This final section includes a list of inspiring and helpful phrases from the Alcoholics Anonymous program.

START ON THE PATH TO RECOVERY

Mindfulness 101

Objective: To gain a basic understanding of mindfulness by practicing a simple breathing exercise.

You Should Know

Mindfulness has been in the news a lot recently, from mainstream magazines to digital media. More and more people are seeking ways to calm their minds and bodies, reduce stress, and be more effective in their daily lives. It might seem like the latest health fad, but mindfulness is actually more than 2,500 years old, stemming from ancient Buddhist traditions.

The term *mindfulness* refers to the practice of *noticing what's happening right here and now, without judgment and with acceptance*. To which you might say, "Easier said than done!" But you can learn.

Addiction or no addiction, many of us go through our days in a trance-like state, on automatic pilot, unaware of what's actually happening in the present moment. We spend too much time thinking about the past or worrying about the future. Or we distract ourselves by compulsively checking our phones, watching TV or, for our purposes, using mind-altering substances. When we're in that trance, we're checked out, or *mindless*.

"I don't want to pay attention to what's going on right here and now—it's too stressful," some people say. Or too painful. Or scary. Or sad. That can be true at first, especially if you're used to tuning out the present moment through using substances. But there's hope. This workbook offers specific strategies for using mindfulness to help you cope better in the here and now.

As you do the exercises, you are invited to turn to mindfulness as your anchor. You may find that your relationship to your problem drug or alcohol use may change as you get better at noticing, being present, not judging, and accepting.

Mindfulness has other benefits, too, which have been verified in reliable research studies:

- Improves moods
- Boosts self-esteem
- Increases resilience
- Reduces depression and anxiety
- Boosts concentration, attention, and memory

- Improves learning and creativity
- Boosts immune system and cardiovascular health
- Helps with chronic pain
- Helps with sleep and eating habits
- Reduces stress
- Heightens sense of being alive

And did you know that mindfulness can actually change the brain? Studies have shown that a regular mindfulness practice can lead to an increase in the gray matter in the prefrontal cortex, which has to do with problem solving, decision making, hypothesizing, and strategizing, as well as the hippocampus, which regulates emotions and behaviors. And, even better, mindfulness can shrink the activity in the amygdala, the “fight-or-flight” part of the brain that is aroused when detecting and reacting to emotions, especially fear.

We would need a separate book to delve further into not only the neurology of mindfulness but also the complex neurology of addiction. But this basic information can be useful as you learn more about how mindfulness can help you recover from problem drug and alcohol use.

Does This Sound Like You?

Henry, 37, a single biology professor, stopped smoking marijuana a few months ago when he started dating Monica, who disapproves of any drug use. Henry likes her and doesn't want to mess up his prospects. After two weeks without marijuana, Henry is feeling anxious, restless, and out of sorts. He has heard about mindfulness from Monica, who attends yoga classes and practices meditation. He thinks he might want to try but has no idea where to start. Part of him wants to just go back to smoking, as long as he can hide it from Monica.

How are you like Henry? How are you different?

What do you think Henry should do in this situation? What can you imagine yourself doing?

What to Do

In this exercise, you'll identify some situations when you can practice a simple mindful breathing exercise that you can do any time, on your own.

Take Three Conscious Breaths

Right in this moment, sit up straight and take an easy breath. Read this paragraph through, then close your eyes. Notice what you're feeling in your body and mind. Let go of any tension you're aware of. And breathe—three slow, easy, deep breaths, expanding your lungs fully, holding for a second or two, then exhaling slowly. Notice any physical sensations, any thoughts or judgments, and let them go, too.

What was that like for you? Write down your responses here.

Mindfulness isn't only about breathing, as we'll discuss later in this book, but it's a good way to practice noticing what's happening right here and now. It might feel weird or uncomfortable at first, but do the best you can.

Pick a regular time every day when you can commit to taking three conscious breaths. For example, you could do it each time you wake up, close the front door, go to the bathroom, park your car, or arrive home. Be creative, and be realistic. Notice what's happening in that moment. Then record the experience in the chart below.

When	Where	How did it feel?	What did you notice?
<i>Example: Before I get dressed every morning</i>	<i>Sitting on the bed</i>	<i>Relaxing!</i>	<i>Heard clock ticking, smelled coffee brewing</i>

If for any reason you have a negative reaction to noticing your breathing, that's OK. Don't judge or criticize yourself. Just let it go for now and move ahead with the other exercises in this book. You'll have other opportunities to revisit mindfulness later.

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Vision Statement, Part 1

Objective: To generate a sense of hope by creating a vision of what you'd like your life to look like in six months, one year, and two years.

You Should Know

Whenever we make a big change in our lives, it's easy to feel overwhelmed. In making the decision to stop using drugs or alcohol, you might feel excited, but you might also feel anxious or sad. That's normal and understandable. With all those difficult feelings, it's hard to get in touch with a sense of hope—hope for success, hope for relief from the addiction, and hope for a happier future. It's OK to hope, even if you're going through a tough time—maybe *especially* then. A vision of your future can serve as a powerful guidepost along your road to recovery. That's why this exercise appears at the beginning of your process.

Does This Sound Like You?

Ariella, 24, had been drinking to excess since her senior year in high school. Although she did manage to graduate from college with a degree in computer science, her drinking escalated rapidly after graduation, and she didn't pursue a job in her chosen field. She attended different outpatient programs and has now been sober for two months. She is working as a barista in a café. Ariella wants to stay sober and is trying to live "one day at a time," but when she thinks about her future, it looks like a big, blank slate.

How are you like Ariella? How are you different?

Do you know what you want in your life? Is there anything in the way of your working toward what you want? Describe briefly.

What to Do

In this exercise, you'll create a vision statement to help you "keep your eyes on the prize"—living a happier life.

First, make a list of twelve things you want in your life. There are no right or wrong answers, and you don't have to be realistic. Just go for it, whether it's getting a job, moving to a new place, buying a house, taking a vacation, falling in love, having children, or simply having peace of mind—anything goes! Use extra paper if needed. If you want, you can create a collage of images from magazines or download photos or images from the internet instead.

Things I Want in My Life:

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

How did that feel? Was it fun or stressful or a little bit of both? Again, it's OK to dream and hope. You deserve it! Write your response here:

Now you'll craft your vision statement. You'll have the chance to do this exercise twice in this workbook. This time, you'll focus on your vision for six months, one year, and two years from today. Later, you'll think even further into the future. You may refer to your list of wants to help you shape your statement.

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

GET READY

Weighing Your Pros and Cons—with a Twist

Objective: To move toward making a decision about your problem substance use by creating a chart identifying your pros and cons for both using and not using.

You Should Know

Do you have mixed feelings about whether to quit using drugs or alcohol? Probably. And that's completely normal. In fact, recognizing and articulating your mixed feelings can help you decide what to do next. This means being willing to take a good, honest look at *all* aspects of your behavior, your pros and your cons.

Some might worry that acknowledging the pros of substance use is wrong or risky. For instance, if you were to say to a loved one who has expressed concern about your use that alcohol relaxes you or heroin makes you feel euphoric, or that you're sad at the thought of quitting, you're likely to get into a nasty argument, which won't help you in your decision-making process.

This exercise is not about right or wrong or good or bad. It's called a *decisional balance exercise*, developed by psychologists James Prochaska, Carlo DiClemente, and John Norcross. Completing this exercise can be powerfully effective for people in recovery and help them understand and accept their *true, ambivalent feelings without any value judgment*.

The twist of this exercise is that you'll be naming your pros and cons for both using *and* not using. You'll identify what you get out of using and what you're afraid of losing if you decide to quit. Exploring your mixed feelings from this unusual angle frequently leads to fresh insights.

Are you ready? Let's get started! The more familiar you are with your own complex feelings and perceptions, the more freedom you'll have to make smart, healthy decisions going forward.

Does This Sound Like You?

Melanie, 19, is a freshman in college. Alcohol is in abundant supply on her campus. Most weekends, Melanie can be found partying with her friends until the wee hours of the morning. Even though Melanie drinks about as much as her friends do, she gets a lot drunker a lot faster and has been known to pass out and not remember what happened. She even woke up in the hospital emergency room once, because her friends couldn't rouse her, so they called 911. Her parents have threatened to pull her out of school and send her to a treatment program. Melanie is a little concerned about this pattern, but she doesn't want to feel like a total social outcast if she doesn't drink or go to parties.

How are you like Melanie? How are you different?

What do you think Melanie should do about her drinking?

What to Do

This exercise is an opportunity to zero in on what you see as the pros (benefits) and cons (costs) of your substance use from different angles. You might consider the following categories in choosing your responses: physical, emotional, financial, relational, spiritual, sexual, legal, social, professional, and academic, among others.

Here is a sample box that Melanie filled out, to give you an idea of how it works. The asterisks will be explained later.

	Pros (Benefits)	Cons (Costs)
Using	<ul style="list-style-type: none"> • <i>Easier to socialize</i> • <i>Feel relaxed*</i> • <i>It's fun</i> • <i>Helps me sleep</i> • <i>Don't have to deal with problems</i> • <i>Less nervous/anxious</i> • <i>Fit in with the crowd</i> 	<ul style="list-style-type: none"> • <i>Hospitalized for alcohol poisoning</i> • <i>Spending too much</i> • <i>Parents are upset</i> • <i>One fender bender</i> • <i>Weight gain</i> • <i>Blacking out</i> • <i>Might have to go to a treatment program*</i>
Not Using	<ul style="list-style-type: none"> • <i>Clearheaded</i> • <i>No hangovers</i> • <i>Parents would be happier*</i> • <i>Schoolwork would be easier</i> • <i>Feel better about myself</i> 	<ul style="list-style-type: none"> • <i>Social anxiety*</i> • <i>Facing my problems</i> • <i>Feeling irritable all the time</i> • <i>Not sleeping well</i> • <i>Having to be responsible</i>

Fill in the boxes below in the following way:

- Pick one box. It doesn't matter which one. Ignore all the other boxes for the moment.
- Write down all the things you can think of for that category.
- Drop any shame, guilt, self-criticism, or worry about how your ideas might sound—just be as honest and uninhibited as you can. Let it out!
- When you start to run out of ideas, move to another box and focus on that one.
- You might notice some overlap, but that's OK. Just keep writing until you feel you're done.
- Quantity doesn't matter. You might have two items in one box and twenty in another. That's all right.
- When you have filled in each box to the best of your ability, reread your list, one box at a time. Add any new items that come to mind.

	Pros (Benefits)	Cons (Costs)
Using		
Not Using		

- In each box, put an asterisk next to the item that feels the *most important* to you from an emotional standpoint—that is, the one that has the strongest “kick.” Be honest. For example, in her pros of using box, Melanie asterisked “Feel relaxed”; in her cons of using box, she asterisked “Might have to go to a treatment program.” These answers gave her important information that could help motivate her to change.
- Compare the asterisked items in your boxes and note below which one of these four items is the number-one item to pay attention to *right now*—and why. What action would you want to take toward addressing your number-one item?

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

The Stages of Change Model

Objective: To identify your current readiness for change by applying the Stages of Change model to your own experience.

You Should Know

If you have weighed the pros and cons of your use, perhaps you have a better picture of your ongoing relationship with substances, both positive and negative. Are you ready for a change? Before you decide, let's look first at how people typically make changes. The Stages of Change model, developed by psychologists James Prochaska, Carlo DiClemente, and John Norcross, is a wonderful tool that can be used not just to identify where you are with your motivation to stop using substances, but for all kinds of life decisions, such as leaving relationships, changing jobs, losing weight, and so on. For our purposes, though, we'll stick to drugs and alcohol.

You might have tried and failed before to cut back on or eliminate your substance use. That is normal and understandable. Most people don't just wake up one morning and say, "OK, that's it! I've had enough," and put down the bottle or pill or needle and never use again. Change is a process that typically follows these stages:

Precontemplation

This is the stage when people are not thinking about changing their behavior. They are perfectly happy to continue drinking or drugging, not concerned at the moment about any harmful consequences. Loved ones, friends, or health-care professionals might have expressed concern, but people in the precontemplation stage of change don't believe they have a problem, at least not one that requires changing their habits.

Contemplation

In this stage, people recognize that they have a problem with drinking or drugging and are thinking about the pros and cons (benefits and costs) of their use. They might also be thinking about cutting back or quitting *someday* but aren't doing anything about it right now.

Preparation

People in this stage are starting to make small changes in their behavior, perhaps cutting back on their use; or maybe setting a date in the future when they will quit or seek help, go to an AA meeting, get a physical exam, or check themselves into a treatment program.

Action

In this stage, people are taking definite action toward changing their behavior, such as quitting outright; entering a detox or rehab facility; or attending an AA, MA, or NA meeting.

Maintenance

The maintenance stage means that people have stopped using and have continued to abstain from substance use for around six months. While it is possible for people to maintain abstinence on their own, it is recommended that they join a support group; continue to ask for help; and build a solid, dependable safety network of supportive people to keep moving forward. We'll talk more about that later in this book.

Relapse is often added to the list, as addiction recovery can often take many tries. Although relapse is common, it is not inevitable, but because it does happen so much, it can be helpful to think of it as a stage of change. It can be devastating to pick up after a period of abstinence, but that doesn't mean all is lost. Every day is an opportunity to start over—and usually people who have been working on their substance-related problems can jump right back in to the preparation or action stages without as much suffering as before.

You might be in different stages of change for different substances. That is, you might have quit using opiates (action/maintenance) but you're smoking marijuana and are not concerned about that (precontemplation). Let's look at each stage using some brief vignettes:

Does This Sound Like You?

Here are some vignettes that illustrate each stage of change:

Precontemplation

Robert, 23, is an unemployed college grad who lives with his parents and smokes marijuana daily, usually at a friend's house, where they hang out and play video games. He participates in a weekly substance-use group because his parents told him he should stop smoking. "I'm here because my parents said they'd cut off my allowance and take my phone away if I didn't show up," Robert says. "I doubt I'll ever stop smoking. I've always had anxiety, and this is the best thing for me. Nothing else works as well as weed, so I don't see what the problem is. I can't wait to move out and be on my own."

Robert is in the precontemplation stage of change. Despite the threat of losing his allowance and phone, he is not ready to confront his addictive behaviors.

Contemplation

Jared, 32, is a married, full-time graduate student working toward his master's degree in public health administration. He has been using nonprescription Adderall since he was a teenager. While he doesn't use it every day, he has begun to notice that he "can't do without it" when he needs to finish a paper or study for an exam. He now has high blood pressure and has lost some weight. Jared's husband complains that Jared is "always wired" and gets angry at him about his Adderall use, which he tries to hide, unsuccessfully. Jared thinks it might be time to make a change. He tells his husband, "Maybe after final exams are over or maybe next year, when I get my degree, then I'll go to a doctor and see if there's something else they can recommend."

Jared is in the contemplation stage of change. He acknowledges there is a problem and is already experiencing some negative consequences of his ongoing use, but he is not yet ready to do anything about it. The contemplation stage of change can be identified as the "maybe someday" stage, which can last for years, even decades, or forever.

Preparation

Charlene, 35, is a married teacher and mother of two young children. Her husband recommended she seek treatment for her problem drinking. She drinks wine every night and then falls asleep, leaving him to manage the children's bedtime on his own. She has agreed to go to therapy because she has noticed that she has been drinking more and more wine at night to "take the edge off," and part of her feels "ashamed" and "out of control." Charlene is sad at the thought of stopping, but she is motivated to do something about it. She decides to try "controlled drinking" for a few weeks, limiting herself to just one glass per night and no alcohol on weekends. "Then, maybe I'll quit on New Year's Day," she says.

Charlene is in the preparation stage. She has mixed feelings about her use, is making small changes, but is not experiencing sufficient negative consequences to quit outright. Instead, she sets a "quit date." People in the preparation stage often find it helpful to set some limits and deadlines and check in with how that feels along the way. It's a good feeling to make an actual plan, which is different from that "someday" syndrome.

Action

Leonard, a guitarist in a rock band, is approaching his thirtieth birthday. Leonard has been smoking marijuana several times a week for about twelve years, ever since he left home for college, but he feels like he isn't really progressing. His childhood friends have good jobs. Some are in long-term relationships; some even have children. So Leonard decides to quit smoking marijuana on his birthday, which, to him, is symbolic of becoming an adult. He tells his friends and his bandmates. He gets rid of his stash, his bong, and his rolling papers. On his birthday, he throws himself a party at a restaurant and invites all his friends and family to celebrate this new beginning.

Leonard is in the action stage—having gone through the precontemplation, contemplation, and preparation stages, he set a date and stuck to it. “It’s not always easy,” he says. He misses some of his old friends, but he feels better about himself and happy to be moving forward in a positive way, taking responsibility, and making healthier choices.

Maintenance

Sheila, 58, had been dependent on alcohol for many years. Her wife, Daphne, and their children had confronted her about her problem a few years back, and she thought maybe she did have a problem. After numerous cycles of detox, rehab, outpatient treatment, AA meetings, and small periods of relapse, she still felt guilty, ashamed, and out of control, which would lead her to pick up again. When her doctor told her she was at risk for liver disease and other chronic health problems, Sheila went to another thirty-day program, and this time she “got it,” in her words: “Life is short. I’m almost sixty. I don’t want to die young, like my mother, who was an alcoholic.” Sheila completed the program and immediately became involved with AA, particularly a sober women’s group that was LGBTQ-friendly. She hasn’t had a drink in nearly a year.

Sheila is in the maintenance stage—she is highly motivated and has a good support network and good sobriety skills. She says it’s a challenge sometimes, but she feels better about herself and hopeful about her future, physically, emotionally, and spiritually.

Relapse

Dennis, 28, has been using opiates for nearly a decade. His use began following a surgery for a sports injury. In the past two years, he has graduated to intravenous heroin use. Dennis has been in several inpatient and day programs and has had short periods of abstinence, but then goes back to using. He has overdosed twice already, requiring resuscitation with Narcan. While he acknowledges that those near-death experiences are a problem, he says he’s not ruling out using again. Dennis attends groups and NA meetings, and now sees a psychiatrist for the drug Suboxone, an opiate-replacement medication. Sometimes he skips taking it in case he wants to get high that day. His therapist recommends another long-term residential program. “I know I’m an addict. I know I’m in trouble. But I won’t go to another program,” Dennis says. “Tomorrow I’ll do better. Tomorrow I won’t use.” He can abstain from using for a few weeks and feels motivated and better about himself. Then Dennis runs into his former dealer or has a bout of depression and picks up again.

Many people, like Dennis, cycle through the precontemplation, contemplation, preparation, action, and relapse stages for a long period of time, without ever reaching the maintenance stage (six months of abstinence). Sometimes they stay in that cycle for years, sometimes decades (though usually not with heroin, as it takes its toll more quickly, and heroin addicts often die young).

If you relapse, remember, it is not the end of the world. You can start back on the path to recovery right away with self-compassion and the willingness to ask for help. It doesn't matter how many times you have relapsed and how many times you start over again—*every attempt at sobriety is worthy of celebration*. Keep going. Believe it or not, you can go from relapse to the action stage of change in a matter of hours and, with help and hope, work toward maintaining those changes.

What to Do

In this exercise, reflect on your own stage of change, being as honest as you can be.

What stage of change best describes where you are *right now* in your process? Explain why you chose that stage.

Think of a time (now or in the past) when you were in the precontemplation stage, whether with substances or another habit or life decision. Describe when and where, and what it was like.

What about the contemplation stage? Describe when and where, and what it was like.

What about the preparation stage? Describe when and where, and what it was like.

Have you ever been in the action stage of change? Describe when and where, and what it was like.

Describe any time when you have been in the maintenance stage—that is, maintained your desired change—for at least six months.

Describe any time when you moved from the action stage into relapse. What happened next?

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Dear Self . . . Yes, You! Part 1

Objective: To build self-empowerment and prevent relapse by beginning a dialogue with the different parts of yourself.

You Should Know

Throughout this workbook, you'll have opportunities to build a new, healthier relationship with yourself. You can learn to notice your inner dialogue. When you're starting to recover from drug and alcohol use, it can often turn nasty and critical and sabotage your progress. You might think the answer is to get rid of that voice. Quite the contrary. That critical voice isn't your enemy—it's your teacher! Developing a consistent, compassionate dialogue with yourself can be vital to maintaining long-term sobriety.

Does This Sound Like You?

Mack, 35, says he has an "intimate relationship" with the angel and devil on his shoulders that talk noisily to him all the time about his excessive use of Vicodin, a painkiller: "Come on, you can take one! What difference will it make?" or "Who's going to know? It'll help you relax." Then the other voice kicks in: "You know you can't stop at one pill. Once you start, you'll want another, and another," or "Remember what happened last time? You ended up missing work the next day!"

How are you like Mack? How are you different?

Does Mack's awareness of his two inner voices help or hurt his progress? Tell why.

What to Do

In this exercise, you'll first identify two specific inner voices—what we'll call your wise self and your addicted self. Some call them the "angel" and the "devil" sitting on your shoulders. Your wise self is the one who knows the negative consequences of using drugs and alcohol and is determined to do something about it. Your addicted self is the one who, despite the negative consequences, continues to use.

On the following lines, write down some of the familiar phrases that come to mind when you pay attention to what your wise self has to say.

Examples:

- *“I know it’s hard and you’ve tried to stop drinking before. Let’s give it another chance.”*
- *“Using heroin doesn’t mean you’re a loser. You are a good person.”*
- *“It’s OK to ask for help.”*
- *“You’ll feel better when you’re not thinking about smoking weed all the time.”*

You might want to look back at Weighing Your Pros and Cons (see page 11), where you identified what you see as the benefits and costs of using and not using substances.

Next, write down some of the familiar phrases that come to mind when you pay attention to what your addicted self has to say.

Examples:

- *“I don’t care anymore. I just want to get high.”*
- *“Leave me alone. I’m a lost cause.”*
- *“You don’t understand. I need to get drunk.”*
- *“I can’t change, no matter how hard I try.”*

We will return to this exercise later in the workbook, so you can see how these voices have developed over time.

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

KNOW YOUR TRIGGERS

What Are Your Triggers?

Objective: To make more positive choices and avoid unwanted slips by learning what your triggers are.

You Should Know

Most people in recovery have heard the term *trigger* before, especially if you've tried quitting or cutting back on drug or alcohol use in the past. A trigger can be a person, place, or object (external triggers); a memory, emotion, or sensation (internal triggers); or a situation (internal or external) that makes you think about using and that might cause you to pick up.

Triggers can often seem to have a life of their own, controlling your moods and behaviors, outside of your conscious awareness: ". . . and the next thing I knew, I was at the liquor store (or calling my dealer)." Knowing your personal triggers is key to self-awareness. And self-awareness is key to your recovery!

Does This Sound Like You?

Angela, 31, is nine weeks abstinent from alcohol. She nearly lost her job as a result of chronic alcohol-related absences. Her employer referred her to an Employee Assistance Program, and she attended a thirty-day residential program, followed by a two-week day treatment program. She now sees an individual therapist and attends AA meetings four times a week. She has daily urges and thinks about alcohol a lot. Angela is making some sober friends, but 90 percent of the people she knows drink, and they don't know about her problem. At a friend's wedding shower, Angela thinks she's "strong enough" to resist drinking, but once the mimosas are passed around and everyone's laughing, Angela starts to feel sad and angry. She wishes she, too, could drink socially, "like a normal person."

How are you like Angela? How are you different?

What were Angela's external triggers? Her internal triggers?

What to Do

In this exercise, you'll identify your personal triggers. As with all the exercises in this book, be as honest and nonjudgmental as you can as you make your lists. Don't hold back. Once you know your triggers, you can make more positive choices and avoid an unwanted slip or relapse.

List the people in your life with whom you might use alcohol or drugs:

List the people in your life who are possible triggers to your picking up alcohol or drugs, besides the people you are likely to use with:

List the places where you might be likely to use alcohol or drugs:

List the time(s) of day when you might be likely to use alcohol or drugs:

List any objects (paraphernalia, books, magazines, bank machine, phone, and so on) you might encounter that might trigger you to want to use alcohol or drugs:

List any specific memories or experiences (a certain song, a romantic encounter, a traumatic event, loss) that are likely to trigger your desire to use:

List any emotions (anger, sadness, fear, anxiety, depression, jealousy, loneliness, happiness, excitement, and so on) you're aware of that might trigger you to use. These can be positive or negative emotions:

List any physical sensations (aches, withdrawal symptoms, cold or flu, pain) that might trigger you to use:

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Noticing Your Urges and Cravings

Objective: To gain better control by recognizing and tracking your urges and cravings.

You Should Know

Now that you are more familiar with what people, places, and things might trigger your desire to use substances, let's look more closely at that desire to use, or what are called "urges and cravings."

Urges and cravings—terms that are often used interchangeably—are a challenging part of recovery, especially in the early going. Most people would describe an urge or craving as a powerful physical sensation and/or mental compulsion to use their substance of choice. Physical urges and cravings are frequently accompanied by a sudden stream of thoughts that make you feel compelled to pick up, as if there is no choice. People who are not in recovery from drug and alcohol use can relate by thinking about the feeling they experience "dying for" that first cup of coffee in the morning or a sugary treat after dinner.

Books and articles about addiction often point to the role of "positive" hormones such as endorphins and dopamine, which can cause euphoric feelings, in feeding the cycle of addiction. We won't be delving into brain chemistry here, but you should know that the feeling of being out of control and helpless in the face of a craving can in large part be chemically based, especially for long-term users.

Once you get better at identifying your triggers, which often lead to urges and cravings, you can take steps to feel more in control.

Does This Sound Like You?

Roderigo, 19, has been using prescription Xanax, a benzodiazepine, to treat his anxiety for two years. He wanted to stop using Xanax because he was afraid he was addicted and wanted to face his life stresses without medication. His doctor put him on a slow program to taper off, and now Roderigo hasn't used any benzodiazepines for the past month. At random times throughout the day, Roderigo has some mild shakiness and a fluttering heart. "It freaks me out," he says. He describes both a strong physical craving and difficulty letting go of his obsessive thoughts about wanting to take a pill.

How are you like Roderigo? How are you different?

Have you experienced physical or mental urges or cravings for your substance of choice?
Describe briefly.

What to Do

For the next week, notice and record, or be mindful of, your urges or cravings: when they occur; where you are and whether you are alone; how intense they are on a scale from 1 to 10 (1 = mild, 5 = moderate, 10 = intense); and how long they last. As you do this exercise, remember to let go of any judgment, shame, or guilt, and just notice.

Example: Tuesday	Time of day	Where were you? Alone or with others?	How intense was it?	How long did it last?
	<i>8 p.m.</i>	<i>Home alone unexpectedly</i>	<i>7</i>	<i>10 minutes</i>

Week of _____

	Time of day	Where were you? Alone or with others?	How intense was it?	How long did it last?
Sunday				
Monday				
Tuesday				
Wednesday				

	Time of day	Where were you? Alone or with others?	How intense was it?	How long did it last?
Thursday				
Friday				
Saturday				

Now that you’ve begun to notice the people, places, and things that trigger you and the frequency and duration of your urges and cravings, what can you do? Here are some options:

- Stop. Breathe. Feel your feet on the ground. Count to ten. Keep breathing.
- Distract yourself by doing something else—read, write, walk, run, go to the gym, have a snack, play a video game. (Later on, we’ll take a broader look at things to do instead of using.)
- Call a safe person, someone who will help you avoid picking up without judging or shaming you.
- Go to an AA or SMART Recovery meeting.
- Practice “urge surfing,” in which you simply notice the urge and its intensity, like a wave coming to shore. You don’t have to do anything. Just watch it arrive, swell, peak, and then get smaller, until it disappears. Sometimes cravings last a few seconds, sometimes a few minutes or more. Most cravings diminish much more quickly than you’d think.

For this exercise, chart your responses to your urges and cravings over the next week, adding on the information in the new column on the right.

	Time of day	Where were you? Alone or with others?	How intense was it?	How long did it last?	Your response
Example: Sunday	<i>1 p.m.</i>	<i>After an AA meeting</i>	<i>7</i>	<i>5 minutes</i>	<i>Told a buddy that I was triggered.</i>

Week of _____

	Time of day	Where were you? Alone or with others?	How intense was it?	How long did it last?	Your response
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Your P.L.A.N. for Social Events

Objective: To lower the risk of relapse by planning how to manage social events where you might be triggered.

You Should Know

One of the hardest challenges in your recovery will be making smart choices about social events and celebrations where alcohol is likely to be served: birthday parties, office parties, anniversaries, weddings, bridal or baby showers, graduations, funerals, religious ceremonies, family holidays—you name it. Sometimes you might have to attend an office event or function, a conference or meeting, in which alcohol is readily available and many, if not most, people will be drinking.

Usually this challenge is hardest for those with a specific history of alcohol use, because alcohol is everywhere in our culture—and it’s glorified. But those with problem drug use can also be triggered by exposure and access to alcohol.

But you can’t hide in a cave the rest of your life. So what can you do about exposure to alcohol?

Does This Sound Like You?

Mei, 50, a divorced corporate executive who has ninety days’ abstinence from alcohol, is asked by her company to give a presentation at an out-of-town conference where there will be receptions, happy hours, and working meals. She will be traveling alone and knows only one other person from her company who will be there. In the past, Mei would stay in a hotel that had a minibar in each room. She worries that the whole event will trigger her to pick up.

How are you like Mei? How are you different?

Have you ever been confronted with a similar situation? What did you do?

What do you think Mei can do to avoid using alcohol? Write some notes here.

What to Do

This exercise will teach you the P.L.A.N. strategy for relapse prevention. P.L.A.N. stands for:

Prepare

Listen

Acknowledge

Say No

Most experts agree that the safest thing to do if you are triggered by the sight, smell, and general availability of alcohol is to avoid the event altogether. This is always a choice. But sometimes you really don't want to have to miss the wedding of a loved one or dear friend. Use P.L.A.N. to do the best you can to manage these unavoidable situations.

Prepare

At least a few weeks before you attend this event, do some research. Find out as much as you can about what you might encounter so you won't be surprised and so you can be prepared with an "escape route" if necessary. Leave nothing to chance.

Event _____ Date _____

Time of day _____ Expected length of event _____

Location _____

List all the people you know who will be at the event:

Of those people, does anyone know about your decision not to drink or drug? Who?

Identify at least one person from the above list who can be your "buddy" at the event.

If no one will be available at the event itself, identify a "buddy" you can call or text (friend, spouse, sponsor, someone supportive), even if you feel you're in a good place.

Buddy's name _____ Phone number _____

Arrange in advance to check in with your buddy *at least once* during the event, no matter what.

Find out if there will be an open bar: (Y/N) _____ Cash bar? (Y/N) _____

If yes, what can you order for yourself instead of alcohol? Many people choose seltzer with lime, juice, soda, and so on.

The more you think about these things in advance, the better chance you have not to do something impulsive. Tell everyone you feel comfortable telling not to offer you alcohol!

Listen

Part of the recovery process is to listen to your wise self and your addicted self, discussed earlier, in advance of an event. Is your wise self telling you that going to this event is a smart or not-so-smart choice? Is your addicted self excited about the possibility of using? Listen closely to your inner voices without judgment or criticism. Write down what your wise self and your addicted self are saying when you think about going to this event. Remember to be honest and compassionate toward yourself.

Acknowledge

Even though you really want to go or absolutely must go to this event, what are your fears and worries, hopes and expectations? Can you acknowledge what risks you might be taking and strengthen your P.L.A.N. to minimize the risk of relapse? Write down your thoughts here, being as honest as you can. There is no right answer!

Say No

Again, it's always an option to decline an invitation to an event. In recovery, *you get to do what's best for you*, even if other people pressure or criticize you. That's called healthy selfishness, and it's especially useful for people pleasers or those who have a hard time saying no in general.

Assess whether you have prepared enough for an event enough to be able to say no at, say, an open or cash bar, or to people passing around a joint or doing lines in the bathroom. (One client once reported that a relative was passing around Xanax at a *funeral*.) If you feel you are at risk, say no, send your regrets, and arrange to visit those people at a later time.

If you do decide to go, practice some ways to say no to an offer of alcohol and/or drugs. For example:

- *"No, thanks."* (Simple, succinct, move on.)
- *"No, thanks. I'm good."*
- *"No, thanks. I don't drink/smoke/use drugs."*
- *"No, thanks. I don't like the taste of alcohol."*
- *"No, thanks. I'm allergic."*
- *"No, thanks. I'm on a diet and avoiding alcohol."*
- *"No, thanks. I've had a problem with drinking/drugging in the past."*
- (Fill in your own) _____
- (Fill in your own) _____

After the event, write down your experience on the lines below, and make note of what you said or did to prevent yourself from picking up. If you did slip and pick up, write about that in detail so you can refer to it at a later date. Slips or relapses are not the end of the world, but the more you prepare, the higher the chance of success.

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

TAKE ACTION

Housecleaning

Objective: To minimize your risk of relapse by taking specific steps to get rid of objects and avoid people and situations that might trigger you to use.

You Should Know

Let's say you've decided to stop (or cut back on) using substances. Now it's time to take some steps to minimize your chances of relapse. Access to your substance of choice and the opportunity to use it are two key elements that can lead to a relapse or the temptation to relapse. Limiting access and opportunity is a smart, healthy choice, but it might not be easy. As with everything in your recovery, be sure to ask for help and support from people you trust to honor your decision.

Does This Sound Like You?

Liza, 20, has been using nonprescription Percocet since she was 17. Her parents have sent her to multiple treatment programs, but whenever she moves back home, she relapses. Upon her return from a wilderness program, Liza's parents were worried. They gave her an ultimatum: "Thirty days of clean drug tests or you'll have to find a place of your own." Liza knew she had stashed pills in different places around the house. She worried that if she found one she wouldn't be able to resist. She asked her parents to help her search the house to be sure all the pills were gone. They combed through closets and drawers, under the bed, under the mattress, and in clothes pockets and found some long-forgotten unused pills, which they threw out together. Liza had lots of mixed feelings, but she knew she was doing the best thing for herself.

How are you like Liza? How are you different?

Have you ever taken steps to limit your access and opportunity to use your substance of choice? How would you feel about doing what Liza did?

What to Do

In this exercise, you'll work on moving from the contemplation stage of change, discussed earlier, to the preparation and action stages. You'll take stock of your physical environment as well as your social network, think about your access to money, and make some tough choices about letting go of things and people who could interfere with your progress.

Taking Stock of Your Environment

First, schedule a specific time to go through your home and get rid of items that put you at risk of using. Commit to it! Ask a trusted person to witness your activity, if you wish.

Date _____

Time _____

Next, go through your house or apartment and dispose of any and all of the following substances or paraphernalia. Don't forget to toss that last little pill or nip or joint or stash that you've hidden. Setting a little something aside just in case is sometimes called "reserving the right to use," and it's a setup for failure.

- Alcohol
- Lighters
- Nonprescription pills
- Rolling papers
- Prescription pills you might abuse
- Bongs, pipes, etc.
- Marijuana
- Mirrors
- Other abusable drugs, such as cough medicine
- Ashtrays
- Medical marijuana card
- Needles, syringes, spoons, etc.

If you live with someone who has access to or uses substances that put you at risk for picking up (for example, prescription drugs), buy a lockbox and have them keep those items in a secret, locked place.

Limiting Access to Money

If you are at risk of picking up drugs or alcohol whenever you have some cash in your pocket, set up a system for yourself to limit access to money. Some people choose to get rid of their bank cards altogether or sign over their account to a loved one. Some arrange to have someone else give them an allowance and then keep track of any expenses together. “But I’m too old for that!” some might say, or “That makes me feel like a child again!” If you are putting your recovery first, tell yourself this: “I’m doing this because I want to have a happier life. It doesn’t matter what people think. I’m not reverting to childhood—in fact, I’m being smart. I’m acting like a mature, responsible adult by putting things into place to limit my chances of relapse.” Sound good? Go for it!

Taking Stock of Your Social Network

As you know, people in your social network can be triggers to using: for instance, family members, friends, and colleagues who just don’t get how serious your situation is and who might push you or urge you to use “just this once.” For your best chance at success, limit or, in some cases, cut off contact with these people.

You can do so in the following ways:

- Delete their numbers from your phone.
- Block them from texting or calling.
- Block them from social media.
- Tell them in person or by email that you do not want to have contact any longer.
- Say no to social events that might trigger you to use.

Add any other “housecleaning” items here that might be helpful in your recovery efforts:

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Reasons Not to Use

Objective: To keep focused on your main reasons for wanting to stop using substances by creating a handy visual reminder.

You Should Know

Now that you're beginning to take charge of your life in a healthier way, it can sometimes feel overwhelming to make so many changes at once. One simple activity that helps people in early recovery is to identify their specific reasons for not using, and to keep that list (or another visual reminder) front and center at all times.

Does This Sound Like You?

Mario, 50, a lawyer and father of three, has relapsed so many times on a combination of alcohol and pills that he has lost count. Now, his wife has threatened to leave with the kids if he doesn't stop drinking. In addition, he hasn't been to the doctor in two years and worries that his liver might be affected by his substance use. Mario has to face up to the possibility that he could lose everything he really cares about: his job, his marriage, his kids, his health. In his head, he knows the main reasons he shouldn't use and what's at stake, but he always seems to forget those reasons and acts on impulse instead.

How are you like Mario? How are you different?

How do you feel about expressing your reasons for not using? Does it make you feel happy? Sad? Scared? Guilty? Describe briefly.

Next, narrow your list down to your top six:

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Now comes the fun part! Take your list and create an attractive, easily accessible way to look at it whenever you feel your motivation is down. You might want to write your list on an index card or colorful piece of paper and keep it in your wallet or purse. Or you can enter your list directly onto your smartphone's note function. Or, instead of a list, you can download positive images onto your phone or computer—photos of loved ones or other inspiring graphics to remind you of your main reasons not to use. Be creative!

Look at your list or your images as often as you need to—and feel free to edit or change your reasons as needed. As you begin to identify your internal and external triggers, and tune in to when you have an urge or craving, you'll get better at noticing those thoughts and feelings and remembering to use this exercise as a strategy for relapse prevention.

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Alternatives to Using

Objective: To minimize the temptation to use by identifying pleasurable activities to do instead of turning to drugs or alcohol.

You Should Know

Another challenging part of breaking free of addiction can be figuring out what to do instead of using. Maybe you have a lot of time on your hands since you're not chasing down your dealer or planning your next high or battling a hangover. Or maybe you can't remember what you used to do before you ever started using.

Maybe using has been so much a part of your daily life that you haven't given a thought to what else could possibly give you pleasure. If any of the above examples strikes a chord, you're not alone. It's a normal and understandable part of recovery and nothing to be ashamed of.

But now, it's time to rejoin life—at your own pace, in your own time.

Does This Sound Like You?

Carrie, 25, has been using cocaine recreationally since high school, first sniffing in the bathroom at school and then snorting lines in the back room at her waitressing job and after work. Her day often revolves around finding coke, getting high, crashing, and starting again the next day. Recently, she had a series of panic attacks that scared her to death, so Carrie has decided to quit. She's proud of herself, but now she has no clue about how to fill her time. "Life is so boring," she says.

How are you like Carrie? How are you different?

What do you think a good starting point would be for Carrie to find things to do besides using?

How do you deal with boredom?

What to Do

Review the following list and put a checkmark next to at least twenty activities that you would consider doing. Then write down which ones you'll commit to doing and in what time period. Be realistic, but don't play it 100 percent safe. Do something new! You might want to think about which activities will help you grow and learn, which ones would help you tackle any boredom that you might experience, and which would directly contribute to preventing a relapse. (See A Note on Boredom on page 72.)

- Acting
- Arranging flowers
- Arts and crafts
- Attending a prayer group
- Ballet or tap dancing
- Bowling
- Buying books
- Buying clothes
- Buying gifts
- Buying household gadgets
- Buying music
- Camping
- Canoeing
- Cleaning
- Collecting things (coins, shells)
- Cooking
- Crossword puzzles
- Dancing
- Daydreaming
- Debating
- Discussing books
- Doodling
- Dressing up and looking nice
- Driving
- Eating
- Entertaining
- Exercising
- Family get-togethers
- Fantasizing about the future
- Fishing
- Flying kites
- Gardening
- Getting a massage
- Going on a date
- Going out to dinner
- Going to a Meetup group
- Going to a museum
- Going to plays and concerts
- Going to religious services
- Going to the beach
- Going to the mountains
- Going to the movies

- Golfing
- Hang gliding
- Hiking
- Horseback riding
- Jogging
- Karate or martial arts
- Kayaking
- Kissing
- Knitting
- Laughing
- Lighting candles
- Listening to music
- Listening to the radio
- Lunch with a friend
- Making a gift for someone
- Meditating
- Meeting new people
- Model building
- Needlepoint
- Painting
- Photography
- Picnic
- Planning my career
- Planning to go to school
- Playing another musical instrument
- Playing cards
- Playing guitar
- Playing with pets or other animals
- Political discussions
- Praying alone
- Quiet evenings
- Reading a book
- Recalling happy moments in my childhood
- Recycling old items
- Refinishing furniture
- Reflecting on how I've improved
- Remembering words/deeds of loving people
- Repairing things around the house
- Riding a motorbike
- Running track
- Sailing
- Sauna or steam bath
- Sewing
- Sex
- Shooting pool
- Sightseeing
- Singing around the house
- Singing with groups
- Sitting in a sidewalk café
- Skating
- Skiing
- Sleeping
- Soaking in the bathtub

- Soccer
- Softball
- Solving riddles or puzzles
- Spectator sports
- Spending time with good friends
- Stamp collecting
- Surfing
- Swimming
- Taking a college class
- Taking an adult education class
- Taking care of my plants
- Taking children places
- Talking on the phone
- Teaching
- Tennis
- Thinking about becoming active in the community
- Thinking how it will be when I finish school
- Traveling abroad or in the United States
- Vacation
- Volleyball
- Volunteering
- Walking in the woods or on the beach
- Walking in my neighborhood
- Watching boxing
- Watching my children play
- Watching TV
- Woodworking
- Working on my car
- Wrestling
- Writing a diary or journal
- Writing books or poems
- Yoga

Now list the twenty activities you chose and when you want to do them by. Over the next week or two, record which activities you actually did and what it was like for you. Refer back to this list, and delete or add to it as needed. And have fun!

Activity	Do by	When done	What was it like?

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

BUILD A SAFETY NET

Creating a Safe Network

Objective: To boost your chances of success by creating a list of people you can trust to be supportive.

You Should Know

Connecting with supportive people who will help you succeed with your recovery goals is an important part of breaking free of addiction. Why? Simple answer: It's too hard to do alone! That's why it's important to start building and maintaining a safe network among all the people you know—family, friends, coworkers, fellow students, and community members.

If you join a self-help group such as AA or SMART Recovery or attend group therapy or counseling, you'll have lots of choices of people who will "get" you and understand what you're going through without judging or shaming you. Some of them might even become a sponsor or recovery buddy—someone very reliable you can call 24/7 and who will be available to focus exclusively on you. You deserve to have as many people in this network as possible, so that you have lots of options in case you hit a rough or vulnerable patch.

Does This Sound Like You?

Alexander, 27, is new to addiction recovery. He had become dependent on painkillers following back surgery two years ago. When his doctors, concerned about possible abuse, stopped writing him prescriptions, he ended up finding pills through a friend, or he ordered them from the internet. He even stole some from his grandfather's medicine chest. Alexander saw a show about addiction and realized he had a chemical dependency. After a stay at rehab, he feels better but has nothing in place to continue his progress now that he is home. He doesn't want to go to AA or NA—"They're not for me," he says. Only a few people know about his history. He doesn't like to talk about it; he'd rather just figure it out alone.

How are you like Alexander? How are you different?

Do you tend to isolate? Do you feel worried or ashamed about telling people you are in recovery? Why or why not?

What to Do

In this exercise, you'll begin to identify people who might be available to join your safe network as you become more comfortable asking for help and isolating yourself less. Do the best you can to choose people who are going to be supportive without being enabling. An enabler is usually someone who cares about you but might feed into your addictive behaviors by lending you money, driving you to meet your dealer, giving you "just one" drink to help you relax, and so on.

Before you begin, think about the qualities you would find helpful in a friend or loved one, such as kindness, acceptance, warmth, respectfulness, patience, and honesty. Does that person ever use drugs or alcohol? Would someone who uses substances be a safe person for you? Try to name four people in each category.

If you can't think of anyone off the top of your head, think about people who might be available to you, if you were to ask. Gradually (not frantically) begin to reach out to these people and tell them you are working hard to recover from substance use and would love to connect with them as supporters along your journey. Use this list as a starting point. Add your own ideas at the end.

People in my family:

1. _____

Phone: _____ Email: _____

2. _____

Phone: _____ Email: _____

3. _____

Phone: _____ Email: _____

4. _____

Phone: _____ Email: _____

People in my circle of friends:

1. _____

Phone: _____ Email: _____

2. _____

Phone: _____ Email: _____

3. _____

Phone: _____ Email: _____

4. _____

Phone: _____ Email: _____

People at school or at my job:

1. _____

Phone: _____ Email: _____

2. _____

Phone: _____ Email: _____

3. _____

Phone: _____ Email: _____

4. _____

Phone: _____ Email: _____

People in my community (AA or NA members, neighbors, clergy, religious community, fellow volunteers):

1. _____

Phone: _____ Email: _____

2. _____

Phone: _____ Email: _____

3. _____

Phone: _____ Email: _____

4. _____

Phone: _____ Email: _____

Others:

1. _____

Phone: _____ Email: _____

2. _____

Phone: _____ Email: _____

3. _____

Phone: _____ Email: _____

4. _____

Phone: _____ Email: _____

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Asking for Help

Objective: To support your recovery process by learning and practicing strategies for reaching out to others for help and support, especially if you are usually the helper.

You Should Know

In the previous exercise, you created a safe network for yourself—a list of people who could be available if you need help in your recovery or in life in general. That’s a great step! Before you move on, let’s tackle a problem a lot of people in recovery have faced—and have stumbled over—throughout their lives: how to ask for help. Sometimes it’s easier said than done.

It is common among people with substance-use histories to try to “disappear” or isolate—perhaps because of guilt, shame, or a sense of unworthiness; perhaps because they were abused or neglected as children; or perhaps because they were betrayed by a loved one and don’t trust that anyone would want to help them. If those experiences are a part of your history, it is essential that you seek individual counseling or therapy to fully understand and ultimately break free of those hurts and traumas.

No matter your history, you deserve help and support. You deserve not to carry the weight of the world on your shoulders or take care of everyone else’s needs before your own. If you go to enough AA meetings or other support groups, you’ll learn that “people pleaser” is a common label among people in recovery. People also find the twelve steps of AA helpful in understanding the cost (and benefit, too) of taking care of others’ needs.

Does This Sound Like You?

Anna, 43, is a single mother of two teenagers; she works part time as an office manager. She is in early recovery from a combination of drug and alcohol use. Before entering treatment, Anna felt responsible for doing all the driving, cooking, cleaning, and household tasks, and she was very resentful and burned out: “I have to take care of everyone else, and I always put myself last.” Anna realizes she needs to change but isn’t sure how to go about setting limits or getting help.

How are you like Anna? How are you different?

What is one step Anna could take to start practicing getting help?

What to Do

In this exercise, you'll first reflect on times in your life when you've asked for help—from simple things like asking someone to help you do a household task to asking for a ride to the airport to asking someone to watch the kids while you take time for yourself. List three of those times on the lines below.

Now, write down three times in your life when you really needed help and didn't ask anyone. Note when it happened (year or your age), who was involved, the reasons why you didn't ask (if you can recall), and what you remember feeling at the time.

1. _____

2. _____

3. _____

Now look at your list of people in your safe network. How might each (or a few) of them help you with something that you might need right now? Here are some typical things that people who are people pleasers have difficulty asking for help with:

- Babysitting
- Pet sitting
- Cooking a meal
- Getting a ride to a meeting or appointment
- Household chore(s)
- Running an errand
- Talking on the phone for emotional support or encouragement
- Being available by phone or text to check in during the day/evening
- Meeting in person for emotional support or encouragement

Now fill in your own ideas for tasks or other things you might need help with:

Record over the next week ways in which you need to, or could try to, ask for help. Here are some ideas of how you might ask for help, by text, phone, or email, or in person:

- *“Hi, _____. If you have a moment, I’m wondering if you can help me with something?”*
- *“Hi, _____. I have a doctor’s appointment on Tuesday at 3:00, and my car is in the shop. Would you be available and willing to drive me?”*
- *“Hi, _____. I have to go to court for my DUI next week. I don’t want my spouse to go because he/she’s still too angry. Can you free up the time to come with me?”*
- *“Hi, Mom. You know how I love your chocolate chip cookies? I really need some comfort food right now. Would you have time to bake a batch and bring them over?”*
- *“Hi, _____. Are you going to the 7:00 meeting? Would you be able to pick me up? I’ll chip in for gas, if that works for you.”*

You get the idea. Ask politely, assuming they have busy schedules. Be sure to say thank you. Someday, perhaps you’ll be in a place when you can return the favor, but for now you are the one who deserves to ask for help from friends and loving supporters along the way.

In the next week, record any situations when you need help, whom you asked and in what way, what you said, and what the outcome was. Even if you don't *really* need help, practice asking anyway and see what happens.

Sunday

Needed help with _____

Asked _____

What you said _____

Phone? _____ Text/Email? _____ In person? _____

Outcome _____

Comments _____

Monday

Needed help with _____

Asked _____

What you said _____

Phone? _____ Text/Email? _____ In person? _____

Outcome _____

Comments _____

Tuesday

Needed help with _____

Asked _____

What you said _____

Phone? _____ Text/Email? _____ In person? _____

Outcome _____

Comments _____

Wednesday

Needed help with _____

Asked _____

What you said _____

Phone? _____ Text/Email? _____ In person? _____

Outcome _____

Comments _____

Thursday

Needed help with _____

Asked _____

What you said _____

Phone? _____ Text/Email? _____ In person? _____

Outcome _____

Comments _____

Friday

Needed help with _____

Asked _____

What you said _____

Phone? _____ Text/Email? _____ In person? _____

Outcome _____

Comments _____

Saturday

Needed help with _____

Asked _____

What you said _____

Phone? _____ Text/Email? _____ In person? _____

Outcome _____

Comments _____

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Tracking Your Recovery Activities

Objective: To create accountability for your choices and actions by keeping track of your recovery-related activities.

You Should Know

One key ingredient of breaking free of addiction is staying active and accountable in your recovery. That means not leaving anything to chance. The more you take action to build your safe network, the better your chance of success. “Why do I need a safe network? I’m finally motivated enough on my own,” a client once asked.

Self-motivation is a great thing. But even the most motivated people lose their momentum and determination at times. If you wait until one of those times, you might be too tired or burned out or anxious or depressed to reach out and ask for help if you are triggered to use. Many experts believe that remaining engaged in regular recovery-related activities lowers your risk of slipping or relapsing.

Does This Sound Like You?

Carolina, 36, juggles a full-time job as a college professor and tries her best to join her wife and their twin two-year-old girls for dinner each night, but she often has student conferences or faculty meetings. Carolina had been using cocaine recreationally for ten years before meeting her wife, then continued to use it occasionally in secret. She stopped when she got pregnant and became so busy that she rarely thought about using. After several recent office parties where a colleague put out lines of cocaine, however, she’s been fantasizing about it a lot. She’s never been in any kind of therapy and says she has no time for meetings or groups; nor is she friends with anyone who is in recovery.

How are you like Carolina? How are you different?

Do you think Carolina is at risk for abusing cocaine again? Why or why not? Write down your thoughts here, and connect them to your own situation.

What to Do

Perhaps you agree that Carolina could benefit from adding some recovery-related activities to her schedule, even if they add temporary stress to her life. In this exercise, you'll keep track of your recovery-related activities, meaning specific events that are directly related to your recovery from drug or alcohol use. Later in this workbook, you'll read about other activities, such as exercise and meditation, which are essential tools for successful recovery as well.

Some recovery-related activities include:

- AA meeting
- MA meeting
- NA meeting
- SMART Recovery meeting
- Inpatient program or rehab
- Meeting with sponsor or "recovery buddy"
- Intensive outpatient program (day treatment)
- Facilitated therapy group
- Individual therapy
- Psychiatric or medication consultation
- Informal support group for people in recovery

For the next week, keep track of your recovery activities here:

Week of _____

	Activity	Where	Time of day	With whom	For how long
Sunday					
Monday					
Tuesday					
Wednesday					
Thursday					
Friday					
Saturday					

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Stretching Out of Your Comfort Zone

Objective: To begin taking safe steps toward new and different life experiences by identifying your comfort zone and thinking about how you can move beyond it.

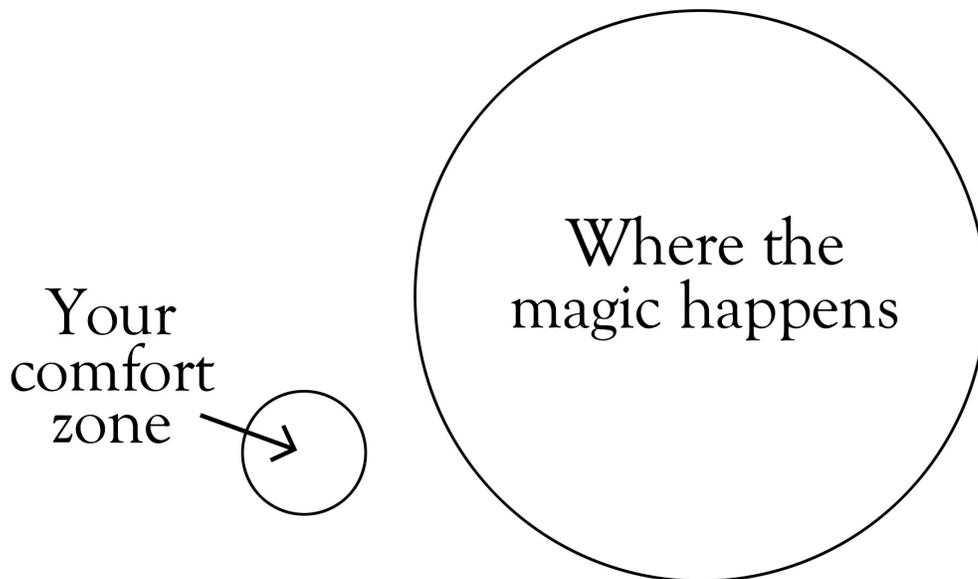
You Should Know

Sometimes the mere idea of creating a safe network and scheduling recovery-related activities might feel daunting. If you are someone who is shy, feels anxious in social situations, tends to isolate, or otherwise avoids people or unfamiliar situations, it can be especially challenging.

Changing habits is hard. For everyone. Remember the Stages of Change model? It's not like we, as creatures of habit, go marching forward from one stage to the next in one straight line. For most of us, it's three steps forward, one step back, or even cycling round and round, as we face our natural resistance to—and, often, fear of—change.

We all have a comfort zone—the things and objects, people, activities, and habits that keep us feeling safe. But here's the catch. Changing habits in a big way, such as what you are doing in breaking free of your addiction to alcohol or drugs, inevitably involves some discomfort.

Some years back, this image was making the online circuit:



Isn't this a great image? First, the MAGIC circle is a lot bigger than the COMFORT ZONE circle. That's encouraging! But see that empty space between the circles? That space represents the UNKNOWN, which can be both exciting and scary to most people, especially if you're giving up your go-to coping mechanism of drugs or alcohol.

To get from one circle to the other, you'll have to navigate some unknown territory. Have you ever heard the saying "Leap, and the net will appear"? It's the same idea. With good planning and good support, you can succeed. But there are no guarantees. As Yoda from the *Star Wars* movies said: "Do or do not. There is no try."

Does This Sound Like You?

Candy, 22, lives at home with her parents, having dropped out of college because of failing grades and mild depression. Candy has a history of anxiety and panic attacks. She has been in and out of treatment for alcohol use since high school. She'll go a few months without drinking, and then she'll go on a bender. Then she'll stop again. Candy has had trouble finding a doctor who will prescribe her antianxiety medication because of her alcohol history. She always feels bad about drinking but loves the relief alcohol gives her. Even though her parents are bugging her, she is not looking for a job. She sleeps late, watches TV, and texts with her friends. "I just want to be happy for once in my life. I don't know what's wrong with me," she says.

How are you like Candy? How are you different?

What clues in Candy's story tell you that she might be stuck in her comfort zone? What could she do to get out?

What to Do

In this exercise, you'll identify the components of your personal comfort zone. Next, you'll look back at the vision statement you wrote earlier to get some clues about "where the magic happens" for you. Then, you'll identify some concrete steps to take to guide you along your journey.

What are the components of your comfort zone? What helps you feel safe but might be interfering with your moving forward? Be as detailed as you can.

Look back at your vision statement. What items in that statement represent “where the magic happens” for you?

What steps are you willing to take to get closer to “where the magic happens” for you? Be detailed. Be optimistic while still being realistic.

Today

Tomorrow

In the next week

In the next month

In the next year

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

KNOW YOUR FEELINGS

Feelings 101—It’s OK to Be a Beginner

Objective: To learn about your emotions by noticing and labeling different types of feelings.

You Should Know

In many cases, people in recovery from problem drug and alcohol use have been out of touch with their feelings, perhaps for a short time, perhaps a long time, perhaps forever. If you’ve been using for a long time, chances are that you’ve been numbing your emotions to some degree.

With sobriety, you are no longer numbing with substances, so you’ll naturally feel more. Those feelings might include negative emotions such as fear, sadness, anger, jealousy, or confusion; or positive emotions such as joy, calm, safety, gratitude, or pride.

If you grew up in a home where your genuine feelings were ignored or criticized or punished, you’ll face challenges along the way, so be very kind and patient with yourself. Suddenly feeling your feelings can be exciting and motivating. But more often, at least at first, they can be overwhelming. In this exercise, you can begin to identify a range of feelings and work toward expressing them safely and effectively. By labeling our feelings, we can use the power of our mind to take a step back and assess, then make a good choice about what to do next.

Does This Sound Like You?

Olivia, 27, attended an inpatient program and has not used any opiates for thirty days, after many years of use. She notices feeling “up and down” all the time but has difficulty identifying her feelings more specifically. “I was numb for so long. I kind of miss it, but I don't want to go back to using. How am I supposed to know what’s normal or not normal? Is this anxiety or anger or just stress? Am I bored or depressed or sad?”

How are you like Olivia? How are you different?

Describe your own awareness of your feelings during this stage in your recovery.

A Note on Boredom

Boredom is a common trigger to relapse. But boredom can often be a sign that you are disguising other feelings, such as sadness, depression, loneliness, anger, or even anxiety and fear. If you find yourself feeling bored, see if you can dig a little deeper to see what other feeling or feelings might also be connected.

If you are used to being under the influence as a means of managing emotions, not being high or stoned or drunk will feel strange at first, and that can feel like boredom, too.

Write down your thoughts about boredom. What else might boredom be for you? What would it be like to be bored and not have to do anything about it—just witness it, sit with it, not judge, let it pass, or redirect your energy?

What to Do

Write down a few situations or experiences in which you are aware of your feelings. Start with noticing pleasant or unpleasant feelings. Then try to be more specific, using this list. If you're ready, note any observations about the experience. Below is a list of feelings to choose from. Feel free to use any feelings that come to mind that might not appear on this list.

Pleasant

affectionate	empowered	mellow	safe
amused	encouraged	open	satisfied
appreciative	excited	optimistic	secure
calm	friendly	passionate	strong
caring	fulfilled	peaceful	surprised
comfortable	grateful	pleased	thrilled
confident	hopeful	relaxed	trusting
curious	joyful	relieved	warm
delighted	loving	rested	

Unpleasant

aggravated	disappointed	guarded	sad
agitated	disconnected	guilty	scared
ambivalent	discouraged	helpless	self-conscious
angry	disgusted	impatient	suspicious
annoyed	disheartened	insecure	tense
anxious	edgy	irritated	terrified
apprehensive	embarrassed	lonely	tired
ashamed	enraged	needy	uncomfortable
bad	exasperated	nervous	unhappy
bored	exhausted	overwhelmed	upset
confused	frightened	remorseful	vulnerable
contemptuous	frustrated	resentful	
depressed	furious	restless	

Day	Situation/experience when you noticed a feeling	Pleasant or unpleasant?	Specific feeling	Observations
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Responding, Not Reacting, to Feelings

Objective: To manage difficult situations more skillfully by learning about the difference between reacting and responding.

You Should Know

Living a sober life means becoming familiar with and accepting of all of your feelings and not turning to drugs or alcohol to escape or avoid them. Simply noticing your feelings, especially unpleasant ones, without doing anything about them, can be a powerful skill for your sobriety.

The world is full of triggers that cause us to react rather than respond wisely: those uncooperative, unsympathetic, or demanding people; events and situations beyond our control; disappointments and dashed expectations; crazy drivers—they're everywhere! But it doesn't mean you ignore your reaction; rather, you can learn ways to work with the reaction.

As with any new skill, it takes practice and a willingness to experience something new and unfamiliar. There will always be external events that bother us, but if we learn to respond and not react, we can make things better for ourselves, even if we can't change the world to our liking.

Does This Sound Like You?

Reacting

Kenneth, 34, hadn't had a drink in thirty days. After a long, stressful day as a nurse, he arrived home tired, hoping for a peaceful evening with his family. Right away, his three-year-old son started whining and clinging to him. The last thing Kenneth wanted to do was deal with an annoying toddler. He felt his jaw clenching and his blood pressure surging. He reacted immediately by getting angry and yelling, "Stop it! Leave me alone!" His son wailed louder, and then they both were miserable.

Reacting happens in an instant, usually stemming from anger or fear or feeling overwhelmed. We all do it. Usually it happens when we're not thinking clearly or logically—that gut reaction.

Responding

When Kenneth arrives home and his toddler starts whining and clinging, Kenneth stops, takes a breath, checks in with himself, and notices his body is very tense; he is feeling angry, tired, and overwhelmed. His shoulders are tight, and he has a slight headache. Although his impulse is still to yell, he stops himself because he is aware that yelling will only make the situation worse. Instead, despite his upset feelings, Kenneth stoops down and gives his son a big hug, and after a few moments, asks his son what's wrong.

When we respond, we stop, notice what we're feeling, assess the situation, and then decide what to do next in a thoughtful, wiser manner. As you might recall, that definition is very similar to mindfulness—noticing what's happening in the present moment without judgment and with acceptance. Then, mindfully, you can choose what to do next.

Here, Kenneth turns his understandable feelings into a positive action, rather than popping off impulsively. He chooses a nonverbal response at first (hugging) because he can't trust that he won't say something he regrets. Then when they are both calm, he can approach his son with words.

How are you like Kenneth? How are you different?

Can you think of a time when you reacted; that is, became emotional without thinking through your response? What about a time when you responded rather than reacted? Describe each instance briefly.

What to Do

Now that you are more familiar with your feelings, you can begin to notice where in your body you experience feelings and what their intensity is. This will help you respond instead of react. Remember not to judge yourself harshly. That won't help. Start with these steps:

- Take a deep breath. Better yet, take three conscious breaths.
- Notice what you are feeling and where in your body you are feeling it (for example, jaw, neck, shoulders, chest, stomach).
- Note the intensity of the feeling (mild, moderate, strong).
- Let go of any tension you are aware of, to the best of your ability.
- Consider what is at stake—is it worth it to react with anger or impulsive actions? What will the consequence(s) be?
- Respond to the person or situation with compassion, using clear, simple language.

This week, keep note of any incidents or experiences when you notice you reacted and shifted it into a response, and what the outcome was.

Sunday

Situation: _____

Reaction: _____

Feeling: _____ Intensity: _____

Where you felt it: _____

Response: _____

Outcome: _____

Monday

Situation: _____

Reaction: _____

Feeling: _____ Intensity: _____

Where you felt it: _____

Response: _____

Outcome: _____

Tuesday

Situation: _____

Reaction: _____

Feeling: _____ Intensity: _____

Where you felt it: _____

Response: _____

Outcome: _____

Wednesday

Situation: _____

Reaction: _____

Feeling: _____ Intensity: _____

Where you felt it: _____

Response: _____

Outcome: _____

Thursday

Situation: _____

Reaction: _____

Feeling: _____ Intensity: _____

Where you felt it: _____

Response: _____

Outcome: _____

Friday

Situation: _____

Reaction: _____

Feeling: _____ Intensity: _____

Where you felt it: _____

Response: _____

Outcome: _____

Saturday

Situation: _____

Reaction: _____

Feeling: _____ Intensity: _____

Where you felt it: _____

Response: _____

Outcome: _____

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Dear Substance of Choice

Objective: To express some of your feelings about your substance of choice by writing a letter directly to that substance.

You Should Know

If you've been drinking or drugging for a while, maybe even a long while, saying goodbye to your go-to coping mechanism can be like saying goodbye to a dear friend. That's a normal, understandable part of the recovery process. It's common, especially early on, to forget the bad times and romanticize and glamorize the "good old days." You do have a relationship with that substance, for better or for worse.

Sometimes, people complain that their substance of choice has taken over their lives, as if that substance is a real being, a powerful entity that controls them. Because that's exactly how it feels. Expressing your feelings in the form of a letter to your substance of choice can be an empowering act, like taking matters into your own hands.

Does This Sound Like You?

Sheldon, 28, hasn't smoked marijuana in three weeks, after smoking several times a week since college. He quit because he has a great opportunity for a job as a salesman, and his interview is in another couple of weeks. His employer requires an initial drug test and then random drug testing. Sheldon really wants this job, so he decided it was time to part ways with weed. At first, Sheldon wasn't sleeping well and had frequent headaches and some anxiety, but those symptoms seem to be improving. But he really misses the feeling of getting high; he misses the excitement of buying a bag and all the activities involved in preparing to smoke. At night, he feels sad and lonely, as if his comfort zone has disappeared.

How are you like Sheldon? How are you different?

Do you feel a sense of loss in parting ways with your substance of choice? Why or why not?

KNOW YOUR THOUGHTS

Tracking Your Thoughts

Objective: To strengthen your self-awareness by noticing your thoughts and keeping track of the habitual negative thoughts that might get in the way of your recovery.

You Should Know

Part of breaking free of addiction involves the willingness to stop and listen to your thoughts, especially your negative thoughts, and what messages they are giving you about yourself, your feelings, and your behaviors. That’s the essence of cognitive-behavioral therapy—learning the connection among thoughts, feelings, and actions.

For most of us with or without addictions, our thoughts often stream along their merry way without our even being conscious of them—they are automatic and habitual. Your boss criticizes you and, next thing you know, you’re at the bar. Your friend doesn’t return your phone call and, next thing you know, you have an urge to pick up. You get a bad grade and, next thing you know, you’re lighting up a joint. You get the idea.

With practice and mindfulness, it is possible to drive a wedge between the initial thought and that “next thing you know” moment. By learning to tune in to the “yakkety-yak” that inhabits our brains during most of our waking hours, you can not only identify those patterns of thought but also identify the accompanying feelings and make better, healthier choices about your actions.

Does This Sound Like You?

Jackson, 29, is a writer. Two of his short stories have been published in a prominent literary journal. He recently completed his first novel and has sent it out to a dozen agents. Jackson has had a drinking problem since college—bingeing on weekends, then trying, often unsuccessfully, to cut back during the week. Now he is concerned that he is getting much drunker with less alcohol than in his earlier days, so he is trying to control his drinking by limiting himself to one per night, two on weekends. When Jackson receives several rejections from agents, he automatically thinks, “My book sucks. I suck. I knew it. I’m just an imposter. No one will ever take me seriously. What is the point of continuing? I might as well get drunk.”

How are you like Jackson? How are you unlike him?

Describe your typical reaction after experiencing a rejection.

What to Do

In this exercise, you'll practice the mindful skill of noticing and recording some habitual negative thoughts that might arise in different situations. Experts have identified various types of negative or distorted thoughts that you'll read about in the next couple of exercises. For the next week, record any habitual negative thoughts you are aware of, then reflect briefly on the process.

Date/Location	Situation	Thought	Reflection
<i>Example: Monday at work</i>	<i>Boss criticized me for turning in my report a day late.</i>	<i>Why does she always pick on me and no one else? She has it in for me. Makes me want to pick up!</i>	<i>Wow. I think this way a lot, not just with my boss, but with other people too.</i>

Date/Location	Situation	Thought	Reflection

Reflections on This Exercise

How helpful was this exercise? _____
 (1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Labeling Your Thoughts

Objective: To better manage your responses and reactions by identifying different types of cognitive distortions and applying them to your life situations.

You Should Know

The field of cognitive-behavioral therapy teaches about the connection between thoughts and actions. Cognitive distortions are types of thoughts that, if examined closely, turn out not to be true. These incorrect thoughts are connected to your core beliefs about yourself; for example, deep down inside, you might believe that you are fundamentally bad, unlovable, defective, worthless, or a loser. Those core beliefs can affect your self-esteem, your relationships, and your ability to make healthy choices.

Now that you are becoming more mindful of what your thoughts are, let's take a closer look at a few types of cognitive distortions that people, addicts and nonaddicts, encounter. The more you are aware of your thinking processes, the more skilled you can become at preventing a relapse.

- *Wearing a Filter*: Isolating and focusing on the negatives of a situation while ignoring or minimizing any positives. ("Nothing comes easily for me; so what if I graduated with a B average? I'm still just average.")
- *Overgeneralizing*: Anticipating that a bad thing that happened once will happen again and again. ("Last time I visited my father, we got into a fight. I'm sure if I go there again, we'll just get into another fight.")
- *Black-or-White Thinking*: Seeing things as either all good or all bad, with no gray area in between. ("No matter how hard I try, nothing good ever happens to me.")
- *Jumping to Conclusions*: Making assumptions about people and events that might not be true. Two types of this cognitive distortion are mind reading ("My husband is thinking that I'm a lost cause") and fortune telling ("Even if I go to a treatment program, I'm sure I'll go back to using").
- *Catastrophizing*: Expecting the worst to happen, no matter what. ("If I ask my boss for medical leave, he'll probably tell the whole staff, and then everyone will know and they'll judge me and avoid me, and I'll have to leave my job and then I'll be broke.")
- *Personalizing*: Thinking everything that happens is related to us. ("Sarah was super irritable toward me today; she must not like me anymore.")
- *Self-Blaming*: Thinking that everything bad that happens is your own fault, that you are inherently defective. ("Of course I didn't get that job. They could tell I'm not good enough. I'll never amount to anything.")

People in recovery from addictions often have specific thoughts related to their use that are also distorted but that feel true, out of habit. Can you relate to any of the categories below?

- *Avoiding Pain*: Thinking that using drugs or alcohol will make it better. (“I’m so sad right now; one drink will help me beat the blues.”)
- *Looking for Pleasure*: Seeking the euphoria or elevated mood that drugs or alcohol can provide. (“I just want to have some fun! It will feel good!”)
- *Feeling Entitled*: Believing that you deserve to have what you want when you want it, despite the consequences. (“I worked hard this week. I deserve to get high.”)
- *Solving a Problem*: Turning to drugs or alcohol as a way to solve a problem that could be solved by other, less destructive, means. (“I’m so tired; I’ll get a boost of energy if I snort this line.”)
- *Managing Stress*: When external circumstances are difficult to deal with, thinking substances will make a difference. (“I can’t take all the bad news; just one won’t hurt.”)

Does This Sound Like You?

Daria, 28, is attending a day treatment program as a step-down from a monthlong residential program to treat her heroin addiction. She now has six weeks of abstinence and is on the opiate-replacement medication Suboxone to help with cravings. This was her third attempt at rehab, after which she refused Suboxone and relapsed within two weeks of discharge. Her family insisted she attend a day program, but Daria is convinced this time will be like the other times. “I’m just a hopeless addict. Nothing good ever happens to me, so why should I expect that this time is going to be the magic answer?”

How are you like Daria? How are you unlike her?

What cognitive distortions can you identify in Daria’s thinking about this attempt at recovery?

What to Do

Here, you'll build on the skills you began practicing in the previous exercise. Continue to notice and record your thoughts, especially the habitual negative thoughts you are aware of related to your recovery. This time, see if you can identify which type of cognitive distortion that thought might represent, then reflect on the process.

Date/Location	Situation	Thought	Type of thought	Reflection
<p>Example from Daria, above: Sunday, NA meeting</p>	<p><i>Listened to other people talk about their recovery</i></p>	<p><i>I'm a hopeless addict. I'll never be like them. Everything I do ends up bad.</i></p>	<p><i>Black-or-white thinking, fortune telling, overgeneralizing</i></p>	<p><i>I do this all the time—thinking I'm different or worse than others. Maybe I need to look at that pattern.</i></p>

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Connecting Your Thoughts and Feelings

Objective: To improve your awareness of how your negative thoughts might influence your feelings by tracking their connection.

You Should Know

If you have been practicing noticing and labeling your thoughts, especially your negative thoughts, you have undoubtedly noticed that certain lines of thought can generate certain difficult feelings. Habitual negative thoughts can make us feel lonely, worthless, sad, angry, frustrated, irritated, anxious, or scared—sometimes mildly, sometimes intensely.

One key to breaking free of addictions is to get better and better at linking up your thoughts with your feelings. You are learning to be mindful of that connection; that is, you are learning to stop, notice, and reflect on your thoughts. Congratulations! Now we'll look at the next step: connecting your thoughts and feelings.

Does This Sound Like You?

Kwame, 34, is a single software engineer who works sixty to seventy hours a week at a fast-paced tech company. He has a history of binge drinking on weekends and multiple attempts at total sobriety. Sometimes, he can go a few weeks, but he has noticed that whenever he does slip, it's on a Friday, after work. "I can't help it. I just want that reward at the end of a hard week, so I stop at my favorite liquor store on the way home." He labeled his thoughts as follows: Situation—>Habitual Thought—>Type of Thought—>Reflection.

Situation	Habitual Thought	Type of Thought	Reflection
Example: <i>Passed liquor store on way home, had urge, bought two nips, got buzzed</i>	<i>I deserve a break. It's been a hard week. It'll feel so good. Afterwards: I'm such a loser.</i>	<i>Feeling entitled, looking for pleasure, self-blaming</i>	<i>This happens a lot. Maybe I need to ask for help in sorting out the pattern.</i>

How are you like Kwame? How are you different?

What do you think Kwame is actually feeling? Name one or two emotions. Refer to the feelings list on page 72 for some options if needed.

What to Do

In this exercise, you'll add the feeling or feelings to the chain you've been working on. Record for the next week any situation when you are triggered to use drugs or alcohol, whether or not you actually do. The chain of events often happens quickly and subconsciously. Noticing and recording the connections is an act of personal empowerment. You are saying, "I am not just a victim of circumstances out of my control. I can get to know myself and learn to take charge of the behaviors that stem from my thoughts and feelings."

Date/ Location	Situation	Habitual thought	Type of thought	Feeling	Reflection
Example: Friday after work	<i>Passed liquor store on way home, had urge, bought two nips, got buzzed</i>	<i>I deserve a break. It's been a hard week. It'll feel so good.</i>	<i>Feeling entitled, looking for pleasure, self- blaming</i>	<i>Angry, frustrated, stressed out, resentful, sad</i>	<i>I'm so stressed out by Friday. I can see why I turn to alcohol for a reward, but then I feel ashamed and guilty.</i>

Date/ Location	Situation	Habitual thought	Type of thought	Feeling	Reflection

Reflections on This Exercise

How helpful was this exercise? _____
 (1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Mindful Self-Compassion

Objective: To improve your sense of well-being by learning and practicing simple self-compassionate statements.

You Should Know

You deserve compassion. You are a human being, wonderful and flawed, like all human beings. And, like many people in recovery from substance use, you probably have a long history of being down on yourself. In addition, you might have experienced a great deal of suffering in your life, without anyone to offer compassion or comfort, and that could be a reason you have sought comfort in substances.

Although the world might not offer you all the love and support you need, what about offering *yourself* compassion? This is not the same as self-pity. It is not being selfish. It is a healthy, effective way to heal yourself and move forward in your recovery. Much research exists to show the psychological benefits of mindful self-compassion, a practice derived from the Buddhist concept of lovingkindness and brought to our Western culture by psychologists Christopher Germer and Kristin Neff, among others.

Does This Sound Like You?

Anthony, 35, has been sober from drugs and alcohol for a year. He is married, works full time in construction, and visits his parents every weekend to help them around the house. Anthony has always had high expectations of himself to be perfect. He criticizes himself when he doesn't live up to those expectations. When Anthony tunes in to his inner thoughts, much of what he hears is criticism.

How are you like Anthony? How are you unlike him?

What types of compassionate statements would you want to say to Anthony to help him lower the volume on the self-criticism?

What to Do

In this exercise, you'll make a list of statements you can say to yourself on a regular basis, even when you're not facing a challenging situation. First, think of statements you might say to a friend or family member whom you care about a lot who might be going through a hard time and needs your support. Write them below.

Now, think of a situation when you were down and wishing someone were there to help you out. What was the situation? What can you say to yourself that is kind and compassionate? If you have trouble thinking of something to say, look at what you might say to a loved one and write that down.

Here are some possible statements:

I am OK as I am.

I am a good person.

I love myself.

I am trying hard and deserve support.

I have a lot to offer.

I forgive myself.

I have normal needs and desires.

I am allowed to make mistakes.

It's OK to be imperfect.

I am a kind, loving person.

Here are some more statements, drawn from the mindfulness literature on lovingkindness.

Think of these statements as wishes or, if you like, prayers.

May I be safe.

May I be peaceful.

May I be healthy.

May I be happy.

May I be free from sorrow.

May I be free of physical suffering.

May I love and be loved.

May I accept myself as I am.

May I be kind to myself.

May I live with ease.

Set aside time each day, maybe when you wake up or as you're falling asleep. Pick a few self-compassionate phrases that have meaning for you, or write down some of your own. The exact language isn't important—do what works for you. Repeat these phrases a few times or as many times as you like. Notice how you feel. If you wish, later down the line, you may change the "I" to "you" or "all beings," to extend compassion not just to yourself but to others, too. But first, start with yourself.

What statements would you like to repeat to yourself in the coming week? Write them below.

How does repeating those statements feel? Be specific.

What self-compassionate statements would you like to repeat to yourself on a regular basis?

Reflections on This Exercise

<p>How helpful was this exercise? _____ (1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)</p> <p>What could you do differently to make progress in this area of your recovery?</p> <hr/> <hr/> <hr/>

Revising Your Inner Dialogue

Objective: To minimize the likelihood of adverse consequences by learning how to reframe negative thoughts into more positive ones.

You Should Know

You might have noticed how quickly your negative thoughts can result in harmful, impulsive actions, often without noticing or honoring your feelings. The more you're aware of your thoughts and feelings, however, the more you can intervene and change direction toward a more positive outcome.

Revising your inner dialogue is not the same as positive thinking. You might remember the *Saturday Night Live* character Stuart Smalley (played by now-Senator Al Franken). The character hosted a satirical self-help show called *Daily Affirmation with Stuart Smalley*. After offering advice to others, Stuart would stand in front of a full-length mirror and repeat the following words: "You're good enough, you're smart enough, and doggone it, people like you."

There's nothing wrong with positive self-talk. But if you are working on breaking free of addiction, you'll need to dig a little deeper. You've already got some great beginning skills—now let's add some more.

Does This Sound Like You?

Let's go back to our example of Kwame, the software engineer with a history of weekend binge drinking. After noticing his pattern of rewarding himself with alcohol on Friday nights, he identified that he was feeling "angry, frustrated, stressed out, resentful, sad." He reflected that the alcohol didn't actually help him. But Kwame is so down on himself, he thinks he's doomed to repeat the same pattern.

How are you like Kwame? How are you different?

How do you think Kwame's negative thinking is affecting his drinking?

What to Do

In this exercise, you'll pretend that you're a great writer. Great writers don't start out with a perfect product. They start out with a first draft, then revise, revise, revise until they're satisfied with the final product. Even then, they might want to revise some more, but great writers know that perfection is not a realistic goal.

Here is Kwame's first draft of his inner dialogue:

I work so hard, I deserve a reward at the end of the week. I like it at first, but then I feel ashamed and guilty. I'm hopeless. I feel out of control. I don't know how to get out of this pattern. Maybe I'm doomed to be an alcoholic for the rest of my life. Would that be so horrible?

And here is his revision:

I can see how I'm beating myself up. It hurts. I'm not a bad person. I do work hard, and I'm at the top of my game. I'm proud of that, but my long hours are taking a toll. I will email my boss on Monday to arrange a meeting to discuss cutting back on my hours. Maybe instead of stopping at the liquor store, I can schedule an evening out with friends. It's been a while since I've hung out with my buddies. They'll understand about my not drinking—in fact, my friend Cal is in AA. Maybe I'll go to a meeting with him. I want to feel better about myself.

Now it's your turn to use your creative powers to revise your inner dialogue. Recall the situations, thoughts, and feelings that you have been noticing and recording in the previous exercises. Pick one to start with and write it down. Don't worry about grammar or punctuation or spelling. We'll call it your first draft. Repeat the exercise three times this week.

First Draft 1

Now, identify any negative thoughts you've recorded and ask yourself, "What could I say to myself instead? What is a way to revise or reframe this thought or feeling to find something more positive or self-compassionate?" Write those below.

Revision 1

First Draft 2

Revision 2

First Draft 3

Revision 3

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

THE MIND-BODY CONNECTION

First, Unplug!

Objective: To learn how to relax your mind and body by identifying and limiting the activities in your life that cause stress and keep your mind on “alert.”

You Should Know

Most of us live in a world full of stimulation—TV, radio, music, smartphones, computers, video games, traffic, road construction, and other environmental noises. Sometimes it’s out of our control—for instance, if you’re a parent, kids can be on full tilt full time. Sometimes, we seek out the stimulation, perhaps to avoid feelings, perhaps because silence feels weird or uncomfortable.

Studies show that constant stimulation and mental activity can lead to depression, anxiety, attention and memory problems, and difficulty concentrating or focusing, all of which can be big challenges to breaking free of your addiction.

Give your brain a break. That doesn’t mean you need to go off to a Zen retreat and take a vow of silence. You can experiment with simple ways to take breaks from all the noise and stimulation. Start by noticing that there is a quiet place deep inside all of us—if only we take a moment to listen.

Does This Sound Like You?

From the moment Tamika, 26, wakes up in the morning, she is wired to technology—checking her phone in bed, listening to the car radio, wearing earbuds at her job, watching TV at night, and texting with friends and family any chance she gets. She now has six weeks of abstinence from cocaine and says she misses the feeling of being “up.” But she doesn’t miss the crash that used to follow, which is why she sought therapy. Tamika says she doesn’t sleep more than a few hours a night and is thinking of having a glass of wine to help her relax.

How are you like Tamika? How are you different?

What would you suggest to Tamika to help her relax her mind without picking up?

What to Do

Here is a list of things that might be keeping you from relaxing your mind. For the next week or few weeks, select several items from this list and try to change your habits or revise your schedule, if possible. Ask for help, if needed. See if you notice any change in your feelings or your general mood.

- Checking email
- Checking Instagram
- Childcare responsibilities
- Driving with the radio on
- Going from meeting to meeting
- Going out to clubs
- Going to loud outdoor concerts
- Going to parties
- Job demands
- Listening to music with earbuds
- Posting or reading posts on Facebook
- Spending time on other social media
- Talking on the phone
- Texting
- Visiting friends and family
- Watching TV news
- Watching TV sports

What else would you add to this list?

What are the top three items that are getting in the way of relaxing your mind?

1. _____
2. _____
3. _____

Do you have a choice about that activity (for example, childcare)? If not, can you ask for help in getting a break? Describe your current situation.

On a scale of 1 to 10, how willing are you to experiment with cutting back on or eliminating your top three activities for the next week or so? _____

(1 = very unwilling, 5 = somewhat willing, 10 = very willing)

If you want to cut back, when and how much will you allow yourself to do this activity (for example, check Facebook only three times a day for no more than five minutes; turn off the TV after 9:00 p.m.)? Be very specific. Tell someone you trust about your choice and ask for accountability. Better yet, find an “unplugging” buddy!

Name of person/buddy: _____

How do you feel about cutting back on or eliminating the activities that interfere with relaxing your mind?

Use this chart to keep track of your “unplugging” activities.

Day	Activity you unplugged from	For how long?	How did you feel before? During? After?

Day	Activity you unplugged from	For how long?	How did you feel before? During? After?

Reflections on This Exercise

How helpful was this exercise? _____
 (1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Mindful Breathing

Objective: To enhance your mind-body connection by learning and practicing several mindful breathing exercises.

You Should Know

It's often hard in early recovery, and ongoing recovery, for people breaking free of substance addictions to be in their bodies without being under the influence. People often cite the desire to be numb, check out, relieve anxiety, treat depression, experience a buzz, expand their consciousness, avoid emotional pain, treat physical pain, and so on.

As challenging as it might be, learning to pay attention to your breathing is a wonderful beginning mindfulness skill that can go a long way to prevent you from reacting to stress or triggers by automatically picking up. You already learned about taking three conscious breaths at the beginning of this book. Now you'll learn several exercises designed to bring awareness to your breath and your mind-body connection.

Learning to be in your body comfortably can take time. Be patient.

Does This Sound Like You?

Carter, 19, was diagnosed with ADD when he was eight and put on a variety of stimulants, such as Ritalin and Adderall. Eventually, he became addicted to Adderall and started buying it from friends and then dealing it on campus. He was suspended for one semester and then couldn't get a doctor to prescribe him stimulants anymore. In his mandatory counseling, he was required to attend mindfulness and meditation classes, but he was resistant. Carter didn't think he could possibly sit still and "be with" his racing mind and jumpy body, as the instructor suggested.

How are you like Carter? How are you different?

What are your thoughts and feelings, both positive and negative, about the suggestion to practice tuning in to your breath?

What to Do

Here are three simple breathing exercises that you can try this week. Choose which ones might be a good fit for you. Sit in a comfortable position in a chair or on a meditation cushion. Avoid slouching. In each case, if your mind starts generating a lot of thoughts, which it inevitably will, gently return to your breath.

In and Out Breathing: Set a timer for two minutes at first, then gradually work up to four or five minutes per sitting. Quiet your mind as best as you can and simply notice your breath going in and out. Don't push or strain or try to control your breathing in any way. Notice: Does the air enter through your nose? Your mouth? Just notice. Inhale. Exhale. Slow. Easy. No effort. Notice your chest or your belly rising and falling as you discover the rhythm and pace of your breathing.

Counting Breaths: Sit comfortably and eliminate any distractions. Inhale slowly, counting up to five. One, two, three, four, five. Exhale slowly, counting down from five. Five, four, three, two, one. You may wish to hold for one or two counts before exhaling. Whatever counting pattern you choose, be sure not to strain or force your breathing. Easy, steady, in and out.

Belly Breathing: Sit comfortably or lie down on a mat or soft carpet (avoid the bed, as you might fall asleep). Put one hand on your belly and the other hand on your chest. Close your mouth and breathe in through your nose, deeply inhaling but not straining. Notice your belly rising, but keep your chest still. Exhale the air through your mouth, noticing your belly contracting slightly. Repeat up to ten times.

Keep track of your progress on the chart below, noting which exercise, when, and for how long you practiced each day (or whenever you can). Note how it made you feel. For other breathing exercises, do a search on YouTube for "mindful breathing," or visit <http://www.betweenessionsresources.com/breaking-free-of-addicton.html> for links to a variety of websites and apps.

Type of breathing	When and where you practiced	For how long?	How did it feel?

Type of breathing	When and where you practiced	For how long?	How did it feel?

Reflections on This Exercise

How helpful was this exercise? _____
 (1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Body Scan

Objective: To experience physical and mental relaxation by learning and practicing the body-scan technique.

You Should Know

Another way to relax the body and mind is an exercise called the body scan, which is exactly as it sounds. While sitting or lying in a comfortable position, you'll bring your mind's awareness to one part of your body at a time, scanning up from the feet to the head. One key to relapse prevention is practicing and building tolerance for being present in your body. This can help interrupt the automatic cycle discussed earlier in this workbook, where a thought leads to an urge, which leads to an impulsive action or reaction. Or sometimes an urge is experienced physically, before any awareness of the thought. The more awareness you bring to this process, the more sense of empowerment and control you can build over your choices.

In the body scan, you can learn to notice your physical sensations without needing to do anything about them. This takes practice and patience. Approaching this exercise with a spirit of curiosity can help. Rather than "Uh-oh! My heart is beating fast," you can practice saying, "Oh. I feel my heart beating. Well, let me just feel it beat and notice what that's like. Nothing bad is happening. I can be with my body as it is."

Does This Sound Like You?

Robert, 31, a landscaper, is recovering from heroin addiction. He has moved through the early physical withdrawal symptoms and is feeling proud of himself. But as his body and mind are adjusting to what it is like to be opiate-free, he says he feels more and more anxious. "I'm jittery all the time, like my body is buzzing. Sometimes I feel short of breath. It's hard to get through those times—I just want to pick up to get rid of those sensations."

How are you like Robert? How are you different?

Can you think of a time when you felt similarly—noticing unpleasant physical sensations that led to an urge to use? Describe.

What to Do

Set aside twenty to thirty minutes for the body scan. Or, if that feels like too much at first, try ten to start. But don't rush through it—give yourself the gift of this experience of being in your one and only body.

If you find your thoughts drifting off, simply bring your mind back to focusing on that part of your body. You may keep your eyes open or closed; it's up to you. Many body-scan audio or video recordings exist online, including some lovely ones on YouTube; you can link to others by visiting <http://www.betweenessionsresources.com/breaking-free-of-addiciton.html>.

Begin by simply noticing your body. Notice any sensations you might be feeling—aches, itches, tingles; notice any feelings you might be aware of—calm, serenity, fear, anxiety. Whatever it is for you, just notice without judgment and with acceptance. There's nothing you need to do. Nothing bad is happening in this moment.

Feel the weight of your body. Notice your body on the chair or the floor.

Take several long, deep breaths. Notice your chest or belly expanding, bringing air into your lungs, helping you relax.

Starting with your feet, notice any sensations—tension, vibrations, temperature, or pressure. There is no right or wrong. Just notice. If you notice that you are holding any tension throughout this body scan, release that tension as best as you can.

Progress up through your body, from the feet to the ankles, calves, knees, thighs, hips, buttocks, pelvis, abdomen, chest, hands, arms, shoulders, back, neck, jaw, face, and scalp. Each time, notice any tension, vibrations, temperature, or pressure.

Continue to breathe deeply and slowly. Come back to noticing your entire body, connecting all parts together, just noticing without judgment and with acceptance.

Take a few deep breaths and come back into the present moment slowly and with kindness.

Record when you do the body scan and what it was like:

When and where you practiced	For how long?	How did it feel?

When and where you practiced	For how long?	How did it feel?

Reflections on This Exercise

How helpful was this exercise? _____
 (1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Progressive Muscle Relaxation

Objective: To enhance your mind-body connection by learning and practicing a progressive muscle relaxation exercise.

You Should Know

Progressive muscle relaxation is another tool to help you be more aware of your body and release stress and tension. With mindful breathing or the body scan, you are not actively moving any parts of your body—you are simply noticing and watching your thoughts and feelings without judgment and with acceptance.

This time, you'll be scanning through your body, as before, but you'll be tensing and releasing muscles as you go. By doing so, you not only get the physical benefit of relaxing your muscles, but also increase your awareness of your body, which is an important element of the mind-body connection that can help you stay sober.

Tensing and releasing your muscles is great for stress reduction. You consciously create the stress (tension) and then take charge of letting it go (release). Tense. Release. *Ahh!*

Becoming more aware of what is happening in your body can help you break free of your addiction, bringing a sense of empowerment rather than victimization. "I can notice and make choices about what's happening in my body, even if it isn't always pleasant" is a very different statement from "I can't stand feeling these sensations; I'm helpless to control what's happening to me."

Does This Sound Like You?

Sophia, 37, has been sober from alcohol and drugs for four years. She lives alone and works as a case manager at a treatment center for women survivors of domestic violence. Sophia finds her job rewarding but stressful, as there are frequent crises and high emotions. Now, instead of using at the end of the day, Sophia overeats to feel numb. "I know I'm substituting one substance for another, but I don't know how else to manage my stress," she says. She has developed frequent migraines and complains of lower-back pain.

How are you like Sophia? How are you different?

Do you sometimes use another substance as a substitute for your substance of choice to manage your stress? Describe.

Do you experience any physical signs and symptoms of stress, such as migraines? What are you doing to manage them?

What to Do

In this exercise, you'll lie down or sit comfortably in a chair. Set aside about fifteen minutes for the full exercise described below. You can also do a shorter version with just the upper body or just the lower body.

Start with your feet, noticing any tension. Create more tension by tightening the muscles in your feet and ankles, scrunching your toes. Squeeze hard, as hard as you can, and hold for a few moments, then release. Notice the change in your experience from the tensed muscles to the relaxed ones. Feel the difference.

Progress slowly up through your body, from the feet to the ankles, calves, thighs, hips, buttocks, pelvis, abdomen, chest, hands, lower arms, upper arms, shoulders, back, neck, jaw, and face. Each time, tense, hold, and release.

Be sure to breathe as slowly and steadily as you can, noticing the difference between tension and relaxation.

When you are ready, slowly come back to the present moment. Wake up your feet and hands, shaking them out if you wish. Before you resume regular activity, take a few moments just to rest and breathe.

You might also want to search YouTube or visit <http://www.betweenessionsresources.com/breaking-free-of-addiciton.html> to find other video or audio progressive muscle relaxation exercises.

Record when you do the Progressive Muscle Relaxation exercise and what it was like:

When and where you practiced	For how long?	How did it feel?

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Taking a “Noticing” Walk

Objective: To bring awareness to the present moment by taking a walk outside and noticing your environment using all of your senses.

You Should Know

One key component of mindfulness is being aware not just of what’s going on inside you (thoughts, feelings) but also what’s going on outside of your body and mind. While the breathing, body scan, and progressive muscle relaxation exercises are aimed at increasing your internal awareness in a nonjudgmental, accepting manner, taking a mindful walk is a bit different.

These days, more and more people are walking around outdoors while looking down at their phones, whether it’s at the beach, the lake, the mountains, or just around the neighborhood. We’re wired up all the time. Studies even show that looking at our phones constantly is changing our brains to be more active, seeking the next exciting stimulus, scrolling from thing to thing to thing, never really stopping to notice.

Learning to be present in the moment and lowering your reactivity will help with relapse prevention. Mindful walking in a beautiful environment is ideal for waking up the senses and noticing what’s around us. We don’t always have access to a beautiful environment, though, so taking a mindful walk in a noisy city environment can be a good exercise as well. The idea is to give yourself the experience of shifting your perspective outward, while remaining connected to your body, your thoughts, and your feelings.

Does This Sound Like You?

Thomas, 29, is a newly divorced real estate broker who works about sixty hours a week. Last year, he was hospitalized for using a combination of alcohol and Klonopin, an antianxiety medication that he was using without a prescription. Thomas has been seeing a therapist for nearly ten years to work on recovering from the trauma of childhood physical and sexual abuse. He has stopped using Klonopin but still drinks occasionally to “steady his nerves.” His therapist has recommended meditation and yoga, and other mind-body relaxation techniques, but Thomas finds that his anxiety spikes during some of these exercises, which triggers him to want to use. “I hate sitting still and noticing what’s happening in my body,” he says. “It just makes things worse.”

How are you like Thomas? How are you different?

Have you ever experienced anxiety at being told “You really should meditate or do deep breathing to relax”? What did you do or not do in response?

Are you open to trying a different way to be mindful? Why or why not?

What to Do

Go for a walk outside by yourself for a minimum of fifteen to twenty minutes. (In cold weather, you might choose a museum or library.) Turn your phone off. Notice any sounds, really tuning in to everything you can hear—sounds up close, sounds at a medium distance, sounds far away. Take it all in. Notice what you feel in your body when you do this, without judgment and with acceptance.

As an alternative to a “listening” walk, you might choose to notice the smells in your environment. How many different smells can you notice? What smells pleasant (for example, a flower)? What smells unpleasant (for example, car exhaust, a skunk)? Notice what you feel in your body when you do this.

Noticing what you see is another type of mindful walk. Notice colors, shapes, sizes, and contrasts. Look up to the sky. Look down to the ground. Take it all in, consciously. Notice what you feel in your body when you do this.

If you experience some anxiety at being outdoors and opening up your senses, reassure yourself that nothing bad is happening. You could do a simple exercise that will help focus your mind and calm your body, such as identifying everything in your environment that is red, or green, or another color. Tell yourself everything will be OK. Or repeat your self-compassionate statements as you walk. Congratulate yourself for trying.

When you get home, record the sounds, smells, and sights in as much detail as you can remember, and what it was like for you. Be creative. Do what feels good for you.

When and where you practiced	For how long?	What did you notice?	How did it feel?

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Eating a Mindful Meal

Objective: To boost your enjoyment of food by learning to eat mindfully.

You Should Know

When is the last time you noticed, really noticed, what you're eating and what you're doing while you're eating? So much stress, so many responsibilities—it's easy to end up mindlessly inhaling your food while you sneak one more peek at your phone or simply rush toward the day's finish line.

Breaking free of addiction means more than just stopping your problem substance use. It means learning to enjoy what life has to offer. And eating good, healthful food is one of life's greatest pleasures. Bringing mindful awareness to your food can enrich your day and bring you into the present moment. And, of course, it's better for your digestion and your health than wolfing down a slice of pizza on the run.

Does This Sound Like You?

Clarissa, 38, is a married mother of three who is in recovery from alcohol use. After staying home with the kids until they were old enough to go to school, Clarissa now works part time as an office manager; her husband is an Uber driver who works evenings, so she usually prepares a simple meal or, more often, picks up some fast food on her way home. Clarissa says she doesn't pay attention to her food—"I could be eating flavored cardboard for all I know. I just don't notice what goes in my mouth."

How are you like Clarissa? How are you different?

What would you suggest to Clarissa about her eating patterns?

What is your own experience with "mindless" eating?

What to Do

This week, make a date with yourself to eat a meal mindfully, using all your senses to notice what's on the list below. You don't have to be alone. If appropriate, ask your family to join in, too. (This won't work with infants and young children, of course!)

First, unplug. No phones, no TV, no music, no devices. Take a deep breath or two. Notice the silence. Notice what's happening in your body and your mind.

Before you even put anything in your mouth, notice the whole meal on the plate; notice the table, the room, the present moment in your home. Then take yourself through the following steps.

- What does the food look like (appealing, not appealing, color, size)?
- How does it taste (hot, cold, salty, sweet, sour, spicy, bitter)?
- What is its texture (crunchy, smooth, creamy, hard)?
- How does it smell (pungent, mild, pleasant, unpleasant)?
- What sounds do you notice (fork clanking, apple crunching)?

If eating an entire meal feels like a stretch, start slowly. Just take a few mindful bites of your food. The purpose is to experience your food mindfully. Record your experience below.

What did you eat?

What did it look like?

What did it taste like?

What was its texture?

What did it smell like?

What sounds did you notice?

What did you discover about your relationship to food or to your mealtime habits? How did you feel doing this exercise? What was positive about it? What was challenging?

What goal(s) would you like to set in the coming weeks to experience more mindful eating? Be specific; for example, "Twice a week, I will eat my lunch mindfully," or "I will eat the first three bites of any meal with mindful awareness."

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Getting Active

Objective: To enhance your mind-body connection by doing physical activities you enjoy.

You Should Know

Unless you've been living in a cave for several decades, you're undoubtedly aware that moving your body is good for you—exercise and movement can improve your mood by boosting those pleasure hormones such as endorphins or dopamine. Health benefits include lower blood pressure, better muscle tone, and improved lung capacity.

Some people in recovery fear that they all of a sudden have to become gym rats and exercise every day in order to reap the benefits. Those thoughts fall under the category of all-or-nothing thinking and can get in your way of taking a few simple steps. Literally. Just walking for twenty to thirty minutes a day can improve your mental and physical health.

Maybe you're out of shape. Maybe you had a traumatic experience in gym class. Maybe you are a survivor of sexual or physical abuse and feel so disconnected from your body that you might be afraid to feel what it's like to move. Start slowly, and if you have a negative reaction, consult a therapist familiar with PTSD and body-held trauma.

Does This Sound Like You?

Jessica, 29, a recovering alcoholic, is an administrator at a busy nonprofit. She wakes up at 6:00 a.m. and doesn't get home until after her evening SMART Recovery meeting. She worries that she is too sedentary; she is suffering from mild depression. When her therapist suggests joining a gym as an incentive to get moving again, Jessica says, "Whenever I do that, I go for a week or two and then stop, so why waste the money?"

How are you like Jessica? How are you different?

What do you think Jessica could do for physical activity that would fit into her busy life?

What to Do

In this exercise, you'll identify some physical activities that you might like to do in the coming week, either by yourself or with others. Look at this list for some ideas. Add your own.

- Aerobics class
- Bicycling
- Dancing
- Fishing
- Gardening
- Golfing
- Hockey
- Home repair
- Housework (vacuuming, sweeping, mopping, and so on)
- Jogging
- Rollerskating
- Running
- Soccer
- Softball
- Swimming
- Tennis
- Volleyball
- Walking
- Washing the car
- Weight lifting
- Yoga

Other: _____

Now make a list of any physical activity that you do now, what you might want to do, and what you used to do in your past. Think about what time of day would be best, how often you want to move, at what intensity level, and for how long. Be realistic, and set small goals so you don't set yourself up for failure. Be sure to consult a physician first if you have any specific health concerns.

Activities you do now:

New activities you want to do:

Activities you used to do and might want to do again:

What is your goal for the next few weeks?

What will you need to do to reach that goal (join a gym, ask a friend to be a tennis partner, enroll in a yoga class)?

Keep track of your physical activities on this chart and record your feelings about doing them.

Day	Activity	For how long and at what intensity?	Feelings, reactions

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Your Nutrition and Sleep

Objective: To establish healthier eating and sleeping habits by learning and practicing different approaches.

You Should Know

You have been exploring ways to change your relationship to your substance of choice, take steps to prevent relapse, build new and healthier relationships, learn the connection between thoughts and feelings, and increase your level of physical activity.

What about your food choices? How have they been affected by your substance use over time? Do you maintain a healthy weight, or are you under- or overweight? What is your relationship with food?

And what about your sleep habits? Do you sleep well? Not so well? Successful recovery includes practicing new skills for healthy self-care around eating and sleeping, starting with understanding the importance of good nutrition and adequate sleep for the optimal mind-body connection.

Before you make any major changes in your eating habits, be sure to schedule a physical exam with your primary care doctor. If you've avoided seeing a doctor for a while, remember to:

- Bring a list of concerns and questions and don't be afraid to ask about *anything*.
- *Be honest* about any past or current substance use. You've done nothing to be ashamed of, and your doctor should know about all aspects of your health.
- Find out if you are due for any routine preventive exams such as a mammogram, prostate test, colonoscopy, and so on.
- Ask if you need a cholesterol test, complete blood count, urinalysis, thyroid test, blood sugar, and so on.

Don't forget to schedule a check-up with your dentist, too! Unhealthy teeth and gums can lead to a host of other problems.

Here are some ideas to establish a regular, healthy sleep schedule and get better-quality sleep:

- Aim to get into bed around the same time every night.
- Unplug from all electronics at least a half hour before lights-out, if possible.
- Keep the room dark and not too hot or cold.
- Do some gentle stretching or simple yoga before getting into bed.

- Play soothing music or a relaxation recording if you have difficulty falling asleep. (This involves electronics, but it's for a good cause. Don't sneak a peek at Facebook!)
- If you wake up in the middle of the night and can't fall back asleep, try to stay in bed to at least rest your body (rather than getting up and doing something). Do a breathing exercise, body scan, or progressive muscle relaxation exercise.

Does This Sound Like You?

Marjorie, 57, a widow, recently attended a ninety-day treatment program for her addiction to alcohol and painkillers that began after her husband died. While at rehab, she regained a sense of her self-worth and hope for the future. During the two-year stretch of her using, she had gained a lot of weight and had irregular sleep patterns. Now that she's home, she wants a fresh start, but she feels overwhelmed.

How are you like Marjorie? How are you different?

Can you relate to her wish to change some habits but not knowing how to begin? Write your thoughts below.

What to Do

As they say in AA, keep it simple! Here are some steps you can take to reclaim, or establish for the first time, a healthy mind-body connection.

Assess Your Eating Habits

What and when do you eat? Do you eat three meals a day? Multiple meals a day? How often do you snack?

Is your diet a good balance of protein, vegetables, healthy carbohydrates, healthy fats, and minimal sugar? Describe a typical day's intake below:

Do you drink enough water? How much? How much caffeine? Soda?

Are you at a healthy weight? What would you need to do to get to a healthy weight for your body type and height? If you are seriously under- or overweight, you might want to consult with a nutritionist for some extra guidance.

What are your goals concerning your relationship to food? Be specific. Ask for help as needed.

Assess Your Sleeping Habits

People in recovery, especially early on, struggle with sleep, as their bodies and brains are often readjusting; finding a regular rhythm and sleep-wake pattern can take a while. Ask your doctor about the possible safe use of nonaddictive sleep aids or other natural means of sleeping well, such as meditation, relaxation, or soft music.

What is your typical sleep schedule, if any?

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Mindful Meditation 101

Objective: To quiet your mind and body through practicing formal and informal mindful meditation.

You Should Know

You may remember that *mindfulness* means noticing what is happening right here and now, without judgment and with acceptance. As you continue to learn skills and strategies for breaking free from addiction, you might want to add some simple meditation practices.

When some people hear the word *meditation*, they worry that they have to subscribe to a certain religious or spiritual belief, or fold themselves into a pretzel and chant. Not so. In recent years, experts like Jon Kabat-Zinn, internationally known teacher and creator of the Mindfulness-Based Stress Reduction program; psychologist Tara Brach; meditation masters Thich Nhat Hanh and Sharon Salzberg; and author Dan Harris have brought ancient Buddhist traditions into the Western culture and made the techniques and practices easily available to people from all walks of life.

As mentioned earlier, studies show that even a few minutes of quieting the mind and body on a regular basis can reap big benefits—less depression, less anxiety, lower blood pressure—and improvements in memory and attention. You are training your brain to default to a more relaxed state. That happens only with regular practice. Just as we wouldn't expect a marathon runner to be able to run a race without training, don't expect that you'll immediately reap the benefits of meditation. Slow and steady. One step at a time.

At <http://www.betweenessionsresources.com/breaking-free-of-addiciton.html> you'll find links to many resources for mindful meditation, or you might want to search for meditation, mindfulness, or guided visualization recordings on YouTube. Sometimes you might want one with music, sometimes without. Sometimes a woman's voice will be calming, sometimes a man's. Explore, experiment, find what works best for you.

There are two categories of mindfulness meditation practices: formal and informal. *Formal practice* requires setting aside a specific time each day or twice a day to be mindful, and it can be done either sitting or walking. *Informal practice* refers to paying mindful, nonjudgmental attention while doing certain routine daily activities such as taking a shower, washing the dishes, making the bed, driving, making lunch, going for a walk, and so on. Start by choosing one daily activity at a time so you don't get overwhelmed, but there is no such thing as too much mindfulness!

Does This Sound Like You?

Harvey, 38, is a father of three who works full time at a stressful job in the tech industry. For some years, he was drinking more than a few beers to relax at night, but the older he gets, the more he suffers the aftereffects the next morning. Harvey has decided to cut way back, if not stop drinking altogether. He saw a TV show about the benefits of meditation and wonders if it might help but thinks it's too "weird" for him. He also worries that he'll be too bored or restless to follow through.

How are you like Harvey? How are you different?

Is there a part of you that resists the idea of meditation? Write down your thoughts about this. Or, if you welcome the idea of meditation, write down your thoughts about what you hope or expect.

What to Do

In this exercise, you'll start with the formal practice of sitting meditation. Sitting meditation requires setting aside a specific time each day or twice a day, or as often as you can, to sit quietly with your eyes closed (or open, gazing steadily downward, if you prefer). Experts often recommend twenty minutes per day, but if that doesn't work for you, try ten. Or five. Or even start with three. You can always build up over time, just like marathon runners in training.

For your sitting meditation, find a time when you can eliminate all distractions and unplug from the world. It might be at home or at work; it might be in your car in a parking lot or at your local library. To start, you might choose to repeat a mantra: that is, a word of your choice, such as "peace," "calm," "one," "love," or something that you can use as your anchor when your mind wanders—which it inevitably will.

Don't worry and don't judge. Just watch the thoughts floating past you, like clouds in the sky. *The mindful moment comes when you notice your mind wandering.* Simply bring your attention back to your anchor. You can also use your breath as an anchor, or any of the mindful self-compassion phrases you have developed. By regularly practicing sitting still and simply noticing the flow of thoughts and sensations without judgment and with acceptance, you'll get better at

noticing when you are not mindful. Again, that “waking up” moment is a moment of mindfulness, pulling you out of your trance and into the present moment.

For your informal mindfulness practice, pick one of the activities mentioned above (taking a shower, washing the dishes, making the bed, driving, making lunch, or going for a walk) and see what it is like to pay full attention to what is happening right here and now. In the shower, do you feel the water on your body? Is it warm enough? Too warm? Do you feel the soap or the shampoo—can you be present throughout the shower? If your mind wanders (for example, to reviewing your to-do list), bring it back to the sensory experience of being in the shower.

This week, try to schedule at least three or four formal sitting meditation sessions, and one or two informal practices. During each activity, practice being mindful, that is, noticing how your body feels; noticing your breath; noticing any sensory experiences such as what you see, hear, smell, or touch. Write down your experiences and your responses.

Date	Formal practice	Informal practice	Response
Example: <i>Monday</i>	<i>Sat for 10 mins. on my couch after work, no phone or TV! Focused on breath</i>	<i>Paid attention while brushing teeth</i>	<i>Got fidgety but stuck with it, noticed the fidgetiness, tried not to judge; tasted the minty toothpaste</i>

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

LOOK BACK AND LOOK AHEAD

Reexamining Your Relationships

Objective: To identify those people who will be most supportive of your recovery efforts by analyzing your relationships with family, friends, and others in your network.

You Should Know

Somewhere along the journey of recovery from alcohol and drug use, most people become more aware of the positives and negatives of their relationships with the people in their lives. If you are in a place in your recovery where you are stabilized medically, trying out new experiences, managing your emotions better, and taking better care of yourself, you might want to take stock of your relationships—past, present, and future—and assess how those relationships have helped you or hurt you, and what to do about them going forward.

Does This Sound Like You?

Yvonne, 20, is a college student who has struggled with mixed substance use. Although she has cut back on her drinking and taking pills recreationally, she still smokes marijuana occasionally. Now she wants to quit. Yvonne’s friends party every Friday night at her friend Sandra’s house. Sandra smokes marijuana and is not planning to stop. When Yvonne asks her to support her goal and not smoke around her, Sandra says, “No way. Just because you don’t want to smoke doesn’t mean the rest of us can’t!” Now Yvonne has to decide what to do about her relationship with Sandra—to avoid her or hang around her. In the meantime, Yvonne’s uncle Jeff, a recovering alcoholic, has invited her to attend AA meetings with him on Friday nights.

How are you like Yvonne? How are you different?

What do you think Yvonne’s best strategy is to support her own goal of quitting marijuana?

What to Do

Take this empowering opportunity to look back and look ahead. In this exercise, you'll identify the most important people in your life, past and present, in the following categories: family, friends, coworkers/fellow students, and community.

On the lines below, list the people with whom you have close relationships in each of the categories. For example, Yvonne's list would include: *Sandra, friend*, and *Uncle Jeff, family*. The goal is to assess for yourself which people you believe will be supportive of your ongoing recovery and which people might interfere with your positive growth and whom you might need to let go of or back away from.

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Next, list these people on the chart on the next page and answer the following questions:

1. How often do you have contact with or are you involved with this person?
2. On a scale from 1 to 10 (1 = not at all, 5 = somewhat, 10 = extremely), how supportive is this person of your substance-use recovery goals?
3. What is your goal for this relationship? (keep as is, see more, see less)
4. Note the reason for your stated goal.

Take your time with this exercise. It doesn't need to be done all in one sitting. You might start filling it in and then come back to it over time, as you see fit.

Name	Relationship	Frequency of involvement?	How supportive is this person of your goals? (1–10)	Your goal for this relationship	Reasons for your goal

Reflections on This Exercise

How helpful was this exercise? _____
 (1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Dear Self . . . Yes, You! Part 2

Objective: To enhance your sense of self-empowerment and prevent relapse by continuing your dialogue with the different parts of yourself.

You Should Know

Earlier in this workbook, you identified the parts of yourself we called the wise self and the addicted self. As you progress in your recovery, you may have noticed that your inner dialogue has changed. Perhaps you're more patient and compassionate with yourself. Perhaps you're better able to manage urges and cravings by identifying the automatic thought that precedes your action or behavior. Perhaps your addicted self is no longer calling the shots. Congratulations!

Somewhere between your wise self and your addicted self is a voice we'll call your *recovering self*. This part of you goes back and forth, back and forth. This part might not have instant access to that longed-for wisdom, but it's trying hard and is open to encouragement and validation. Getting in touch with what your recovering self has to say can broaden your self-understanding and strengthen your commitment to building a healthier, happier life.

Does This Sound Like You?

Alice, 40, a store manager with a history of opiate dependence, has worked on identifying the voices of her wise self and addicted self by listening mindfully and without judgment, writing down her inner dialogue, and talking with her therapist about her struggles. She has been drug-free for thirty days but says her confidence is getting shaky. Her therapist encouraged her to write down what her wise self might have to say to her recovering self at this stage.

How are you like Alice? How are you different?

What might Alice's recovering self have to say if she could give it a voice?

What might Alice's wise self want to say to her recovering self?

What to Do

First, go back and look at your Dear Self, Part 1 letter (see page 21), which gave voice to your wise self and addicted self. What do you notice when you read that now? What has changed? What is the same?

What would you add to that conversation now?

Now, let's zero in on your recovering self. Here are some examples of what that part of you might be saying. On the next page, use the blank lines to write down some of the familiar phrases that come to mind when you pay attention to what your recovering self has to say.

Examples:

- *"This is all so hard. Sometimes I think, 'What's the point?' I know what I should do, but part of me wants to give up."*
- *"My partner urged me to stop drinking, so I did. It's been a few months now. So I've proved to her that I can do it. I'm in control, not an addict. So maybe I can drink once in a while after all."*
- *"It's hard not to use when everyone around me seems to be doing it. I realize I do feel so much better about myself now, but sometimes I feel sorry for myself, too."*

Reflections on This Exercise

How helpful was this exercise? _____

(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

What Are Your Strengths?

Objective: To increase your self-confidence and motivation by identifying and rating your emotional strengths.

You Should Know

It's hard to feel good about yourself and tap into your positive qualities when you are in the throes of problem substance use or addiction. Feeling guilty and ashamed about your self-worth is unfortunately extremely common among people in recovery. Even if you've been doing well, those residual, self-critical feelings, perhaps deeply ingrained from long before your addiction began, tend to hang around.

As you continue growing and changing, it is essential that you connect—perhaps for the first time ever, or the first time in a long time—with the positive aspects of yourself. Knowing you have strengths, believing in yourself, and nurturing relationships with others who value you and your strengths are key to breaking free of your addiction.

Does This Sound Like You?

In group therapy, Stephen, 48, a married father of two adult children, is working on his longstanding alcohol dependence. He has relapsed frequently and continually puts himself down: "Let's face it. I'm a drunk. There. I said it. I've tried so many times to be a good person, but I always fail." When asked to share a couple of things that he thinks are strengths, Stephen hesitates. "I have no idea. It's been so long since I felt good about myself."

How are you like Stephen? How are you different?

What might you say to Stephen if you were in a group therapy session together?

What are your feelings about trying to identify your emotional strengths? Does it make you feel excited and hopeful? Or does it make you feel nervous or worried that you might not come up with anything? Describe below.

What to Do

Below you'll find a list of statements that reflect important emotional strengths. Rate each statement from 1 to 10, with 1 = strongly disagree and 10 = strongly agree. Then answer the questions at the end of this exercise.

- _____ I am able to love other people.
- _____ My self-esteem is usually high.
- _____ I am a flexible person.
- _____ I am a creative person.
- _____ I am a curious person.
- _____ I don't let other people's opinions of me keep me from doing what I think is right.
- _____ I am assertive when it comes to looking after my own interests and the interests of those I care about.
- _____ I set realistic goals for myself.
- _____ I have good common sense.
- _____ I am able to control my impulses.
- _____ I take care of my body and my health.
- _____ I am a flexible person.
- _____ I usually trust other people.
- _____ I would not describe myself as a victim.
- _____ I don't have a problem dealing with things that are unknown or uncertain.
- _____ I am easygoing most of the time.

- _____ I keep calm even when I am stressed.
- _____ I am patient.
- _____ I am a positive thinker.
- _____ I take responsibility for my decisions and actions.
- _____ I am well-liked.
- _____ I enjoy the company of others and also enjoy being alone.
- _____ I am good at predicting other people's behavior.
- _____ I am self-aware and like to learn about myself.
- _____ If something is bothering me, I can usually figure out what it is and do something about it.
- _____ My sense of humor often helps me deal with stress.
- _____ If I can't control a certain situation, I can usually stop my worried thoughts.
- _____ I have several close people I can confide in.
- _____ When I need help, I have several people I can turn to.
- _____ I have a strong support network.
- _____ I don't have a problem getting angry when it is warranted.
- _____ I have techniques I use to calm myself down when I am upset.
- _____ I accept my feelings, even when they sometimes trouble me.
- _____ I am able to talk openly and honestly when something is bothering me.
- _____ When I make a mistake, I try to figure out what I did wrong and learn from it.

List other emotional strengths that come to mind:

Review your list of emotional strengths. Pick one or two and describe below an incident that demonstrates how you used this strength to address a problem in your life.

What would a caring family member say is your greatest strength?

What would your best friend say is your greatest strength?

What is an emotional strength that helps you in your relationships?

Describe the best parts of your personality in five words:

1. _____
2. _____
3. _____
4. _____
5. _____

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

What Are Your Passions?

Objective: To move forward in your recovery by identifying the things in life that you are most passionate about.

You Should Know

What do you think of when you hear the word *passion*? Do you think of sex? Romance? Feeling ecstatic? Or do you think of being out of control? Overly emotional? Something else? The concept of passion doesn't always conjure up positive feelings for people in recovery. Passion typically implies having and expressing strong emotions—and that's not always easy for people struggling with addiction.

But feeling passionate doesn't necessarily mean you're bouncing around with glee all day long. Passion can be a quiet emotion, like having a deep-down sense of joy and satisfaction. It doesn't even have to be shared, if you don't want to.

As you move along in your recovery process, getting back in touch with, or identifying for the first time, what you are passionate about—what really floats your boat or gets you up in the morning—can give you the boost of motivation to continue on your path toward a happier, healthier life.

Does This Sound Like You?

Harold, 27, is an unemployed college graduate in recovery from heroin addiction. He attended an inpatient program and is currently living in a sober house, where he is meeting new people in the recovery community and getting a lot of support to stay off heroin. His NA sponsor suggested that he think about applying for a part time job in the near future doing something that he is passionate about, which makes Harold anxious. "I have no idea what I want to do or what I'm passionate about. Since I was using for most of my twenties, I feel lost. I don't know who I really am."

How are you like Harold? How are you different?

Can you relate to Harold's sense of not knowing who he is? If so, in what way?

What might be some obstacles Harold will face as he tries to figure out what he is passionate about?

What to Do

These questions are designed to get you thinking about your own passions. It's OK to skip around and answer the ones that have the most relevance and meaning for you. In the Reflections section, describe how the information you've learned might help you move forward in your recovery.

What are a few things that get you excited—things you love talking and thinking about?

Name three or four things that you loved to do as a child.

What jobs or careers make you think, "Wow, I wish I could do that!"?

Do you know anyone in that career? Or someone who might know someone? List them here.

What talents do you have (for example, music, art, writing, building things, fixing things, athletics)?

What would other people (friends, family, teachers) say you're talented at?

Imagine you're at the end of your life, looking back. What are one or two things you absolutely need to do or create so that you can say you fulfilled your potential?

If money were no object and you could work for free, what would be your dream job?

If you had to give a talk or make a video about something you are passionate and knowledgeable about, what would the topic be?

What would bring you a sense of fulfillment and contributing to the world?

What activity would keep you so totally engaged that you wouldn't notice if hours passed?

If money were no object and you could go back to school to study anything you want to learn more about, what would it be?

If a doctor told you that you had less than a year to live, what would you drop everything to do right away?

What do you want to be doing that would make you really happy?

What would be worth giving up drugs and alcohol for if you could be guaranteed success and happiness in a certain career?

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

H.O.P.E. Is in the Air

Objective: To maintain your momentum in addiction recovery by learning the H.O.P.E. model.

You Should Know

You wouldn't be reading this workbook if at least a little part of you didn't believe things could get better. Without hope, it's hard to get through the inevitable setbacks and failures. Without hope, it's hard to create a vision of the future and set goals for yourself that will result in less stress and more satisfaction.

H.O.P.E. stands for **H**ealing, **O**penness, **P**atience, and **E**xpectations.

Healing

Do we ever truly heal 100 percent, like how a scrape or cut eventually heals over and there's no scar whatsoever? Probably not. There will always be the experience of the wound. But we can work toward healing from life's difficulties with a mindful attitude and self-compassion.

People in recovery from addiction have frequently suffered terribly in their lives: childhood traumas such as abuse, neglect, bullying, losses, divorce, living with a mentally ill family member, or living with an active addict. With good therapy and a lot of support, your adult self can understand and accept those wounds. You can learn to say, "That happened to me. It wasn't my fault. I have skills now for taking care of myself and moving on."

Trauma experts talk about how our wounds are stored in our body and mind and can affect us for the rest of our lives if they are not dealt with. You deserve to heal. You deserve to take the time to make a new relationship with your past. This doesn't necessarily mean forgiving those who have wounded you; this means *forgiving yourself* in the present, acknowledging that you've done the best you can, and moving toward a new, more fulfilling future.

Openness

Most of us, when we're wounded or hurting, want to protect ourselves from further harm. That makes sense. So how do we ever experience anything new if we stay in our bubble? Remember the earlier exercise *Stretching Out of Your Comfort Zone* (see page 67)? It takes a leap of faith to try something new or break an old habit. Yes, there is a risk, but what things in life that are good and wonderful don't involve some kind of risk? With an open mind, an open heart, and an open spirit, you can add riches to your life that you might never have dreamed of—a sense of safety, strength, control, happiness, respect, love, and connection. Those are yours for the asking.

Patience

“What do you mean, mine for the asking?” you might wonder. “I’ve been wanting good stuff in my life for as long as I can remember!” That’s where patience comes in handy. It can’t be said enough: Change can be hard. Change can be slow. Seeing the fruits of your efforts, especially if you’re someone who craves instant gratification, can take time.

Be patient with that urgency. Listen to it and acknowledge it—don’t push it away, because it can add positive, driving energy to your journey. Use your mindfulness skills to watch all of your thoughts come and go, and invest every day in your recovery activities so that you can set the stage for getting what you want.

Expectations

Here’s another dilemma. You might ask: “What if I work on healing, acknowledge my wounds with compassion, practice patience with the nature of change, and my life is still stressful and unmanageable sometimes?”

Welcome to reality. That statement isn’t meant to be cynical or punitive. It’s just true. We don’t always get our way. Most things in life are out of our control. It can be frustrating, but it can also be freeing to realize that we can dream and plan and set goals and have the process be rewarding, without necessarily having all of our expectations fulfilled.

So even if you work hard and do all the right things, you might not achieve the “perfect” life. Shoot for good enough. Shoot for OK for today. Shoot for being grateful in the moment for what you do have. H.O.P.E. is a process. Embrace it as best you can.

Does This Sound Like You?

Penny, a divorced woman who works as a medical technician at a large hospital, is about to turn forty. She recently attended a four-week intensive outpatient program (IOP) following detox for alcohol dependence. She is proud of herself for being honest with her family, friends, and employers, and excited about turning forty and “starting my life over again.” In the IOP, she meets a divorced man who is also in early recovery. They hit it off and get together for coffee a few times on the outside. They are very attracted to each other and, for both, it’s been a long time since they’ve been in a relationship. But Penny worries that it might be too soon to manage both her own recovery and a new boyfriend.

How are you like Penny? How are you different?

How would you assess Penny's situation, pros and cons?

What parts of the H.O.P.E. approach might be helpful for Penny at this time?

What to Do

What does the H.O.P.E. approach mean to you? How can you use its concepts to move forward in your recovery? Use the lines below to answer the following questions.

What are your hopes?

Examples:

- *"I hope I can maintain my focus on myself and not back down from setting limits with others."*
- *"I hope I will find a great job in an area I'm passionate about."*
- *"I hope I can regain my parents' (spouse's/partner's/children's/friends') trust if I continue to work hard."*

Healing

What wounds are you carrying from your past that need to be healed?

What people could help you in your healing process?

What activities or recovery strategies could help you in your healing process?

Are you willing to experience some emotional discomfort without picking up drugs or alcohol?
Why or why not?

Openness

Do think of yourself as a closed or open person, or somewhere in between? Explain.

Do you remember a time when you felt open to change and new experiences? Describe.

Who or what inspires you to remain open, maybe even to feel vulnerable, in the interest of leaving your comfort zone?

What are you willing to do in the next week to practice being more open to new people, places, and things?

Patience

How would you rate your ability to be patient? _____
(1 = no ability, 5 = moderate ability, 10 = excellent ability)

Do you remember a time when you were forced to be patient, waiting for something good? Describe.

What would you be willing to wait for now, and what could you say to yourself to learn more patience?

Expectations

What are your expectations of yourself in regards to your recovery right now?

What are your expectations of others in regards to your recovery? Be specific.

How do you manage having unmet expectations (being disappointed)?

How would you like to manage having unmet expectations?

Are you setting your expectations too high, too low, or just right? Describe two or three experiences that illustrate your answer.

Reflections on This Exercise

How helpful was this exercise? _____
(1 = not very helpful, 5 = moderately helpful, 10 = extremely helpful)

What could you do differently to make progress in this area of your recovery?

Vision Statement, Part 2

Objective: To continue generating a sense of hope by creating a vision of what you'd like your life to look like in five years and ten years.

You Should Know

Earlier in this workbook, you had the opportunity to create a vision statement for your future. To do an exercise like this might seem contrary to the popular phrase in AA: "One day at a time." You might say, "Who knows what the future holds? If everything is out of our control, why not just let things unfold?"

Sure, that makes sense. But no one is saying that the vision statement is some kind of contract. Rather, it is an expression of parts of yourself that you might have hidden away or buried for years—the parts that want a happy, healthy, fulfilling life. It can't hurt to envision that for yourself, can it? Having a goal or vision is an important element of motivation that can keep you going during rough times and enhance your pleasure in the good times.

Does This Sound Like You?

Vincent, 28, has stopped drinking alcohol and smoking marijuana after getting off probation following a series of DUIs. He won't get his license back for another six months. He is living at home with his parents and recently got a "recovery" job (a minimally demanding job) bagging groceries while he attends court-ordered SMART Recovery meetings and individual and group therapy a few times a week. Vincent is motivated to stick to the terms of his probation. When asked, he said he can't possibly imagine what his vision would be five and ten years from now. He doesn't even know what he'll be doing next month.

How are you like Vincent? How are you different?

Are you aware of anything—internal or external—that might be in the way of your working toward what you want? Describe it briefly.

What to Do

In this exercise, you'll create another vision statement to help you keep your eyes on the prize—living a happier life.

Go back and look at your Dear Self letters (see pages 21 and 137). Review your strengths, your passions, and your H.O.P.E. answers (see page 151). Then relax. Maybe even meditate for a few minutes. Allow yourself to dream.

First, review your list of twelve things that you want in your life from your first vision statement. Now, add twelve more. Use extra paper if needed. As before, you may create a collage of images from magazines or download photos or images from the internet.

Things I Want in My Life:

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

Now, you'll craft another vision statement. This time, you'll focus on your vision for five and ten years from now. As before, some categories you might want to include are:

- Relationship to drugs and/or alcohol (using/not using)
- Relationships with friends
- Relationships with family
- Finances
- Health
- Job/school
- Spirituality

DAILY EXERCISES

Today's Goal

Setting daily goals can be an important part of getting back on track with your life. Goals can give you something to dream about and work toward. Meeting your goals, whether small or large, can give you a sense of pride, accomplishment, and accountability.

Keep it simple. Maybe one day you set a goal of making a phone call to an old friend. Perhaps another day you set a goal of going to the gym for an hour or taking a walk in nature. Here are some categories that you might want to set a goal for:

- One recovery activity
- One mindfulness activity (formal or informal)
- Something spiritual (prayer, religious gathering)
- Getting away for the day
- Attending a social event
- Exercising
- Meeting a friend
- Relaxing
- Eating less (or more)
- Doing something creative
- Add your own: _____

Pick one activity per day as a commitment to your recovery from alcohol or drug use. Be realistic about your goal. Record when you do this activity and what it was like for you. On the lines below, set your goals for tomorrow. State your goal and what you need to do to meet it. Tomorrow, check off whether you met your goal and note how you feel about it.

Date: _____

Before

What is your goal for tomorrow? Example: *Take a 30-minute walk by myself.*

What do you need to do to meet it? Example: *Ask my spouse to watch the kids.*

After

Did you meet your goal? If yes, how did you feel about it? If not, what got in the way?

Example: *No. It was raining, and I decided not to go. It's OK. I'll do it tomorrow.*

What Are Your Challenges?

At the end of each day, you might feel burdened by worries about the future, unfinished business, upcoming stressful events, or your own inner uncertainty about how you're doing and where your recovery work is leading. Writing down up to three challenges will help you get out of your head and into some healthy problem solving using the skills you've learned.

On the lines below, list up to three challenges you face for tomorrow. State what the challenge is, how you feel about it, and what you think you can do to meet it. At the end of the day, check off whether you met your goal and note how you feel about it. Here's an example:

Challenge: I'm going to a work event tomorrow where I know alcohol will be served.

Feelings: Anxious. I might be triggered.

What can I do?: Tell a friend that I need support; call sponsor before and after; take three conscious breaths. If I can't deal, I'll leave.

Today's Date: _____

Challenge 1: _____

Feelings?

What can you do to meet that challenge?

Challenge 2: _____

Feelings?

What can you do to meet that challenge?

Challenge 3: _____

Feelings?

What can you do to meet that challenge?

What Are You Grateful For?

If life feels tough right now, it's a proven balm for depression, fear, worry, and anxiety to recall at the end of each day a few things you're grateful for. It can be as simple as running water, electricity, a roof over your head, your safe neighborhood, and so on. Or you might want to list specific things like "My boss said kind things to me today," or "My spouse brought me flowers," or "I felt clearheaded and positive today."

Date: _____

List five things you are grateful for today:

- 1. _____

- 2. _____

- 3. _____

- 4. _____

- 5. _____

ADDITIONAL RESOURCES

Relapse Prevention Checklist

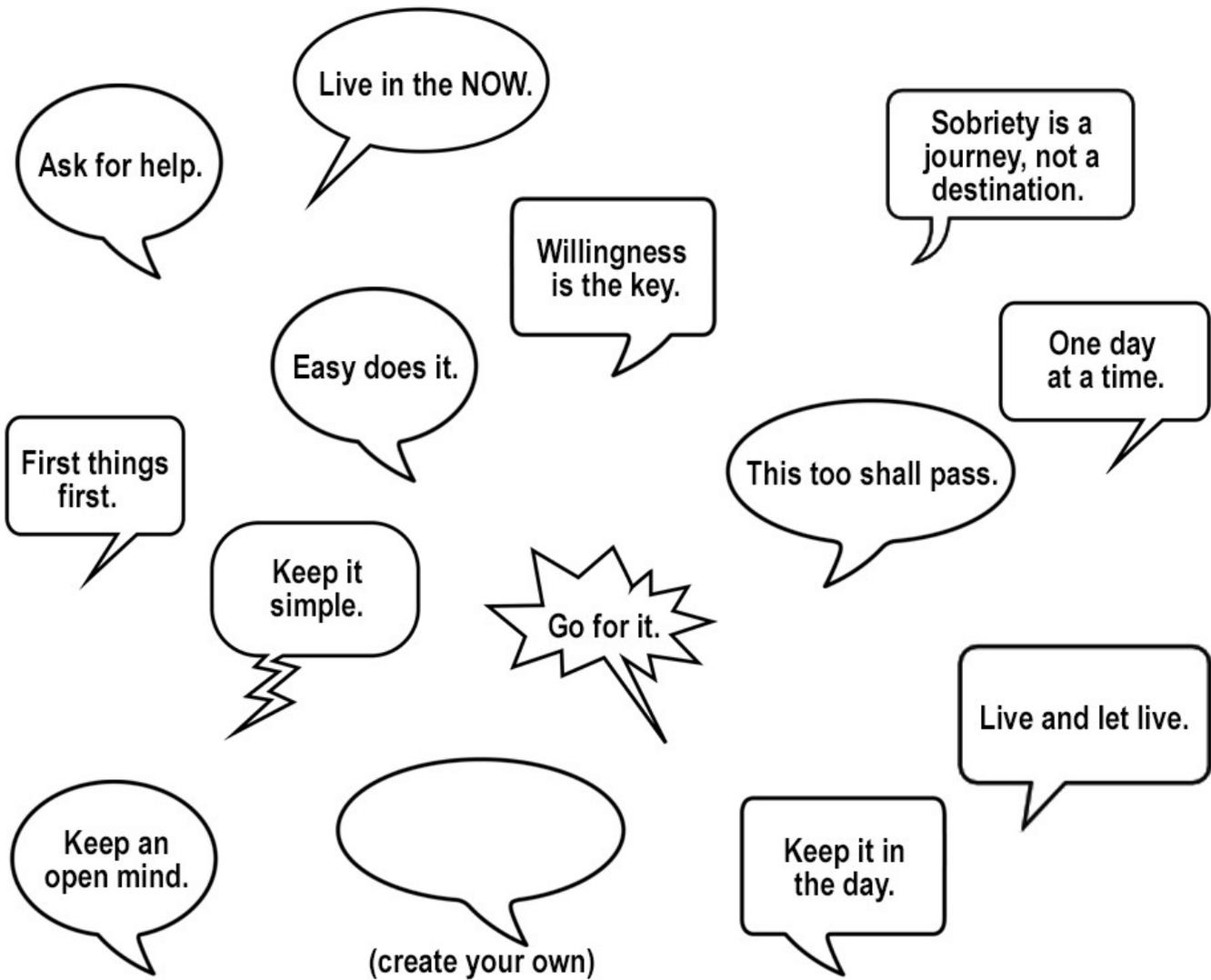
Use this list as a handy reminder of the exercises offered in this workbook. You may check them off when you do them to chart your progress toward successful recovery. Note that many of the exercises are not a “one-and-done” deal; for instance, you’ll want to practice the breathing exercises on a regular basis. Best of luck on your journey!

<input type="checkbox"/> Taking three conscious breaths	3
<input type="checkbox"/> Creating a vision statement, part 1	6
<input type="checkbox"/> Weighing your pros and cons	11
<input type="checkbox"/> Identifying your stages of change	18
<input type="checkbox"/> Writing a letter to yourself, part 1	21
<input type="checkbox"/> Identifying your triggers	26
<input type="checkbox"/> Charting your urges and cravings	31
<input type="checkbox"/> Learning how to P.L.A.N. for events	36
<input type="checkbox"/> Doing your “housecleaning”	41
<input type="checkbox"/> Listing your reasons not to use	45
<input type="checkbox"/> Identifying alternatives to using	48
<input type="checkbox"/> Creating a safe network	54
<input type="checkbox"/> Reflecting on how to ask for help	58
<input type="checkbox"/> Tracking your recovery-related activities	64
<input type="checkbox"/> Identifying your personal comfort zone	67
<input type="checkbox"/> Naming your feelings	72
<input type="checkbox"/> Practicing responding to feelings instead of reacting	76
<input type="checkbox"/> Writing a letter to your substance of choice	81
<input type="checkbox"/> Noticing your habitual thoughts	84
<input type="checkbox"/> Identifying different types of thoughts	88

❑ Connecting your thoughts and feelings	91
❑ Practicing mindful self-compassion	94
❑ Revising your inner dialogue	97
❑ Practicing unplugging	101
❑ Practicing mindful breathing exercises	105
❑ Doing the body-scan exercise	108
❑ Doing the progressive muscle relaxation exercise	111
❑ Going on a “noticing” walk	114
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❑ Getting active	120
❑ Reviewing your eating and sleeping habits	124
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Words of Wisdom

Alcoholics Anonymous is well known for its simple but powerful phrases to help people stay on track. Here are some helpful ones for you to reflect on, write down, put on your phone, or say aloud:



Breaking Free of Addiction

Addiction to drugs and alcohol is one of the most serious medical, psychological, and social problems facing Americans today. But, with help, you can recover. When you feel less alone and more empowered with tools that work and a supportive community, you can begin to build a happier, healthier life—the life you’ve always wanted.

This workbook offers forty-two therapeutic exercises that will help you learn about your problem substance use, make healthy choices, practice new skills, and try strategies to prevent relapse. Grounded in mindfulness-based theory, cognitive-behavioral theory, and the wisdom of self-help movements, the book is divided into nine sections: Start on the Path to Recovery, Get Ready, Know Your Triggers, Take Action, Build a Safety Net, Know Your Feelings, Know Your Thoughts, The Mind-Body Connection, and Look Back and Look Ahead. Each exercise includes an objective, a brief discussion, and an illustrative vignette, followed by the activity. You are invited to reflect on your process throughout and offer feedback. Daily worksheets and a relapse prevention checklist are included.

The exercises include:

- Weighing Your Pros and Cons
- What Are Your Triggers?
- The Stages of Change Model
- Noticing Your Urges and Cravings
- Your P.L.A.N. for Social Events
- Reasons Not to Use
- Alternatives to Using
- Creating a Safe Network
- Asking for Help
- Stretching Out of Your Comfort Zone
- Feelings 101—It’s OK to Be a Beginner
- Responding, Not Reacting, to Feelings
- Connecting Your Thoughts and Feelings
- Mindful Self-Compassion
- Revising Your Inner Dialogue
- Mindful Meditation 101
- Getting Active
- What Are Your Passions?
- Reexamining Your Relationships
- H.O.P.E. Is in the Air

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About the Series:

Between Sessions Resources produces a variety of tools to enhance the effectiveness of psychotherapy and counseling. This workbook is part of the company’s ongoing efforts to standardize the treatment of both common and uncommon mental health problems.

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