



Client Workbook



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SUBSTANCE USE /
BRAIN INJURY
BRIDGING PROJECT

The Substance Use / Brain Injury (SUBI) Bridging Project is a joint effort of the above organizations to provide education and treatment information on substance use following a brain injury.

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Contents

Introduction		4
How to use this workbook		5
Introduction to substance use and acquired brain injury		7
Section 1 Understanding the addiction cycle		11
Chapter 1	Getting ready for change	13
Chapter 2	My top 5 reasons for change	17
Chapter 3	The effects of drugs and alcohol	21
Chapter 4	The ABCs of substance use	31
Chapter 5	Thoughts, feelings and substance use	35
Chapter 6	First things first. Ideas to get started	39
Chapter 7	Saying no to alcohol and drugs	43
Chapter 8	Coping with cravings	47
Section 2 Tools to use during recovery		51
Chapter 9	Journaling	53
Chapter 10	Being in groups	59
Chapter 11	Setting realistic goals	69
Section 3 Understanding yourself and your relationships		73
Chapter 12	Being your own best friend	75
Chapter 13	Building self esteem	79
Chapter 14	Building healthy relationships	83
Chapter 15	Building a support network	87
Section 4 Coping strategies for life		91
Chapter 16	Assertiveness	93
Chapter 17	Dealing with boredom	97
Chapter 18	Coping with strong feelings	101
Chapter 19	Relaxation	105
Chapter 20	Problem-solving	109
Chapter 21	Staying healthy	115
Section 5 Pulling it all together		121
Chapter 22	Goal setting for recovery	123
Chapter 23	Learning from lapses	129
Appendix A	For more information	135
Appendix B	Forms for reproduction	137

Introduction

This workbook was created for people who are living with the effects of a brain injury and are also having some problems due to drug or alcohol use.

The workbook was designed by a partnership of people at Community Head Injury Resource Services of Toronto (CHIRS) and the Centre for Addiction and Mental Health (CAMH).

The materials presented are based upon the programming provided at CAMH, Brentcliffe Site.

To get the most out of this workbook we strongly recommend that clients review it with a counsellor who is familiar with addictions and/or is helping people after brain injury.

Acquired Brain Injury counsellors using this workbook are encouraged to seek consultation from professionals with experience in the treatment of substance abuse.

Counsellors in addictions and substance abuse are encouraged to seek consultation from professionals with experience in the management of the effects of acquired brain injury.

How to use this workbook

This workbook was put together for three groups of people:

- People living with the effects of brain injury who are having some problems due to drug or alcohol use
- Counsellors in substance use
- Counsellors in acquired brain injury (ABI)

It can be used as an aid in structuring individual counseling sessions with a client or as handouts for use in group settings. Each chapter is organized into the following sections to make the workbook easy to follow:

- **Goals**
- **Information**
- **Self-assessment**
- **Worksheet**
- **Plan**

We recommend that each individual session or group work follow the structure suggested by the format of the workbook. Sessions should begin with a review of the goals, followed by the presentation of information, self assessment and personal goal-setting. In most chapters, information is brief enough that it can be reviewed with the client in a single session. However, there are some topic areas that are more complex and may take several sessions to review.

A recovery checklist is included in the Forms for reproduction section. Completing this form, or a similar plan at the end of each session, will help to keep clients focused on their particular goals. Getting in the habit of reviewing these each week will assist clients in organizing their thoughts, problem-solving, and follow-through.

A structured self-assessment is provided in most chapters. Worksheets and plans are provided to assist the client in applying the new information to their own plan of action.

The order of the chapters provides a logical sequence for the introduction of information. However, this order can be altered to fit the needs of a particular client or the structure of the program in which it is being used.

Please note that not all chapters contain all sections. Worksheets can be taken out of the workbook and used as handouts for groups.

This workbook is designed to be a resource for the following user groups:

- Counsellors with little experience in substance use should find enough information and examples in each chapter to have meaningful conversations with their clients about substance use and its effects. However, the workbook is not intended to be a replacement for consultation with counsellors in substance abuse.
- Counsellors with little experience in acquired brain injury should find that the structured, written presentation and concrete examples will help clients to compensate for memory impairments and other cognitive difficulties. However, consultation with an acquired brain injury professional is strongly recommended.
- The multiple choice and checklist format of self-assessments is designed to facilitate self-assessment for persons whose cognitive difficulties make answering open-ended questions difficult.

Introduction to substance use and acquired brain injury

Is my substance use really a problem?

This is a very difficult question to answer, particularly for a person who has had a brain injury. After reviewing the available information about the effects of alcohol and brain injury we have concluded that it is not safe to use alcohol in any amount after brain injury. Having said that, the usual recommended limits for safe use of alcohol for those under the age of 65 are two drinks in a day for men and one drink per day for women. The difference between men and woman is based on size and the ability of the body to process the alcohol.

There are many reasons why it is generally considered unsafe to use illegal drugs. There is a risk of getting arrested — people who sell drugs are not regulated by law, so people who buy them are at risk for being the victims of crime. Some illegal drugs pose a great risk of causing further brain injury as well. Taking more of your prescription drugs than your doctor prescribes is also dangerous. Medical complications, including further brain injury, can result.

If you have had a brain injury, it is not safe to drink alcohol in any amount, it is not safe to use illegal drugs, and it is not safe to take more than the prescribed dose of your medications.

Here are some signs that it might be time to ask for help — do any of these signs apply to you?

- You have tried to cut back or stop using substances on your own but somehow you keep on using
- Someone around you is very worried about your use of alcohol or drugs
- You worry about your use of alcohol or drugs
- You have had legal, financial or relationship problems that are related to your use of alcohol or drugs

There are a lot of good reasons for avoiding the use of drugs and alcohol after a brain injury. A helpful resource is: *User's manual for faster, more reliable operation of a brain after injury* (Ohio Valley Center, 1994; www.ohiovalley.org)

Eight reasons not to use

Here are the eight reasons that the Ohio Valley Center gives for not using drugs or alcohol after a brain injury:

- 1 People who use alcohol or other drugs after their injury do not recover as well as those who do not.** After brain injury some brain cells (neurons) are killed. Sometimes connections between neurons are disrupted as well. Recovery is the process of rebuilding connections between brain cells. Unfortunately, the body cannot make new brain cells. Most often being intoxicated (drunk) means that the functioning of your brain cells has been disrupted. This makes it more difficult to recover from your injury.
- 2 Problems with balance, walking and talking are made worse by alcohol and drugs.** Alcohol and drugs can cause falls and/or difficulty in speaking, even in those without brain injury. After a brain injury, problems with balance and speech caused by the injury itself can make these problems worse.
- 3 People who have had a brain injury sometimes say and do things without thinking them through. This problem is made worse by drugs and alcohol.** One of the functions of your brain is to stop you from acting on bad ideas. That function is turned off when you are using. This can result in doing and saying things that you regret later.
- 4 Brain injuries can make it more difficult to pay attention, remember new information and think things through clearly. Drugs and alcohol interfere with all of these mental abilities.** Many people find that after their brain injury they have to relearn some of the skills they once had. It is common to have problems finding the right word, concentrating, solving problems and making use of other thinking skills. Adding alcohol and drugs to these problems makes it even harder to get things done.
- 5 After a person has had a brain injury, they generally find that alcohol and other drugs have a more powerful effect.** After a brain injury, the brain is more sensitive to alcohol and drugs. No matter what a person's ability to handle alcohol and drugs was before their injury, it is reduced after injury. Also, alcohol and drugs can interfere with any prescribed medications.

6 After a brain injury it is common to have times when a person feels down or depressed. Drinking and using drugs can make depression worse. After a brain injury there are a lot of changes and challenges that make life more difficult. That can be a cause for feeling down. Also, the effects of a brain injury itself can cause a depressed mood. That may be one reason why some people turn to alcohol or drugs to feel relaxed and happier. That may be true in the short run. In the long run, though, things usually get worse. Alcohol acts as a depressant in the brain. That will make you more depressed.

7 Drinking and using drugs can increase the likelihood of having a seizure. About 5% of people with a brain injury go on to have trouble with seizures. Seizures are serious and can cause further brain damage or injury. That is why doctors take great care to help their patients prevent having seizures. Many people are prescribed drugs to prevent seizures after they have had a brain injury. It is very dangerous to mix alcohol and other drugs with these medications. Taking yourself off prescribed drugs so that you can drink is also very dangerous. Talk to your doctor and get the facts.

8 Using drugs or alcohol after a brain injury increases your risk of having another brain injury. After you've had one injury, your chances of having another brain injury are three times greater. Brain injuries can cause people to have more accidents because of changes in their balance, coordination and judgment. Alcohol and drugs only make these difficulties worse.

Congratulations on having made the decision to seek more information on the effect of substance use on acquired brain injury.

By going through the information in this workbook you will learn to understand more about your substance use. You will also find coping strategies to help you manage the difficulties that may arise during your recovery and you will find information about how to pursue a healthy lifestyle. Remember that one book will not give you all the answers — it is very important to find people whom you trust to help you.

Section 1

Understanding the addiction cycle



Chapter 1

Getting ready for change

Goals

- To learn that the good things associated with substance use may come quick and easy, but they don't last long
- To learn that the problems that come from using drugs or alcohol last a long time



Information

The first step in your recovery is to understand why you use drugs or alcohol and your reasons for wanting to make a change

Self-assessment

Check any or all of these short-term benefits of drinking or drug use that apply to you:

- Instant gratification (feeling good right away)
- Helps me get to sleep
- Helps me deal with pain
- Helps me deal with stress
- Puts off having to deal with something that I don't want to think about
- Makes me numb (helps me to stop having feelings)
- Gives me something to do when I feel lonely
- Helps me to socialize
- Helps me to relax
- Gives me a sense of courage
- Helps me to have fun and lifts my spirits
- Helps me feel normal, like one of the group
- Gives me something to do when I feel bored
- Helps me feel less depressed
- Helps me loosen up and be more exciting

Other short-term benefits:

Lasting effects of drug use

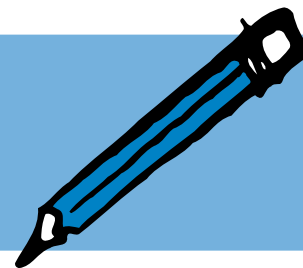
Here are some problems that come from drinking or drug use. Notice that the effects tend to last a long time. Check any or all of these long-term effects you might have experienced:

- Forgot what happened
- Fell or got in an accident
- Did something unsafe or illegal
- Lost money
- Argued with my family
- Argued with my friends
- Had problems with my health
- Had problems with the law
- Lost my house/apartment
- Hurt someone I care about
- Did something that was against my own values
- Lost control of my temper
- Damaged my reputation
- Got kicked out of a rehabilitation program
- Had trouble keeping doctor or therapy appointments
- Was not getting the most out of my rehab
- Felt badly about myself (damaged my self-esteem)
- Found that my problems were still there when I sobered up

Other long-term effects:

Worksheet, Chapter 1

Getting ready for change



Now that you've had a chance to examine some of the pros and cons of your drinking or drug use, you might find it helpful to complete this chart. You may want to come back to it from time to time as you learn more about yourself.

Drinking or drug use

What's good about it

What's not good about it

Chapter 2

My top 5 reasons for change

Goals

- To understand how important motivation is to making a change
- To define your motivation for wanting to make a change
- To have your motivations handy during the tough times

Information

Making changes in your life is a real challenge and it helps to have a clear idea of why you want to make a change and what might help keep you motivated during the rough times.

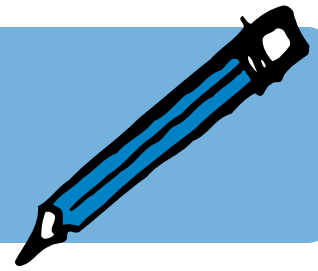
Some reasons for making a change might include:

- Relationships that are important to you
- Goals you want to reach
- Ways your health might improve
- Activities you want to pursue



Worksheet, Chapter 2

My top 5 reasons for change



I want to make a change for the following reasons:

- 1 _____

- 2 _____

- 3 _____

- 4 _____

- 5 _____

Plan

**There are a lot of ways that you can put your list to use.
Check any or all of these ideas that you think might work for you:**

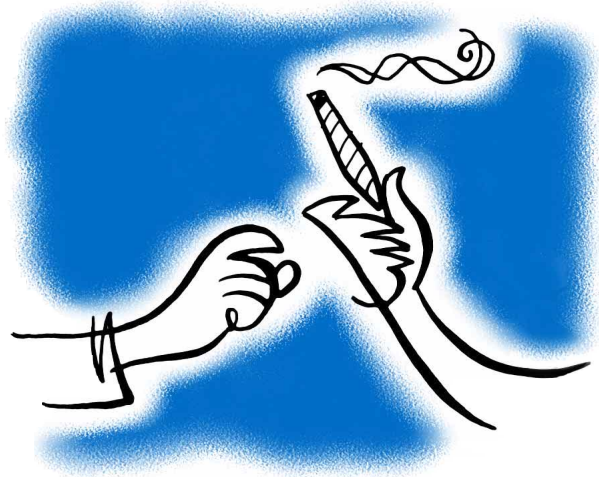
- Write your list on a card and keep it with you
- Share your list with a supportive person so that they can encourage you
- Write a poem or a jingle you can say or sing to yourself
- Keep a journal with pictures to keep you inspired (see Chapter 9, page 53)
- Make a poster and hang it in a place that you will see each day
- If your list involves people who are important to you, use their pictures or something they have given you to remind yourself of what you are working for
- Plan to call or talk to five people to tell them about your reasons for making a change
Add these things to your Coping Card (see Chapter 8, page 47).

Chapter 3

The effects of drugs and alcohol

Goals

- To learn about how drugs and alcohol change the normal functioning of the brain and body
- To understand the health effects of using substances

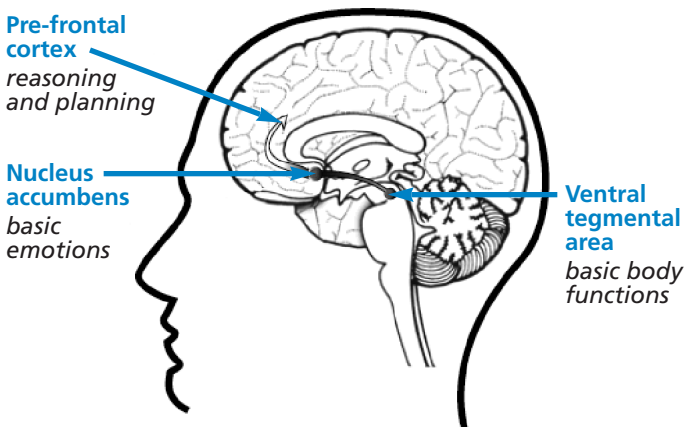


Information

Why it feels like you can't live without drugs or alcohol

Our brains are wired so that when we do something that gives us pleasure, we tend to want to do it again. That's what drives us to do things that help us survive — eating, for example. Almost all drugs that are used to get high change how the natural chemicals work in the brain's pleasure centre. This change tricks you into thinking that the drug is something you need for survival. Often, the changes in brain chemistry that drugs cause last longer than the high. That can cause serious long-term problems, including withdrawal symptoms and brain damage.

REWARD CIRCUIT



This is a picture of the reward circuit in the brain. The most important thing to notice is that the reward circuit has strong connections to the part of your brain that is responsible for basic emotions (the nucleus accumbens) and the part of your brain that regulates basic body functions (the ventral tegmental area). One of the reasons that addictive drugs have such a strong effect is that they act on the part of the brain that is in charge of very basic survival instincts. When the urge to use the drug is strong enough, this part of the

brain can override the part of the brain in charge of reasoning and planning (pre-frontal cortex). This is one reason why most drugs make the problem of being impulsive — acting without thinking — worse. This is also why people spend a lot of time and energy getting the drug they abuse for a short-term high, even though it causes a lot of problems in the long run.

What drugs and alcohol do to your body

Stimulants speed up bodily functions. Depressants slow the body down. Some drugs cause you to see and feel things that are not really there — but the effects of drugs don't stop there. As you read through the information on the following chart, you will see that although drugs may have one or two effects that make you feel good, they also cause many problems. Because of the way drugs work on the brain, you may focus on the one or two positive effects, without stopping to think about all of the problems. Sometimes the problems last much longer than the effect of the substance itself. This causes damage to the body and brain that may be permanent. Many drugs, and alcohol, have been shown to have long-term health effects that include liver damage, an increased risk for getting cancer, heart disease and brain damage.

This table show the effects of some common drugs. It is important to notice that all drugs listed make some of the problems that come with brain injury even worse.

Cannabinoids

Name	Common names	What they do	Problems they cause
<p>Marijuana Hash</p> <p>Active Ingredient: Tetrahydrocannabinol (THC)</p>	<p>blunt dope grass joints pot hash hemp</p>	<p>Imitates a pleasure chemical in the brain</p>	<p>Slow thinking Apathy (loss of motivation) Poor balance Poor coordination Poor memory Poor learning Anxiety Panic attacks Fast heart rate Cough</p> <p>Increased risk for psychotic episode</p>

Depressants

Name	Common names	What they do	Problems they cause
<p>Barbiturates (e.g., Amytal, Phenobarbital)</p> <p>Benzodiazepines (e.g., Ativan, Halcion, Xanax)</p>	<p>downers reds red birds phennies yellows yellow jackets</p> <p>candy downers sleeping pills tranks</p>	<p>Reduce anxiety</p> <p>Feeling of well-being</p> <p>Lower blood pressure</p> <p>Lower pulse</p> <p>Cause drowsiness</p>	<p>Impulsive behaviour Poor concentration Fatigue Confusion Poor judgment Slurred speech Dizziness</p> <p>Interferes with memory storage (blackouts)</p> <p>For Barbiturates: Medically dangerous withdrawal</p> <p>Death with overdose</p>
<p>Alcohol (Spirits, beer, wine)</p>		<p>Feeling of well-being</p> <p>Deaden pain</p> <p>Reduce social anxiety</p>	<p>Impulsive behaviour Poor concentration Fatigue Poor balance Poor coordination Confusion Poor memory Poor judgment Slurred speech Shrinks brain Liver damage Heart damage Birth defects Seizures</p> <p>Medically dangerous withdrawal</p> <p>Death with overdose</p>

Depressants (continued)

Name	Common names	What they do	Problems they cause
GHB Gamma-hydroxy butyrate	Georgia home boy liquid ecstasy	Feeling of well-being	Impulsive behaviour Poor concentration Fatigue Confusion Poor memory Poor judgment Nausea/vomiting Headache Seizures Coma Death

Opioids (opiates)

Name	Common names	What they do	Problems they cause
Tylenol with codeine Cough syrup with codeine Fentanyl (duragesic) Talwin	cody schoolboy	Pain relief Feeling of well-being	Drowsiness/nausea Constipation Slows breathing Stoppage of breathing Coma Death For Oxycodone/Vicodin and Oxycontin: Severe withdrawal that includes the above and diarrhea and nausea
Oxycodone/Vicodin Oxycontin	TNT tango cash		
Morphine	monkey Ms. Emma		
Opium	block gum hop		
Heroin	H dope, horse junk, smack		For Heroin: Staggering gait HIV risk Hepatitis risk

Stimulants

Name	Common names	What they do	Problems they cause
Amphetamine	speed bennies black beauties crosses hearts	Feeling of increased energy Mental alertness	Fast, irregular heart beat Poor appetite Weight loss Heart failure Nervousness Trouble sleeping Tremors Loss of coordination Aggression Impulsive behaviour Confusion Poor coordination Psychosis
Cocaine	blow candy Charlie coke flake rock snow toot		Increased body temperature Stroke Seizures Headache Panic attack Paranoia
Methamphetamine	meth chalk crank crystal fire glass go fast speed		Aggressive behaviour Violence Psychotic behaviour Memory loss Impaired memory Impaired learning Shrinkage of brain Paranoia
MDMA (methylenedioxy meth- amphetamine)	ecstasy adam clarity Lover's speed peace	For MDMA: Feeling of well-being and empathy Mild hallucinations Increased sensitivity to touch	Poor memory Poor learning Increased body temperature Heart damage Kidney failure Liver damage

Hallucinogens

Name	Common names	What they do	Problems they cause
LSD	acid blotter boomers cubes microdot	Change in thinking and perception	Nausea Flashbacks Increased body temperature Fast heart rate Poor appetite Trouble sleeping Weakness Tremors
Mescaline	buttons cactus, mesc payote		Changes in thinking may continue after the drug has worn off
Psilocybin	magic mushroom purple passion shrooms		For Psilocybin: Anxiety

Other drugs

Name	Common names	What they do	Problems they cause
PCP (Phencyclidine)	angel dust boat hog love boat peace pill	Numbness Change in perception	Fast heart rate High blood pressure Poor coordination Memory loss Nausea Vomiting
Inhalants e.g.: Solvents paint thinners gasses glue nitrites	laughing gas snappers, poppers	Head rush Sudden stimulation of senses	Impulsive behaviour, Headache, Nausea, Vomiting, Slurred speech, Poor memory, Wheezing, Unconsciousness, Weight loss, Depression, Muscle weakness, Liver damage, Brain damage, Sudden death Use associated with suicide
Steroids (anabolic steroids) e.g.: Androl oxandrin winstrol testosterone	roids Arnolds gym candy pumpers stackers weight trainers juice	Imitates the effects of male hormones Taken to increase muscle mass/strength	Increased risk of stroke and heart and liver disease Increased risk of infection Aching joints Nervousness Trembling Increased anger/rage attacks For men: Baldness, development of breasts, inability to get an erection For women: Facial hair, deepened voice, reduction in breast size Changes in appearance including: Acne, Oily hair, Baldness, Jaundice Swelling of feet and ankles, Bad breath, Mood swings Health risks associated with injection include HIV and hepatitis

Self-assessment

Consider your Health

What substance(s) have you used or abused?

What effects did the substance have on you?

What health problems has your substance use caused?

Check any or all effects you have experienced:

- | | |
|--|--|
| <input type="checkbox"/> Aggression | <input type="checkbox"/> Nausea |
| <input type="checkbox"/> Blackout/memory loss | <input type="checkbox"/> Over eating |
| <input type="checkbox"/> Coughing, wheezing or other lung problems | <input type="checkbox"/> Panic attacks |
| <input type="checkbox"/> Confusion — disorganized thinking | <input type="checkbox"/> Poor balance |
| <input type="checkbox"/> Fatigue | <input type="checkbox"/> Poor judgment — did something I regretted later |
| <input type="checkbox"/> Forgetting to eat/losing weight | <input type="checkbox"/> Poor co-ordination |
| <input type="checkbox"/> Hangover | <input type="checkbox"/> Poor memory for new information |
| <input type="checkbox"/> Headache | <input type="checkbox"/> Tremors |
| <input type="checkbox"/> Heart problems | <input type="checkbox"/> Trouble sleeping |
| <input type="checkbox"/> Kidney problems | <input type="checkbox"/> Vomiting |

Other effects:

Which health problems worry you?

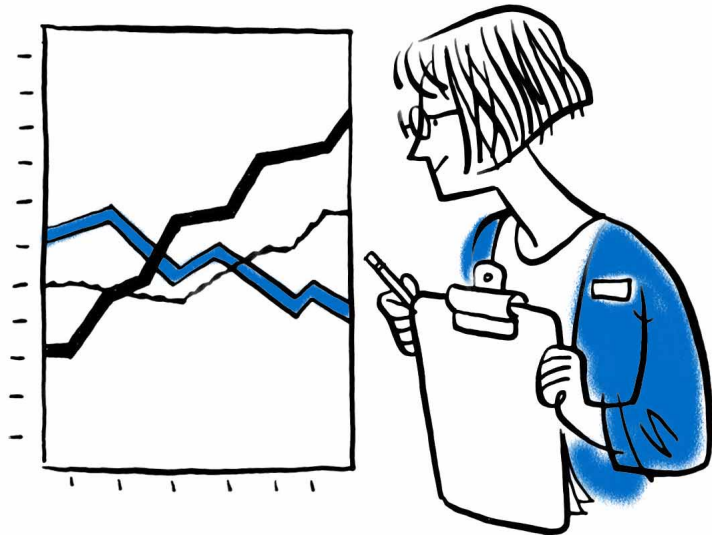
What do you want to prevent by stopping your use of alcohol and drugs?

Chapter 4

The ABCs of substance use

Goals

- To learn about triggers for alcohol or substance use
- To identify some triggers for alcohol and drug use
- To identify what coping skills will help deal with triggers



Information

What purpose does substance use serve in your life?

Your use of alcohol or drugs serves some purpose or function in your life. In the last chapter you learned that there are some short-term benefits that come from your drinking or drug use. This chapter will help you understand why you want to drink or use drugs, what happens to you afterwards and how to make a plan to avoid drugs and alcohol.

The ABCs of substance use

Antecedents

The things that come before you drink or use drugs. Another name for antecedents is triggers. Triggers for some people can be thoughts, or things in the environment, or emotions.

Behaviour

What happens when you drink or use drugs. This includes your choice of drug or alcohol, how much you use or consume and what you are doing while you are using.

Consequences

What happens after you have used alcohol or drugs. These can be physical, emotional or social effects of your use. Consequences can be both positive and negative. A positive consequence could be an escape from worries. A negative consequence could be a hangover and a missed appointment.

Self-assessment

Here are some common triggers. Check any that might apply to you.

Having strong uncomfortable emotions

- Sadness
- Anger
- Loneliness
- Frustration
- Anxiety
- Boredom

Dealing with physical discomfort

- Pain
- Symptoms of withdrawal
- Fatigue
- Illness/nausea

Having an urge or a craving

- Thinking about the alcohol or drug
- Seeing the alcohol or drug
- When I'm with others who are drinking or using drugs
- When others ask me or pressure me to drink or use drugs
- When I want to test my ability to control my use (I think I know when to stop)

To make a good time feel better

- To enjoy a special event more
- To enjoy being with my friends
- While I'm relaxing
- To reward myself

When I have problems in my relationships

- With my parents
- With my loved ones
- With my neighbours
- With my co-workers

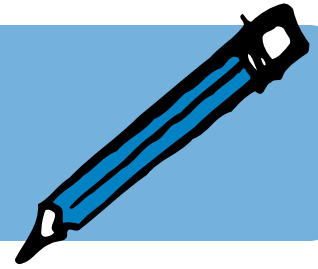
If you stop to think about your patterns of behaviour, you might notice that there are some situations in which you are more likely to use drugs or alcohol. Here are some common examples. Check off any that apply to you:

- Getting paid (having money with me)
- Being in a certain neighbourhood
- After work or an appointment
- At the end of the day
- On weekends
- On days I don't go to work/therapy
- Seeing or using paraphernalia (pipes, spoons, needles, bottles/glasses)
- Seeing friends and associates who use
- Intimate relationships (going on dates)

Other situations:

Worksheet, Chapter 4

The ABCs of substance use



Use this table to help you keep track of your ABCs. Doing this will also help you learn more about your substance use. We have given you one example to help you get started.

A ntecedents/triggers <i>(What came before you drank or used drugs)</i>	B ehaviour <i>(What you did)</i>	C onsequences <i>(What happened afterward)</i>
<p>Got my cheque.</p> <p>Started thinking about how much my life has changed since my injury.</p>	<p>Went into bar and had four beers.</p> <p>Got into an argument.</p>	<p>Police were called.</p> <p>Tripped and hurt my knee. Spent all my money. Feel guilty.</p>

Plan

Once you have a clear idea of what factors lead to your drinking or drug use you can begin to plan ahead. If strong feelings come up, then you might need to learn some stress management strategies to handle them. These might include exercise, relaxation strategies and learning how to think differently about what you find distressing. If you're feeling bored, you may need to find meaningful ways to spend your time. If you're feeling lonely, building a support network might help. If you're tired, eating better and learning how to get a proper night's sleep can help with fatigue. The idea is to do what you can to avoid triggers or situations that make you want to use substances

**Talk with someone you trust for ideas that might help with your recovery.
Check any coping skills that you want to learn:**

- Learn ways to handle anger
 - Learn ways to handle stress
 - Learn ways to handle anxiety
 - Get more exercise
 - Eat better
 - Develop better sleep routines
 - Have more meaningful/fun ways to spend time
 - Other ideas:
- Develop routines that help get things done
 - Learn how to think through problems
 - Learn how to be less impulsive
 - Learn ways to get support from others
 - Get help managing money
 - Find a sponsor/mentor

Now that you have identified which coping skills you think would work for you, number them in order of importance. Put a 1 next to the skill you'd like to start working on first, and so on. You and your counsellor can use this information to set goals for your recovery.

Make a plan to get started. Work with your counsellor to select a goal that can be completed in the next week or two. If feelings of anxiety are a problem, you might set a goal to read Chapter 19 (see page 105). If you're feeling lonely or bored, plan something that will give you a chance to be with people in an environment that will not encourage you to drink or use drugs.

This week I will:

Chapter 5

Thoughts, feelings and substance use

Goals

- To understand the link between thoughts, feelings and addiction
- To begin to identify the thoughts and feelings that are associated with addiction
- To identify coping strategies that will help in any situation



Information

Substance use becomes an addiction when a person goes from social use to needing a drug. Remember that drugs and alcohol trick the brain into thinking that they are something that is needed for survival. People who are addicted believe that they need the drug, or alcohol, to feel well emotionally and physically. They also continue to use to prevent symptoms of withdrawal (the shakes, anxiety, etc.). The feelings that are caused by addiction and that keep addiction going are very strong. They may override your sense of reason and make you do things that you would not do for any other reason. Stopping the use of drugs and alcohol is only one part of the problem. A person with an addiction must deal with the thoughts and feelings that make them want the drugs or alcohol in the first place.

The Alcoholics Anonymous program makes use of the word HALT as a way to remember how important it is to stop and think about how they are feeling.

Hungry **A**ngry **L**onely **T**ired

Self-assessment

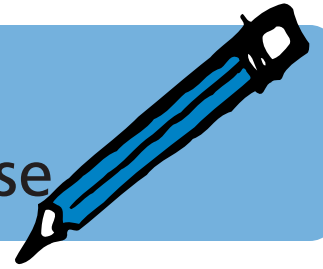
When a person is using substances they often get into the habit of thinking in ways that keep them stuck in their situation. This is known as stinky thinking. Often those addicted to substances have had to lie or cover up so much that they have forgotten how to be honest with themselves.

Which kinds of stinky thinking have you noticed in yourself?

- Entitlement** I deserve it! I worked hard all week
- Lying** I used to have a problem but I don't anymore.
- Victim stance** I've had a lot of frustration in my life. That's why I drink.
- Grandiosity** I'm OK...I'm in control.
- Hop over** It's alright, today won't count.
- Boredom** It's Saturday on a long weekend and I have nothing to do.

Worksheet, Chapter 5

Thoughts, feelings and substance use



Which of these examples of healthy thinking might help you stay on track?
Check any that apply and add some of your own.

- The best way to reward myself is being substance free.
- If I take it one day at a time, I can do this.
- Everyday is important. Today counts.

Other examples of healthy thinking:

Later in the workbook you will learn more about healthy ways to deal with strong feelings.

Chapter 6

First things first. Ideas to get started

Goals

- To make a list of things to do to help get started
- To make a list of early coping strategies

Information

Once you decide to make a big change in your life, it can then be hard to figure out how to start. Here are some ideas of things that you can do to support your new lifestyle:



- 1** Throw out all alcohol and drugs and anything that goes with them such as pipes, etc.
- 2** Stop seeing or talking to the heavy drinkers and drug users you know
- 3** Do what you can to avoid being around people who drink or use drugs
- 4** Change your phone number
- 5** Throw out the contact information of dealers or people who drink heavily
- 6** Try new activities that are drug-free
- 7** Try a self-help group such as Alcoholics Anonymous or Narcotics Anonymous
- 8** Talk to people you trust about difficult situations
- 9** Tell people who can and will help you quit drinking or using drugs what you are doing, let them know what they can do to help
- 10** Have your money deposited directly in your bank or get help to manage your money

Plan

Here is a plan to help you get started on the road to avoiding drugs and alcohol.
Fill in the blanks:

On (date) _____ I will get rid of the following items:

I will avoid the following people:

I will avoid those people by doing the following things:

Here is what I will say if I do have to speak to those people:

I will not go these places:

Doing these things will make it easier to avoid those places:

These are people who I can count on to help me:

Here are the things they can do to help me:

These are things that I can do that will be safe and healthy:

These are places I can go that will help me avoid using drugs or alcohol:

Chapter 7

Saying no to alcohol and drugs

Goals

- To learn how to say no to drugs and alcohol
- To practice using Top 5 Motivators to keep on track



Information

If someone is too interested in what's in your glass, it's their problem, not yours.

When you decide to stop using alcohol or drugs, one of the most difficult situations you will come across is having people offer you a drink or drugs. Some people will encourage you to drink or use drugs even if they know that you are trying to make a change. (There are more ideas for being assertive in Chapter 16, see page 93.)

It is more common than you might think for people who do not have brain injury and who are not fighting substance use to choose not to drink on any given occasion. You may feel self-conscious but you do not have to explain why you are saying no. Try to remember that for other people it is no big deal, and no one will think it is out of the ordinary if you refuse.

Some tips

- Look the person in the eye, so they know you mean what you are saying
- Say no thanks right away without offering an explanation
- If you don't get into a conversation about your decision, the conversation will end more quickly
- If the person offers again, say no again and ask the person to stop offering/asking
- Suggest something else to do or ask for something else to eat or drink
- Change the subject
- Leave the situation if you feel uncomfortable
- Remember it's your choice—you don't have to explain your reasons
- Use your Top 5 Motivators card to remind you why you are not using drugs or alcohol
- Feel proud of your choice.

Plan

Use this worksheet to plan ahead for the times you will find yourself in situations that you might find hard to handle. We have given you a few examples, now fill in situations that you think you might face, and solutions to those situations.

Who will ask or offer	Where and when	Who/what can help
My cousin Frank	At a family party	My brother
<p>What I can say and do</p> <p>I'll tell Frank that I'd rather have a Coke, I'll go get a Coke.</p> <p>Ask my brother to hang out with me for a while</p> <p>Take a walk away from the party</p> <p>Look at my Top 5 Motivators card</p>		

Who will ask or offer	Where and when	Who/what can help
My friend Marty	Phone call to my house	Answering machine Prompting notes by telephone or counsellor
<p>What I can say and do</p> <p>Make sure I have my top 5 reasons card</p> <p>I'll keep a script by the phone to remind me of what I want to say: for example – <i>I don't want to party with you, I'm done with that, please stop asking.</i></p> <p>I'll keep saying: <i>No thanks. Please stop asking.</i></p> <p>He asks for reasons, I tell him: <i>my mind is made up, I don't want to do that</i></p> <p>I'll end the phone call</p> <p>I'll screen phone calls</p>		

Who will ask or offer	Where and when	Who/what can help
What I can say and do		

Who will ask or offer	Where and when	Who/what can help
What I can say and do		

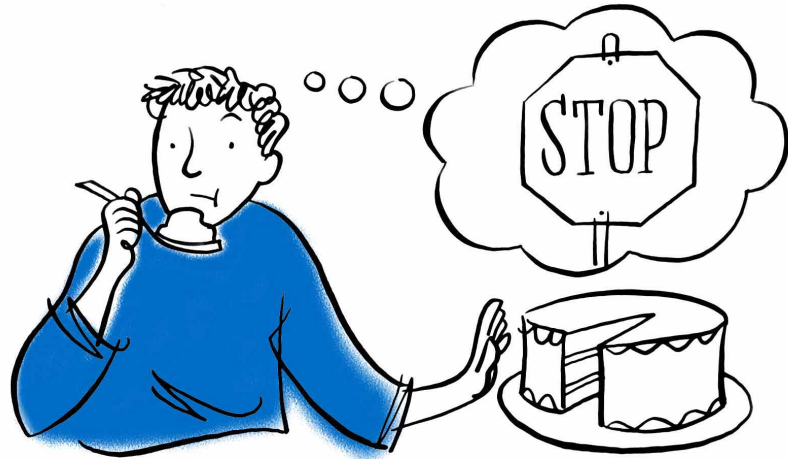
Who will ask or offer	Where and when	Who/what can help
What I can say and do		

Chapter 8

Coping with cravings

Goals

- To learn about cravings
- To develop coping strategies for cravings



Information

How do you know when you're having a craving?

Everyone who quits drinking or using drugs has cravings. A craving is the feeling that you want to get high. Sometimes the feelings are very strong and it is hard to think about anything else. Sometimes the feelings are weak and you can easily get your mind onto something else. You know you are having a craving when:

- You think about wanting to use drugs or alcohol
- You have some physical sensations, like a knot in your stomach or tension
- You find yourself thinking about how to get alcohol or drugs

The good news is that you don't have to drink or use drugs when you have a craving. You will have more control than you realize you are capable of over what you think and how you feel if you learn to stop and think.

Once you have started to pay attention to what you are thinking, find a way to be your own best coach. This won't be easy at first, but with practice it will get easier. Here are a few useful thoughts that you can review when you feel a craving:

- It's normal to have cravings, it does not mean that I am not getting better
- Cravings don't last forever, they go away whether or not I get high
- The longer I do not drink or use drugs the weaker the cravings get
- The longer I do not drink or use drugs, the fewer cravings I will have
- Cravings may be uncomfortable, but they won't hurt me
- I've been doing well
- I've worked hard, I don't want to spoil it now
- I can do this

Self-assessment


Stop and think

When you recognize the thoughts or feelings that go with a craving, stop and review this list of ideas. This will help you fight the craving. Check any or all you think you might work for you:

- Keep a picture of a stop sign in my wallet or purse or somewhere I will see it often
- Wear a rubber band around my wrist and snap it to stop the thoughts
- Review my reasons for avoiding drugs and alcohol
- Practice breathing or relaxation or meditation
- Distract myself with something interesting or fun
- Find a book, a song, a poem, a prayer or a picture of a person or place that gives me a feeling of hope and strength
- Have something to eat
- Listen to music
- Talk to someone I trust
- Write in my journal (see Chapter 9, page 53)
- Leave the situation or do something to change it
- Read my journal or workbook
- Pat myself on the back
- Make a list of my accomplishments
- Make a tape with a pep talk that I can play when I need it

Plan

Having a plan to cope with cravings will help. Practicing your plan before you need it will make it work even better. One way to get some good ideas about what to do is to think about a time when you didn't have a craving. What were you doing? Where were you? Who were you with? Use the following Coping Card of ideas to make your plan.

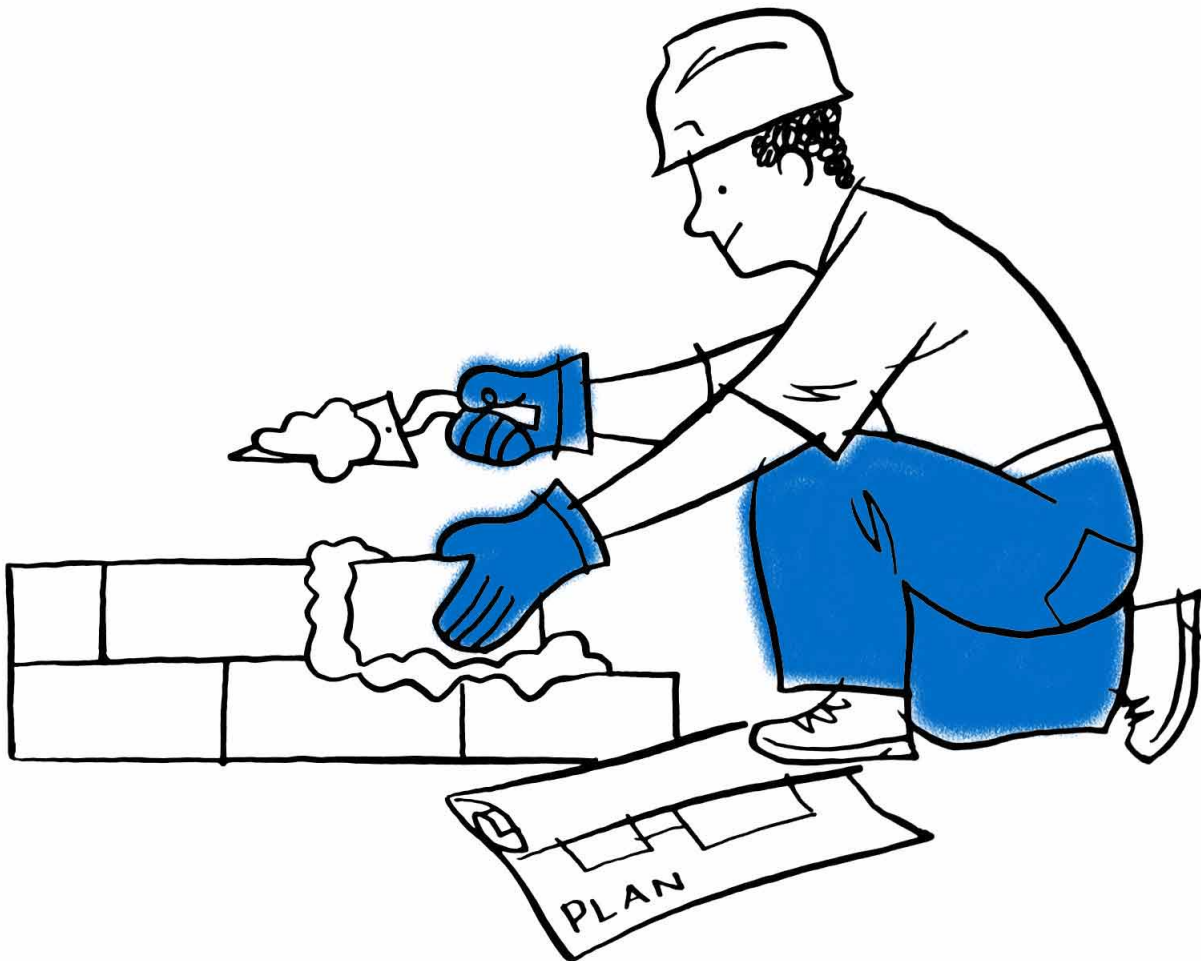


Coping Card *(Tape quarter for phone call and/or subway token on back)*

Top 5 reasons for change	Emergency Plan
1 _____	1 Leave the situation
2 _____	2 Go somewhere safe such as _____
3 _____	
4 _____	3 Take a few deep breaths and try to relax.
5 _____	
Call _____	Phone _____
Call _____	Phone _____
Call _____	Phone _____

Section 2

Tools to use during recovery



Chapter 9

Journaling

Goals

- To learn how to keep a journal or diary
- To learn how keeping a journal can help with recovery

Information

Being in recovery is a very busy time. You are learning a lot about yourself, your body and your thoughts and feelings. It's hard to keep it all straight. Having a record can help you to sort out your thoughts and remember what happened. It can also help you to keep track of the changes you are making. Journals don't have to always be words on paper. They can be artwork, a collection of pictures or images, tape recordings — anything that helps to remind you of important thoughts.



Here are some things to keep in mind that will make journaling easier:

- Focus on the good things that are happening
- Don't worry about grammar or spelling, it's your record!
- Write in point form
- Silence your inner critic
- Try drawings or diagrams — whatever works
- Write first thing in the morning to calm a cluttered mind

Self-assessment

How a keeping a journal can help:

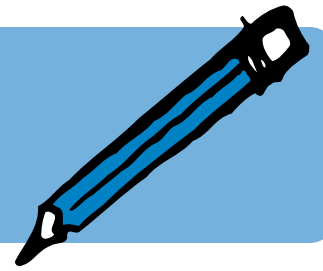
- Keep track of my thoughts and feelings
- Remember information
- Think through problems
- See my progress
- Remember what I've done well
- Keep track of ways to improve

What might keep you from journaling?

- Too busy
- Nervous about seeing a blank page
- Reading problems
- Writing problems
- Don't see a benefit in it
- Sometimes I don't like what I wrote
- I don't want a written record
- Fear
- Forget to make a note — don't think of it
- Don't know what to write
- Worried that someone else will find and read it

Worksheet, Chapter 9

Journaling



Ways to make keeping a journal easier

Check the ones that might work for you:

- You and your counsellor can make notes together
- Use a tape recorder and say a few sentences each day
- Plan to write in your journal at the same time each day
- Use music to help you relax and stimulate creativity
- Make copies of the form on the next page and use it daily

You might want to cut out the next page and ask your counsellor to photocopy enough copies for a week to get you started. Put them in a binder and have a special spot at home to keep the binder.

These are some suggestions for how to set up your daily journal and how it could work for you. Don't think too hard about it, even a few thoughts a day will help. You can write more on the back of the page if you have more to say.

Remember that it is for your eyes only. You don't have to share it with anyone.

Daily Journal

Date: _____

Today I... (List your main activities)

I made a step toward recovery by...

(Don't worry if it seems small. Was there a coping skill you learned or tried, something you learned about yourself?)

I've been thinking about...

Questions or things I want to remember to do...

Chapter 10

Being in groups

Goals

- To get information about being in therapy groups
- To identify the coping strategies needed to make being in a group easier
- To learn how peer support can help to reach goals



Information

Here are some ways of feeling more comfortable

If you have never attended group therapy before it can be a scary experience. Everyone feels uncomfortable at first. When you go to a group for the first time it is a good idea to make sure you have some basic information. Try to find out:

- Who is the group leader?
- What do people talk about?
- How long does the group last?
- How do they take turns talking? (Do they raise hands, or is it more like a conversation?)
- What does everyone in the group have in common? Why are they all there?
- Does the group have any special rules?

Most groups have some rules.

These can include:

Confidentiality

What happens in a group session is the private business of the people in the group. It isn't polite to talk outside the group about the people and what happens. They should show you the same respect. If you are thinking about what happened in a group and want to talk it through and you are not sure who to talk to about it, ask a program staff member or your counsellor. When in doubt, leave names out.

Show respect

Avoid the 'isms' like racism and sexism.

Be caring and empathetic

Try to see things from the other person's point of view. Put yourself in their shoes.

Start your sentences with the word "I"

For example, "I worry about..." Hearing about your experiences helps others, and helps them to feel at ease.

Be honest

That means telling the truth and trying to share your honest feelings.

Only one person talks at a time

Don't start side conversations.

Be a good listener

Making eye contact and nodding let a person know that you're still paying attention.

Ask for clarification

If you're not sure what someone means, ask.

Think about giving everyone a chance to talk

Try to keep your remarks to the point.

Avoid giving advice

Don't offer your opinion unless someone asks you what you would do.

Don't force your point of view on others

Arguing doesn't help.

Learn how to be positive when you're giving feedback to others

Think about how you would like to have others treat you. Blaming and shaming don't help.

Frequently asked questions about groups

What should you do if you have trouble paying attention, understanding what people are saying or you get too tired?

Let the leader of the group know before the session that attention and fatigue are a problem for you. Make a plan to get feedback. You could sit near the leader who can signal you if you seem to be drifting off, or you can signal the leader if you're feeling lost. In some cases it may be a good idea to admit your difficulty to the group and ask for their support. With notice, the group and the leader might agree that it is okay if you leave the room quietly for a little break to wake up. The main idea is to admit the problem and make a plan to manage it. Let the leader know that you will leave the room and where you will go.

What should I do if I get angry in the group?

The big advantage of group therapy is that everyone is there to learn with and from each other. There are bound to be people who you enjoy spending time with and others who are harder for you to get along with. If you know that this is a problem for you, make a plan with the group leader. Some ideas include letting the leader know that you will leave the room, where you will go, and how or when to talk about it later. And of course, you can work on your anger management outside of the group (see Chapter 16, page 93).

Sometimes I say things without thinking or I talk off topic. What can I do to prevent problems?

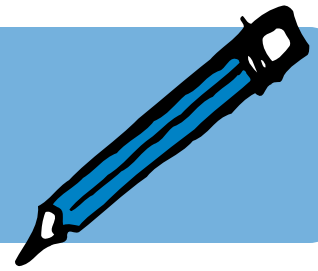
Let the group know that this is something that you are working on. Ask for their feedback. It can help to write out or plan comments before you make them. That will force you to edit. It may be possible to work on this in group. Be sure to talk about using this strategy first, so no one will question why you are writing during the group.

It's rude to interrupt, but sometimes I forget what I wanted to say while someone else is talking.

This is another time when writing notes may be a good idea. Again, let your leader or the group know why you are writing. If you have trouble thinking when you're on the spot, you can prepare some things to say before the group starts. Make a note of what you want to bring up. It never hurts to make a plan and ask for support.

Worksheet/plan, Chapter 10

Being in groups



If you do a little bit of homework before you begin you will be relaxed and gain more from your group sessions.

What should I let the group leader know about me?

How should I say it?

What coping strategies might be useful?

Check the ones you think you can use:

- Get there a little early
- Sit near the front
- Arrange a scheduled break with the leader
- Ask to have distractions removed
- Turn off my cell phone
- Ask the group leader to make a cue card with that day's topic and put it somewhere I can see it
- Make my own a cue card with the topic of the group to help me stay on topic

More Information

Self-help groups and 12-step programs

What are they?

A model for self-help groups originated with Alcoholics Anonymous. The goal of membership is to provide the social support needed to remain abstinent from drugs and alcohol — to stop drinking and to stop using drugs.

Who runs them?

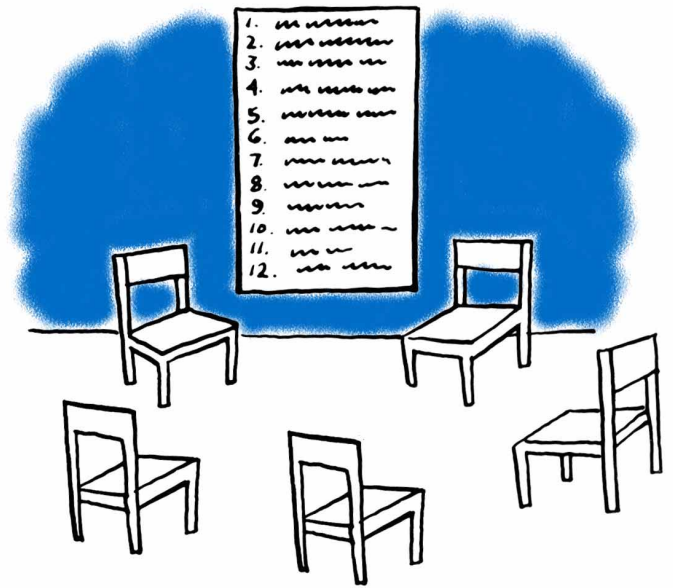
Local chapters of Alcoholics Anonymous (AA), Narcotics Anonymous (NA) and Cocaine Anonymous (CA) are led by people who have been successful in not using drugs or alcohol. Each of these groups is an independent organization, but all use the same model. National and local chapters provide support and literature. There is no charge to attend.

Who attends?

People who are willing to consider that their substance use is problematic.

Basic concepts of 12-step groups

- By following the 12 steps, you learn to take responsibility for your drinking or drug use, and how to change what you are doing
- Substance abuse is a disease that gets worse if you don't do anything about it
- The only way to get better is to stop using drugs or to stop drinking
- You stop using drugs or alcohol one day at a time
- The concept of spiritual life is discussed, but no particular religion is promoted



Frequently asked questions about AA, NA and CA

What are the 12 steps?

- 1** Admit that if you drink and/or use drugs your life will be out of control. Admit that the use of substances after having had a brain injury will make your life unmanageable.
- 2** Start to believe that someone can help you put your life in order. This someone could be God, an AA group, counsellor, sponsor, etc.
- 3** Decide to get help from others or God. Open yourself up to change.
- 4** Make a complete list of your past negative behaviours and any current behaviour problems that you would like to change. Also make a list of your positive behaviours.
- 5** Meet with someone you trust and discuss what you wrote in Step 4.
- 6** Become ready to sincerely try to change your negative behaviours.
- 7** Ask God for the strength to be a responsible person with responsible behaviours.
- 8** Make a list of people your negative behaviours have affected. Be ready to apologize or make things right with them.
- 9** Contact these people, apologize and make things right.
- 10** Continue to check yourself and your behaviours daily. Correct negative behaviours and improve them. If you hurt another person, apologize and make corrections.
- 11** Stop several times each day to think about how you are behaving. Are your behaviours positive? Are you being responsible? If not, ask for help. Reward yourself when you are able to behave in a positive and responsible fashion.
- 12** If you try to work through these Steps, you will start to feel much better about yourself. Now it's your turn to help others to try to do the same. Helping others will make you feel even better. Continue to work these Steps on a daily basis.

12 Steps of AA/NA developed by William Peterman, BS, CADC and reprinted with permission of the National Head-Injury Foundation Substance Abuse Task Force White Paper, Southborough, MA: NIF, 1988.

How do I find a meeting?

www.Alcoholics-anonymous.org will point you to a regional website. Your local phone book should list the number of the closest central office. These offices can provide you with a list of meetings. Ask your counsellor for help in finding this information.

What different kinds of meetings are there?

Open meetings

Open to anyone, regardless of whether or not they admit a problem with substance use

Closed meetings

Open only to people who are willing to admit they have a problem with substance use

Lead meetings

A primary speaker tells his or her story of recovery

Discussion meetings

Set in a more intimate setting, these meetings are usually a round-table discussion

How should I start?

- Most people usually like to start with open meetings
- It's okay to ask someone to go with you to an open meeting; it is a good idea for a counsellor or rehab worker to arrange to go with you until you feel comfortable
- Arrive 10 minutes early, this will give you a chance to adjust to the setting, look at the literature that is available, and select a seat; it's also a good time to make introductions

What happens in meetings?

- Meetings often start with reading the 12 steps
- Individuals who have met important milestones will be acknowledged; tokens, which look like poker chips, are given to participants after specific periods of staying away from drugs and alcohol
- In Lead meetings, the chairperson will introduce the speaker; the speaker will tell the story of their addiction and recovery
- People in the group may respond to the speaker; usually they provide words of encouragement or talk about how the story relates to their experience
- The formal meeting ends with everyone reciting the Lord's Prayer and an optional collection is taken to support the meeting
- People stay to talk and have a coffee

Do I have to say anything in front of the group?

- It is okay to attend an open meeting and just listen and observe what happens in the group
- All of the general rules for group mentioned earlier apply at AA/NA/CA meetings

What is Sponsorship?

Sponsors are mentors for people who are new to the 12-step group. Having a sponsor is optional, but is usually useful for people who are new to the program. The sponsor is a person who has experience with the group and can provide support along the way. People who act as a sponsor for people with brain injuries will need some information about brain injury. This can be found at www.chris.com.

Chapter 11

Making the most of your brain power

Goals

- To take an inventory of any cognitive problems
- To begin developing compensation strategies

Information

Working on your recovery takes a lot of brain power. There's a lot to pay attention to, learn, remember and think about. It's very common for people in recovery to notice that they are having problems thinking clearly, remembering details, learning new information or staying alert during the day. This may be due to both the effects of a brain injury and substance use. Developing compensation strategies works best if you are focused on a specific problem or difficult situation. For example, it's easier to figure out what to do if you are having trouble remembering appointments than it is to figure out how to handle a general memory problem.



Self-assessment

Most people find that they have some of the problems listed below at one time or another. Check the box that describes how often these things happen to you.

	Seldom	Sometimes	Often
Trouble remembering names or faces	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble understanding or remembering what I read	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forget what I want when I get to the store	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feel confused or irritated in busy or loud places	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forget something that happened	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forget appointments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have trouble making my mind up about some things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forget to do things I meant to do	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wonder if I'm using a word correctly, or have words on the "tip of my tongue"	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Daydream when I should be listening to something	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Misplace or lose things	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Feel fatigued during the day or get tired quickly when I have to pay attention or think hard	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have difficulty getting places on time	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have difficulty getting started on something	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Have difficulty getting something organized	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Get distracted while I'm doing something.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leave things unfinished	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble following directions or losing my place in tasks I know well	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Getting lost in a familiar place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Forgetting to take my medications	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doing something without thinking about the consequences	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Trouble thinking ahead	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

List any other changes you may have noticed, or problems that you know about from a previous illness or injury.

Talk about this questionnaire with people who can help you to get around any difficulties that you may have. With a little planning, these problems won't interfere with your recovery

More information

Compensation strategies

By addressing one issue at a time, it will be easier to overcome any problems you may have. Here are examples of situations and compensation strategies you can use to help.

If you have trouble paying attention:

Remove distractions

- Turn off the TV or radio when you're having a conversation
- Keep your work areas free of clutter
- Close windows/doors to keep noise down

Be an active listener

- Take notes
- Rephrase or repeat what you have been told
- Sit near the front and ask questions
- Let others know when your attention is fading

If you have problems with fatigue:

- Plan your most important activities for your best time of day
- Take a walk or move around to wake yourself up
- Ask for a break when you need it

Take good care of your body:

- Eat well (see Chapter 21, page 115)
- Get enough sleep (see Chapter 21, page 115)
- Exercise regularly
- Don't drink too much caffeine
- Talk to your doctor regularly
- Plan rest periods during the day

If you have problems with memory:

- Keep notes in a special notebook or day planner you can carry with you (this works better than bits of paper that can get scattered); keep it with you or in a special place so it doesn't get lost
- Make lists of things to do
- Note appointments on a calendar
- Keep a note pad by your phone to write down important information
- Keep your wallet, glasses and other important items in a special place at home so they don't get lost
- Place items you need to take with you in a place by your door
- Set alarms to remind you to take medication
- Make posters to remind you of important information
- Give yourself more time to learn new information, underline or make notes while you read and review information; use the **PQRST** method:

Preview what you need to read

Question yourself about what you will read

Read the material

Summarize the material in your own words and the answers to your questions

Test yourself after reviewing the information several times
(Try not to guess at information. This can interfere with learning.)

If you have problems with planning or time management:

- Get in the habit of making a daily plan, using your schedule and a "to do" list
- Review your plan first thing in the morning and again several times throughout the day
- Before going to bed, review what you have done and make a plan to complete unfinished items

If you have problems with reasoning and problem-solving:

- Talk things over with someone you trust.
- Use the problem-solving strategies in Chapter 20 (see page 109)

Plan

Which compensation strategies do you and your counselor think might be helpful to you? Write down your ideas.

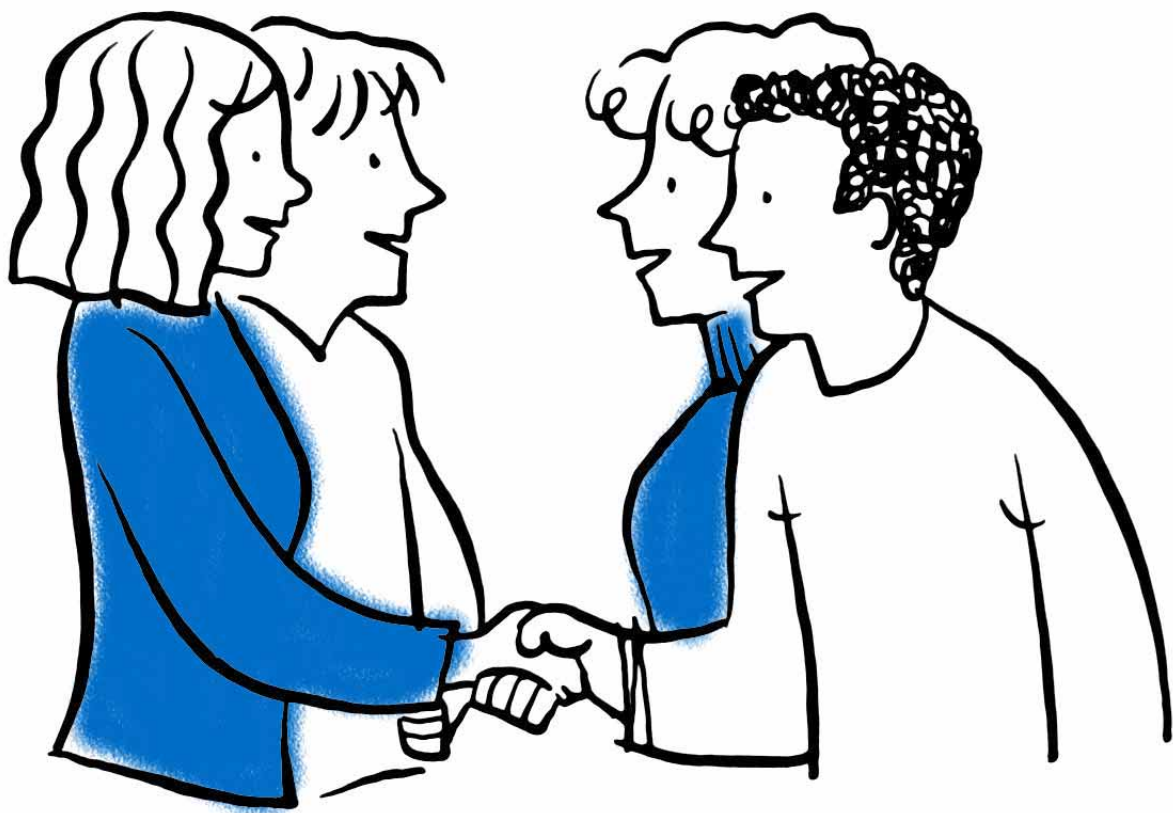
What Problem(s) are you having? (e.g. forget appointments)

Which strategies will you try? (e.g. keep a calendar)

How can your counselor/workers help you? (e.g. call to confirm appointments)

Section 3

Understanding yourself and your relationships

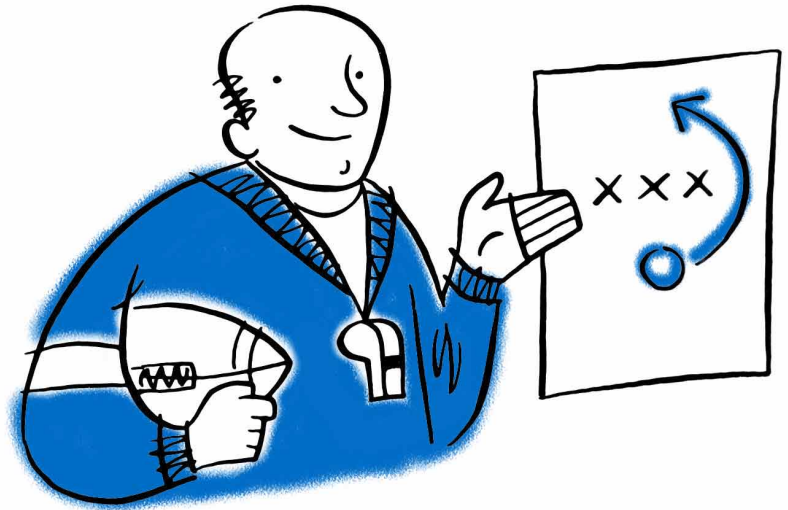


Chapter 12

Being your own best friend

Goals

- To learn about the concept of self-talk
- To recognize self-talk
- To understand how to make own self-talk more productive



Information

Do you remember a great teacher, coach or friend?

If so, it is probably because they helped you in one or more of these ways:

- Helped you set realistic goals
- Predicted that you would be successful
- Told you what you did right
- Gave you specific tips about how to improve
- Encouraged you to keep trying even when things didn't work out
- Helped you learn from your mistakes
- Listened to your feelings without being critical

Self-assessment

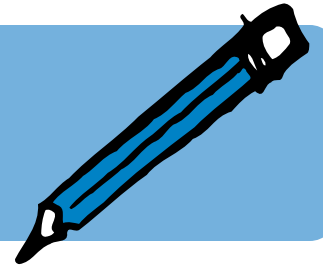
Self-talk is the conversation everyone has going on in their heads about what they are doing, how they are doing and whether they should or should not be doing it. You have probably noticed that you have self-talk going on in your head all of the time.

What kind of friend are you to yourself? Look through the following examples. Check the ones that most sound like the way you talk to yourself.

The situation	Critical and negative	Helpful and supportive
You are getting ready to do something hard	<input type="checkbox"/> You'll probably screw this up too <input type="checkbox"/> You're so stupid <input type="checkbox"/> You can't do that	<input type="checkbox"/> Just do your best <input type="checkbox"/> Take things one step at a time <input type="checkbox"/> You've done things like this before <input type="checkbox"/> You can do it!
You did something well	<input type="checkbox"/> Anyone can do that <input type="checkbox"/> You could have been better, faster, smarter	<input type="checkbox"/> Good job <input type="checkbox"/> You made the effort <input type="checkbox"/> You did it
You make a mistake	<input type="checkbox"/> You are an idiot! <input type="checkbox"/> You can't do anything right!	<input type="checkbox"/> You tried your best <input type="checkbox"/> You can learn from this <input type="checkbox"/> You'll get it right next time — make a plan
You feel upset	<input type="checkbox"/> You're such a baby <input type="checkbox"/> Other people can handle this, why can't you? <input type="checkbox"/> You shouldn't feel angry or sad	<input type="checkbox"/> Whatever you feel is okay, feelings are there for a reason
Someone says something that hurts your feelings	<input type="checkbox"/> He's right, you're a failure <input type="checkbox"/> You're unlovable	<input type="checkbox"/> There are people who care for you and who understand you
You are looking at a magazine	<input type="checkbox"/> You're ugly <input type="checkbox"/> You look awful	<input type="checkbox"/> You're doing the most with what you have; you don't have to be a model to be attractive <input type="checkbox"/> Most people don't look like the people in magazines and movies

Worksheet, Chapter 12

Being your own best friend



Think about the way you talk to yourself in new or uncomfortable situation. Is it negative self-talk or positive self-talk that you hear? Use this chart to help you move through a negative approach and find a positive approach.

Negative self-talk

When I don't like me, I tell myself ...

e.g., ***How could I make that mistake?
I'm so stupid!***

Positive self-talk

When I make a mistake, I can say to myself...

e.g., ***Everyone makes mistakes,
I'll try to do better next time.***

Chapter 13

Building self esteem

Goals

- To understand what self esteem is
- To learn what to do to improve self esteem
- To take responsibility for working on self esteem

Self-assessment

People who feel good about themselves generally have more success. To do well in recovery, it is important for you to work on building your self-esteem. Use the self-assessment checklist below to understand more about what self-esteem is and then make a plan for building yours.

These are ways of building good self-esteem. Which do you do?

- Feel and think about myself in a positive way
- Have a sense of well-being and respect for myself
- Take care of myself physically and emotionally
- Spend time with people whom I respect and who respect me
- See my accomplishments as worthwhile
- Express my feelings in a way that is respectful of others
- Let myself be, without pushing or judging myself
- Let others be, without pushing or judging them
- Accept and thank others for positive comments
- Balance my needs with those of others
- Admit mistakes and move on
- Make self-talk my best friend

These are ways to reduce your self-esteem. Which do you do?

- Not stand up for myself
- Have critical self-talk about not being good enough (smart enough, fast enough, etc.)
- Not ask others for what I need in a direct, healthy way
- Not ask for help when I need it
- Stay trapped in old negative ways of thinking and behaving
- Don't believe — not believing in myself
- Try to please others and put myself last



Plan

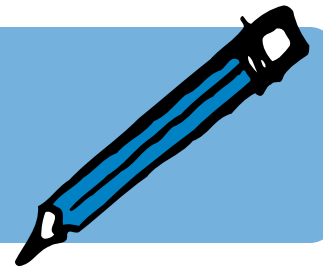
Begin to work on your self-esteem today

Here are some ways of boosting your self-esteem that will have an immediate positive effect. Check any or all you think would work for you:

- Take care of my body; groom and dress myself in a way that makes me feel proud
- Make a list of my strengths
- Do something I am good at
- Help someone
- Set a goal and go for it
- Complete the worksheet on the next page
- Talk to my counsellor about how things I heard as a child might affect how I feel about myself now
- Other:

Worksheet, Chapter 13

Building self esteem



Use this chart to list all your strengths and the things you do that make you feel good:

My strengths

What do you like about yourself?

e.g., *I have a good sense of humour*

Feeling good

What things do you do that make you feel good?

e.g., *I hang around people who enjoy my sense of humour*

Chapter 14

Building healthy relationships

Goals

- To learn about healthy boundaries in relationships
- To learn what it means to intrude on personal boundaries
- To learn how to bring relationships with others into balance



Information

The amount of sharing and privacy between people is what makes up the boundaries in a relationship.

Personal Space

This is the amount of physical space people like to have around them and how much physical contact they like to have. For example, some people don't mind when a friend pats them on the back or touches their shoulder, but would be uncomfortable if someone they just met did this. Some people hug friends — others are uncomfortable with that. There's no right or wrong. When a person has good boundaries they respect others' personal space and watch out for signs that a person is uncomfortable. For example, when you reach out to pat or hug someone and they step away from you, or pull away, or change their facial expression — that means they are uncomfortable. Generally it's enough to quickly apologize or step back. It's usually a good idea to ask for feedback if you are unsure. Use the self-assessment in this chapter to learn more about personal boundaries.



Healthy
boundaries



Collapsed
boundaries



Rigid
boundaries



Self-assessment

**Do you show any of these signs of collapsed, or poor, interpersonal boundaries?
Check off any that apply to you:**

- I tell all before I know I can trust someone
- I talk to someone as if we are best friends the first time we meet
- I go against my own values to please someone else
- I don't notice when someone else is showing poor boundaries
- I take whatever I can for the sake of getting whatever I can
- I give whatever I can for the sake of giving
- I let someone hurt my feelings or abuse me
- I let others tell me how I should think or feel
- I let others tell me what is important
- I expect other people to fill my needs without asking
- I get weak or fall apart so that someone will take care of me
- I do things to hurt myself (self-abuse)

Do you show any of these signs of rigid boundaries?

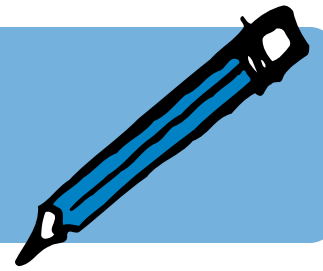
- I don't tell anyone how I feel
- I don't trust, even after I have had time to get to know someone
- I feel that others are likely to hurt me — that I am all alone
- I expect others to do things my way, or go away
- I don't ask for help
- I don't offer help or support
- I stop/close relationships before they get started

How do you demonstrate healthy boundaries?

- I can say no to requests in a nice way
- I am okay when others say no to me
- I have a lot of self respect
- I expect give and take in a relationship — what I would do for them, they would do for me
- I share responsibility and control
- I share personal information as I get to know someone, and they share information with me the same way
- I don't tolerate being abused
- I know what I need and want and express myself assertively
- I value my own opinions and are open to and value others' opinions
- I ask for help when I need it
- I don't push my own values aside to avoid being rejected

Worksheet, Chapter 14

Building healthy relationships



This worksheet is about boundaries. Work through it and you will learn important information about yourself and your relationships.

What is important to me in my relationships with friends?

What is important to me in my relationships with family?

What is important to me in my relationships with a spouse or partner?

How has my alcohol or drug use changed these important relationships?

What do I need to change in my relationships to help me in my recovery?

What steps do I need to take to change or improve my relationships?

Chapter 15

Building a support network

Goal

- To understand the types of support others can offer
- To begin making a plan for increasing support

Information

Recovery is hard work and it is important to have people around you who can help you along the way. Using drugs and alcohol may have caused problems in your relationships and you may feel that you are not getting much help from other people right now. You may have the most contact with people who are still using or who are not very supportive. It's a good idea to think about where you can get the help you need.

Professionals, such as support workers, doctors and counsellors can be supportive, but their time is usually limited. That's why it is important to think about getting support from different places.



What kinds of social support should you look for?

Emotional

someone who will listen to you and who you can talk to about feelings

Moral

someone who will encourage you

Practical

someone you can ask for help with everyday tasks such as transportation

Mentorship

someone you can look to for guidance and instruction

Recreational

someone you can have fun with

Self-assessment

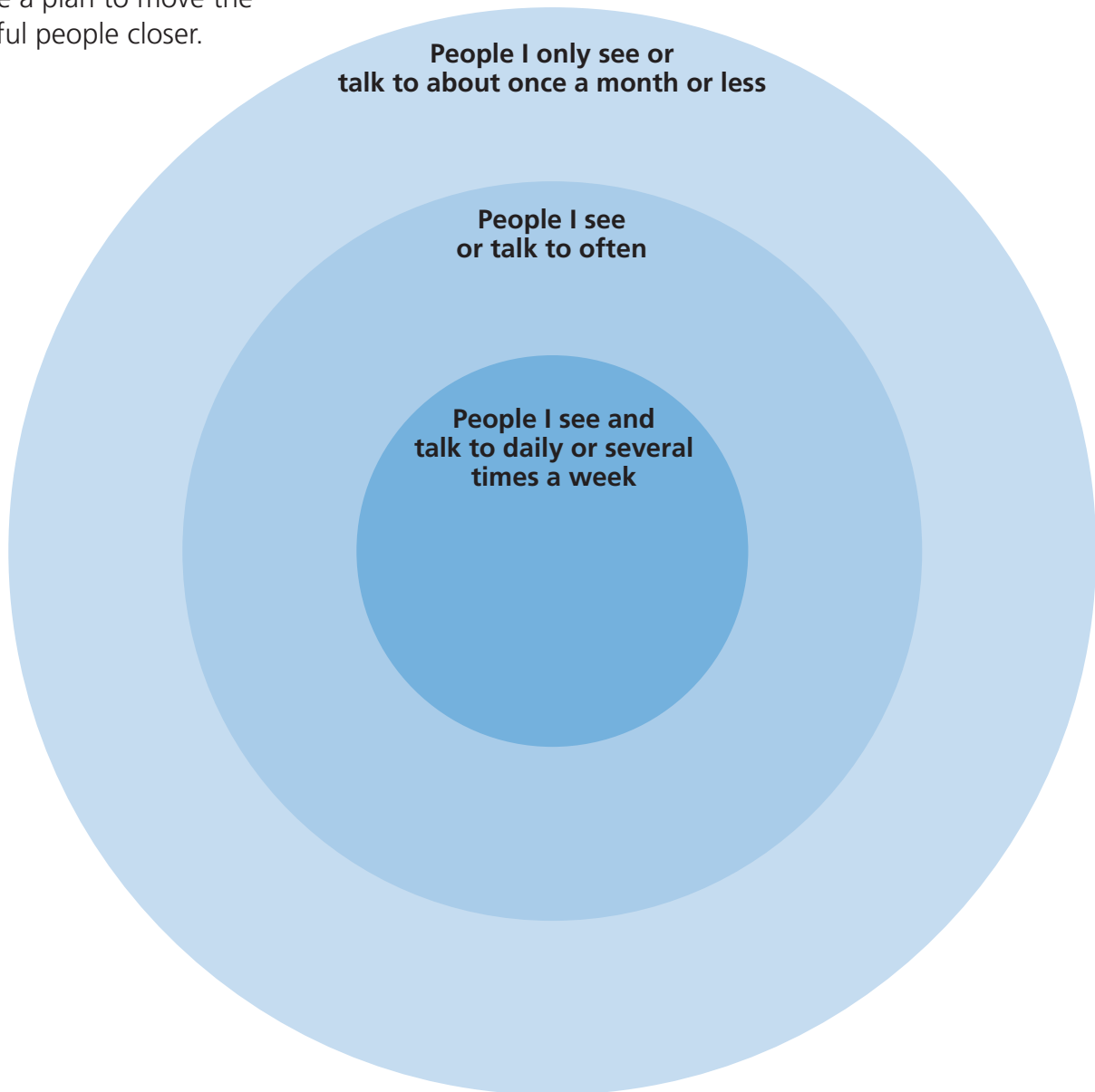
Who is in your life right now?

By completing this exercise you will be able to get a good idea of how everyone you know fits into your life. By identifying and labelling everyone, you will be able to see more clearly who might best help you in your recovery.

Put the names of people on the chart according to how often you see them. Circle the names of people who are now or could be supportive.

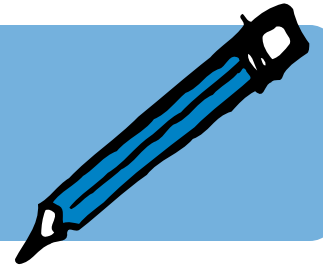
Put an X by the names of people who are not supportive or who might be harmful in some way. Try to move the unhelpful people away from the centre.

Make a plan to move the helpful people closer.



Worksheet, Chapter 15

Building a support network



Now fill in the following chart. Refer to the list above to help you think of your unmet support needs. For example, if you'd like to start playing baseball again and have no one to take you, write that down. Then think of someone who could take you there and perhaps even play and then plan how you will contact that person. Look at the circle on the previous page (page 88) to get ideas of who you could contact and who you should not contact.

What do I need support with?

Who can I ask?

What is my plan?

Section 4

Coping Strategies for life



Chapter 16

Assertiveness



Goals

- To understand what assertive behaviour is
- To begin making a plan to practice assertive behaviour

Information

Taking care of yourself by being assertive, not aggressive

Being assertive means expressing your thoughts, needs and feelings in a direct way that is respectful of others' rights. When you are assertive, you are taking care of yourself and managing your anger. Most people have different styles of coping with their feelings. Check the boxes of the coping styles that you think apply to you. (The last style, being assertive, is the most productive way to handle your anger — making everyone involved feel good and getting what you need.)

Basic Coping Styles

Passive

- Avoids conflict
- Neglects own needs
- Feels inferior to others
- Often feels hurt, anxious, resentful and frustrated

Aggressive

- Intimidates others to get what they want
- Causes conflict
- Insensitive to other people's feelings or wishes
- Feels hostile, superior and wants power and control
- May have feelings of guilt after behaving aggressively

Passive/Aggressive

- Indirect with feelings
- May be passive at first, and then blow up
- Won't talk about what is really bothering them
- May make sarcastic or cynical remarks
- Feels resentful and looks for revenge

Assertive (best)

- Able to tell people how they feel without putting anyone down
- Direct and honest communication
- Feel good about themselves, but not by putting others down
- Willing to compromise
- Feels respect for others and themselves

How to make an assertive statement

Use this formula to make an assertive statement.

It's usually best to keep your statement to one or two sentences.

Describe what is happening

I think...

Just the facts (no judging or blaming)

Express your feelings

I feel...

Give your honest reaction without blaming or intimidating

Specify what you want

I would like it if you would...

Be specific enough so that a person can really do what you are asking

Consequences

I think we would both benefit because...

State the payoff for you and the other person

Example:

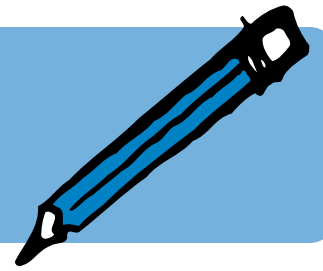
I think you have asked me to do a lot of work, and **I feel** overwhelmed

I would like it if you would make me a list so I know what to do first

We will both benefit because I will work better and get more done

Worksheet, Chapter 16

Assertiveness



Think of a situation when you wished you had stood up for yourself or one where you blew up and regretted it.

Where were you?

Who were you having a problem with?

What did they want from you?

How did that make you feel?

How did you respond?

Now, practice three different assertive statements that would have worked for you in that situation.

1 _____

2 _____

3 _____

Plan

Tips for learning to be more assertive

- Practice difficult situations; you might even make a script for yourself and go over it
- Ask someone supportive to role-play with you; start by role-playing a person who responds well to your message; then practice what to do if someone disagrees, or has an aggressive response to you
- Remember that you have a right to your feelings; you don't have to justify your feelings or argue; sometimes restating your main point in a simple way is all that is needed

Example:

I think that you've asked me if I want a drink several times now, and ***I'm feeling*** a bit pressured. I would prefer it if you would stop asking, please. ***That way I'll feel more relaxed and we can both enjoy the party.***

Supportive response:

***I'm sorry, I didn't mean to pressure you.
Let's enjoy the party.***

Your response:

Thank you for understanding.

Unsupportive response:

I thought you would have more fun, relax a little. Don't be so sensitive, I wasn't pushing.

Your response:

I was just letting you know what was on my mind. Let's get back to the party.

Aggressive response:

***Boy are you a killjoy.
Too good to have a little drink?***

Your response:

I am sticking to soft drinks tonight.

It takes practice to be assertive. Keep working at it. Don't be discouraged if you have trouble thinking on your feet. Learn from situations that come up and practice your responses for difficult times you can foresee.

Plan ahead

Are there situations that you prepare for ahead of time? Saying "no" to a request? Asking someone to stop or start doing something? Plan your statement here. Ask someone to role-play with you. Practice responding to supportive and unsupportive replies.

Chapter 17

Dealing with boredom

Goals

- To learn about the benefits of using leisure time constructively
- To begin a plan for leisure time that supports recovery

Information

Being bored is often a trigger for drinking or using drugs. If your way of spending free time included using drugs or alcohol, or you were bored much of the time, you need some new activities. They might actually be a new coping strategy that will benefit you in many positive ways.



The benefits of leisure activities

- Reduces boredom
- Healthy form of escape
- Decreases stress and tension
- Gives a sense of personal well-being
- Helps regulate sleeping and eating
- Gives life balance
- Increases socialization and makes you feel like you are part of the community
- Gives you a focus
- Creates a sense of freedom
- Experience fun and pleasure
- Leads to self discovery
- Creates a sense of control and accomplishment
- Allows for creativity

Self-assessment

Which of these problems has kept you from making good use of your free time?

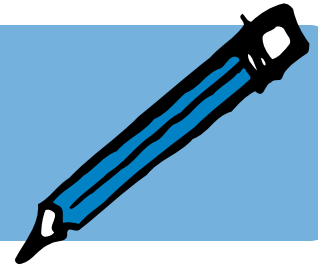
- Easy to fall into past habits (e.g., first choice — turning on the TV)
- Lack confidence to try something new
- Hard to make time for recreation
- Limited budget
- Trouble thinking of ideas
- Transportation — getting where I want to go
- I miss doing things I used to do, but now they are more difficult to manage
- Not having someone to do things with
- I'm in a bad mood, and I don't feel like having any fun
- I'd rather have a job
- Other:

Which of these goals for free time are important to you?

- Finding an activity that is meaningful
- Being helpful to others
- Meeting people/making friends
- Learning something new
- Being creative or making something
- Relaxing
- Working off physical tension
- Getting in shape
- Other:

Worksheet, Chapter 17

Dealing with boredom



It can be hard to think of things you want to do. Use this check list to get some ideas. It's best to have a variety of ideas that include things that you can do alone or with others, at home or in the community.

Social / Group activities

- Team sports
 - Clubs/organizations
 - Volunteering
 - Church/religious
 - Sing in a choir
 - Adult/recreation classes
 - Other
-

Creative Activities

- Arts/crafts (painting, woodworking, knitting)
 - Music (singing, playing an instrument)
 - Photography
 - Creative writing
 - Drama
 - Dance
 - Other
-

Things you do on your own

- Go to library
 - Computers
 - Puzzles (wordsearch/crosswords)
 - Jigsaw puzzles
 - Listen to music
 - Meditate
 - Make art
 - Other
-

Outdoor

- Picnic/cookout
 - Hiking
 - Water sports/boating
 - Gardening
 - Fishing
 - Other
-

Physical activities

- Swim
 - Bowl
 - Golf
 - Fitness
 - Walk
 - Tennis
 - Other
-

Spectator

- Watch sports
 - Go to a play/museum/concert
 - Go to a movie
 - Games
 - Trivia
 - Board games
 - Cards
 - Other
-

Some ways to get ideas

- Look through your community recreation guide
- Read the newspaper — look for free and low-cost events
- Ask people to talk about what they like to do

Plan

Use this worksheet to start making your plan.

What I would like to do	Barriers/challenges	Possible solutions	Action plan
Go bowling	Don't know bowlers	Find league	Get community recreation booklet Ask at bowling alley
Gardening	Live in apartment Don't know much about it Don't have much money	Start with potted plants Find local gardening club and volunteer	Visit city gardens and volunteer

This week, I will....

- Make a list of three things that I can do on my own, without much planning.
Keep the list where I will see it when I'm bored.
- Complete my action plan

Chapter 18

Coping with strong feelings

Goals

- To learn to cope with strong feelings
- To begin planning coping strategies to deal with strong feelings

Information

As human beings, we all have feelings. Feelings are important to our survival because they get us to pay attention to what is happening and change our behaviour to deal with the situation. For example, we feel anxiety, or anger when something or someone threatens our well-being. When there is danger approaching, we get anxious, which should make us more careful. When someone threatens us, or a need is frustrated, we get angry — which gives us the energy to fight for what we need. Even though emotions are helpful, they can also lead us astray. For example, anxiety is only good for you if there really is something dangerous around. Anger is only useful if there really is something important to fight for, and you are in control enough to be assertive (not aggressive). (See Chapter 16, page 93, to learn the difference between being assertive and being aggressive.)

When you have a strong feeling, it's wise to use your head to decide what is causing you to feel that way, and then figure out the best thing to do.

This isn't always easy. Planning ahead for difficult situations is probably the best way to avoid problems. Making plans with your counsellor or other support people in your life can help you to avoid any problems you have managing emotions. It's not enough to just try harder. You need to have a plan.



Emotional maturity

Those addicted to drugs or alcohol use those substances as a way to cope with strong feelings. When they stop using the drugs, the feelings come back. The trouble is that during the years that they were using drugs or alcohol they were not learning about other ways to deal with feelings. That means that when they stop using they have some catching up to do before becoming an emotionally mature adult.

Being an emotionally mature person means that you take responsibility for your feelings. You think things through to be sure that your feelings are not leading you astray. If you have problems managing your emotions because of a brain injury or some other difficulty, then it is important to recognize this and get the support you need.

You shouldn't ignore feelings, but you need to recognize them and deal with them before they make you feel overwhelmed. Then you do what you need to do to manage the situation that caused them. You don't just react to feelings. You stop and think first.

Be aware of how you are feeling

To prevent becoming overwhelmed by strong feelings, make sure that you tune in regularly to your everyday feelings. Ideas to help you tune in include:

- Writing in your journal
- Meditating
- Talking to your pet or having an imaginary conversation
- Making the time to talk to someone you can trust

Stop and think

When you notice that you are having a strong feeling, taking a break from what is going on can be helpful. You might have to leave the situation, or just sit quietly where you are. Take a few deep breaths.

Know yourself

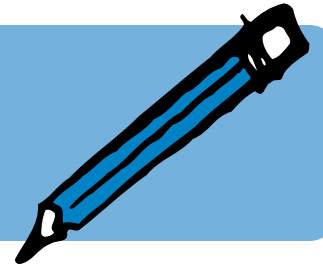
Think back — you will probably be able to name the kind of situations that lead to strong or unpleasant feelings.

Practice expressing your feelings

Letting others know how you are feeling takes time and practice. Going back to old habits of keeping your feelings bottled up or blowing up can be a warning sign of relapse.

Worksheet, Chapter 18

Coping with strong feelings



Are there feelings you are struggling with? What are they? Fill in the following chart and it will help you get a handle on which situations give you strong feelings and how you can handle them.

Use this worksheet to think through and plan ahead for ways to cope with strong feelings. The first two examples might help you.

What I was feeling	When does this happen?	How can I think differently about it?
Angry	Talking to my mother. I hate it when she tells me what to do. I'm an adult.	Whatever happens, it's my choice. She's just trying to help.
<p>What can I do?</p> <p>Keep conversations brief.</p> <p>Don't argue. Change the subject.</p> <p>Say goodbye, hang up or leave.</p>		

What I was feeling	When does this happen?	How can I think differently about it?
Sad	Thinking about my failures, usually when I see how well my sister is doing.	I'm making good progress.
<p>What can I do?</p> <p>Make a list of things I'm doing well.</p>		

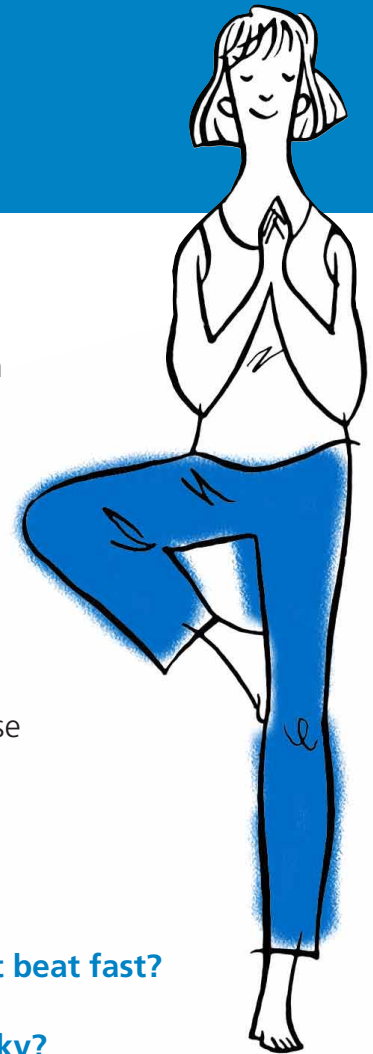
What I was feeling	When does this happen?	How can I think differently about it?
What can I do?		

What I was feeling	When does this happen?	How can I think differently about it?
What can I do?		

What I was feeling	When does this happen?	How can I think differently about it?
What can I do?		

Chapter 19

Relaxation



Goals

- To learn about the concept of releasing physical and mental tension
- To give an example of a relaxation technique

Information

It is very common for people to drink or to use drugs to relax. When you stop using drugs or alcohol, you may begin to notice some symptoms like headaches, trouble sleeping, or anxious feelings. If you are going to stay sober, you need another way to deal with these symptoms. You have to be on the lookout for symptoms of tension.

Self-assessment

Does your breathing change?

- Faster
- More shallow
- I hold my breath

Do you have tension in any muscles?

- Forehead
- Jaw
- Neck
- Shoulders
- Chest
- Stomach
- Hands
- Legs

Other:

Does your heart beat fast?

Do you feel shaky?

- Hands
- Knees

Do you get a sinking feeling in your stomach?

Do you have a nervous habit?

- Biting your nails
- Twisting your hair
- Grinding your teeth

More information

It is possible to learn to relax without the help of drugs. Learning to relax is a skill you can learn like any other skill. You have to learn it and practice it then you'll be able to use it when you need it. There are lots of different ways to relax including yoga, meditation, relaxed breathing and Tai Chi. They're all examples of ways to let go of physical and mental tension. In this chapter we're going to introduce a simple breathing technique. Try it and practice it. Be on the lookout for other relaxation techniques, try them and find the ones that work best for you.

Relaxation Exercises

Relaxed breathing works in two ways. It actually helps you breathe as if you were already relaxed, which sets your body on its way to letting go of tension; and it gives your mind something to focus on, which helps to relax you even more. Try the following exercises and then use the ones that work best for you.

Relaxed breathing

- 1 Find a comfortable, quiet place to sit or lie down; make sure that you are in a comfortable position, but don't cross your legs, your back should be supported
- 2 Close your eyes or find a spot on the wall to focus on
- 3 Put one hand over your belly button, and the other on your chest
- 4 Take in a slow deep breath through your nose; the hand on your chest should stay still; the hand on your belly should rise slowly
- 5 Imagine that your lungs are filling from the bottom up
- 6 Let your breath out slowly through your mouth
- 7 Take another breath only when you feel the urge to breathe; try to breathe with a slow natural rhythm
- 8 Take ten slow, relaxed breaths; each time, picture your lungs filling with air from the bottom up

Tips for relaxed breathing:

- Your tummy should go out when you are breathing in
- Your chest and shoulders should be still
- Your breathing should be at a comfortable, natural pace

Brief body scan

Find a comfortable place to sit or lie down. Close your eyes or look at a point on the wall. Take ten relaxed breaths. As you breathe, focus on the feeling of the air moving past your mouth and your nose. Each time you exhale picture the tension leaving your muscles. Imagine that the tension leaves your body with the air from your lungs. You may feel heavier or lighter with each breath. To help you focus, picture a blackboard with the numbers one through ten written on it.

Continue to breathe at a slow, relaxed pace. Now, starting with the muscles in your forehead, concentrate on each muscle group in your body. Work down your body to your toes. When you get to a tense muscle, take a few short breaths and release the tension. If you get stuck, then tense the muscle briefly and then let go.

An example of how to tense and relax muscles:

- 1 Think about the muscles in your forehead; are they tense?
- 2 Raise your eyebrows and hold them for a count of three seconds
- 3 Lower your eyebrows
- 4 Try again if you still feel tension

How to tense and relax specific muscle groups:

Mouth	Smile or frown
Jaw	Clench your jaw; then wiggle your jaw
Shoulders	Shrug your shoulders
Arms	Press your arms against your sides
Hands	Make a fist
Legs	Push against the floor
Feet	Curl your toes

Tips for practicing relaxation

- Take quick relaxation breaks during the day
- Put an appointment for relaxation on your schedule to remind you to practice
- Daily practice should be done in a quiet place without distractions; practice for five minutes and then increase the time slowly as you start to enjoy your practice.
- In addition to the relaxation exercises above, try some of the relaxation tapes that are available at the library or in bookstores
- Make your own tape with music you find relaxing

Chapter 20

Problem solving

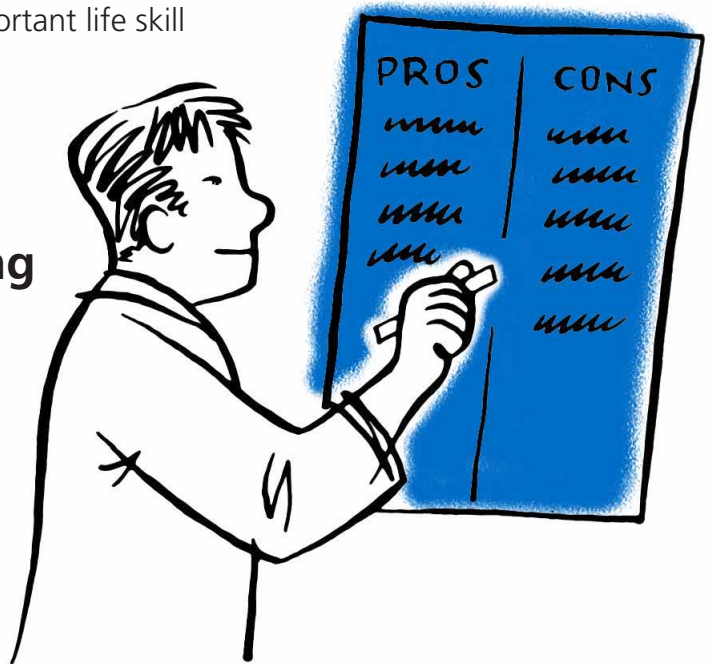
Goals

- To learn that effective problem-solving is an important life skill
- To understand how this skill will help recovery

Information

The six steps of problem-solving

- 1 **D**efine the problem
- 2 **B**rainstorm possible solutions
- 3 **R**ate the possible solutions
- 4 **A**rrive at a plan
- 5 **I**mplement the plan
- 6 **N**otes for next time



1 Define the problem

Once you have decided that a problem exists, take your time, think about it and see if you can get to the root of it. A good plan is to break a problem down into its parts. Try to write it as a statement, beginning with "I". For example, *I am bored* or *I would like a job*. Then try to answer these questions:

- What are the pros and cons of the situation now? (It's probably not ALL bad.)
- What do I need?
- What do I want?
- What are the barriers?

2 Brainstorm possible solutions

Write down possible solutions. Write down as many as you can think of, but don't be too critical of yourself. Ask people close to you for some suggestions.

3 Rate the solutions

Review the pros and cons of each solution. Consider them all carefully, then put them in order, starting with the one you like the most, down to the one you like the least.

4 Arrive at a plan

You might find that your favourite solution has some downsides to it. There may be a barrier of some kind to achieving it. Your counsellor, group, or someone close to you can help find a way around any obstacles.

5 Implement the plan

Follow your plan, making adjustments if you need to.

6 Notes for next steps

There is always something new to be learned. It is important to review the results of your plan so that you are ready if a similar problem comes up in the future.

Example

Andrew has a friend Susan with whom he used to spend a lot of time. Talking with his counsellor, he realized that even though he thought of her as a friend, she really was a drinking buddy. They only saw each other when they had money to buy drinks. He accepts her invitations to hang out and always feels sorry later because he ends up having something to drink. Andrew doesn't want to hurt Susan's feelings, and he does like the idea of spending time with a woman — even if she's just a friend. Susan isn't interested in giving up drinking. Andrew feels torn. He knows that seeing her isn't good for his recovery.

Here's how Andrew dealt with the problem:

1 Andrew defined it

I'm torn because I want to spend time with a person but that person is not supportive. Right now she's the only friend I have in my neighbourhood.

He broke it down into parts.

What do I want?

- To spend time with Susan.
- To spend time with a supportive person
- To avoid conflict with Susan
- To stay sober

What do I need?

- Sober friends
- The will and the skills to say no

What are the barriers?

- I spend a lot of time alone
- I'm still learning to be assertive

2 Andrew brainstormed it

Andrew discussed his situation with his counsellor and came up with lots of possible solutions. Here are a few:

- 1 Talk to Susan, and ask her to stop asking me to go drinking with her**
 - Pros:** Avoid drinking
 - Cons:** Hurt her feelings; feel lonely and bored; hard to say no because I have nothing else to do; I feel funny so I give in
- 2 Try to get Susan to spend time with me without drinking**
 - Pros:** Great if it worked
 - Cons:** Tried several times; wound up drinking
- 3 Get in touch with my cousin who doesn't drink and make plans to hang out**
 - Pros:** He's good company
 - Cons:** It takes time and bus fare to get to his place
- 4 Go to a 12-step meeting in my neighbourhood**
 - Pros:** Fills time; makes it possible to meet people
 - Cons:** Feel awkward at meetings
- 5 Move to a new neighbourhood**
 - Pros:** Get away from non-supportive friend
 - Cons:** Expensive; would still be lonely

3 Andrew rated the possible solutions

Andrew looked at his list and realized that he had to make a plan that helped him stop seeing Susan, and to deal with feeling lonely and bored. The cons of seeing his cousin and going to 12-step meetings seemed like things he could plan around. He decided to start there.

4 Andrew arrived at a plan

Andrew figured that it would be easier to say "no" to Susan's invitations if he had something definite on his schedule. It is easier for him to turn down a drink when he has somewhere else to be. Here's the plan he made:

- Practice assertive ways to say "no" to Susan;
Andrew and his counsellor practiced ways to say "no" even when Susan is persistent
- Ask for support to help add activities to his schedule
- Made a standing date with his cousin for Monday night to watch a video and have dinner
- Attend AA meetings on Tuesday and Sunday; make a point to stay for coffee
- Look for a volunteer job on Wednesday and Friday
- Schedule counselling for Thursday
- Make plans with family for one day on the weekend

5 Andrew **implemented** the plan

- He made the call to his cousin who was happy that there was something he could do to be supportive
- He and his counsellor found meetings he could attend
- He wrote times and instructions in his notebook so he wouldn't forget.
- He applied for a number of volunteer positions
- He talked with his sister and his parents about visiting them on the weekend
- He tried one volunteer job doing filing for a community centre
- He also sold hot dogs at the stand during the kid's hockey games

6 Andrew made **notes** for next steps

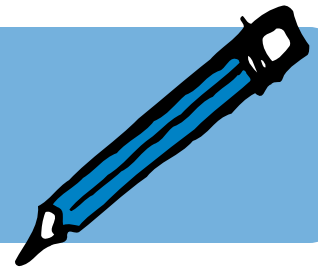
Andrew did find that it got easier each time he said "no" to Susan. After a few weeks she stopped asking, but he sometimes felt very sad and lonely. He talked with his counsellor about losing his friend and about being worried about her.

Andrew was shy at 12-step meetings — a problem he hadn't realized. He is used to socializing while high. Andrew and his counsellor added "coping with anxiety" to their plan.

Andrew figured out that he feels most comfortable being social when he's active, when he's doing something — he liked volunteering at the hockey rink better than 12-step meetings. He got to talk about hockey with the players' parents and enjoyed watching the kids' games. He plans to look for other volunteer jobs that will help him meet people who have interests like his own.

Worksheet, Chapter 20

Problem solving



Think of a problem in your life that you would like to solve. Use the same exercise as in the example with Andrew.

1 Define the problem

What is happening now?

Break the problem down into parts

What do I want?

Barriers

What do I need?

Barriers

2 Brainstorm possible solutions

3 Rate possible solutions

Possible solution

Pros

Cons

4 Arrive at a plan

5 Implement the plan

6 Notes for next steps

Chapter 21

Staying healthy

Goals

- To get basic information about eating right
- To get information about physical activity
- To get information about getting a good night's rest
- To start setting personal goals for staying healthy



Information

Why is eating right important to recovery?

People who are actively using drugs and alcohol often neglect to take care of their body. Eating well helps their bodies recover. Sometimes feelings of fatigue are actually caused by early signs of malnutrition. Eating well can help you to feel better sooner.

Eating right

The body needs more than 50 different nutrients, like vitamins, each day. To get them you need to eat a variety of foods. The Canada Food Guide is a good place to start to learn about nutrition. You can get a copy from the Health Canada Web site at: http://www.hc-sc.gc.ca/fn-an/nutrition/index_e.html. The main food groups are: grains, vegetables, fruits, milk products and meat products and alternatives. The healthy diet that Health Canada recommends is mostly grains and fruits and vegetables and a few servings of milk products and meat (and other high protein foods) per day.

Basic tips for eating well during recovery

- 1 Make small changes over a period of days so you'll stay with it.
- 2 If you don't feel like eating: Don't force yourself to eat a lot at one time. Have small meals that include foods that look good to you, and eat regularly to keep your energy up. (Using drugs and alcohol can change your appetite and it may take a while to get your appetite back.)
- 3 If you find you want to eat a lot: It is common for people to eat too much when they are feeling stressed, bored, upset or tired. If you find that you're using food as a coping strategy, then try to problem solve using other strategies, such as relaxation (see Chapter 19, page 105).
- 4 Choose foods with various textures and colours and arrange servings attractively on a plate. This will make eating more enjoyable.

5 Eat breakfast: A lot of people skip this meal, but it is important to eat something in the morning to give your body enough energy to start the day. You don't have to eat right away, but you should eat something within the first hour of getting out of bed. Also, try to eat something that contains protein. Protein breaks down slowly and keeps your energy level higher longer than other food groups. Leftovers from dinner might make a good breakfast. Here are some other examples of good breakfast foods:

Blender Drink

- 1 cup of skim milk
- 1/2 cup of fresh fruit
- 1 tablespoon of skim milk powder
- Honey or sugar to sweeten

Simple Breakfast 1

- Fresh fruit
- Low fat yogurt
- Whole wheat toast or muffin

Simple Breakfast 2

- Fresh fruit
- Whole wheat bagel with peanut butter
- Skim milk
- Fresh fruit

6 Eat often and snack right: Having a light meal or a healthy snack every three or four hours keeps your body supplied with energy all day and keeps you from feeling tired. It also helps prevent mood swings and cravings. Snacks should be light and include protein, such as low-fat milk, cheese, yoghurt and lean meats.

Snack Ideas:

- Fresh fruit
- Small handful of almonds
- Low-fat yoghurt
- A piece of cheese the size of your thumb, and four crackers
- A piece of lean meat on a piece of whole wheat bread

7 Keep sweets to a minimum: Candy bars, cookies, and other foods high in sugar may give you energy for a short while, but they will make you feel tired. They don't contain the nutrition you need and they may spoil your appetite for healthier foods.

8 Cut down on fat: Fatty foods are foods that are fried, like French fries and fried fish. They also include high fat meats like some sausages. Eating high fat foods can leave you feeling tired.

9 Limit your caffeine intake: Don't drink more than 3 or 4 servings of caffeine a day. That's one small cup (about the size of your fist) of coffee, a can of cola and small cup of tea. A lot of soft drinks contain caffeine — some more than coffee. Decaffeinated coffee has a very small amount of caffeine (about 3% of a regular cup of coffee). There is caffeine in some cold medicines, headache pills and weight loss products. So be careful and read the labels.

10 Drink enough liquid: Your body is made up mostly of water. You need water to be healthy. Drink six to eight cups of water a day. If you don't like water, juice works too — but don't overdo the sugar. Cola and coffee don't count as healthy liquids.

Get some physical activity

All it takes to be healthy is about one hour of activity in the day. That may sound like a lot, but introduce activities ten minutes at a time here, ten minutes at a time there — before you know it, you're more active. Health Canada has more information that may be useful. Go to <http://www.phac-aspc.gc.ca/pau-uap/paguide/start.html> for suggestions. Even if you have some difficulties with mobility there are lots of ways to add physical activity to your daily schedule. Your plan doesn't need to be complicated. Start off slow and build up slowly — that's the best way to make a lasting change in your habits.

- Take a ten-minute walk in the morning; walking and propelling a wheelchair are both good forms of moderate exercise
- A short routine of stretches that you can do in the morning or during the day will keep you flexible; if you have pain or limited mobility, ask your doctor or a physiotherapist for the stretches that would be best for you
- Take a few breaks during the day to walk or wheel
- Get off the bus or train a stop or two early, or park so you have to walk a little farther
- Dance to your favourite music for ten minutes
- Watch an exercise program on TV
- Set a goal to find at least one active form of group recreation — dancing, hiking or walking

Make sure you get enough sleep

Getting a good night's sleep is important. Drugs and alcohol often affect your sleep patterns. You may find that you're wide awake at night, when you want to get to sleep and tired or sleepy during the day. It is normal to have some sleepless nights. Don't let it worry you — what keeps most people awake is trying too hard to sleep!

Make a schedule for going to sleep and waking up. This helps train your body to feel tired at the right time. If you have a bad night, try not to sleep in. It's better to deal with the fatigue for a day and get yourself back in the right rhythm. Take a brief nap if you feel the need.

Limit your naps to under an hour. Avoid napping in the evening. You might feel tired and need to nap. Most people get tired in the afternoon. Resting isn't bad, but if you do nap keep it short, and don't nap after 3 p.m. in the afternoon. Sleeping too much during the day will keep you from getting the right kind of deep sleep at night.

Avoid caffeine 4-6 hours before bedtime. Even if you think caffeine doesn't affect you it's a good idea to avoid it before bed. Remember that this includes chocolate, tea and soft drinks.

Avoid heavy, spicy or sugary foods 4-6 hours before bedtime. These can affect your ability to stay asleep.

Exercise regularly, but not right before bed. Regular exercise, particularly in the afternoon, can help deepen sleep. Strenuous exercise within 2 hours before bedtime, however, can decrease your ability to fall asleep.

Make sure your bedroom is a comfortable place to be. Adjust the temperature, get a comfortable bed, arrange for the room to be quiet and dark enough to get to sleep.

Reserve your bed for sleep and sex. Try not to use your bed for reading or work or watching TV. These are activities that can keep you awake at night. If you need some background noise at night, turn on the radio. Put it on a timer so it shuts itself off.

Eat a small snack. Warm milk (without cocoa) and foods high in the amino acid tryptophan, such as bananas, may help you to sleep.

Practice relaxation techniques before bed. Deep breathing and other relaxation exercises may help relieve anxiety and reduce muscle tension.

Take a warm shower or bath before bed. Warming up your body can make you feel more relaxed and sleepy.

Read something relaxing. Choose a book that you can put down easily and that leaves you in a peaceful mood. Reading from a book of poems, devotions or religious text can be helpful. Magazines with short articles are also a good choice. But remember; don't bring the book to bed as it may keep you up.

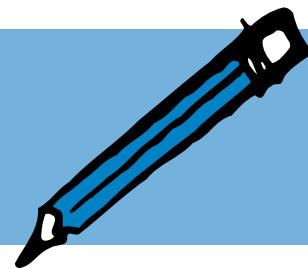
Avoid staying in bed if you're tossing and turning or worrying. It's better to get out of bed and do something relaxing like reading until you feel drowsy. Go back to bed and try to fall asleep again. Sometimes writing a list of worries and telling yourself you'll get to them tomorrow will help you to put problems out of your mind. Try a relaxation exercise (see Chapter 19, page 105) or move to a chair and read something calming. Go back to bed when you feel sleepy. It may be helpful to work with your counsellor to develop a coping strategy for worrying at night.

If you wake up in the middle of the night: Most people wake up one or two times a night for various reasons. That is normal. If you find that you wake up in the middle of the night and cannot get back to sleep within 15–20 minutes, get out of bed and read something calming. Avoid getting into the habit of eating late at night because your body will then begin to expect a midnight snack. Don't watch TV. It's too easy to get involved in a program that will keep you awake.

If you have nightmares, flashbacks or dreams about using: It is very common to have flashbacks of past problems or nightmares while you are in recovery. These experiences are normal. Talk with your counsellor and doctor and make a coping plan.

Worksheet, Chapter 21

Staying healthy



Use the information in this chapter to set personal goals for staying healthy.

Name three things you can do this week to start eating better

(e.g., eat breakfast, choose a healthy snack, drink more water)

1 _____

2 _____

3 _____

Name three things you can do to get a good night's rest

(e.g., set a regular bedtime, relax before bed, make sure my room is a comfortable temperature)

1 _____

2 _____

3 _____

Name three things you can do to increase your physical activity

(e.g., take the stairs, walk ten minutes in the morning, get off the bus one stop early)

1 _____

2 _____

3 _____

Section 5

Pulling it all together



Chapter 22

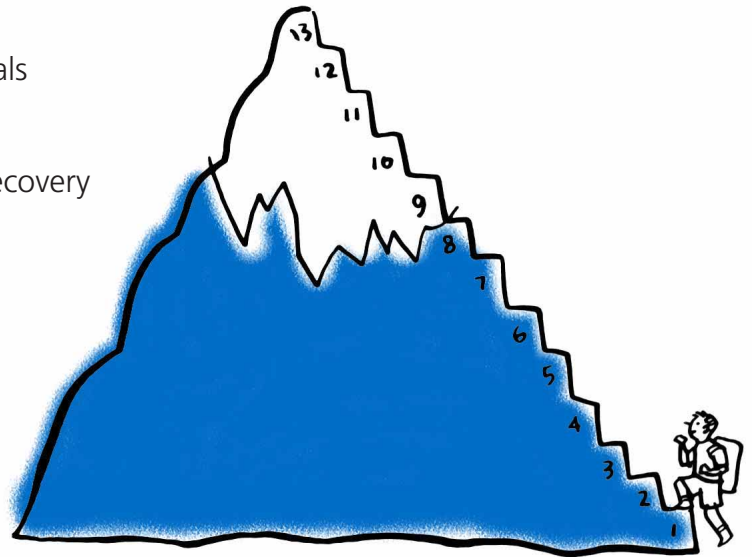
Goal-setting for recovery

Goals

- To learn about the importance of setting goals
- To learn about setting realistic goals
- To begin to think about personal goals for recovery

Information

Recovery is a busy time. Unless you set goals and make a plan for how to reach them, there can be so much to do it can get confusing. Here are clear goal-setting exercises to break down what you have to do into do-able, manageable routines.



- Routines can be a useful way to get things done things that happen on a regular basis; try to build in routines wherever you can
- Get into the habit of making appointments with yourself to get tasks done; if you set aside a specific time for a specific task, you're more likely to do what you set out to do
- Make sure that you really can do the things that are on your action plan; think about what you can reasonably manage during your recovery

Good goals are:

- Meaningful** Get you where you want to go
- Measurable** You know when you've met them
- Time-limited** You know when you can expect to complete them
- Realistic** It's reasonable to expect success

Where do you start?

As you work on your recovery you'll find lots of information about things that you can do to improve your well-being and ways you can move toward your goal for staying substance free. As a way to help you set your goals, read the checklist below. Feel free to add your own ideas. Try to think of ways you can start working toward your goals each day.

Self-assessment

Go through the following checklist to identify how you can start setting goals. Check off any that you think would work for you, or write in your own.

Goal: Finding your triggers

- Talk to your counsellor about the last time you used or drank; work with your counsellor to identify your triggers
- Write in your journal when you come across a trigger
- Other goals:

Goal: Managing difficult situations

- Write out a script you can use when you're offered drugs or alcohol
- Make a list of places and people you should avoid
- Make a list of people who support you in your sobriety
- Other goals:

Goal: Taking care of your body

- Have breakfast
- Eat healthy snacks
- Get to bed around the same time each night
- Drink only one cup of coffee each day
- Take your medications as they were prescribed
- Practice your relaxation exercises
- Start some physical activity
- Other goals:

Goal: Taking care of your emotional/spiritual well-being

- Write in your journal
 - Talk to a friend
 - Pray or meditate
 - Read
 - Practice tuning into your feelings
 - Other goals:
-
-
-

Goal: Communicating better

- Ask someone for help; start with something small, such as asking a store clerk for help in finding an item
 - Practice ways to give feedback in a nice and positive way
 - Practice being an active listener, by nodding and making eye contact
 - Make a supportive statement in group
 - Give someone a compliment
 - Make an assertive statement
 - Other goals:
-
-
-

Goal: Spending time thinking about things that make you feel good

A lot of people have a hard time doing this. It might seem like a waste of time. But it isn't, it's a productive exercise. Go ahead, let yourself daydream. You can't change your past and you can't count on winning a million dollars, but you can think about what would turn a normal day into an extra-special day for you.

Here's an example:

Jim isn't working right now. He's bored a lot of the time, and feels like his life is going nowhere. He wants to get a job or go back to school. While daydreaming he remembered that last Monday had been a pretty good day. He had an appointment and got up early instead of sleeping in. He had breakfast at a coffee shop and the man behind the counter started a conversation with him.

He helped a lady when she dropped her bag at the grocery store and she smiled and thanked him. He watched a football game with his brother and there were no arguments. Those were all small events, but they all added up to a very special day, a good day. When Jim reflected, or daydreamed about that day, he realized a few things:

- He feels good when his day starts before noon
- He gets out of the house when he has a plan
- He feels good when he has the chance to help others
- He enjoys watching sports
- He likes spending time with his brother

Think about what makes a day a good day for you. Use these details to build a list of ideas you can use to have more and more good days. Start daydreaming!

When you daydream about having a good day:

Who are you with?

Where are you?

What are you doing?

Happy people celebrate their accomplishments (even small ones) and count their blessings. They take time to make each day as good as possible. What can you do to make your days more pleasant?

- Help someone with something
- Congratulate myself for working on my recovery
- Do something that I enjoy
- Take a walk
- Other ideas

Plan

Weekly Recovery Checklist

Put this list together each week. This will help to make sure you have everything working for you. Check off each box as you complete the task. Cut out the plan and put it somewhere where you will see it each day. Put it someplace that works best for you — the bathroom mirror, a kitchen shelf, your refrigerator door.

- My appointments are listed on my calendar
- My schedule is listed on my calendar
- My plans for attending appointments are made (note any plans that need to be made, e.g., childcare, transportation, etc.)
- I have completed my action plan and scheduled any actions I need to take on my calendar
- Other plans for this week include:

Weekly Action Plan

This week, I will manage my triggers by:

This week, I will take care of my body by:

This week, I will take care of my emotional and spiritual health by:

This week, I will work on my communication skills by:

Chapter 23

Learning from lapses

Goals

- To learn the difference between lapse (a slip) and relapse
- To develop an emergency plan
- To learn some strategies for learning from lapses



Information

A lapse is often part of the progress

Having a lapse means a return to using either drugs or alcohol. It can be a single event or a few events.

Having a lapse does not mean that all of your progress is gone. It does mean that something needs to be done to get back on track and stay on track.

Early signs of a lapse can be hard to see

Be on the lookout for decisions you make that do not seem to be overly important on their own, but might bring you closer to a high-risk situation. You might say to yourself that you have a good reason for getting into that particular situation, but really it is just a lie you are telling yourself.

Joe's example: Joe knows that if he takes the A bus, he will pass his old drinking buddy's house and the place they used to go drinking. He and his counsellor made a plan to avoid this high-risk situation by having Joe take a different bus home. One day Joe had to stand waiting in the rain for his bus, and when the A bus stopped, he thought, "*just this once...*" He started taking that bus regularly, and after a few days, he got off in his old drinking buddy's neighborhood. That's what led to his lapse.

Signs on the road to lapses

Here are some of the things that might let you know a lapse is coming

- Life out of balance, e.g., stress, loneliness, boredom
- I deserve this, my life isn't what I want it to be
- Danger! High risk situation

Self-assessment

Review the Lapse

Check any or all of these factors that apply to you and your situation:

- Is my lifestyle out of balance? Do I have too much stress, not enough coping support, too much to do, too little to do?
- Did a strong feeling lead to my lapse?
- Was I trying to test myself?
- Were there people around who influenced me to use?
- Was I thinking that I owe myself some pleasure?
- Did I make a decision to get into to a high-risk situation?
- Did I feel discouraged about being sober?
- Did I think I couldn't handle a situation that came up?
- Did I try to cope, but something went wrong?
- Did something I didn't expect happen?

What to do in case of a lapse?

Cut out this card and place it somewhere you can refer to it a few times each day.

This card is made to fit in your wallet. If you need larger print, use a copy machine or your computer printer to make a larger copy.



**A lapse is not a sign of failure.
It is one stop on the road to success.**

- 1 **Stop.** Once you see it, stop it. Leave the situation and/or ask for help
- 2 **Look and listen.** Pay attention to what is happening so that you can learn from it
- 3 **Try to stay calm.** A lapse does not mean that your recovery has failed; one slip doesn't mean that you've had a total relapse; it does not erase the progress you have made
- 4 **Review** your reasons for wanting to stop using; go back to your Top 5 Motivators
- 5 **Think** about your past successes; this will help you realize that all is not lost
- 6 **Review** the situation that led up to the lapse
- 7 **Try to let go of feelings of guilt and/or shame;** show yourself some compassion; stopping isn't easy; learn from what happened so that you can cope better next time

Plan

It's a good idea to have an emergency plan. An emergency plan is a set of instructions you can refer to when you feel that you might have a lapse or if you have had a lapse.

Leave the situation.

Here are some ideas for places that I can go:

Call someone.

Here is a list of people I can call, with their phone numbers:

Here is a list of crisis numbers that I can call:

Here are other instructions that may be useful:

Appendix A

For more information

Substance Abuse

Centre for Addiction and Mental Health (CAMH)

http://www.camh.net/About_Addiction_Mental_Health/Drug_and_Addiction_Information/index.html

Health Canada Straight Facts about Substance Abuse

http://www.hc-sc.gc.ca/ahc-asc/pubs/drugs-droques/index_e.html

Government of Canada Health Portal / Addictions:

http://chp-pcs.gc.ca/CHP/index_e.jsp/pageid/4005/odp/Top/Health/Addictions

Acquired Brain Injury

Ontario Brain Injury Association

<http://www.obia.on.ca>

Traumatic Brain Injury Resource Center

<http://www.braininjuryresources.org>

Substance Abuse and Acquired Brain Injury

Community Head Injury Resource Services (CHIRS)

<http://chirs.com>

Ohio Valley Center for Brain Injury Prevention and Rehabilitation

<http://www.ohiovalley.org>

Substance Abuse Program Directories

Drug and Alcohol Directory of Treatment (DART)

<http://www.dart.on.ca>

Canadian Centre on Substance Abuse: Treatment Locator —

http://www.ccsa.ca/CCSA/EN/Topics/Intervention/Key_Questions_Treatment.htm

Program Reference Materials Available through CAMH (www.camh.net)

Structured Relapse Prevention — An Outpatient Counselling Approach

Helen M. Annis, Marilyn A. Herie, Lyn Watkin-Merek
Centre for Addiction and Mental Health, 1996

Treating Concurrent Disorders: A Guide for Counsellors

Edited by Wayne Skinner
Centre for Addiction and Mental Health, 2004

***Nutrition and Recovery: A Professional Resource
for Healthy Eating During Recovery from Substance Abuse***

Trish Dekker
Centre for Addiction and Mental Health, 2000

Appendix B

Forms for reproduction



Coping Card (Tape quarter for phone call and/or subway token on back)

Top 5 reasons for change

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____

Emergency Plan

- 1 Leave the situation
- 2 Go somewhere safe such as _____
- 3 Take a few deep breaths and try to relax.

Call _____

Phone _____

Call _____

Phone _____

Call _____

Phone _____



A lapse is not a sign of failure. It is one stop on the road to success.

- 1 **Stop.** Once you see it, stop it. Leave the situation and/or ask for help
- 2 **Look and listen.** Pay attention to what is happening so that you can learn from it
- 3 **Try to stay calm.** A lapse does not mean that your recovery has failed; one slip doesn't mean that you've had a total relapse; it does not erase the progress you have made
- 4 **Review** your reasons for wanting to stop using; go back to your Top 5 Motivators
- 5 **Think** about your past successes; this will help you realize that all is not lost
- 6 **Review** the situation that led up to the lapse
- 7 **Try to let go of feelings of guilt and/or shame;** show yourself some compassion; stopping isn't easy; learn from what happened so that you can cope better next time

Daily Journal

Date: _____

Today I... (List your main activities)

I made a step toward recovery by...

(Don't worry if it seems small. Was there a coping skill you learned or tried, something you learned about yourself?)

I've been thinking about...

Questions or things I want to remember to do...

Plan

Weekly Recovery Checklist

Put this list together each week. This will help to make sure you have everything working for you. Check off each box as you complete the task. Cut out the plan and put it somewhere where you will see it each day. Put it someplace that works best for you — the bathroom mirror, a kitchen shelf, your refrigerator door.

- My appointments are listed on my calendar
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- My plans for attending appointments are made (note any plans that need to be made, e.g., childcare, transportation, etc.)
- I have completed my action plan and scheduled any actions I need to take on my calendar
- Other plans for this week include:

Weekly Action Plan

This week, I will manage my triggers by:

This week, I will take care of my body by:

This week, I will take care of my emotional and spiritual health by:

This week, I will work on my communication skills by:
