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COPING WITH FEELINGS AND MOODS

4 Continuing Education Credits

Asynchronous Distance Learning Course

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Course Author: Dennis C. Daley, Ph.D.

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Do the best you can until you know better.
Then when you know better, do better.

— Maya Angelou

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ABOUT THE INSTRUCTOR

Dennis C. Daley, Ph.D., is a Professor of Psychiatry, and Chief of Addiction Medicine Services at Western Psychiatric Institute and Clinic (WPIC) of the University of Pittsburgh Medical Center. He oversees a large continuum of care at Addiction Medicine Services (AMS), which includes over twenty-five treatment, prevention and intervention programs, training programs for psychiatric residents, medical students and graduate students in behavioral health.

Dr. Daley has been or is currently an investigator, trainer and/or consultant on numerous research studies at WPIC sponsored by the National Institute on Drug Abuse and National Institute on Alcohol Abuse and Alcoholism related to treatment of individuals with substance use disorders and mood disorders. He is currently a trainer and consultant on a NIDA sponsored study of bipolar substance abusers at Harvard Medical School (Roger Weiss, MD, PI). Dr. Daley and colleagues at AMS are currently involved in seven research projects. His research interests are in the areas of addiction, mood disorders and addiction, and adherence to treatment.

Emotional Health in Recovery: What Current Research Tells Us About Feelings, Coping, and Relapse

The feelings and moods addressed throughout this course — anger, anxiety, depression, guilt, grief, boredom, loneliness — are not merely uncomfortable experiences that clients must endure during recovery. Recent research has established that the capacity to manage these emotional states is one of the strongest predictors of whether recovery succeeds or fails, and that the specific pathways through which unmanaged emotions lead to relapse are more varied and more clinically targetable than previously understood.

A 2024 review in the Journal of Clinical Investigation provided a comprehensive framework for understanding how stress drives substance use and relapse. The author described an adaptive stress response cycle — baseline, acute reaction, and recovery — and documented how chronic stressors, trauma, and sustained drug use disrupt this cycle, leading to "inflexible, maladaptive coping; increased craving; relapse risk; and maintenance of drug intake" (Sinha, 2024). For practitioners using this course's coping skills framework, the Sinha model clarifies why the feelings addressed here are not simply emotional discomfort but physiological states with measurable neurobiological correlates. When a client in early recovery experiences overwhelming anxiety or anger, they are not just having a bad day — they are experiencing a stress response system that has been altered by chronic substance use and may no longer regulate itself effectively. The coping strategies this course teaches — cognitive reframing, behavioral activation, relaxation techniques, support-seeking — function as prosthetic stress regulation, providing the client with external tools to manage a stress response system that cannot yet do the job internally. This reframe can help practitioners explain to clients why coping skills feel effortful rather than natural in early recovery: they are compensating for a system that needs time and sustained abstinence to recalibrate.

The specific emotional pathways to relapse have been mapped with increasing precision. A 2022 qualitative study analyzed 200 "node maps" — graphical representations of relapse events — created by adolescents in a recovery high school. Nearly half (48.4%) of relapse events occurred "in response to negative affect." The researchers identified six distinct relapse pathways, which they grouped into three systemic failures: failure to cope, failure to guard against temptation, and failure of belief (Whitt et al., 2022). The finding that negative affect triggered nearly half of all relapses directly validates this course's emphasis on emotional coping skills — and the six distinct pathways suggest that not all emotional relapses follow the same route. Some clients relapse because they cannot tolerate the emotion itself. Others relapse because the emotion triggers automatic behavioral patterns that bypass conscious decision-making. Still others relapse because the emotion erodes their commitment to recovery goals, making use seem like a reasonable choice in the moment. Effective coping skills training — the kind this course provides — must address all three mechanisms, not just the first.

The distinction between different types of depressive experience in early recovery has clinical implications for how practitioners apply this course's mood management strategies. A 2023 study tracking 10,103 patients entering substance use disorder treatment measured depressive symptoms weekly during the first month and identified four distinct subgroups: high demoralization and high anhedonia; remitting symptoms in both domains; high demoralization with preserved capacity for pleasure; and low symptoms throughout. Every subgroup except the low-symptom group showed elevated treatment dropout rates (Rabinowitz et al., 2023). For practitioners working through this

course's depression and mood management sections, the four-subgroup model suggests that "depression" in early recovery is not one condition but at least three distinct presentations requiring different interventions. A client experiencing demoralization — hopelessness, loss of meaning — may respond best to motivational and purpose-building interventions. A client experiencing anhedonia — inability to experience pleasure — may need behavioral activation that rebuilds the capacity for positive experience. A client experiencing both simultaneously represents the highest risk for treatment discontinuation and may require the most intensive support.

The role of guilt and shame — emotions this course addresses directly — has received particular research attention. A 2022 qualitative study of 77 women and 38 men in group therapy for substance use disorders found that both genders discussed guilt and shame, but women uniquely identified stigma as significant to their experience of addiction and recovery. Women in mixed-gender groups reported less comfort with the group composition and more self-perception concerns compared to women in gender-specific groups (Sugarman et al., 2022). A 2025 ecological momentary assessment study of 288 participants attempting tobacco cessation tracked affect states and lapse events in real time across 10 days. Guilt was associated with higher lapse odds between individuals, while disgust and shame predicted lapse within individuals. The researchers proposed that "addiction is facilitated by cycles of guilt and shame" and found that pride was protective against lapse at the between-person level (Jones et al., 2025). Read together, these studies suggest that the guilt and shame management sections of this course address emotions that are not merely unpleasant but actively drive continued substance use through self-reinforcing cycles. When a client uses, they feel guilt and shame; those emotions become triggers for further use, which generates more guilt and shame. Breaking this cycle requires the kind of cognitive restructuring and self-compassion strategies this course describes — not as optional emotional wellness tools, but as direct relapse prevention interventions.

The broader construct of emotion regulation — the capacity to manage emotional states effectively — has emerged as a measurable predictor of recovery outcomes. A 2024 one-year follow-up study of 63 patients with opioid use disorder found that 78% experienced recurrence, and those who relapsed "exhibited significantly more difficulties in emotion regulation" than those who maintained remission. Importantly, baseline affective temperament — the intensity of emotional experience — did not differ between groups, confirming that the problem is not how strongly clients feel but whether they have strategies for managing what they feel (Zengin İspir et al., 2024). A 2024 study of 122 participants in Recovery Dharma found that emotion regulation difficulty was the strongest predictor of recovery capital — more influential than mindfulness, age, gender, or other demographic factors (Wang et al., 2024). Together, these findings position the coping skills taught in this course not as supplementary wellness content but as core recovery infrastructure. The client's capacity to manage anger, tolerate anxiety, navigate grief, and sit with boredom without turning to substances is, according to the current evidence, the single most important predictor of whether their recovery will be sustained.

Interactive Recovery Workbook Series

Coping with Feelings and Moods

Recovery Strategies for Emotional Health

Dennis C. Daley, PhD.

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Daley Publications
PO Box 161
Murrysville, PA 15668

Phone: 724-727-3640
Fax: 724-325-9515
Email: daleypublications@yahoo.com
Web page: www.drdenniscdaley.com

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I wish to thank Cindy Hurney for her excellent work in designing and formatting this workbook. I appreciate how she takes care of all the many details involved in my recovery guides. Thanks also to Janis McDonald in helping to update this revised edition.

COPING WITH FEELINGS AND MOODS:
Recovery Strategies for Emotional Health

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About the Workbook

This workbook was written to help individuals in recovery from an alcohol or drug problem or a mental health problem learn about feelings (also called emotions) and strategies to cope with them. Inability to understand, recognize and manage feelings creates problems in relationships and is a risk factor for relapse following a period of sobriety. This also impedes recovery from mental health disorders. You can improve your physical or mental health, relationships, enhance your recovery and reduce your risk of relapse by learning about your feelings and ways to manage them. You can also improve the quality of your life by decreasing negative and increasing positive feelings. In this workbook, I will discuss numerous ways to manage different feelings.

Recovery is a long-term process involving change in different areas of your life. This workbook will help you focus on emotional issues in recovery that affect your mental health. You will learn to recognize your feelings and how these affect you or others. You will learn strategies to manage common feelings experienced among people in recovery such as anger, anxiety, boredom, depression, grief and guilt and shame. And, you will learn about the importance of increasing positive feelings.

About Our Interactive Workbooks

Our workbooks are informative, user-friendly and useful for individuals with any type of substance use disorder, including those with co-occurring psychiatric disorders. Other workbooks and journals related to the topic of this workbook include: *Managing Anger*; *Grief Journal: Living with the Loss of a Loved One*; *Anxiety Disorders Recovery*; and *Depression Recovery*. These materials are used in many addiction, mental health or co-occurring treatment programs. Descriptions of each workbook are available on: www.drdenniscdaley.com. Appendices B and C provide additional resources to help you learn about managing feelings.

About the Author

Dennis C. Daley, Ph.D., is Professor of Psychiatry and Chief of Addiction Medicine Services (AMS) at Western Psychiatric Institute and Clinic (WPIC) of the University of Pittsburgh Medical Center. He is a therapist, educator, researcher and consultant who has been involved in managing treatment programs, educating professionals, and conducting studies funded by the National Institute on Drug Abuse and the National Institute on Alcohol Abuse and Alcoholism. Dr. Daley has numerous publications including books and workbooks on recovery from addiction, psychiatric or co-occurring disorders, relapse prevention and family recovery. He has developed materials for children and adolescents as well as adults. Dr. Daley has written 35 educational videos including the highly popular *Living Sober* series. Several of these videos address feelings in recovery, mood and anxiety disorders. His practical recovery materials are used throughout the U.S. and other countries. Several of his works have been translated to foreign languages.

1. Understanding Your Feelings

An important part of your recovery and emotional health relates to feelings (also called emotions) and moods. Your understanding of, and ability to manage your feelings and moods affect your health, relationships with others, ability to succeed in life and the overall quality of your life. This also affects your recovery as those who use positive strategies to manage feelings lower their risk of relapse.

Your emotional health is affected by many physical, mental, economic, social, interpersonal, spiritual and environmental factors.[1] Each of these factors can affect the others. The way you think, the types of relationships you have and your experiences in daily life can affect how you feel or moods that you experience. Your feelings or moods can affect your ability to work or how you relate to other people. For example, when Bethany feels depressed, she is less productive at work and is more likely to isolate herself from her family or friends. When Ryan has problems at work, he is more likely to feel anxious and worry about his performance. David is more likely to direct his energy towards his music (he has a band) when he feels bored with his regular job. This brings him satisfaction and makes his boredom at work more tolerable.

You ability to manage your feelings affects your recovery from addiction or a mental health disorder. Poorly managed feelings may contribute to problems in any area of your life and interfere with your recovery. If you let negative feelings build up on the inside, you may find yourself dwelling upon them and spending too much mental energy on them. This, in turn, can create personal distress and cause problems in your life.

Poorly managed feelings can also contribute to relapse to addiction or cause problems in recovery from a mental health problem. For example, when Joel's anger gets too intense and he feels he's losing control, he is more likely to relapse to cocaine use. When Melissa doesn't use positive strategies to manage her anxiety, she is at risk to relapse to alcohol. When Karl feels bored with recovery, he is more likely to contact people who pose a risk to her recovery. And, when Kayla becomes too upset with men she is dating, she is more likely to threaten to hurt herself or actually hurt herself.

If you are aware of and handle your feelings constructively, you will feel better, get along better with others and feel more satisfied with your recovery and your life. For example, when Anthony "drops off his resentments" at an AA meeting, he feels more in control of this feeling and better about himself. He also feels his recovery is not at risk when he takes this positive step to manage his resentments. When Lisa shares her feelings of gratitude with family members and good friends, she feels more connected and closer to them. Her sharing this positive feeling often leads to others sharing positive feelings as well, which makes her more appreciative of the people in her life. And, when Greg shows compassion to the struggles of his teenage son, he feels like they get along better and Greg's son is more open about sharing his feelings and experiences. Greg's son

is then more likely to listen to him and not create a big argument. Greg learned that he can influence his son more with compassion than negative feelings such as anger, which in the past he was more likely to direct towards his son.

Feelings or Emotions

Feeling and emotion are terms used to describe your emotional life or your "subjective" experience, which are personal and unique to you. A feeling involves not only the experience of what you "feel," it also involves your thoughts or how you think. A feeling may have a physical component and show in your facial expression, release of hormones or muscle tension. All of these things (your thinking, your body's reaction and how you experience a feeling) together impact on how you act in regard to your feelings.

Everyone experiences a range of feelings in their daily life. According to experts, those that are common across cultures include anger, sadness, fear, enjoyment, love, surprise, disgust and shame.[2] Feelings may be conscious (in your awareness) or unconscious (out of your awareness). They affect how you view the world, and talk to and relate to other people.[3]

Both negative and positive feelings are an important part of daily life. Positive feelings such as love, gratitude or joy can motivate you to work harder, be creative, savor your life, build relationships and do positive things that help others. These are good for your health, your connections with other people, and add to the quality of your life.

Even feelings you consider negative such as anxiety, fear, anger or depression can help you in certain situations if you use these in ways to motivate or help yourself. For example, anxiety or fear can help you avoid a potential danger such as moving out of the way of an oncoming car, moving away from a fire, or quickly getting away from a snake that could be poisonous. Grief following the loss of an important relationships can lead to other people showing compassion, love and support, which can draw you closer to them. This can help you tolerate your grief better as you know you do not have to suffer alone.

Some people have used their depression in a creative manner to produce songs or write poetry, stories or books. Others who felt angry over situations such as growing up poor or feeling discriminated against have used their feelings of anger to motivate themselves to excel at work, sports, another activity or endeavor, or to do things to help others or society.

Moods and Feelings That Cause Problems

Mood refers to a feeling or emotion experienced over a period of time and can be part of a "disorder" if you experience other symptoms with it that cause distress in your life. For example, John felt depressed because he didn't get a job that he really wanted. However, this lasted briefly and did not become a mood disorder. If John's sadness or depression persisted and he had other symptoms like poor appetite or trouble sleeping that lasted weeks or longer, feeling hopeless, helpless or suicidal, he probably would have a "mood disorder."[4] When a mood is persistent,

intense and causes considerable personal distress, it may be part of a psychiatric disorder requiring professional treatment.

Feelings or moods can cause problems if they are too intense, extreme, chronic (last too long) and overwhelm you or lead you to act in ways that harm you or others. For example, if you become verbally or physically abusive towards others when angry, get drunk or high on drugs to escape this feeling, hurt yourself or become suicidal, the outcome is negative. Or, if you act in passive-aggressive ways and express your feelings indirectly, this can have a negative effect on your relationships with other people. Even if you try to suppress or hide your feelings, they are likely to show with others in your facial expressions, body language, tone of voice or in your behaviors. Any of these negative ways of coping with feelings can cause serious problems in your life and in your relationships with others. If your depression leads to losing hope and wanting to give up on life, isolating yourself from others, the outcome can be negative unless you get help with your depression.

Some people in recovery from addiction feel depressed when they quit using substances and evaluate their life. These feelings often improve with ongoing sobriety and positive changes made in recovery. However, some feel more severe depressed feelings and experience other symptoms that make up a "mood disorder" that is more serious. These feelings may not go away or may even worsen as sobriety progresses. Similarly, anxiety that overwhelms a person and leads to avoiding situations causing anxiety could be part of an "anxiety disorder" that require treatment.[5] These depression or anxiety symptoms can actually worsen when a person gets sober and may interfere with recovery if not addressed.

Many of the therapies for addiction or psychiatric disorders focus on feelings or moods, and helping people improve their ability to manage these. Learning and using positive coping skills helps those with an addiction reduce their relapse risk and feel better about their recovery and life. Positive coping also helps those with a psychiatric illness manage their disorder(s), which in turn can increase the quality of their life.

Factors Contributing to Your Feelings or Moods

Many factors contribute to specific feelings or moods as well as how you cope with these. Your challenge is to become aware of and understand why you feel a specific feeling or mood. Factors influencing your feelings or moods and how you deal with these include the following.[6]

- **Your biology (physical factors).** Hormones, neurotransmitters in the brain, and physical factors such as pain, heart conditions, other medical illnesses, and the effects of a medication can impact on your feelings or moods. For example, people with chronic medical disorders may feel depressed as a result of limitations caused by their condition.

  Low levels of a brain chemical called serotonin can play a role in anxiety or depression. This can also affect your sleep, appetite and mood. Or, excessive norepinephrine (another neurotransmitter in your brain) may trigger anxiety.

Experts believe that the right hemisphere of the brain is involved more than the left hemisphere in feeling negative emotions. Some believe we are born with a predisposition towards certain emotional states such as anxiety, sadness or happiness. For example, if one of your parents was anxious or depressed a lot, you may have inherited this tendency. However, predisposition interacts with life experiences and how you think about the world to determine what feelings or moods you experience and to what degree, and how to cope with them.

- **Alcohol or drugs including nicotine, and addiction to substances**. Substances as well as addiction to these can contribute to depression, anxiety, anger, boredom, shame and guilt and feeling empty. Substances can cause specific feelings, exaggerate them, cover them up and even make them worse. For example, stimulants and nicotine can cause anxiety or intensify it. Alcohol, sedatives or opioids can cause depression or make it worse. Any type of substance addiction as well as withdrawal from physical dependence can contribute to depression, anxiety or feeling hyper. Even stopping an addiction can cause feelings of boredom.

  Substances activate the "reward system" in the brain so feeling good becomes associated with using drugs. Once you are addicted, your brain depends on these substances to feel good more than feeling good from "natural" activities such as eating, sex or accomplishing something in your life.

  The effects of substances can lead to acting on feelings in unhealthy ways. For example, Debbie often feels depressed and threatens suicide following cocaine binges. When Bill drinks he is more likely to get into arguments and fights with others. Even though Bill has a job and family, he puts himself and his family at risk because of his short fuse, which is more likely to lead him to acting on his anger when drinking.

- **Your personality.** Some people are more anxious, pessimistic, optimistic, depressed, angry, optimistic or passionate that others. This means they often present themselves in a certain way much of the time, perhaps more than other people. Such patterns are likely to be present throughout one's life. If you were optimistic when young, you are likely to continue being this way when you get older. If you were pessimistic when young, you are likely to be this way unless you learned to change how you think about life and relate to others.

  Personality is also influenced by biology and experiences in your family. Most of us can identify ways we behave that reflect what we learned (or inherited) from a parent. For example, Phil describes learning kindness and tolerance from his mother. Becky says her short fuse is very similar to her mother who also had a short fuse and got angry too quickly for many things.

- **Your thinking and beliefs about yourself and the world**. If you have negative beliefs or thoughts about yourself, this will show in your feelings and actions. If you believe life should be fair and it is not, this can contribute to feeling angry, resentful or demoralized. You may even feel cheated. People who are more pessimistic (negative) than optimistic (positive) are more likely to experience negative feelings based on judging themselves harshly and expecting the worst to happen. People who have more of a pessimistic thinking style often

see the negative in situations. If they blame themselves for failure, this can lead to feeling guilty along with feeling depressed.

On the other hand, if you take responsibility for how your thoughts affect your feelings, you may be more open to changing how you cope. For example, when Amy judged herself harshly and berated herself by thinking "I am worthless, I can't succeed in life," she was more likely to feel depressed and down on herself. Then, when Amy was depressed she was more likely to isolate herself from others, which put her in a vicious cycle. Amy did not feel better until she learned to change her negative judgments about herself. When Burt took a few drinks after being sober for over two years and told himself "I'm a failure, I blew my recovery" he put himself at risk to continue drinking. When he caught himself thinking this way and changed his thoughts to "I made a mistake, I better get back on track," he stopped things from getting out of control and losing control.

- **Your experiences in life including stressful ones.** Events and interactions with people that cause stress may impact on how you feel. However, it is often your interpretation of these events or interactions that determine what you feel. For example, Antoine was passed over for a promotion at work because another person had more experience and was more qualified. If he believed that he had gotten the shaft and developed a bad attitude, this could have led him to feeling angry, resentful or depressed. However, he put this in perspective and told himself his day would come, that he had to continue doing good work and it would pay off with a promotion in the future.

  If something that you view as upsetting or bad happens and you put this in perspective, you can gain control over your feelings. For example, if your car breaks down and the cost of repairs are high, if you tell yourself this is part of life and you'll just have to deal with it, you may accept this without feeling too upset. If you did poorly on a test in school and tell yourself you have to study harder and prepare better for the next test, then follow through with better preparation, you are less likely to feel upset and disappointed with yourself.

- **Your behaviors and how you choose to act.** Your thinking affects your behavior, which in turn affects how you feel. For example, if you lose a job, berate and blame yourself and wallow in self pity, you will feel bad, which could lead to not taking action to find another job. On the other hand, if you assess the situation and determine your job was lost due to a downsize and not your poor performance, and look for a new job, you are more likely to feel in control of your situation. You do not have to let an event, in this case a loss of a job, lead to feeling so bad that you do not take action. That is not to say you can't be bummed out if this happens, but it is how you think and what you do that determines how you feel over time. Taking action and solving problems usually leads to feeling better.

  Choosing to act in a positive way can affect how you feel. People who show kindness often feel good about themselves and can influence positive feelings in others. They enjoy "doing" something positive for another. It doesn't matter how big or small an act of kindness is, it still can make you (and others) feel good.

- **The quality of your relationships with other people.** People who have a positive social network (people and organizations) and good connections with other people tend to feel better and do better than those who are not well connected with others. Having confidantes you can share your thoughts, feelings and experiences with, and having people to share things with in life can lead to positive feelings. Sharing positive feelings can improve your relationships. And, good relationships can add to positive feelings. In section 14 of this workbook, I talk more about positive relationships and strategies to increase connections with others.

- **Your accomplishments in life.** People feel good when they achieve something positive in their lives. This can relate to meeting a specific goal. Or, it can result from success at school, work or some endeavor (music, sports, creative work, etc). When you feel you have achieved something positive, you feel good. You may feel pride and a sense of satisfaction that you reached your goal.

- **Other factors**. Other things can contribute to your feelings or moods. These include opportunities you get in life, your ability to forgive others who have hurt you, your resilience or ability to bounce back from setbacks or negative experiences, and your spirituality or religious practices. For example, many people use prayer and religious practices to contain negative and increase positive feelings.

Recovery from Addiction

Alcohol and drugs can cover up your feelings, exaggerate them, or cause you to express them in ways that are not healthy. When you get sober, you are more likely to be aware of your feelings, some of which you may find difficult to deal with until you learn to use positive coping strategies.

You have to understand and manage your feelings for your recovery to progress. This involves learning information, increasing your self-awareness (to learn how this information relates to your life) and improving existing or developing new skills for managing your feelings.

Recovery provides you with an opportunity to make changes within yourself and in your lifestyle. As a result, it gives you a chance to grow, to become a better person and more fulfilled in your life. The opportunity to better manage your feelings is one of the many benefits of recovery.

Recovery from addiction requires hard work and a commitment to change. This workbook requires you to take a *proactive* approach. It contains a number of recovery tasks aimed at helping you deal with specific feelings and improve your emotional skills. You will be asked to do a lot of thinking and self-reflection, answer questions to figure out what your problems are with your feelings, and determine the changes you want to make and how to make these changes.

To change, you have to set goals for recovery as it relates to managing your feelings, develop a plan of action and take specific steps to reach your goals. It is helpful to put your plan in writing and review it with someone you trust who knows you. Discuss your completed workbook activities with a sponsor or another person in recovery. If you are in professional treatment, you

can discuss your answers to sections of this workbook with your therapist or other member of your treatment team.

Suggestions on How to Use This Workbook

This workbook was written to help you better understand and cope with your feelings. This can be used by anyone with addiction to alcohol or drugs, or another addictive disorder such as compulsive gambling, compulsive sex or compulsive eating. If you have a co-existing psychiatric illness, you can also benefit from using this workbook in your recovery.

As you complete this workbook, you will discover that some sections and tasks can be applied to different problems or recovery issues you are dealing with. For example, the connection between your beliefs and thoughts (cognitive), how you feel (emotional), and how you act (behavioral) is relevant whether you are dealing with anxiety, anger, boredom, depression or guilt.

You will also discover that this workbook can help you with issues that may have little or nothing to do with your addiction. You can learn a variety of coping strategies to use across a range of feelings, which can lead to improved health and more satisfying relationships.

You do not have to complete every section of this workbook. The sections and tasks you complete should depend on which feelings you need help dealing with as part of your recovery. If you are in therapy, you can also talk with your therapist about the issues in this workbook. Your therapist can also help you understand your feelings and learn new ways to cope with them.

You can get the most out of this workbook by:

- **Being honest.** Complete the questions as honestly as you can even if you have negative attitudes or thoughts or don't feel like answering.

- **Being patient.** There are no short-cuts, easy answers, or quick ways to deal with your problems. Change takes time and you can't hurry it along.

- **Making a long-term commitment to improve yourself.** This helps you hang in there during difficult times when you are struggling or find yourself not wanting to change.

- **Being self-reflective.** Think about what you read and how you respond to the questions. Self-reflection helps you figure out where you are now and what you need to change.

- **Being realistic.** Don't try to set goals that are too high or can't be reached. Expect to experience some rough spots along the way.

- **Working hard.** Don't try to slide through recovery. Hard work usually pays off and is worth the effort, especially when you are struggling with certain feelings.

- **Setting goals for change.** You are more likely to work a recovery plan if you identify things you want to change and set goals. Setting goals gives you something to work towards.

- **Using 12-step programs and other mutual support programs**. Alcoholics Anonymous (AA), Narcotics Anonymous (NA), and other 12-Step programs provide an excellent way to deal with addiction. Attend meetings, get a "sponsor," read the program recovery literature, and learn the "tools," especially the 12-steps. If you do not like 12-Step programs, find other support programs to help you recover from your addiction. Consider programs such as Recovery Inc., Emotions Anonymous, or others that deal with psychiatric disorders.

- **Sharing your plan and goals with others.** Don't try to recover alone. Lean on others and talk about your problems, concerns, questions, frustrations, and feelings. Others can give you support, advice, and feedback on your recovery plan.

- **Allowing room for mistakes.** Everyone makes mistakes, especially when trying something new. Changing any area of your life is trying something new so expect to make some mistakes. Learn from your mistakes. Don't be afraid of failure.

- **Taking a look at your progress.** It helps to regularly review your recovery. At first you may wish to check your progress each day or week. This allows you to assess progress and obstacles in your recovery. Try not to overlook your progress, no matter how small.

- **Rewarding your progress.** Do something nice for yourself as a way of rewarding progress that you make towards your goals. Don't take your hard work for granted.

- **Reviewing your past work in this guide.** You can benefit from reviewing this workbook again in the future. You may find that as your recovery progresses, you see things differently or need a reminder on how to cope with certain feelings. Reviewing your past work can also help you to see improvements that you made over time.

Professional Treatment

Many of the counseling approaches or therapies for addiction include focus on the "emotional" component of recovery by helping you become aware of your feelings and how these impact on ongoing recovery and relapse risk.[7] AA and NA recognize this in the term called "H.A.L.T." which stands for "don't get too hungry, angry, lonely or tired." Awareness of, and control over anger, loneliness or other feelings aids recovery and reduces the chances of a relapse.

The same is true for counseling or therapy for psychiatric disorders. Many therapies focus on helping you become aware of your feelings and moods. These treatments also help you learn coping skills or strategies to manage your feelings or moods. The result is that you can improve your mental health and the quality of your life.[8]

If you have concerns about how you manage your feelings and don't make enough progress with mutual support recovery programs, consider professional treatment with a therapist or counselor. Many people in recovery find therapy very helpful.

Severe feelings of depression or anxiety or panic causing personal distress or problems in functioning may be part of a psychiatric disorder. More severe cases may require medication in addition to therapy. Medications for a depression or an anxiety disorder should be used in conjunction with therapy or other coping strategies.

Medications used to treat a mood or anxiety disorder should not be viewed in the same light as using alcohol or other drugs to get high. Alcohol and drug addicted individuals are not immune to psychiatric disorders and some require medication for depression or an anxiety disorder in addition to therapy or participation in mutual support programs. However, you have to be careful what medications you use for an anxiety disorder as some of these can lead to a dependency.

How to Benefit from Professional Treatment

As stated before, being honest, patient, self-reflective, realistic, working hard, setting goals, making a commitment to change and evaluating your progress can help you benefit from treatment. Following are a few other ways to get the most out of your treatment.

- **Show up for your sessions.** Attend all of your sessions regardless of how you feel or the level of your motivation. If you show up, you can work with your therapist on your problems and concerns.

- **Go prepared with problems and issues to discuss.** Whether you are in individual and/or group therapy always go prepared to discuss your problems, concerns, issues of importance, thoughts and feelings. It is good to have one or two issues to discuss at each session so you use your therapy time wisely.

- **Do the work of therapy outside of your sessions.** If you and your therapist agree you will do something specific (read, write, reflect, change a behavior, do something else) between sessions, take this seriously and do your part. It is up to you to use what you learn in therapy in your life.

- **If you take medications for an addiction or psychiatric illness, take them only as prescribed**. Do not miss doses, take too much or mix with drugs that can interact with your medicine. If your medications don't seem to be help, talk with your doctor about other ones that may help you.

Recovery Activity

1. How would you rate your ability to manage and control your feelings?
   ❑ Excellent ❑ Good ❑ Fair (need help) ❑ Poor (really need help)

2. How would you rate your ability to tolerate distress or upsetting feelings?
   ❑ Excellent ❑ Good ❑ Fair (need help) ❑ Poor (really need help)

3. How would you rate your ability to pursue your goals even when you feel upset?
   ❑ Excellent ❑ Good ❑ Fair (need help) ❑ Poor (really need help)
4. How would you rate your ability to show empathy and concern towards others?
   ❑ Excellent ❑ Good ❑ Fair (need help) ❑ Poor (really need help)
5. How would you rate your ability to express positive feelings to others?
   ❑ Excellent ❑ Good ❑ Fair (need help) ❑ Poor (really need help)

6. Which of the following feelings do you need to learn new strategies to manage better?
   - ❑ Anger
   - ❑ Anxiety or fear
   - ❑ Boredom
   - ❑ Depression or sadness
   - ❑ Emptiness or lacking joy
   - ❑ Gratitude
   - ❑ Guilt and shame
   - ❑ Hopelessness
   - ❑ Loneliness
   - ❑ Sharing positive emotions with others (e.g., love, gratitude, etc.)
   - ❑ Other (write in_____)

7. Describe your overall style of managing your feelings, and your satisfaction with the way you handle them.

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2. Recognizing Your Feelings

Feeling are often short lived although in case cases they can last long. They often happen unconsciously without you being aware of what you feel. Paying attention to signs of feelings in your thoughts, behaviors and body can help you become more aware of them.

Being aware of your feelings, what causes them and how they affect you and others is necessary if you are to manage these in healthy ways. This in turn can reduce your risk of relapse to alcohol or drug use, improve your relationships and add to the quality of your life.

Sometimes feelings are referred to as "positive" or "negative." *Positive ones* include feeling caring, cheerful, glad, grateful, hopeful, loving, proud, joyful, passionate, or forgiving. These feelings usually make you feel good. And, sharing them with others can affect how they feel.

Negative ones include feeling angry, resentful, bitter, bored, sad, anxious, fearful, hostile, lonely, hopeless, guilty, disappointed, jealous, or humiliated. These usually make you feel bad or uncomfortable.

However, be careful about labeling feelings as only positive or negative. A feeling can be a negative or positive depending on the intensity and how it affects your behavior or health. Excitement, for example, can be negative if it leads to reckless or impulsive behavior or making poor decisions. Or, it can be positive and make you feel energized and invested in what you are doing. Intense anger can be negative and drag you down, making you feel upset because you feel others are treating you unjustly. Or, anger can be used in positive ways. Anger is energy that can empower and motivate you to resolve problems, conflicts, or work harder towards a goal that you wish to achieve. Fear can cause you to react quickly to a potential danger and avoid an accident. Or, it can control your life and cause you to avoid situations you fear, which can limit your opportunities in life.

Emotional Skills and Emotional Intelligence

You may not think about needing "skills" to manage your feelings, but people who use skills to manage their feelings or moods well do better in life. A skill refers to an ability to do something and can relate to any area of life including your emotional life.

According to experts *emotional skills* include the ability to identify your feelings, label them so you know what they are, assess their intensity (there is a difference between mild or severe depression, anxiety or anger), and manage these in healthy ways. These skills help you delay

your gratification, control your impulses to act, reduce stress, and know the difference between feelings and actions or behaviors.[9]

Cognitive strategies or skills refer to how you think about and understand your feelings, how you talk yourself out of bad feelings or talk yourself into acting in ways that enable you to manage upsetting feelings. *Behavioral strategies* or skills refer to verbal and non-verbal ways of communicating and dealing with feelings.

In our culture we mainly think of intelligence in terms of "intellect" or our ability to understand concepts and ideas, and to learn new information. However, there are many "other" types of intelligences that impact on our lives. One is called "*emotional intelligence*" and plays a large role in your ability to succeed in life. This refers to your ability to recognize, understand and manage your emotions. People who manage their feelings are at an advantage in life in any area such as intimate relationships, friendships and ability to succeed at work or other areas.

Emotional intelligence involves the following:[10]

- **Awareness of your own feelings and being able to read emotional signals in your body (physical state), thinking or behavior (how you act).** This requires you to know what you feel and why you feel this way, and tell the difference between accurate and inaccurate feelings. For example, some people mislabel disappointment or other feelings as anger and tend to feel angry too often and get angered too easily. You also need to know the difference between feelings and actions or behaviors. You can feel angry without acting angry as you give yourself time to work through this feeling.

- **Being able to manage feelings without doing so in an angry or passive manner**. This involves expressing your needs related to your feelings. If you feel rejected and lonely because your spouse or partner does not spend enough time with you, rather than be passive and drag your feet to express your feelings, you could initiate a discussion to talk about your need for companionship and attention.

- **Your ability to manage stress, tolerate frustration and still pursue your goals in life.** Everyone experiences stress and feels frustrated at times. You need positive ways to manage your frustrations and stresses so these do not interfere with your personal goals in life. This means you have to live with some stress and accept that frustration is part of life.

- **Your ability to delay gratification and control your impulses so that you do not act on your feelings when you experience them**. You could be very upset with your spouse or partner and feel like cussing them out or doing something else that could be hurtful. Or, you could feel a strong attraction to a spouse of a friend. Taking time to think through these situations and delaying acting on your feelings or impulses enables you to manage your feelings more constructively. Be careful about letting it all hang out and freely expressing feelings at any time. There are times in which you should not express your feelings to others.

- **Your ability to express positive feelings such as love, joy, gratitude and others.** People who feel and express positive feelings tend to do better and feel more satisfied with their

relationships than those who focus mainly on the negative or upsetting feelings or emotions. It is easy to take positive feelings for granted so do not ignore these.

- **Your ability to show empathy towards others**. This refers being aware of the feelings of other people and showing concern for them. You show empathy in what you say and do for others. This may mean listening to another's feelings and problems, not judging them and not giving unasked for advice because you want them to feel better.

- **Your ability to recognize the feelings of others.** This means knowing how to read body language, gestures, and tone of voice. This involves figuring out what others are feeling by what they say or how they say it, and even by what they don't say. Feelings can be conveyed more in a facial expression or tone of voice than what a person says. Intimate relationships that succeed are usually the ones in which people are able to understand, appreciate, acknowledge and share feelings with each other, even ones that are uncomfortable. For example, a spouse who "forgets" an important event such as an anniversary is conveying a feeling to their spouse, even though this feeling may be a negative one. The feeling could be mild anger or intense hostility for a variety of reasons, but you would never know unless you are aware that a feeling is being expressed by their failure to acknowledge this important event. Or, a person could say "I feel fine' when you ask how they are doing, but a sad or intense look on their face can tell you they do not feel fine.

  If your partner is upset and angry with you, it is better to know this up front than to try to guess what they feel. And, if you can convey to this person in a nonjudgmental way that you understand what he or she is feeling, you help validate their feelings as important and real to them. It may not be easy to experience another person's strong feelings, especially ones you believe to be negative. But, as a part of life it cannot be avoided.

  On the other hand, you also need to be aware of other peoples' positive feelings. While these can add to the richness of your relationships, these can also make you feel anxious at times. For example, if someone expresses a strong feeling of attraction or love towards you, and you never expected this, you have to figure out how to deal with it.

Why It is Important to Be Aware of Feelings

Awareness of your feelings enables you to figure out why you feel a certain way, identify issues to attend to in your relationships, or solve problems contributing to upsetting feelings. Sharing feelings appropriately can help you form and sustain relationships.

Awareness of your feelings also allows you to determine if a specific feeling is excessive or intense and a problem for you. For example, if your anxiety is so strong that you avoid situations you feel anxious about, it can interfere with your ability to function. If your depression is so severe that you feel like is not worth living, you should know you need help immediately so you do not act on any suicidal thoughts or feelings. Or, if your anger is so intense that you want to resort to violence, this is a signal that you need to control this feeling and figure out healthier ways of managing it.

Both negative and positive feelings can add to the richness of your life. Feelings can motivate you to work towards your goals or make changes in yourself or your life. Some feelings like worry or anxiety can at times help protect you from harm or prepare you for something important. For example, a fear of drowning when swimming in the ocean can protect you from taking a risk and swimming too far from shore. Anxiety about an upcoming job interview can motivate you to prepare better for this interview.

Your awareness of feelings, your own as well as the feelings of other people, can also help you determine which relationships need to be dropped or improved. For example, if you are involved in an intimate relationship with someone who is usually angry, jealous or full of contempt, this is a signal that your relationship is in trouble. You may want to reevaluate such a relationship to determine if staying in it is in your best interests, especially if this anger, jealousy or contempt is directed towards you. Knowledge of such emotional issues and patterns can help you sort through your relationships to identify those that need to end or change.

Recovery Activity

1. Describe your ability to experience a range of feelings (both positive and negative).

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2. Describe how aware you are of your different feelings.

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3. Describe your ability to express positive feelings.

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4. Describe your ability to recognize the feelings of other people.

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5. Describe your ability to listen to, validate, and accept the feelings of other people.

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6. Describe your ability to convey empathy (understanding and concern) to other people who express feelings of upset, anger, distress, disappointment, sadness or worry.

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7. Are there certain feelings that you seem to experience more than others? If yes, which ones and how do these affect your life?

_____

_____

_____

_____.

8. Are there feelings that you tend to avoid or find very uncomfortable? If yes, which ones, and why do you avoid them?

_____

_____

_____

_____

9. Are you mainly aware of, or apt to express, your negative feelings? If so, why and how does this affect your life?

_____

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10. Which feelings make you feel the most vulnerable to relapse to alcohol or drug use?

_____

_____

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_____

Carrie's Example

I have a long history of addiction to heroin and pain pills. I have been drug free and in recovery several times with sober periods up to three years. My last two relapses followed times when I felt very anxious, upset and worried and didn't use the coping skills I had learned. One time this happened when my 64 year old mother was diagnosed with cancer. I felt shocked, anxious and very worried she might not make it. It wasn't long before I was buying pills on the street. The other relapse happened after my company downsized and I lost my job. I was anxious and worried that I might not find another good job. The only good thing I can say is that I stopped both relapses early. One relapse I stopped after just a week of using, another after two months. The second one, as you can imagine, caused more damage to me and my family because it lasted so long.

I learned that I have to stick with my program all the time. I need to reach out and let others support me and talk about my feelings rather than act on them. As my therapist and sponsor said, there's nothing wrong with feeling anxious or worried as long as I cope with it without creating an excuse for using drugs.

3. How to Manage Negative Feelings

Understanding and managing negative feelings reduces your chances of relapse to an addiction. This can also improve your relationships and the quality of your life. Since feelings can be unconscious and out of your awareness at first, you can become aware of them by paying attention to body cues as well as how you think and act. These can "signal" specific feelings.

In later sections, information will be provided on specific feelings like anger, anxiety, boredom, depression, emptiness, grief, guilt and shame that can complicate recovery or contribute to relapse if you don't use skills to manage these. Information about increasing positive feelings in your life will also be presented. Your job is to decrease the amount of negative feelings, manage negative feelings in healthy ways, and increase the amount of positive feelings experienced.

Following are strategies to help you understand and manage your feelings.[11]

- **Recognize and label your feelings.** Don't deny your feelings because this can cause you more difficulty in the long run. Give a name or label to your feeling. Put you feelings into words such as: "I feel hurt, I am miffed, I'm anxious or worried, I feel disappointed, I'm depressed, I feel guilty, I feel grateful," etc. Even if you feel what you believe is "negative" or "bad" feeling, remember that it is simply an honest feeling. Experiencing and labeling a feeling doesn't mean you have to "act" on it. In fact, there are many instances when it is best to contain your feeling and not express it to others.

- **Be aware of how your feelings show**. Pay attention to how your feelings show in your body language, physical symptoms, thoughts and behavior. For example, pacing and feeling "keyed up" or tight may indicate one person is angry. For another, it may indicate feeling worried or anxious. A person may be prone to headaches or other physical complaints when upset and angry. These or other physical cues may be a sign that something emotional is going on that needs your attention.

  When feeling upset, rejected, or frustrated, one person may go on a shopping binge. Another may turn to food and eat too much or use alcohol or drugs. Another person may withdraw and avoid others when upset. The ways in which feelings show through behavior are endless.

- **Look for causes of your feelings**. Think about why you feel a certain way. What causes this feeling? Feelings aren't usually "caused" by other people or events but how you think about these. Your beliefs about feelings play a big role in how you deal with them. For example, if you believe anger is bad and not to be expressed, you are likely to deny angry feelings or hold them inside.

To understand why you feel the way you do, look at the connection between what you believe or think, how you feel, and how you act. Any of these components can affect the other.

You can also look for patterns to your feelings. Do you tend to experience certain feelings more frequently than others? Does your response to certain situations or events form a pattern? For example, are you prone to feeling anxious and worried when you are faced with a difficult task where others put demands on you? Are you prone to feeling mad or depressed after receiving criticism from others?

- **Evaluate the effects of your feelings and your coping style, both on yourself and other people.** How is your physical or mental health affected by your feelings and how you manage them? How is your behavior or self-esteem affected? How are your relationships affected? If your feelings or the ways in which you deal with them cause you distress or problems in your relationships, then you need to work on changing how you deal with them.

  You need to consider how your feelings affect other people. For example, if you are depressed or angry, how does the way you show these feeling in your behaviors impact your family or other relationships?

  There may be many positive effects of your feelings and how you cope with them. Most likely, there are some feelings that have more of a positive effect on your life and some that have more of a negative effect. If a feeling or how you deal with it causes problems for you, this is a signal that you should change how you cope with it.

- **Identify coping strategies to deal with your feelings**. Continue to use coping methods that are effective. If needed, learn new coping methods. There is no right way to cope with your feelings. Having a variety of coping strategies puts you in a good position to effectively deal with your feelings. Coping strategies include verbal (what you say), cognitive (how you think) and behavioral (how you act.)

- **Rehearse or practice new coping strategies (if needed)**. Practice ahead of time how you might deal with a particular feeling, especially when another person is involved. This can make you feel more prepared and confident of what you will say. Learning to express feelings is a skill that has to be *learned and practiced* just like any other skill.

  Sometimes you can practice alone by thinking of different things that you can say in certain situations. You can even practice talking out loud how you might deal with your feelings towards another person in a given situation. Or, you can practice with another person. For example, if you feel very attracted to a person and want to ask them out on a date, but feel uncomfortable doing so, you can practice with a friend.

- **Put your new coping strategies into action.** You can come up with a good plan to deal with feelings but if you don't put it into action, it does you little good. Action is needed for change. You have to translate your desire or need to change into your actual behavior. Don't worry about making a mistake, as this is to be expected when you first change how you cope

with your feelings. If you make any mistakes, just try to learn from them to help yourself in the future.

- **Change inefficient coping strategies.** All strategies will not work the same in all situations. The key is having several to rely on so that you do not use the same strategy all of the time. Even if a coping strategy works well in one situation, it may not work in another. Make sure you have several strategies that you can rely upon to help manage your feelings. If a particularly strategy does not work or help you much, use other strategies. Don't continue to use things that do not work for your.

Recovery Activity

1. How important is it to you to learn new ways to manage your feelings. Explain your answer.

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2. What did you learn in this section that can help you in your ongoing recovery in dealing with your feelings. Explain your answer.

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Setting a Goal

My **goal** in relation to how I manage my feelings is:

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Steps I will take to reach this goal are:

_____

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_____

Potential benefits of reaching my goal are:

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_____

_____

Sanya's Example

1. My goal is to get better control over my feelings and not let everything out right away. When I feel mad or frustrated, I let it out without thinking about whether I should do this, how I should do this or how I may affect others with what I say or how I say it. Plus, when I verbalize anger I usually do so in a hostile way that upsets and pushes other people away.

2. Steps I will take to reach my goal of better control over my feelings is to take time to think before I blurt out how I feel and what I think. I will practice expressing feelings in ways that are not hostile or demeaning to others. And, I will work to know when to keep a lid on my feelings because it is not always good to let these out.

3. Potential benefits of reaching this goal include feeling better about myself, having a better quality of sobriety, improving relationships with others, and not having a poor excuse to get high again.

4. Anger

Anger is a common feeling experienced by most of us. The intensity of anger can vary from mild to severe, which in turn impacts on how you manage it (that is, what you do or what you do not do—doing nothing is actually a coping strategy). Terms used to convey different degrees of anger include mad, angry, upset, pissed off, furious, annoyed, outraged, resentful, irritable and hostile. In the extreme form anger can lead to rage, hatred and violence.

Many factors contribute to anger or problems managing it.[12] These include your beliefs and attitudes, experiences in your family and social environment, opportunities in life you get (or feel cheated from getting), other feelings, your personality and your biology. Some people have a shorter fuse than others, probably a result of the interaction of physical and mental factors. Everyone knows someone who an "angry" person. This means anger is ingrained in their personality and physiology as they may be "wired" differently.

Anger can either be a primary or secondary feeling. When it is primary, you feel mad, miffed or pissed about something or someone, even though it is your thinking that leads you to this feeling. When it is secondary, below your anger may lie other feelings such as fear, hurt, disappointment or depression.

You can act rational and deal with anger in healthy ways. Or, you can act irrational and say or do things that make things worse for you and even for other people.

Whether primary or secondary, poorly managed anger can impact on your physical or mental health. People with high levels of anger increase their risk of heart disease and their risk for a second cardiac event.[13] This in turn can impact on how long a person lives.

Anger that is not managed well can contribute to a relapse to alcohol and drug use.[14] In addition, much friction can be caused in a relationship if you ignore your anger or act on it in ways that hurt other people physically or emotionally. For example, becoming verbally abusive or physically violent when angered creates a new set of problems in your relationships in addition to being a threat to the health and well-being of the other person.

On the other hand, anger is an emotion that can empower you if dealt with in a positive way. Anger can motivate you to set or reach goals or work hard to accomplish things in your life but only if you do not let anger control you, and you control it instead. For example, Martin Luther King said that he used his anger to help him write, pray and preach well.

Anger, in itself does not cause problems. How you think about, express, and manage anger determines how it affects your health, your life and your recovery from addiction.

Some people try to ignore their anger and hold it inside. They stew on the inside, and may even become depressed. They may deal with anger by dragging their feet, criticizing others behind their backs, or avoiding people.

Others let their anger out too quickly without "thinking through" this feeling or the consequences of expressing it, regardless of the way it is expressed. They may lash out at others, yell, cuss, scream, or act in other hostile ways. Some get into fights or show other forms of physical violence towards other people when angry. Some destroy objects or property. Yet others use these feelings as an excuse to use alcohol or other drugs, go on an eating binge or engage in another unhealthy behavior. If this describes you, you need to learn to "contain" your anger and control your behavior so you do not act it out or engage in behaviors that harm you or others.

Recovery Activity

1. How much of a problem is your anger or how you cope with it or express it?

   - ❒ No problem
   - ❒ Small problem
   - ❒ Moderate problem
   - ❒ Serious problem

   Describe the reason for this answer:

   _____

   _____

   _____

   _____

2. Describe how your anger usually shows in your thoughts, feelings, behaviors or physical symptoms (e.g., I get sad, frustrated, pace, feel nervous, etc.).

   _____

   _____

   _____

   _____

3. I usually deal with anger by (e.g. holding it inside, letting it out immediately, talking it out, lashing out at others, fighting, etc.):

   _____

   _____

   _____

   _____

4. I learned the following from my parents about anger and how to express it:

   _____

   _____

   _____

   _____

5. My anger affects my use of alcohol or drugs in the following ways:

   _____

   _____

   _____

   _____

6. My anger affects my relationships in the following ways:

   _____

   _____

   _____

   _____

Strategies for Managing Anger

Following are strategies used by others to cope with their anger.[15] No one strategy works the same for everyone. Find several that you think will work for you and use these. If you cannot use these successfully on your own, get help from a therapist or counselor.

- **Recognize your angry feelings.** Pay attention to body cues, thoughts, and behaviors that tell you that you are angry. Use your anger cues to admit that you are angry. Don't deny, hide, minimize, or ignore your anger, but do not act out when angry.

- **Figure out why you are angry.** When you feel angry figure out where it is coming from. Does it relate to your thinking about something another person did or said to you or related to an event, experience, or situation? Anger is often caused by the way you think about things.

- **Decide if you really should feel angry**. Are you an angry person who seems to get mad too often or without good reason? When angry, ask yourself if the facts of the situation warrant an angry reaction on your part? Or, ask yourself if your anger is the result of a character defect (i.e., you get mad frequently for little things). Intense anger needs to be contained and kept in control.

- **Identify the effects of your anger and your methods of coping with anger.** How does your anger and your methods of coping affect your physical, mental, or spiritual health? How are your relationships with family members and others affected?

- **Use different strategies to deal with anger.** These include cognitive (your beliefs about anger and the internal messages you give yourself), behavioral (how you act), and verbal (what you say to other people) strategies. Having a variety of strategies puts you in a good position to cope with anger in a wide range of situations.

- **Cognitive strategies for anger management (these relate to how you think)**.

    - Evaluate your beliefs about anger and change those beliefs that cause you problems. For example, if you believe you should "let it out" every time you get angry, you may find this isn't good and your belief should be challenged and changed. Or, if you believe you should never get mad, you might have to change this belief and give yourself permission to feel anger but to keep it in control.

    - Determine if your anger is really justified given the situation. This requires not jumping to conclusions and getting all the facts of the situation first.

    - Use positive self-talk or slogans (for example, "this too will pass," "keep cool and stay in control," etc).

    - Evaluate the risks and benefits of expressing your anger or holding it inside.

    - Take a few minutes at the end of the day to see if you are harboring anger from the day's events.

- **Verbal strategies for anger management (these relate to what you say).**

    - If appropriate, talk with the person you are upset with but in a calm and respectful matter. Ask to talk with them about something bothering you and then share your concerns in a calm manner. Do not yell, cuss, put them down, humiliate or blame them. Keep in mind that some people will not care how you feel or what bothers you.

    - Discuss the situation or problem that contributes to your anger directly to the person with whom you are angry, but only if this is appropriate. For example, it may not be appropriate to share such feelings towards a boss.

    - Share your angry feelings with a friend, family member, therapist, AA, NA or other 12-Step program sponsor. Many find it helpful to discuss anger at support group meetings.

    - Act the opposite. If you feel angry towards someone, instead of acting in ways that convey anger, show kindness towards them. If you are angry because someone hurt you, show forgiveness and do not hold a grudge.

    - Discuss your thoughts about the situation or problem that contributed to your anger with a neutral person to get an objective opinion on the situation and how you view it.

- Apologize or make amends to others hurt as a result of how you expressed your anger.

- If you have to leave a heated argument with a loved one in order to take time to calm down, let this person know that you need some time out to get yourself together. Tell this person that you want to come back to finish the discussion after you calm yourself down.

- **Behavioral strategies for anger management (these relate to your actions).**

  - Direct anger energy towards physical activity such as walking, exercise, or sports. Regular physical activity is a good release for many stresses or feelings.

  - Use creative media, such as painting, drawing and other forms of arts and crafts.

  - Write about your feelings in a journal or anger log. If you put your feelings into words, they may have less control over you.

  - Practice verbal strategies mentioned in the previous section to better prepare yourself to express your feelings to others.

  - Use reminder cards that provide specific coping strategies you can use to deal with anger.

  - Leave situations in which your anger is so intense you might lose control and do something irrational or violent, or say something that could be very hurtful to another person.

When to Seek Professional Help

Seek help if you experience serious problems as a result of anger, how you cope with it, or your inability to gain control of it on your own.[16] Professional help is especially important for those who experience persistent and chronic anger, intense feelings of anger or rage, act out by threatening, hitting or hurting others, or breaking objects. Treatment can also help people who turn anger against themselves and exhibit self-destructive tendencies such as those who cut, burn, or hurt themselves.

If you abuse your children, partner or spouse, seek help for domestic violence in a mental health clinic or program that specializes in domestic violence counseling. Make sure your family members get help too because they may need it, especially if your abuse was persistent over time. Just because you get help does not mean they will push aside their feelings about the abuse they experienced.

Setting a Goal

My **goal** in relation to how I cope with my anger is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

Josh's Example

1. My goal is to stop being passive and letting my anger build up. When I do this, I get passive aggressive and show anger by making critical remarks, forgetting to do things and being disrespectful in ways that are not real obvious.

2. Steps I will take to stop my pattern of building things up and then acting in a passive way include: a) doing an anger check at the end of each day to identify feelings early so that I do not avoid these; b) determining if my anger is justified or an overreaction as I blow things out of proportion; c) talking with my wife about my feelings if she is involved in situations I'm upset about, but doing so in a calm, respectful manner; d) having regular discussions with my therapist and NA sponsor to discuss my progress and continue to learn anger management strategies; and e) getting regular exercise to let off steam.

3. Potential benefits of reaching this goal include better control over my emotional life, getting along better with my wife, and not letting others control my feelings.

5. Anxiety and Worry

Most people feel anxious or fearful and worry from time to time. This often leads to making good decisions to avoid danger or take steps to be safe or prepared for a specific event. For example, fear of an accident can lead a person to drive at a reasonable speed or to flee from a fire. Fear of getting hurt in an accident if a seat belt is not worn can lead to using a seat belt to increase the odds of not getting hurt should an accident occur. Anxiety over a job interview can lead a person to prepare well for this interview, thus increasing the chances of getting the job. Fear of doing poorly in school can lead a student to study more. Anxiety over an upcoming social event where alcohol is being served can motivate a recovering alcoholic to prepare for this event in a way that insures his recovery is protected.

Many rely on alcohol or drugs to decrease their anxiety symptoms only to find in the long run such use can contribute to an addiction, including addiction to prescription medications. People in recovery often feel anxiety related to their recovery and many things in their life. Some of this is normal and will get better as sobriety progresses and positive changes are made. Other anxiety requires you to learn ways to manage it so it does not causes distress or contribute to a relapse to your addiction or lead to always seeking anti-anxiety drugs when you feel anxious.

Anxiety and worry are closely related. Anxiety refers to the *physical* side and worry refers to the *mental* side. When you have one, you usually have the other.

Some of the physical ways in which anxiety shows include shortness of breath, rapid heart beat, tightness or discomfort in the chest, feeling lightheaded or weak, feeling uptight or on edge, tingling or numbness.[18] Some even end up in a hospital emergency room because they think these symptoms of their anxiety (or panic) is really a heart condition.

Anticipatory anxiety refers to feelings of anxiety associated with thinking ahead of time and what "may happen" in the future. Another term used to describe this is *fear of anxiety*. Some people avoid situations because of their fear of anxiety. Examples of places or situations avoided include shopping in a large or crowded store or standing in check-out lines; attending church; going to the doctor or dentist; going to the movies, sporting events, or music concerts; driving through tunnels or over bridges; riding elevators or escalators; or traveling by plane, bus or train. In some cases, people become so anxious and fearful of leaving home that they seldom or never leave it.

Worry refers to thinking about something over and over. Worry may occur in relation to a *real* problem, a *potential* problem, or something you think may happen. People who worry a lot often feel inadequate in coping with the problems or situations they worry about. Some of the things people worry a lot about include their health or the health of other family members, making correct decisions and doing what's right, being on time, losing control of feelings or behaviors, pleasing and making other people happy, and staying sober.

The majority of people with anxiety also have symptoms of depression. Anxiety and depression sometimes go hand in hand. The treatment approaches and recovery strategies used to help with

depression and anxiety have much in common. For example, changing beliefs and thoughts, solving problems, managing moods and feelings, improving communication and relationships, and learning signs of relapse are often the focus on treatment of an anxiety disorder or clinical depression.[19] Also, similar medications may be used for anxiety disorders or depression.

Anxiety Disorders

Some people experience excessive anxiety, dread or worry to the point where they feel tension and other physical symptoms like nausea, dizziness, shortness of breath. These are not normal reactions to genuine threats. And, they lead to impairment in life and are accompanied by other symptoms. In some instances, intense anxiety can lead to avoiding behaviors associated with these feelings. This in turn, can limit one's life and cause considerable personal distress. This could contribute to an "anxiety disorder." [17]

While anxiety disorders share common symptoms like those mentioned above, each disorder has other unique symptoms as well. Anxiety disorders include:

- **Panic attacks** in which you feel intense fear, racing heart, shortness of breath, sweating and chest pain. They can occur for no reason or as a result of stress. You may think you are having a heart attack or going crazy.

- **Panic disorder**, which means you have multiple panic attacks over time. They may happen quickly and without warning. And they cause great concern to you and interfere with your life.

- **Phobias or irrational fears**, which occur when you are confronted with a situation or object that you fear. Examples include heights, animals (e.g., dogs or snakes), insects (e.g., spiders) closed spaces, speaking in public and others.

- **Generalized anxiety disorder**, which involves frequently feeling excessive anxiety and worry for a bunch of different things. You may also feel tense, your heart may race or you may feel dizzy.

- **Obsessive-compulsive disorder**, where you experience distressful thoughts over and over and repeat behaviors that you cannot control in an attempt to control your thoughts.

- **Post-traumatic stress disorder**, where you have distressful thoughts, anxiety, anger and other reactions to a traumatic experience. This experience is severe or life threatening and can include exposure to military combat, a natural disaster (flood, earthquake), fire or accident.

Anxiety can also be caused by medical problems like thyroid disease and reactions to alcohol, illicit drugs or prescribed drugs. When you stop using an addictive substance (alcohol or other drugs), it is common to feel anxious as well as depressed for awhile.

If you have an anxiety disorder or are concerned that you may have one, consult a psychiatrist, physician, psychologist or therapist for help in determining if a disorder is present. Then, a plan can be developed with you to address your anxiety disorder. There are several effective psychological therapies for anxiety disorders. These include cognitive behavioral therapy (called "CBT"), exposure therapy and other therapies. CBT helps you change your belief and thinking and your reactions to situations that trigger your anxiety symptoms. Exposure therapy is used for OCD, PTSD, phobias and panic disorders. These help you confront your fears.

Medications used for anxiety disorders include antidepressants (remember anxiety and depression often exist together). Different types of antidepressants are used depending on the type of anxiety disorder that you have. Benzodiazepines and beta blockers are also used as well as antipsychotics for more severe anxiety. If you are in recovery from an addiction, be careful about the types of medicines you use as some anti-anxiety medications such as the benzodiazepines can produce dependence.

Other helpful approaches to reduce anxiety symptoms include mindfulness meditation, hypnosis, biofeedback, relaxation, exercise, and eye movement desensitization and reprocessing (called "EMDR"). You can learn meditation or relaxation from a professional or teach yourself. You can get a professional to help you with an exercise program or develop one yourself. Hypnosis, biofeedback and EMDR all require the help of a professional. Talk with your doctor or therapist about these alternative approaches if other approaches are not helping as much as you would like.

Recovery Activity

1. How much of a problem is your anxiety or how you cope with it or express it?

   - ❒ No problem
   - ❒ Some problem
   - ❒ Moderate problem
   - ❒ Serious problem

   Describe the reason for this answer:

   _____

   _____

   _____

   _____

2. My anxiety shows in the following ways:

   _____

   _____

_____

_____

3. I get anxious or worry a lot because:

_____

_____

_____

_____

4. My anxiety and worry have affected my life in the following ways:

_____

_____

_____

_____

5. My anxiety and worry have affected my relationships in the following ways:

_____

_____

_____

_____

6. How often do the things you feel anxious or worry about actually happen?

_____

_____

_____

_____

7. The connection between my use of alcohol or other drugs and my anxiety or worry is:

_____

_____

_____

_____

Strategies for Managing Anxiety and Worry

Following are strategies used by others to cope with their anxiety and worry.[20] No one strategy works the same for everyone. Find several that you think will work for you and use these. If you cannot use these successfully on your own, get help from a therapist or counselor.

- **Identify and label anxiety and worry**. Know the signs and symptoms of your excessive anxiety or worry. This will help you "catch" yourself when you feel anxious or are worrying too much.

- **Find out what is causing your anxiety and worry**. Identify the specific problems, situations, or things that cause you to feel anxious and worried. If these are real problems, look at ways to solve these. If these are potential problems ask yourself how likely it is these problems will actually occur. Work on changing how you think about potential problems.

- **Get a physical examination.** This may help determine if medical problems are contributing to your anxiety.

- **Evaluate your diet.** Try to figure out if your use of caffeine, sugar, or other foods are contributing to anxiety and making you feel on edge.

- **Evaluate your lifestyle**. Make sure you get enough rest, relaxation, and exercise. Exercise can help release some of your anxious feelings and may serve the additional benefit of helping to prevent anxious feelings from building up.

- **Learn meditation and relaxation techniques**. Meditation can help you feel calmer and gain better control over your anxiety. There are many books and tapes available to teach yourself relaxation. Or, you can learn these techniques from a professional.

- **Practice proper breathing techniques.** Stop shallow or rapid breathing or holding your breath. Learn proper ways of breathing and practice these each day until they become automatic. You can practice breathing techniques at work, home, in the car, before a speech, or before going into a situation about which you feel anxious.

- **Change your anxious beliefs or thoughts.** Practice changing your "anxious" and "worrisome" thoughts or beliefs. When working on a *real* problem causing you anxiety or worry, view the problem for what it is. Do not look at it as a barrier you cannot overcome. When feeling overly anxious or worried about a *potential* problem, ask yourself what evidence you have that the problem will ever occur or what you fear about the outcome. Try to identify all the possible outcomes, not just the negative ones that you worry might happen. Make positive "self" statements such as, "I can do it," "My anxiety won't get the best of me," "I'm in control of my worry," "It's OK to make mistakes," or "No one has to be perfect."

- **Share your anxious feelings and thoughts with others.** Discussing your feelings and worries with a friend, family member, sponsor, or counselor may help you feel better and gain

relief. This can also help you learn what others do to handle their anxiety and/or worry and identify new ways to cope. However, keep in mind that you can overwhelm others if you constantly share your anxiety without doing other things to cope with it.

- **Set aside "worry" time each day**. Try to avoid worrying throughout the day and save your worries for a specific time you call your "worry time." Pick a place and a regular time, then allow yourself to let your worries out. Limit yourself to 15 minutes or so a day for this worry time.

- **Keep a written anxiety-and-worry journal.** Writing your thoughts and feelings in a journal can help you better understand these. This can help you identify patterns of anxiety and worry, coping strategies that do not work, and coping strategies that work in reducing anxiety and worry. This can also help you track your progress over time.

- **Face the situations causing you to feel anxious and worry.** Reality is often not as bad as what you think it might be. When you directly face situations you find difficult, your confidence level may increase. Start with the least threatening anxiety- or worry-provoking situations and gradually build towards facing more difficult ones. Engaging in situations you feel anxious and worry about should reduce your anxiety and worry over time.

- **If your anxiety level continues to cause you significant distress, consult a mental health professional.** A consultation with a mental health professional (psychiatrist, psychologist, social worker, counselor, etc.) will help you determine if your anxiety is a symptom of a psychiatric illness. Many treatments are available to help individuals with anxiety disorders. These include different types of psychotherapy as well as medication. Be careful about types of medication used as you do not want to become dependent on medication such as tranquilizers. Let your doctor know that you are recovering from an addiction so that the proper medications are used should your symptoms require the use of medicine.

Setting a Goal

My **goal** in relation to my anxiety and/or worry is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

Megan's Example

1. My goal is to accept that some anxiety is normal and to know when I need to use other coping strategies that don't involve reliance on anti-anxiety medications as I have abused these in the past.

2. Steps I will take to reach my goal of managing anxiety include: a) knowing how much anxiety I can tolerate without feeling I "need" to seek drugs from a doctor; b) using self-talk to convince myself to feel less anxious; c) accepting that many of the bad things I worry about seldom happen, which means my anxiety has no basis; d) talking to my NA Sponsor or therapist before I start seeking medicine for anxiety because my past pattern has been to try to get medications; and e) working with my therapist on using a recovery guide that helps people like me learn about anxiety and ways to manage it in healthy ways.

3. Potential benefits of reaching this goal are more confidence in my ability to deal with feeling anxious, no need to seek drugs from doctors (as this feeds by addiction) and not avoiding some situations I avoided in the past when I felt a certain degree of anxiety.

6. Boredom

Boredom can impact on relapse if you don't use positive coping strategies and get involved in meaningful relationships and activities.[21] If your lifestyle was wrapped up in alcohol or drugs, or in the "fast life," being sober may feel boring at first. You may even miss the "action" more than you miss alcohol or drugs. Replacing times that you used substances with new activities takes time and effort. Guard against letting boredom serve as an excuse to use alcohol or drugs again. Perhaps you gave up some of your non-drug and alcohol interests over time as your addiction took over your life. Things that were once important to you may no longer be part of your life.

You may also feel bored with your job, your relationships, or other life circumstances. Substance use may have covered up your boredom and unhappiness. Now, you have to face these issues. If you are bored with your life try to figure out why. For example, maybe you are bored in your relationship because your needs aren't being met. Or, you are bored at work because you aren't using your talents or your job isn't challenging.

Boredom with recovery is common in the early phases. Some people who are initially excited about recovery may find later that the routine of recovery bores them. They may debate within their mind whether they should continue feeling this way or go back to using again. During this period their risk of relapse increases. Without acknowledging their boredom and using active coping strategies they can increase their risk of relapse.

Recovery Activity

1. How much of a problem is your boredom or how you cope with it?

   - ❒ No problem
   - ❒ Some problem
   - ❒ Moderate problem
   - ❒ Serious problem

   Describe the reason for this answer:

   _____

   _____

   _____

2. I enjoy the following hobbies or activities:

_____

_____

_____

3. As a result of my alcohol or drug problem, I gave up these activities:

_____

_____

_____

_____

4. Of this list, I miss the following activities the most:

_____

_____

_____

_____

5. I would like to get involved in these activities again:

_____

_____

_____

_____

6. New activities or interests that I could get involved with include:

_____

_____

_____

_____

7. Are you bored with recovery? ❒ Yes ❒ No

Explain your answer: _____

_____

_____

_____

8. What excites me and makes me passionate or feel good about my life is:

_____

_____

_____

_____

Strategies for Managing Boredom

Review the following strategies that others have used to manage their boredom.[22] Use those that you think can help you.

- **Recognize your boredom and determine the reasons.** Everybody feels bored now and then. Pay attention to times when you are bored and figure out why you feel this way.

- **Regain "lost" activities.** Get involved in activities that you enjoyed prior to your addiction. Figure out what used to bring you pleasure and fun that didn't involve alcohol or drug use.

- **Develop new interests.** Learn new hobbies, develop new interests, or find new forms of pleasure or enjoyment. Try some activities or hobbies that you always wanted to do. Have things you can do alone or with others in any place, any time, or in any weather.

- **Appreciate the simple pleasures in life.** If you have a need for high levels of action, excitement and risk, you have to learn to enjoy simple pleasures. Give yourself time to learn how to enjoy these simple pleasures in life such as quiet time alone, talking with a loved one, reading, listening to music, watching a movie or taking a walk.

- **Build fun into your day-to-day life.** You may wish to complete a daily or weekly list of pleasant activities to make sure you have fun. Try to find a balance of fun activities involving other people and those involving just you.

- **Identify "high-risk" times for feeling bored.** For many people recovering from addiction, evenings and weekends are the times when they are most likely to feel bored. Knowing your high-risk times puts you in a position to plan recovery or social activities during these times.

- **Change your thoughts about boredom.** Expect some boredom and don't think you always have to be busy at something. Lower your expectations if needed. And don't expect others to be responsible for making your boredom go away. It's up to you. Boredom can be a signal that something in your relationships or lifestyle needs to change. Challenge thoughts such as, "I'm bored, I need alcohol or drugs."

- **Carefully evaluate relationship or job boredom before making any major changes.** If you are bored with a close relationship or your job, figure out why and what you need to do. Perhaps you need to work on improving, ending, or finding new relationships. However, major changes in relationships, jobs, or other major areas of life should be well thought through. In the early months of recovery, be careful about making major changes too quickly,

such as developing a new romantic relationship. Many have relapsed because a new relationship became more important than their recovery.

- **Deal with persistent feelings of boredom.** If you feel empty inside and nothing has meaning in your life, consult a therapist. You can benefit from therapy. Feeling bored too often may be associated with your feeling empty or like your life has no direction or meaning.

- **Participate in mutual support programs.** These can help you keep busy and meet new people. Many programs sponsor dances, picnics, or other organized activities or events. In some areas, there are "recovery clubs" that provide an opportunity to socialize without the threat of alcohol or drugs. Recovery clubs also sponsor social events. Any of these activities can help you cope with boredom in addition to offering other benefits.

Setting a Goal

My **goal** in relation to my boredom is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

Matt's Example

1. My goals are to not let feeling bored be a reason to get high again and to get involved in positive, enjoyable activities that do not threaten my recovery.

2. Steps I will take are: a) accept I can't always have "action" in my life and that it is OK to have ordinary experiences; b) accept that being sober is different than getting high and boredom is common early on; c) get back to working out regularly at the gym and playing basketball; d) finding one new hobby that I can enjoy; and e) schedule activities that are enjoyable each week so I lessen the chances of feeling bored.

3. Benefits are that I am less likely to relapse to drug use and will have better use of my time.

7. Depression

Depression is a term with different meanings. In the casual sense, feeling depressed means feeling sad, down or bummed out. This feeling is often temporary and, although it can cause discomfort, it is not nearly as serious as *clinical depression* that is more persistent and severe as other symptoms accompany the depressed mood.

This section of the workbook will help you learn the difference between feeling depressed and having a more serious clinical depression. However, the coping strategies discussed at the end of this section can help you with either of these.

Depression is closely associated with addiction.[23] Drugs such as alcohol, opiates, tranquilizers, and sedatives depress the central nervous system and can cause you to feel depressed. Depression is also associated with "crashing" from the effects of cocaine or other stimulant drugs.[24]

Problems and losses caused by an addiction also contribute to feelings of depression. Many things are lost because of addiction -- relationships, jobs, status, health, money, dignity and self-esteem. Sometimes depression is caused by a relapse to substance use, especially after a significant period of abstinence and recovery.

Getting and staying sober can help decrease or eliminate feelings of depression. However, this is not always the case. You may still feel depressed even if you have been sober for weeks or months. Or, you may experience depression long after you are sober.

Clinical Depression as a Mood Disorder

Higher rates of *clinical depression* are found among the addicted compared to the general population.[25] This type of depression involves feeling depressed or being unable to experience pleasure for several weeks or longer. Other depressive symptoms include loss of appetite; decrease in sexual desire or energy; difficulty concentrating; significant weight change; problems falling asleep, staying asleep, or sleeping too much; feeling agitated or restless; feeling hopeless, helpless, worthless, or guilty; feeling like life is not worth living; or making an actual attempt at suicide. For some people, symptoms have been more or less present for months or even longer, and interfere with their life.

Many therapies are effective with depression. These include cognitive-behavioral therapy (called "CBT"), interpersonal therapy (called "IPT") and others.[26] In addition, medications are helpful in moderate to severe cases of depression. If therapy alone does not help a moderate case of depression, ask to be evaluated for an antidepressant medication. If your depression is severe, consider medication as well as therapy when you start treatment. This will reduce your personal

suffering and distress and start your recovery from depressive illness. Even if you do not have a clinical depression it still can help to learn some ways to handle feelings of depression so that your recovery goes better.

Recovery Activity

1. Check symptoms you have experienced every day or nearly every during the past two weeks (or longer). Put two check marks by symptoms that have been present for over a month.

   - ❒ Feeling depressed or sad or down
   - ❒ Trouble experiencing pleasure (nothing feels good; it is hard to enjoy life)
   - ❒ Appetite disturbance (don't have much of an appetite; poor eating)
   - ❒ Sleep disturbance (hard to fall or stay asleep; waking up early; poor sleep quality)
   - ❒ Feeling agitated or irritable
   - ❒ Feeling slowed down
   - ❒ Difficult concentrating or remembering things
   - ❒ Feeling helpless, hopeless, or guilty
   - ❒ Loss or decrease in sexual desire or energy
   - ❒ Thoughts of suicide (wish you were dead; wonder if life is worth living)
   - ❒ Plan to take your life (if you check this get help immediately)
   - ❒ Actual suicide attempt (if you check this get help immediately)

2. At this time, how much of a problem is your depression or how you cope with it?

   - ❒ No problem
   - ❒ Some problem
   - ❒ Moderate problem
   - ❒ Serious problem

   Describe the reason for this answer:

   _____

   _____

   _____

   _____

3. Depression has affected my life in the following ways:

   _____

   _____

   _____

   _____

4. I am currently depressed because (what may be contributing to this mood?):

   _____

   _____

   _____

   _____

5. I tend to have a lot of negative, pessimistic, or depressing thoughts (for example, I often think about the worst-case scenario, see only the negative side of situations, exaggerate problems, or make mountains out of molehills, etc.).

   ❒ Yes ❒ No Explain your answer:

   _____

   _____

   _____

   _____

6. My use of alcohol or drugs and my depression are connected in the following ways:

   _____

   _____

   _____

   _____

Strategies for Managing Depression

Review the following strategies that others have used to manage feelings of depression or a clinical depression.[27] Use the strategies that you think can help you.

- **Do something about the problems causing you to feel depressed.** Solving problems contributing to depression should help you feel better. If you feel depressed because you are overweight, then do something about your weight. If you feel depressed because you hate your job, look at other job options. If you feel depressed because your relationships are unsatisfying, look for ways to improve these relationships or develop new ones.

  However, depression is not always related to "problems" or "life events." Biological factors may contribute to a clinical depression. This is especially true of people who have two or more episodes of clinical depression, called *Recurrent Depression*. This type of depression increases your chances of having a future episode. Also, many physical diseases or medical problems are associated with a higher rate of clinical depression. A physical examination can help rule out physical causes of depression (e.g., other diseases).

- **Evaluate your relationships.** Develop new relationships if your current ones are not satisfying. Determine if you need to end a relationship such as one in which the other person abuses you physically and/or psychologically and refuses to get help to stop the abuse.

- **Evaluate your relationship skills.** Effective skills include expressing your thoughts and feelings directly, making requests, saying no when you do not want to something another person requests or demands, initiating discussions of problems, learning to compromise, expressing empathy and understanding others' feelings, being able to show support towards others, and expressing positive feelings. Figure out if you need to improve any of these skills.

- **Keep active.** Even if you have to force yourself to do things, keep active in your social relationships, and with your hobbies and interests. When you least want to do things may be when you most need to. Physical activity like walking, running, working out, working around the house or yard, or playing sports may indirectly help improve your depression.

- **Talk about your feelings and problems.** Share your feelings of sadness or depression with supportive people such as close friends or family members. Talk about your feelings with a counselor or sponsor if you are involved in a 12-Step program. Venting your feelings may provide some relief and help you gain a different perspective on your depression. Or, you may learn some new ways of coping with depression that other people have used. However, guard against always talking about your depression with others. People are usually supportive to a degree. If you do not help yourself and make changes, others can get tired of hearing you talk about your depressed feelings.

- **Look for other feelings associated with depression.** Other emotions may contribute to depression. Some people feel more depressed when they suppress or hold onto feelings of anger. Others who feel guilty and shameful may be prone to depression if they do not figure out ways to work through their guilt. Some people get depressed as a result of constantly feeling anxious or fearful. Grief over a significant loss leads to depression with others.

- **Change your depressed thoughts.** Identify and challenge negative, pessimistic, or depressed thoughts. Avoid making mountains out of molehills, always looking at the negative side of things, always expecting the worst case scenario, or dwelling on your mistakes or shortcomings. You can use self-talk strategies to change negative thoughts. For example, if you make a mistake, instead of saying "I'm not capable of doing this," say, "I made a mistake. It's no big deal, everyone makes mistakes."

- **Focus on positive things and celebrate your achievements.** Acknowledge your positive points or strengths. Do not take yourself for granted and give yourself credit for your positive qualities. Take an inventory of your achievements or the positive things happening in your life. Learn to look at the "other" side of things when you catch yourself thinking negatively. For example, suppose you lost 25 pounds over several months only to gain 5 back. Rather than put yourself down and feel depressed for gaining pounds back, remind yourself that you still are 20 pounds less than your previous weight. Remember, it is what you do and how you think about what you do that determines how you feel.

- **Make amends.** Depression can be connected to guilt associated with hurting others, which often happens with addiction. Making amends can help you feel better about yourself. The 12-Step programs can help you with this process. A counselor or sponsor can help you determine when you are ready to face individuals who were hurt by your addiction.

- **Keep a written journal.** Writing about your feelings can help you release them, better understand them, and help you to figure out if there are patterns to your feelings and behaviors. For example, suppose you discover that you feel more depressed after visiting your parents. In exploring this further, you discover these feelings relate to constantly being criticized by your father, or because your mother is usually drunk when you visit, which triggers bad feelings and memories from the past. A journal can also help you keep track of changes in your depression over time as well as positive coping strategies that seem to help you. In addition, you can write about positive or hopeful things that happen to you each day.

- **Participate in pleasant activities each day.** Each day do something that is fun, enjoyable, or pleasurable. It does not matter how small this is. Even little things like taking 15 minutes to read a magazine and enjoy a cup of coffee or tea may help you feel better.

- **Identify and plan enjoyable future activities.** We all need things to look forward to whether it is buying something nice for ourselves, taking a vacation, or participating in an enjoyable activity. Looking forward breaks up the monotony of doing the same things over and over. It provides a focus for your energy and can make you feel invested in life. Set goals in relation to activities, events, or experiences that you can plan and look forward to.

- **If your depression does not get better, seek an evaluation by a mental health professional.** If these or other coping techniques do not help much, and your depression continues and causes you personal suffering or interferes with your life, seek an evaluation with a mental health professional. There are many different types of treatment for clinical depression including therapy as well as antidepressant medications. Not all clinical depressions need medications. But if yours does, you should not feel guilty. It is not the same as drinking alcohol or using drugs to get high or loaded. For many people, clinical depression is a recurrent disorder requiring ongoing treatment. If you have had two or more episodes of serious depression you probably need ongoing treatment, even after your depression improves or lifts completely. People with recurrent depression who stop treatment when their symptoms improve put themselves at risk for relapse in the future.

Setting a Goal

My **goal** in relation to my depression is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

Levona's Example

1. My goal is to improve my depressed mood and get more active in life so I don't sit around and mope.

2. Steps I will take to feel better include: a) using the thinking skills my therapist taught me to change some of my distorted thoughts like expecting the worst outcome or blowing things out of proportion; b) keeping a daily mood diary in which I rate my mood so I can catch things early (in the past I just let my mood worsen without taking action); c) building enjoyable activities in my life each week; d) being active and doing things even when I don't feel like it because I do feel better when I get involved in things; and e) exercising regularly because this helps improve my mood. Plus I feel better about myself when I'm in shape.

3. Benefits include feeling better, feeling that I can control my depressed mood and don't have to let it control me, and being more engaged in life (which my family will appreciate).

8. Feeling Empty or Joyless

When you stop using alcohol and other drugs, you may feel "empty" and find it hard to feel joy or pleasure. You may believe your life lacks meaning or purpose and feel miserable as a result. If such feelings continue into your recovery, it places you at risk for relapse. Reverting to drug and alcohol use can seem like a better option than feeling empty and lacking joy in your life.

Negative consequences of your addiction may contribute to these feelings. Some people lose their capacity to experience joy as their addiction progresses. Others get away from important values or feel their spiritual life and relationships are damaged, which can add to these feelings. They may quit church, lose connections with important people and feel lost.

You can help yourself in recovery by building connections with other people, reclaiming positive values harmed by your addiction, focusing on spiritual issues and becoming involved in meaningful activities and relationships. As your quality of life improves, these types of feelings will lessen or go away. But, you have to actively work at feeling better.

Recovery Activity

1. How much of a problem is feeling empty in your life at this time (that is, you feel like your life lacks meaning, purpose or direction).

   ❒ No problem
   ❒ Some problem
   ❒ Moderate problem
   ❒ Serious problem

   Describe the reason for this answer:

   _____

   _____

   _____

   _____

2. How much of a problem is experiencing joy in your life at this time?

   ❒ No problem
   ❒ Some problem
   ❒ Moderate problem
   ❒ Serious problem

Describe the reason for this answer:

_____

_____

_____

3. I feel empty or lack joy in my life because:

_____

_____

_____

4. Most important in my life is (for example, a good family life, close friends, success, being creative, being kind and loving, helping other people, being at peace with God or myself, etc.):

_____

_____

_____

5. What makes me feel good about myself or feel a sense of purpose and satisfaction is:

_____

_____

_____

6. I (have or do not have) close relationships with others. Explain your answer.

_____

_____

_____

7. I feel like I am (am not) using my talents, abilities, or creativity (at work, at home, in your social life, etc.). Explain your answer.

_____

_____

_____

8. My use of alcohol or other drugs affected my feeling empty or joyless by:

   _____

   _____

   _____

9. I (do or do not) feel connected to God or a Higher Power. Explain your answer.

   _____

   _____

   _____

Strategies to Manage Emptiness or the Lack of Joy

Following are strategies that others have used to develop meaning in their lives and feel better.[28] Use the ones that you think can help you.

- **Nurture your relationships.** Sharing quality time with family, friends or peers in recovery is one of the best ways to lessen these feelings. Showing concern, expressing love, spending time with, and taking an interest in other people is a good way to nurture relationships and feel connected.

- **Be of service to others.** Helping others can bring you meaning and purpose. There are many things you can do to help out a friend, family member, or fellow AA/NA member. You can help at AA/NA meetings and volunteer on community, church, school committees, or task groups. When you are well grounded in recovery, you can be of service by serving as a sponsor. In the meantime, setting up or cleaning up after meetings, providing rides to meetings and showing support to fellow AA's or NA's is a good way to be of service.

- **Get involved in the spiritual aspects of recovery.** Developing a relationship with God or a Higher Power is one of the key ways of feeling a sense of meaning in life. Praying, reading the Bible or other religious works, or communicating with your Higher Power helps you to develop your spirituality. Attend services at your church, synagogue or other place of worship.

- **Focus on important activities.** Figure out the work or leisure activities that bring you a sense of joy and pleasure and spend time in these activities. Develop hobbies and interests that excite you and give you something to look forward to.

- **Focus on your achievements.** Give yourself credit for your achievements related to recovery, work, hobbies, creative, or athletic activities**.**

- **Attend support group meetings.** Attending support group meetings provides you with a chance to get close to others, work your recovery program, and focus on spirituality.
- **Use the 12-Step Program.** Working the 12 steps helps you to develop your spirituality in recovery. Many of the 12 steps provide a way to rely on your Higher Power and to seek forgiveness for things you have done in your addiction that hurt others.

- **Set goals for the future.** Setting goals gives you something to work towards. Goals help you structure your time and provide a way to measure your progress. It is helpful to have short-term (less than three months) medium-term (three to six months) and long-term goals (more than six months).

- **Build structure in your life.** Having things to do and structuring your days and weeks will prevent you from aimlessly going about your life. Even if you are not currently working and have a lot of time on your hands you can build structure by using a daily and weekly schedule.

- **Change your thoughts about excitement.** If you believe you can't feel much pleasure or joy in life unless you are "living on the edge" and involved in dangerous activities, change your thinking. Learn to accept and enjoy the simple pleasures in life that do not involve "action" all of the time. If you are an "action junkie" you will need to decrease your need for constant action and excitement, and slowly learn to enjoy routine aspects of life. Tell yourself that "living on the edge" caused you more trouble than it was worth.

Setting a Goal

My **goal** in relation to my feelings of emptiness and joylessness is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

9. Grief

Grief is common when you experience a significant loss in your life. This can be a loss of a relationship caused by death (sudden or prolonged, expected or unexpected), divorce, separation or some other reason. Other losses that contribute to grief include the loss of physical or mental functioning as a result of illness or an accident, the loss of a career, job or financial security, the loss of a stable living arrangement, the loss of a pet, or the loss of status associated with a job or position in the community.

Even "giving up" an active addiction can cause some grief in the early stages of recovery. When you give up your addiction you can lose an identity, a lifestyle and something that organized your life even though this had negative results.

Loss of a loved one can lead to grief and both your "internal world" (what you think and feel inside) and your "external world" (your relationships with people and the world) can be affected. The effects of grief can show in any area of your life--your physical or mental health, your family or social relationships and your lifestyle.[29]

You may experience feelings of shock and disbelief over your loss and have strong reactions during certain times of the year, especially when you lose a loved one (e.g., birthdays, holidays or anniversaries are sometimes hard on those of us who have lost a family member or intimate partner or close friend). You may feel a variety of emotions from your loss including anger, sadness, depression and anxiety. It some cases it can affect your ability to get through the day.

Many people with an addiction have suffered multiple losses, sometimes as a result of their addiction, but also due to other factors. The negative effects of addiction can build up since any area of life can be harmed, often to a significant degree. Addiction can bring out the worst in people often causing relationship damage including the end of relationships.

If and when you deal with grief in your recovery is a personal decision based on your ability to maintain sobriety while dealing with emotional issues related to grief. Some people wait until they have established a stable period of recovery (months or longer) before they explore grief issues. Others address grief issues earlier. Others feel no need to address grief issues. This is a decision you can talk over with a therapist, counselor and sponsor. Don't be surprised if people have different opinions about if you should address your grief and when to do so.

In some cases, a loss can lead to emotional trauma where you find it hard to deal with the loss and get along in life. Some combat veterans and others exposed to events like floods, fires, hurricanes or terrorist attacks may experience what is called "PTSD" or post-traumatic stress disorder.[30] PTSD involves re-experiencing traumatic events with symptoms of increased arousal and avoidance of people, places or events associated with the trauma. Intrusive thoughts and images, anxious feelings, anger, irritability, aggression, flashbacks, nightmares, sleeplessness, difficulty

concentrating and headaches may be part of PTSD. Also, depression, guilt, and shame are common following traumatic events.

Recovery Activity

1. How would you rate grief as a problem in your life at this time?

   - ❑ No problem
   - ❑ Some problem
   - ❑ Moderate problem
   - ❑ Serious problem

2. List any losses you believe are contributing to your grief (write names of people).

   _____

   _____

   _____

   _____

   _____

3. Describe your grief in relation to losses listed above. Focus on your feelings and thoughts.

   _____

   _____

   _____

   _____

   _____

4. Describe how your grief has affected your substance use, physical health and mental health.

   _____

   _____

   _____

   _____

   _____

5. Describe how your grief has affected your relationships or other areas of your life.

   _____

   _____

   _____

_____

_____

Strategies to Manage Grief

Following are strategies others have used to manage their grief.[31] Review this list and use the strategies that you believe will help you manage your own grief.

- **Feel your grief and do not avoid it.** There are no short cuts to grief. Avoiding painful feelings only prolongs your grief. Do not rush through your grief and related feelings. Embrace your grief and honor it as it is part of you and you have to live with it.

- **Share your story of grief.** Talk about your loss to others you trust and can confide it. Share your thoughts, feelings and what it has been like for you. Don't worry about repeating your story in the early phases of grief. When you share your feelings with others, be aware that some people may have difficulty hearing about your pain and your loss. Some may even want to try to move you too quickly through your grief. They may mean well, but trying to rush you through grief is not good.

- **Learn from other peoples' experiences with grief.** When people know you have lost a loved one they often share their own experiences of loss. You may find strength and hope in listening to the stories of others. You may also learn what others have done to cope with their losses and feelings of grief.

- **Reach out for support from family or friends.** It is human nature to not reach out for help or support when it is needed the most. This is why it is good to stay connected to loved ones who support you. If you are struggling with your grief, let another person know.

- **Express your feelings.** Verbalize your feelings about your loss to people you trust who care about you. If you are angry admit it. If you are anxious, sad, depressed or lonely, admit this, too. If you have depressed feelings that persist for a long time, consider professional help. If you felt relief because a loved one died after a prolonged or difficult illness, be honest about this feeling. Accept and share this feeling with others whom you think will understand it.

- **Write about your experiences.** Write about your grief in a journal. Take time to reflect on what you have written, what you think, how you feel and what you have learned about yourself. Discuss this with a therapist if you are in therapy or counseling.

- **Reflect on your loss.** Reflect on the time you shared with the person you lost. Look at photos, videos or DVDs of them. Read cards or notes sent to or received from them.

- **Pay tribute to your loved one.** Keep reminders in your home like photos or momentos. Visit them in the cemetery or mausoleum if they are buried. Keep them in your thoughts and prayers.

- **Use self soothing strategies to deal with thoughts, feelings and memories.** These may include deep breathing exercises, listening to a soothing tape or music. making positive statements or affirmations to yourself, meditating, or taking a relaxing bath.
- **Do not let your grief be an excuse to relapse.** Work hard at your recovery and keep up your disciplines. Share your feelings of grief with others at meetings.

- **Explore resources on grief.** There are many excellent websites with information about grief and how to manage it. Some examples are: www.caringinfo.org; www.davidkessler.org; www.griefandrecovery.com; and www.webhealing.com.

Setting a Goal

My **goal** in relation to my feelings of grief is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

David's Example

1. My goal related to grief over the loss of my wife of 24 years to cancer is to accept my loss and my feelings, and not intellectualize my feelings.

2. Steps I will take to manage my grief include: a) acknowledge my grief and accept that I will feel many emotions related to the loss of my wife; b) share my feelings of loss with my brother, sister-in-law and several close friends who care about me, and accept their love and support; c) talk with my children to encourage them to share their feelings with me and each other; and d) develop family rituals so me and the kids can honor their mother's memory.

3. Potential benefits include living more comfortably with my grief and helping my kids deal with their grief.

10. Guilt and Shame

Feeling guilty or shameful is closely associated with drug and alcohol problems.[32] *Guilt* refers to "feeling bad" about your behaviors. You can feel guilty for things you have done or failed to do. For example, you may feel guilty for using family income for drugs and alcohol; hurting, lying and conning family or friends; or breaking laws in order to get money to pay for drugs. Or, you may feel guilty for not fulfilling your obligations or responsibilities with your family, friends or employer. Perhaps this showed by not spending time or taking much interest in the lives of your parents, spouse, or children. Or, not doing your job adequately and cheating your employer. Some people in recovery feel guilty for harming their own physical, mental or spiritual health (this also affects their family and loved ones).

Shame refers to "feeling bad about yourself." You feel weak, defective, or like you are a failure or "less than" others. When you feel shameful, you feel something is wrong with *you.* Guilt and shame lead to feeling disgusted with yourself.

The intensity of these feelings can vary. James, once a professional athlete with great potential, felt bad that he lost his career and the chance to make a great living. However, he said that what he felt most guilty about was "abandoning my wife and kids and leaving them in financial ruin. My addiction got so bad I couldn't give them the love, time and attention they deserved. I made a lot of money but often didn't support my family. My focus was mainly on getting drugs, then recovering from the effects of getting high, then getting more drugs. It was a vicious cycle. My addiction controlled my life and ruined my career and family life. I feel awful about what I did to them. I'm so ashamed of letting my addiction do this to them."

James' story is not unique. Many addicted people have wrecked havoc on their family and its members causing emotional, physical, spiritual and financial damage. I have worked with parents who lost their children to Children or Youth Services or given them to a relative because they could not care for these kids due to their addiction. I have also seen many people get separated, divorced or lose important love relationships because the addiction got in the way. During the active phase of addiction, they don't think much about these negative effects or the potential loss of relationships. However, when they get sober and open their eyes and examine the impact of their addiction on their loved ones, they often are flooded with feelings of guilt and shame.

Treatment and recovery offer many opportunities to manage these feelings. For example, several of the Steps on the 12-Step program (Steps 8 & 9) focus on helping the addicted person identify people hurt by their addiction. Then, they can work with a therapist or sponsor to determine who to make amends to, when and how. This process of making amends can undo some of the damage caused by their addiction.

Like many of the other recovery tasks, it takes time and effort to work through guilt and shame. Do not expect others to quickly accept you and forgive you for what you did during your active addiction. Give them time to deal with their own feelings. Ongoing recovery is essential for managing feelings of guilt and shame.

Complete the following statements to help you clarify where you stand in relation to guilt and shame to get you started in creating an action plan.

Recovery Activity

1. How much of a problem is feeling guilt and shame in your life at this time.

   - ❒ No problem
   - ❒ Some problem
   - ❒ Moderate problem
   - ❒ Serious problem

   Describe the reason for this answer:

   _____

   _____

   _____

   _____

2. Behaviors or actions on my part during my active addiction that I feel guilty about include:

   _____

   _____

   _____

   _____

3. Of these behaviors, the two I feel the most guilt about are:

   _____

   _____

   _____

   _____

4. Some things that I failed to do during my addiction for which I feel guilt are (for example, not spending time with family, not fulfilling work, school or financial obligations, etc.):

   _____

   _____

   _____

   _____

5. Of these behaviors, the two I feel the most guilt about are:

_____

_____

_____

_____

6. Describe any feelings of shame that you have:

_____

_____

_____

_____

7. My drug or alcohol problem changed me in the following ways:

_____

_____

_____

_____

Strategies to Manage Guilt and Shame

Following are strategies that others have used to mange their feelings of guilt and shame.[33] Review this list and use those that you believe can benefit you.

- **Recognize your guilt and shame.** Be honest with yourself about what you did or failed to do as a result of your drug and alcohol problem, and how you feel about yourself. Completing the previous section was a way to begin this step.

- **Give yourself time to feel better about yourself.** Be realistic in terms of accepting the reality that it may take time to feel less guilt and shame. Change may come initially in small steps such as feeling less guilty now than in the past. Remember, feeling better about yourself will be connected to making positive changes in yourself and your lifestyle.

- **Accept your limitations.** Admit and accept your flaws and limitations. Do not blame yourself for having an addictive disease. Instead, take responsibility to make positive change by getting and staying sober, and dealing with problems caused by your addiction.

- **Share your feelings of guilt and shame.** Talk with others about your feelings of guilt or shame. Share your true feelings and admit honestly the things you did that hurt others as a

result of your addiction. The intimate details of your actions or inactions are best shared with someone who understands addiction such as a therapist or sponsor or peer in recovery.

- **Use a 12-Step Program.** Use the 1-Steps of AA, NA or other related programs. Many of these Steps directly and indirectly help with guilt and shame feelings. For example, Step 5 states *"admitted to God, to ourselves, and to another human being, the exact nature of our wrongs."*

- **Make amends.** Make amends to others who were hurt by your addiction. This puts you in a better position to receive forgiveness from others. Steps 8 and 9 of the 12-Step program can help guide you through this process.

- **Seek forgiveness.** You can directly ask for forgiveness from those who were hurt by your addiction. Keep in mind that the risk you take is that some people may not wish to forgive you for what you did that hurt them. Also, asking forgiveness must be done with sincerity; you must accept that it will be meaningless unless you work hard at your recovery and show positive changes in your behaviors. You can also ask forgiveness from God or a Higher Power.

- **Review positive things in your life.** Reflect upon your personal strengths (good things about yourself), accomplishments, talents or gifts, relationships with people who matter to you and positive things you do in your life. Try to balance the focus on things you feel bad about and things you feel good about. Over time, the good feelings should outweigh the bad feelings that you experience.

Setting a Goal

My **goal** in relation to my feelings of guilt and shame is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

Dawn's Example

1. My goal is to improve my relationships with my adult children who were often ignored during my addiction and who are upset with things I did or didn't do as their mother.

2. Steps I have taken so far or will take include: a) I invited my adult children to attend some counseling sessions with me so they can learn about addiction and share their experiences and feelings about my addiction; b) I introduced them to Al-Anon and two of them are attending; c) I talked privately with each one to express my regrets over the bad things that happened when I was drinking; d) I will continue to stay connected with them by regular phone calls and visits—I invite them over for dinner regularly; and e) I will continue to share my feelings with my AA Sponsor and my recovery group.

3. Benefits I have already experienced include feeling better about myself and closer to my children. I think this will continue to get better the longer I am sober and the more I stay active in their lives. I've accepted that I wasn't so much a "bad" mother as a "sick" mother stuck in my alcoholism, which interfered with my ability as a mom.

11. How to Increase Positive Feelings

In earlier sections, emphasis was placed on managing "negative" feelings like anger, anxiety, boredom, depression and others to reduce the chances of a relapse, make you feel better about yourself and make your life more satisfying. Unfortunately, our culture focuses much more attention on the negative than the positive so it is up to you to focus on positive feelings.

It is just as important to be aware of, experience, and express, "positive" feelings. Expressing positive feelings such as affection, love, joy, and gratitude can bring you closer to others and improve your relationships.[34] Ideally, there should be a balance in your life in experiencing and managing a both positive and negative feelings.

Those who experience high levels of positive feelings (especially a ratio of at least 3 positive to 1 negative feeling) often show better health than those who do not.[35] They have less pain, less disability related to a chronic health condition or disease, and tend to fight off disease and illness better. They tend to deal better with stress. Not only is the quality of their life affected by positive feelings but they may also live longer. Clearly, there are many potential advantages of positive feelings. Expressing these also benefits others in your life.

Recovery Activity

1. How much of a problem is expressing positive feelings.

   - ❒ No problem
   - ❒ Some problem
   - ❒ Moderate problem
   - ❒ Serious problem

   Describe the reason for this answer:

   _____

   _____

   _____

2. Positive feelings that are the easiest for me to express include:

_____

_____

_____

3. Positive feelings that are the most difficult for me to express include:

_____

_____

_____

4. The last time I expressed a positive feeling to each of the following people was:
   - My spouse or partner _____
   - My mother or father _____
   - My son or daughter _____
   - My brother or sister _____
   - Other relative _____
   - A close friend _____

5. Sharing positive feelings with others can benefit my relationships in the following ways:

_____

_____

_____

6. List two people with whom you would like to share a positive feeling, and then write a statement about something specific you would like to say to them.

   Person 1: _____

   What I would like to say: _____

   _____

   _____

   _____

   Person 2: _____

   What I would like to say: _____

   _____

   _____

Increasing Your Focus on Positive Feelings

Following are strategies others have used to focus more on positive feelings in their daily lives.[36] Use the ideas that you believe can benefit you.

- **Make a commitment to focus on positive feelings**. Each day, make sure you balance the focus on stresses, negative feelings and positive feelings. Since you are in control of your feelings, you need to actively pay attention to these and make it a point to experience positive feelings each day. Since thinking often affects feelings, focus on thoughts that can lead to feeling positive. Do not ignore the positive or brush it off, no matter how bad the day was.

- **Express more positive than negative feelings each day.** Try to get at least a 3 to 1 ratio of positive vs. negative feelings each day. While you can work on counteracting negative feelings by using different coping strategies, you can also focus each day on sharing more positive feelings.

- **Share a positive feeling with someone you have wanted to share it with but have not.** This can be a family member, friend, colleague or acquaintance. Perhaps they did something that you appreciate or feel grateful for. Or, maybe you just feel positive towards them because of your relationship with them and what it means to you. Let them know it. Although it is best to share such feelings in person, you can also do this on the phone, in a letter or note, via email or with a text message.

- **Review each day to assess whether you focused enough on positive feelings.** At your day's end inventory, determine if you need to work harder at expressing positive feelings. Even something as simple as a "thank you" to others is a way to share a positive feeling. Are you saying "thank you" enough to others, even for small gestures of kindness or friendship or help?

- **Be grateful and share this feeling regularly with others**. Talk with your spouse, partner or friend about what you feel grateful for. Even if you repeat yourself—which is likely because there are only so many things or people to feel grateful about—share your gratitude with others who are important to you.

- **Savor positive feelings and experiences**. Since many feelings come and go, when you feel something positive enjoy it while you can. To savor a feeling or experience means to pay attention and enjoy it.

- **Share your positive feelings with God or your Higher Power in your prayers.** Many people "count their blessings" and give thanks to God that they have these blessings. Prayer

is a very private way to express your gratitude, appreciation or your love of God or your Higher Power.

- **Practice mindfulness.** To be mindful is to focus on the present moment. Accept what you feel without judging yourself. Stay in the here and now as much as you can.

Setting a Goal

My **goal** in relation to my ability to express positive feelings is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

Shannon's Example

1. My goal is to experience and express more positive than negative feelings each day.

2. I can reach this goal by: a) being aware of my tendency to focus too much on the negative than positive; b) consciously work on letting myself feel positive feelings and not sluff them off; c) act gracious when others do something nice for me such as when my parents give me money (I used to yell at them for doing this, telling them I don't need their money or want it; I have to accept they love me and it is just one way they show their love); and d) as a doctor, I'm used to focusing on symptoms and negative experiences of patients. I'm going to make it a point to ask patients I see about positive things in their lives as well as problems they are having.

3. Benefits to being more focused on positive feelings are stopping criticism towards my parents and feeling closer to them, being more helpful to my patients, feeling better about my life and being a more positive influence on others.

12. Gratitude

Gratitude is the feeling of being thankful for or appreciating something someone has done for you.[37] You can feel this in many different situations involving family members, friends, co-workers or other people. This can relate to a gift they gave you for a special occasion (birthday, graduation, anniversary, wedding). Or, it can relate to something they gave you just because they care about you. What they give can be "tangible" (money, clothing, furniture, a car, jewelry, clothing or any object). Or, they can give you "help or support" by spending time with you, listening to your problems or concerns, giving you words of encouragement during difficult times, or helping you with a specific task (fixing something, taking you somewhere, cooking for you, doing your yard work or house work).

You may also feel grateful to other people because they are in your life and they are special to you. For example, many people are very thankful for the love and support of a parent, grandparent or spouse, other relative, good friend or a mentor at work.

Or, gratitude can be the feeling you get when you reflect upon the various "gifts" you have in life. These gifts can relate to your physical health or abilities, your mental health or abilities, your spiritual health or abilities, your intimate relationships, friendships or social skills, your profession or special talents, opportunities you have been given, your financial condition, or any other area of life.[38]

Many people in recovery from addiction are grateful to others who help them in recovery. These include professionals, sponsors, other members of mutual support programs, and other people who value and support their recovery.

Gratitude is important as is expressing it to others, to yourself or to God when you pray and count your blessings. Feeling and expressing gratitude can enhance your connection with others, make you feel better about your life and motivate you to do things to help others. When you are grateful for what you have, you may be more prone to reach out and help others less fortunate than you. Grateful people report higher levels of positive emotions, satisfaction with life, energy, and optimism. And, they have lower levels of stress and depression. In addition, those who regularly attend services or engage in religious activities (prayer, readings, etc) are more likely to be grateful and feel responsibility towards others.[39]

Recovery Activity

1. Gratitude is important to me and my recovery because:

_____

_____

_____

_____

2. Describe your pattern of expressing gratitude to others. Are you satisfied with the attention you pay to gratitude? If yes, why? If no, why not?

_____

_____

_____

_____

3. List names of people whom you are very grateful to have in your life.

_____

_____

_____

_____

4. List some of your "gifts" or "blessings" for which you are grateful (physical, psychological, spiritual, interpersonal, financial, etc).

_____

_____

_____

_____

Strategies to Express Gratitude

Following are strategies others have used to focus more on positive feelings in their daily lives.[40] Use the ideas that you believe can benefit you.

- **Look for blessings.** Think about the people in your life, and experiences you are thankful for. Acknowledging and expressing gratitude is an active process that requires you to look for your blessings. It is easy to take people, experiences, opportunities and comforts for granted. By looking for these you insure that you focus on your blessings, no matter how tough life is at a particular time. Answer this question each day "what blessings did I experience today?"

- **Do not show ingratitude.** The opposite of gratitude is ingratitude, in which there is a lack of gratitude or appreciation of others, opportunities or experiences. This shows in a passive

manner in which you do not acknowledge or express gratitude towards others or blessings in life. Or, it shows in complaining about, criticizing or berating another who does something nice for you or believing you deserved more than you got from another. Ask yourself each day "have I been ungrateful or taken my blessings for granted?"

- **Challenge non-grateful thoughts.** A strategy used in many therapies is challenging negative or faulty thinking and replacing it with more realistic thinking. The result is improved mood and satisfaction in relationships as well as better adjustment at work. The same process holds true when you have non-grateful thoughts. If you learn to catch these thoughts, you can change them to more grateful ones.

- **Think gratitude thoughts**. You can increase the number and frequency of gratitude thoughts by not taking others and good experiences for granted. Reflect on your daily life to find things for which to feel grateful or thankful. Even in times of difficulty there should be people or things in your life that bring you joy. Be sure to think about these and savor them no matter how small. Each day, consciously focus on thinking in ways that show you are thankful, appreciative or grateful for people in your life, opportunities or experiences.

- **Express gratitude in your language**. Avoid keeping your gratitude to yourself when other people are involved. Share your gratitude in what you say to them. You do not have to give an impassioned speech when you feel grateful. Simply saying "thank you," "I appreciate you (or what you did)," "I am grateful that you did this for me," or something similar goes a long way with others. Increase the number and frequency of these expressions to other people.

- **Show gratitude in your actions**. Share your appreciation and sense of thanks in small gestures as well as more significant gestures. You can convey gratitude in notes, cards, emails, text messages or phone messages to a loved one, friend or someone who has done something that you appreciate. You can also convey gratitude in how you conduct your relationship with others. Gratitude can show in giving time, attention, love, emotional support or practical help to another person. It can show in a broad range of kind, altruistic, helpful or empathic actions. While the examples are endless, you have to figure out how you can show your gratitude in what you do. Show others, just don't tell them.

- **Do not take others for granted**. It is easy to take others for granted, especially loved ones like a parent, spouse, or child. Try to avoid this by showing your loved ones that you appreciate them, are thankful for who they are and things they do for you and for others. Let them know they are important to you. Acknowledge birthdays, anniversaries or other occasions that are important to them. Take an active interest in the lives of others by spending time with them, asking how they are doing, and finding out how things are going for them. Do helpful things without asking them if they need help since some people are likely to refuse offers of help from others. Think about a person or two you are taking for granted and do something to express your gratitude towards them.

- **Write about gratitude in a journal or workbook**. Writing helps you describe your experiences, express your thoughts and feelings, and reflect upon your observations of gratitude. During the next week, write something every day even if only a sentence or two.

During the next several months write at least weekly (or more often if you prefer). Purchase a journal, buy a notebook, or create your own gratitude journal on the computer.

- **Write a gratitude letter.** You can also write a letter to a person towards whom you feel grateful. This can be a loved one, friend or someone who made a difference in your life (teacher, coach, mentor, advisor, supervisor, colleague, religious person, etc). Be specific in your letter about what the other person did that you feel grateful about.

Setting a Goal

My **goal** in relation to my ability to express gratitude is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

Robert's Example

1. My goal is to focus more on feeling and expressing gratitude to people important to me.

2. Steps I can take are: a) complete a gratitude inventory where I list family members and close friends I am close to and at least 2 things I am grateful about with each of them; b) share my feelings of gratitude regularly; c) do a weekly "gratitude reflection" activity where I review what I am grateful for each week; d) incorporate thanks into my praying; and e) write a letter expressing my appreciation, love and gratitude to my wife for sticking by me through my worst times during my addiction and caring for our children when I wasn't available.

3. Benefits of expressing more gratitude are feeling more in control over positive feelings, better relationships and less focus on negative stuff in life.

13. Love and Recovery

We all need love in our lives. Love is a major need that must be fulfilled if you are to be psychologically and spiritually healthy and reach your potential. Feeling loved and cared about, and loving and caring about other people, can help us feel closer to others and happier. Having loving relationships with others is one of the most basic of all human needs. Such relationships enrich our lives.

While mature and healthy love brings much joy and happiness, the lack of love or serious problems in love relationships may bring misery in the form of depression, anxiety, heartbreak, loneliness, bitterness or chronic anger. Without love life can feel empty and meaningless.

On the other hand, a lack of loving relationships, an inability to express or show love towards others, or an inability to actually feel love towards others may cause you to feel bad, depressed, lonely, or empty. Addiction hurts love relationships. Recovery, on the other hand, provides opportunities to restore loving relationships and develop new ones.

Although you may think about love as a feeling or emotion, it is much more. It is also an attitude and approach to others and to life. Love involves your behaviors or what you say and do. With love, similar to other feelings, actions speak louder than words. How you treat others reveals your feelings more than what you say to them. For instance, you can tell another person how much you care about and love them but treat them shabbily. Or, you may seldom tell another that you love or care for them, but treat them with much kindness, respect, and love in your actions.

We watch movies, attend plays, read novels, poetry and other books, and listen to hundreds of songs about love. Advertisements on TV and in the print media entice us to buy products as a way to express our love. We see therapists to help us deal with problems in marriages and other love relationships. Despite this huge emphasis on love in our culture, few people think that there is anything that needs to be learned about love, or how to love others and be loved by them.

Dr. Erich Fromm, one of the most influential psychologists of the twentieth century believed that most people see the problem of love primarily as that of being loved, rather than of developing their capacity for loving others.[41] People think that to love is simple, but to find the right object of love is difficult. Dr. Fromm said that attempts for love are bound to fail, unless you develop your total personality. He also said that satisfaction in individual love cannot be attained without the capacity to love one's neighbors, without true humility, courage, faith and discipline. Thus, the "art of loving" requires knowledge and much effort if you are to succeed at it.

In contemporary society, it isn't unusual for an individual to spend considerably more time and effort at work, on hobbies or leisure pursuits, or pursuing financial goals than working on improving the ability to love and improve personal relationships. Relationships with loved ones are often taken for granted, put on the back burner or not attended to at all. No doubt this is a major reason why some people who achieve great success in their profession and produce

important works or accumulate large amounts of wealth are unhappy, lonely, or end up separated or divorced, are disliked by their children, and don't have mutually satisfying relationships that are loving and nurturing.

According to psychiatrist, Dr. William Glasser, friendship is an important part of love. Friendship characterized by compatability--having things in common with your spouse or partner--is necessary to keep any love alive over the long run. He says "ask yourself, if I were not hormonally attracted to this person, would he or she be someone I would enjoy as a friend? If the answer is no, there is little chance for that love to succeed. Hormones get us together; they do not keep us together."[42] According to Dr. Glasser, you need a life of your own separate from your love relationship in order for it to last. He believes strongly that spouses need their own interests, hobbies and friends to pursue separately without fear of criticism or complaint from the other. Too much dependency is viewed as detrimental to the relationship.

A spouse who does not feel that he or she is receiving enough time or attention, or doesn't share enough common activities, is unlikely to feel comfortable with this idea. It really requires a "balance" between taking care of the needs of your loved one as well as your own.

Dr. John Gottman, one of the leading researchers on marriages and love relationships, has discovered that there are several principles that make marriage and other relationships successful. Many of these principles involve behaviors that enhance and reinforce love between partners such as getting to know each other well, nurturing fondness and admiration towards each other, turning towards each other rather than away from each other, letting your partner influence you, improving emotional communication skills, and having a sense of shared meaning on important issues in life. Dr. Gottman found that regardless of whether a couple compromises often and calmly works out their problems, agrees to disagree and rarely confronts their differences, or has passionate disputes, *they can have a healthy marriage if they share at least five times as many positive as negative moments together*.[43] Healthy marriages can have problems or disputes, but these can be overcome if there are substantially more positive than negative interactions.

In recent years that has been increased focus on positive feelings or emotions.[43] According to Dr. Barbara Frederickson who has conducted many research studies on positive emotions, people feel better and function better if they experience a 3:1 ratio of positive to negative emotions.[44] In a recent book, she discusses a number of strategies that you can use to increase positive emotions such as gratitude, joy, love and others.

The fact that so many professionals are conducting research and writing about positive feelings speaks to the importance of focusing on these in daily life. Clearly, there are many benefits to focusing on positive feelings and increasing these in your life.

Recovery Activity

1. My addiction affected my ability to care about or show love towards other people in the following ways:

   _____

   _____

   _____

   _____

   _____

2. I (am or am not) "getting" enough love from others in my life (explain your answer):

   _____

   _____

   _____

   _____

   _____

3. I usually express or show my love towards the following people in these ways:

   My parent(s) or caretaker(s)

   _____

   _____

   My spouse or partner

   _____

   _____

   My brothers or sisters

   _____

   _____

   My children

   _____

   _____

   My grandchildren

_____

_____

My friends

_____

_____

Other people

_____

_____

4. Others would describe my ability to show love in my actions or behavior in this way:

_____

_____

_____

_____

_____

_____

_____

_____

Giving and Getting Love in Your Life

Following are strategies others have used to focus on love in their lives.[45] Use the ideas that you believe can benefit you.

- **Spend time with people important to you.** Give of your time to loved ones such as family and people important in your life. Time is one of the most precious gifts you can give. If you love your parents, spouse, or children, show it by spending time with them.

- **Take an active interest in the lives of loved ones.** Ask your loved ones about their life and what is important to them. Ask about their activities at home, work, school, what they think about different things going on in the family or in the world, and about their hobbies or interests. Find out what excites them about life, and what their hopes and dreams are. Encourage them to talk about their worries or stresses, too.

- **Do nice things for other people.** Offer to help them with a problem or with any task such as cleaning the house, cooking, yard work, homework, or something else. Offer to take them out for a meal, to a movie, or other event, or to do something you know interests them. Honor

special occasions (birthdays, graduations, mother's day, father's day), or surprise your loved one with an unexpected gift, card, or personal note.

- **Attend to the needs of people important to you.** Close, loving relationships require an ability to give and take. "Giving" means being aware of what the other person needs and trying your best to help meet these needs. For example, if your partner needs time to talk about his or her day, give them the time and show interest in what they say. If your partner has the need to do things that you don't like to do, compromise and do some of these things together. If your son or daughter needs attention and reassurance of your love, convey this in your words and actions.

- **Make positive statements to others.** Say nice things to others. It can be about something they said or did. Or, it can be a reminder that you value, admire, appreciate, or love them. Say thanks to them when you appreciate something they did for you.

- **Show love through physical gestures or gifts.** Touching, hugging, or kissing are ways to show your positive feelings to people you love such as family member or intimate partner. Also, giving gifts (even very small ones) is an excellent way to convey your affection for another person.

- **Don't let emotional baggage accumulate.** This can make it easier to share love towards others. Deal with upsetting feelings directly so they don't accumulate. Do not let anger or disappointment towards a loved one build up because it can interfere with your willingness to share love or other positive feelings with them. If you are married or live with your intimate partner, never go to bed angry. Communicate in respectful ways. Do not attack, use hostility or contempt, or put the other person down when discussing your anger or upset feelings because this will only make things worse. In the event you do say some things you think you should have not said during a discussion, apologize and work hard to avoid this in the future.

Setting a Goal

My **goal** in relation to love is:

_____

_____

_____

Steps I will take to reach this goal are:

_____

_____

_____

Potential benefits of reaching my goal are:

_____

_____

_____

14. Positive Relationships

Managing your feelings in positive ways can benefit your physical, mental, emotional and spiritual health. This can also help you sustain positive relationships with other people. Studies show that people with high levels of social ties or emotional connections to others have lower rates of illness, lower levels of stress hormones, live healthier lifestyles, and live longer than those with lower levels of emotional support.[45] Building and sustaining positive relationships clearly is good for you in many ways. Life is better when you feel loved and cared for by others and feel connected to them. This is also good for your recovery.

Your Social Network and Social Support

Your social network includes people and organizations that are part of your life. This network may include relationships with family, friends and other people in your life as well as involvement in organizations such as a Church, a Synagogue, or mutual support programs like AA, NA or other 12-Step and non 12-Step recovery programs. While the amount and frequency of contact or connections with your social network may vary, people and organizations provide help in many ways. These include providing help and support with an emotional or personal problem, help with a task or project and in some instances financial help. For example, many parents still provide financial help to their adult children as they embark on their careers and deal with current financial pressures. More importantly, parents help their children in many ways and often provide ongoing love and support.

People in recovery from an addiction, mental health problem or both can find support from other people in recovery who participate in mutual support programs such as AA, NA, programs for co-occurring disorders and programs for mental health problems. Organizations like AA or NA represent a life saving support network for many people recovering from an addiction. These and other mutual support programs are usually easily accessible and available. People in recovery do many things to help and support each other, both during good times and during times in which a person struggles with their recovery. Relationships with sober people who understand and support recovery can help reduce some of the potential social stressors and pressures that can impact on relapse. As a result of good connections with others in recovery, you can reduce your risk of relapse.

Also, recovery programs help you deal with the havoc your addiction or mental health problem may have caused to family or loved ones. For example, the "making amends" Steps 8 and 9 of the 12-Step program provide one way to undo some of the damage to others caused by your problems. A sponsor in AA, NA or other 12-Step program can guide you through the process of making amends so that the timing is right.

It is good to have several confidantes or people you trust to talk with regularly. These are people you can talk with about your thoughts, feelings, problems and struggles. Some of these you can

talk to about your recovery. You can open up and share personal things with confidantes without worrying that they will judge use or use this against you. By not "keeping secrets" and sharing what goes on with you with others, you put yourself in a position to get support, feedback and help with specific concerns or problems. And, you get mentoring from people like Sponsors who help guide you in recovery.

Relationship Problems and Traps to Avoid

Negative relationships can cause stress, contribute to depression and other negative feelings, and cause problems in your life. These relationships can drag you down, hurt your recovery and affect the quality of your life. Failure to connect with and get close to other people can weaken your relationships as well as interfere with your ability to succeed at work or in life. And, not paying attention to the emotional needs of others can lead to relationships that do not work well.

On the other hand, positive relationships can enhance your recovery and improve the quality of your life. Stated simply, good relationships add to your enjoyment and satisfaction with life.

To build healthy and positive relationships you need to focus on emotional needs of others as well as avoid (or manage) some of the relationship traps that people in recovery experience. If these relationship traps continue, you raise your risk of relapse to your addiction. And, you put yourself in a position to feel more negative than positive feelings, which in turn impacts on your moods and the quality of your life.

Following are examples of a few of these common problems or relationship traps experienced by people in recovery. Talk with your therapist or an AA/NA sponsor if you are experiencing any of these (or others not listed here) and you think your recovery or mental health is at risk if you do not do something to cope with them.

- **Early recovery romance**. This occurs when you get interested in another person before you have established a significant period of stability in your recovery. Some people put a time frame on this and say that you should not get involved in a new romantic or intimate relationship until you have at least a year of stable sobriety. The reason is that this relationship often becomes a priority and recovery takes a back seat, which raises the risk of relapse.

- **Relationship hopping**. This involves moving from one relationship to the next without giving any one relationship enough time to develop into something meaningful. Or, it may involve getting easily bored once the "newness" of a relationship wears off. The result of this boredom is ending the relationship, regardless of the impact on others.

- **Moving in prematurely with a person you do not know very well**. Some people in recovery move in quickly with another person they meet in the program. They do this without having spent much time together and not knowing much about this person. This type of relationships seldom lasts very long and often causes many more problems than it is worth. Impulsively acting on sexual attractions or emotional needs is likely to work against you. Should you feel like you want to do this, talk to a confidante (especially a therapist and

sponsor) before making any decision. Give yourself time to think through the situation and make the best decision.

- **Relationships with others getting high or addicted.** Social pressures to use (both direct and indirect) are one of the most common risk factors for relapse if positive coping strategies are not used. Avoiding high-risk people still getting high is one of the most effective ways to lower your vulnerability to social pressures to use substances again. If your spouse or partner gets high or has an addiction, if you don't have a plan to deal with this your recovery is at risk.

- **Close relationships with unhealthy or abusive people**. Examples of unhealthy people include those who still have an active addiction, those who only "take" and seldom or never "give" to others, those who focus mainly on themselves or use you mainly to get their needs satisfied (these can be emotional, physical, sexual, financial) or those who abuse you verbally or physically. Staying in an abusive relationship can not only threaten your recovery from addiction. It can also harm your mental and spiritual health.

- **Excessive dependency**. This involves relying too much on another person to get your emotional (and other) needs met. Some people depend on others so much that they wear them out emotionally. They are too needy, too self centered and often hard to please.

- **Keeping too distant emotionally**. This involves not sharing feelings and limiting what you disclose to another person about what your think, feel or experience in life. It is hard to get close to you and get to know you because others can't always figure out what you feel or how you think. People keep others away emotionally by limiting what they share about themselves especially their feelings, using threats or hostility to push others away, or by not taking much of an interest in others or failing to show any empathy towards them. A lack of "give and take" in a relationship is another common way to keep emotionally distant from others.

There are many other examples of unhealthy relationships or patterns of behaviors that sabotage relationships. Part of your recovery should include talking about your relationships, how they were affected by your problems, and how you communicate and share with others, and what you can do to improve your relationships.

Healthy and Positive Relationships

An important component of healthy relationships is "self-disclosure" and communicating effectively to others.[46] This means knowing when and how to share what you think, what you feel and things that bother or concern you. Self-disclosure requires trust of the other person and a willingness to let them in your personal world. When you talk about your feelings, you are letting the other person in your emotional world. Sharing information about yourself and how you feel is the hallmark of self-disclosure and good communication. This is necessary for long-term, positive relationships.

Healthy and positive relationships involve "give and take" where both people are interested and concerned about the other and convey this in how they communicate and relate. They can count on each other to provide help and support.

Earlier in this section I discussed the importance of social networks and support. This mean you not only have to "get" support from those in your social network, but you also have to "give" support to others as well. Relationships that are one-sided do not do well. Relationships in which both people are concerned about the other do better.

Healthy relationships also require working through problems, struggles or differences. But, you must do this in a respectful way and not berate the other person, push them away with hostility or negative feelings. The issue is not whether or not you and another person have a problem or conflict, but how you deal with it.

Marriages or intimate partnerships not only require positive communication and problem solving as discussed above. To succeed, these relationships also require sharing values, goals or meaningful experiences in life. You have to be connected to your spouse or partner in such a way that you share life experiences as well as your "inner" life. You work as a team yet maintain your individuality. You care about and nurture each other. And, during times of difficulty, you turn towards each other rather than move away from each other.[47] Your spouse or intimate partner should be your confidante.

As you read in earlier chapters of this workbook, paying attending to others and what they feel is critical for relationships to succeed. Positive relationships involve much more than sharing your own positive feelings towards others. These involve conveying a sense of understanding to the other people regarding their feelings. Often, this involves knowing how to "read" another person by paying attention to non-verbal cues and what they do not way, as well as what they do say when they communicate to you.

Recovery Activity

Answer the following questions about your relationships and how you communicate with others. Use this information to help you develop strategies to build positive relationships with others.

1. How satisfied are you with your family relationships and how often you see or interact with family members?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

2. How satisfied are you with your relationships with friends and how often you see or interact with them?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

3. How satisfied are you with your social network (the number and quality of people and organizations in your network)?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

4. How satisfied are you with your ability to seek and get support from others?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

5. How satisfied are you with how you communicate your feelings to others?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

6. How satisfied are you with how you deal with angry feelings?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

7. How satisfied are you with how you deal with sadness or depression?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

8. How satisfied are you with how you deal with anxiety, worry or fear?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

9. How satisfied are you with how often you share positive feelings towards others?
   üvery satisfied üsatisfied üdissatisfied üvery dissatisfied

10. What can you do to improve how you communicate your feelings to others?

    _____

    _____

    _____.

11. List any relationship traps or problems that currently are a negative influence on your emotional life or your recovery?

    _____

    _____

    _____.

12. What can you do to improve your relationships with family or friends?

    _____

    _____

    _____.

13. If you have children, what can you do to improve your relationships with them?

    _____

    _____

    _____.

Strategies for Positive Relationships

Following are strategies others have used to improve their relationships and enhance their social networks.[48] Use the ideas that you believe can benefit you.

- **Assess your relationships to determine which ones are healthy and which ones are not.** Use this personal inventory of your relationships to decide who to avoid or minimize your contact with because of their negativity or potential to drag you down. Use this to figure out how to increase your interactions with positive people.

- **Avoid high-risk people and relationships with negative people**. Avoid people who do not care about your recovery from an addiction and/or mental health problem, try to persuade you to drink or use drugs, use or abuse you, or represent a "relationship trap." Focus instead on increasing your exposure to supportive and positive people.

- **Stay connected to positive people**. This means communicating regularly, both when you need help and support as well as when you do not. If you wait to reach other to others only when you have a problem, you are not likely to follow through and actually reach out. If you spend time with others and stay connected through good times and bad times, you are more likely to ask for and use support from others. It is highly recommended that you talk with someone every day during the early phase of your recovery. This can be a Sponsor, peer in recovery or a confidante who understands your addiction.

- **Assess your social network and recovery network**. This can help you determine gaps in these networks. You can then take steps to build upon these networks (people and organizations).

- **Build a positive recovery network.** This network includes people who care about you and your recovery (family, friends, and peers in mutual support programs like AA, NA or others). If your current social network is mainly comprised of negative people, start with AA, NA or other mutual support program. You should have a list of people, phone numbers and email addresses so you can communicate regularly with those who support you.

- **Communicate more positive than negative feelings towards others.** Remember the positive to negative ratio (3 to 1). Share more positive than negative feelings in your relationships. Make a conscious effort to share gratitude and appreciation to others in your life. Also, know when not to share negative feelings with others. And, if you share negative feelings like anger, do so in a calm and respectful manner.

- **Listen to others and convey that you understand their feelings.** As I mentioned many times in this workbook, empathy towards others is an important component of a give and take, healthy relationship. To be empathic, you need to listen to what someone is communicating. Pay attention to non-verbal and verbal cues, as well as what is said or not said. To gain the

trust of another person they need to know that you listen to them and understand how they feel.

- **Do positive things for others.** Give of your time and attention, give emotional support, help others with practical tasks and show kindness in your daily actions. Sharing your personal time is one of the greatest gifts you can give to others important in your life (family, friends, and confidantes).

Final Comments

You deserve a lot of credit for taking time to read and complete sections of this workbook. The effort you put forth shows your interest in becoming more emotionally competent. This in turn should lead to a better quality of life.

Many ideas were shared in this book as well as experiences of others. You can decide which of these to use and incorporate in your life. Remember that positive change requires effort and a plan. You have to continue to use (or practice) new coping strategies. Not all will work. Your job is to find those strategies that can help you increase positive feelings, decrease negative feelings and improve your health and relationships.

If you are interested in learning more about any of the specific issues discussed in this recovery workbook, you can consult the suggested readings. You may find specific titles or topics that appeal to you that you want to learn more about.

I appreciate the opportunity to share some of my knowledge and experiences with you. I wish you well in your continued efforts at recovery.

Appendices

Appendix A: Coping with Feelings Worksheet

Appendix B: Footnotes, References, Suggested Readings

Appendix C: Internet Resources

Appendix A
Coping with Feelings Worksheet

1. Write a brief description of a situation or event contributing to feeling upset.

_____

_____

_____

2. List the feelings or emotions this experience triggered.

_____

_____

3. List your specific thoughts in relation to this situation and the upset feeling you experienced.

_____

_____

4. Describe how you coped with this upset feeling. How did you act or what did you do?

_____

_____

5. New coping strategies:

   A. List some ***new thoughts*** regarding this situation and your upset feeling.

_____

_____

_____

   B. List some ***new behaviors or actions*** to help you cope with this feeling.

_____

_____

_____

Appendix A
Coping with Feelings Worksheet

1. Write a brief description of a situation or event contributing to feeling upset.

_____

_____

_____

2. List the feelings or emotions this experience triggered.

_____

_____

3. List your specific thoughts in relation to this situation and the upset feeling you experienced.

_____

_____

4. Describe how you coped with this upset feeling. How did you act or what did you do?

_____

_____

5. New coping strategies:

   A. List some ***new thoughts*** regarding this situation and your upset feeling.

_____

_____

_____

   B. List some ***new behaviors or actions*** to help you cope with this feeling.

_____

_____

_____

Appendix B

Footnotes (References and Suggested Readings)

References followed by a (*) are suggested for individuals in recovery

1. Anderson NB & Anderson PE (2003). Emotional Longevity: What Really Determines How Long You Live. NY: Penguin Putnam, Inc.

2. These emotions common across cultures are discussed in many publications. Examples include the following:
    a. Ekman P (2003). Emotions Revealed: Recognizing Faces and Feelings to Improve Communication and Emotional Life. NY: Times Books.
    b. Carter R, Aldridge S, Page M & parker S (2009). The Human Brain Book. NY: DK Publishing.
    c. Goleman D (1995). Emotional Intelligence: Why It Can Matter More Than IQ. NY: Bantam Books.

3. Pennebaker JW (2011). The Secret Life of Pronouns: What Our Words Say About Us. NY: Bloomsbury Press.

4. There are many books on depression and other related mood disorders written for professionals who provide treatment, individuals with depression (including those with co-occurring substance use disorders) and family members or concerned others. Following are examples.
    a. Daley DC & Douaihy A (2006). Mood Disorders and Addiction. NY: Oxford University Press. *
    b. Daley DC & Douaihy A (2009). Depression Recovery Workbook. Export, PA: Daley Publications. *
    c. Daley DC & Haskett RF (2003). Understanding Bipolar Illness and Addiction, 2nd ed. Center City, MN: Hazelden.
    d. Daley DC & Thase ME (2003). Understanding Depression and Addiction, 2nd ed. Center City, MN: Hazelden.*
    e. Miller MC (editor, 2008). Understanding Depression. Boston, MA: Harvard Health Publications.
    f. Pettit JW & Joiner TE (2006). Chronic Depression: Interpersonal Sources, Therapeutic Solutions. Washington, DC: American Psychological Association.
    g. Stein DJ, Kupfer DJ & Schatzberg AF (editors, 2006). Textbook of Mood Disorders, 2nd ed. Washington, DC: American Psychiatric Publishing, Inc.
    h. Thase ME & Lang S (2004). Beating the Blues: New Approaches to Overcoming Dysthymia and Chronic Mild Depression. NY: Oxford University Press.*

5. There are many books written for professionals who provide treatment, individuals with anxiety disorders (including those with co-occurring psychiatric disorders) and family members or concerned others. Following are a few examples.

a. Antony MM, Craske MG & Barlow DH (2006). Mastering Your Fears and Phobias: Therapist Guide, 2nd ed. NY: Oxford University Press.
b. Antony MM, Craske MG & Barlow DH (2006). Mastering Your Fears and Phobias: Workbook, 2nd ed. NY: Oxford University Press.*
c. Beck AT & Emery G (2005). Anxiety Disorders and Phobias: A Cognitive Perspective. NY: Basic Books.
d. Butler G, Fennell M & Hackmann A (2008). Cognitive-Behavioral Therapy for Anxiety Disorders: Mastering Clinical Challenges. NY: Guilford Press.
e. Clark DA & Beck AT (2010). Cognitive Therapy of Anxiety Disorders: Science and Practice. NY: Guilford Press.
f. Craske MG, Antony MM & Barlow DH (2006). Mastering Your Fears and Phobias: Therapist Guide, 2nd ed. NY: Oxford University Press.
g. Craske MG, Antony MM & Barlow DH (2006). Mastering Your Fears and Phobias: Workbook, 2nd ed. NY: Oxford University Press. *
h. Daley DC & Douaihy A (2009). Anxiety Disorders Recovery Workbook. Export, PA: Daley Publications. *
i. Daley DC & Salloum IM (2003). Understanding Major Anxiety Disorders and Addiction, 2nd ed. Center City, MN: Hazelden. *
j. Foa EB, Keane TM & Friedman MJ (2000). Effective Treatments for PTSD. NY: Guilford Press.
k. Miller MC (editor, 2008). Coping with Anxiety and Phobias. Boston, MA: Harvard Health Publications.
l. Rygh JH & Sanderson WC (2004). Treating Generalized Anxiety Disorder: Evidence-Based Strategies, Tools, and Techniques. NY: Guilford Press.
m. Stein DJ, Hollander E & Rothbaum O (editors, 2010). Textbook of Anxiety Disorders, 2nd ed. Washington, DC: American Psychiatric Publishing, Inc.\
n. Taylor S (2006). Clinician's Guide to PTSD: A Cognitive-Behavioral Approach. NY: Guilford Press.
o. Zinbarg RE, Craske MG & Barlow DH (2006). Mastery of Your Anxiety and Worry: Workbook, 2nd ed. NY: Oxford University Press. *
p. Zinbarg RE, Craske MG & Barlow DH (2006). Mastery of Your Anxiety and Worry: Therapist Guide, 2nd ed. NY: Oxford University Press.

6. The following references provide a broad review of multiple physical, psychosocial or social factors affecting feelings or moods.

a. Aamodt S & Wang S (2008). Welcome to Your Brain. NY: Bloomsbury
b. Goleman D (2003). Destructive Emotions: How Can We Overcome Them? NY: Bantam Books.*
c. Goleman D (2006). Social Intelligence: The New Science of Human Relationships. NY: Bantam Books.*
d. LeDoux J (1996). The Emotional Brain: The Mysterious Underpinnings of Emotional Life. NY: Touchtone.
e. Lewis M, Haviland-Jones JM & Barrett LF (2008). Handbook of Emotions. NY: Guilford Press.
f. Rosenthal NE (2002). The Emotional Revolution: How the New Science of Feelings Can Transform Your Life. NY: Citadel Press.

g. Thayer RE (1996). The Origin of Everyday Moods: Managing Energy, Tension and Stress. NY: Oxford University Press.
h. See also Anderson & Anderson 2003; and Goleman 1995.

7. Many individual and group therapy or counseling approaches in the treatment of addiction help clients in recovery focus on understanding feelings and moods, and learning skills to manage these. Examples include:
    a. Daley DC & Marlatt GA (2006). Overcoming Your Alcohol or Drug Problem: Client Workbook. NY: Oxford University Press. *****
    b. Daley DC & Marlatt GA (2006). Overcoming Your Alcohol or Drug Problem: Therapist Guide. NY: Oxford University Press.
    c. Daley DC & Douaihy A (2011). Group Treatments for Addiction: Counseling Strategies for Recovery and Therapy Groups. Export, PA: Daley Publications.
    d. Daley DC Mercer D & Carpenter G (2002). Group Drug Counseling. National Institute on Drug Abuse Therapy Manuals for Drug Addiction, Manual #4. Rockville, MD: Department of Health and Human Services.
    e. Marlatt GA & Donovan D (2005). Relapse Prevention, 2nd ed. NY: Guilford Press.
    f. Mercer D & Woody G (2002). Individual Drug Counseling. National Institute on Drug Abuse Therapy Manuals for Drug Addiction, Manual #3. Rockville, MD: Department of Health and Human Services.
    g. Monti P, Adams D, Kadden R et al (2002). Treating Alcohol Dependence, 2nd. Ed. NY: Guilford Press.

8. Many individual and group therapy or counseling approaches in the treatment of psychiatric or co-occurring disorders (psychiatric illness combined with alcohol or drug problems) help clients in recovery focus on understanding feelings and moods, and learning skills to manage these. Some approaches like Cognitive Behavioral Therapy, Interpersonal Psychotherapy or Coping Skills Training are used with many different types of disorders. Other types of therapies are used for specific types of psychiatric disorders such as Dialectical Behavior Therapy for borderline personality disorders. Examples include:
    a. Beck A (1976). Cognitive Therapies and the Emotional Disorders. NY: International Universities Press.
    b. Daley DC & Thase ME (2004). Dual Disorders Recovery Counseling: Integrated Treatment for Substance Use or Mental Health Disorders.
    c. Dimeff LA & Koerner K (2006) Dialectical Behavior Therapy in Clinical Practice: Applications Across Disorders and Settings. NY: Guilford Press.
    d. Greenbert LS (2002). Emotion-Focused Therapy: Coaching Clients to Work Through Their Feelings. Washington, DC: American Psychological Association.
    e. Lewis M, Haviland-Jones JM & Barrett LF (2008). Handbook of Emotions. NY: Guilford Press.
    f. Linehan M (1993). Cognitive Behavioral Treatment of Borderline Personality Disorders. NY: Guilford Press.
    g. Spradlin SE (2003). Don't Let Your Emotions Run Your Life: How Dialectical Behavior Therapy Can Put You in Control. CA: New Harbinger Publications,Inc.*****
    h. Weiss RD & Connery HS (2011). Integrated Group Treatment for Bipolar Disorder and Substance Abuse. NY: Guilford Press.

i. Weissman MM, Markowitz JC & Klerman GL (2002). Comprehensive Guide to Interpersonal Psychotherapy. NY: Basic Books.
j. See also DJ, Hollander E & Rothbaum O 2010; and Stein DJ, Kupfer DJ & Schatzberg AF 2006.

9. Salovey P & Sluyter DJ (1997). Emotional Development and Emotional Intelligence. See also Goleman 1995.

10. See Salovey & Sluyter 1997, Goleman 1995, and Goleman 2006 for a discussion of the components of emotional intelligence. For an intriguing dialogue between a well respected psychological researcher, Dr. Paul Ekman, and a highly revered spiritual leader, The Dalai Lama, see Lama D & Ekman P (2008). Emotional Awareness: Overcoming the Obstacles to Psychological Balance and Compassion. NY: Times Books.

11. There are many helpful books on understanding and managing feelings as a way of improving physical and mental health. In addition, many materials addressing recovery and relapse prevention in addiction or co-occurring disorders focus on the importance of managing moods since inability to cope with negative emotional states is the most common relapse risk factor. Examples include:
    a. Daley DC & Douaihy (2011). Relapse Prevention Counseling: Strategies to Aid Recovery from addiction and Reduce Relapse Risk. Export, PA: Daley Publications.*
    b. Daley DC (2011). Relapse Prevention Workbook: For Recovering Alcohol and Drug Dependent Individuals, Revised edition. Export, PA: Daley Publications.*
    c. Daley DC & Haskett, R (2003). Understanding Biplar Illness and Addiction, 2nd Ed. Center City, MN:Hazelden.*
    d. Marlatt GA & Donovan D (2005). Relapse Prevention, 2nd ed. NY: Guilford Press.
    e. Miller MC (editor, 2010). Coping with Grief and Loss. Boston, MA: Harvard Health Publications.
    f. Pennebaker JW, Ed. (2006). Emotion, Disclosure, & Health. Washington DC: American Psychological Association.
    g. Pennebaker JW (1997). Opening Up: The Healing Power of Expressing Emotions. Revised ed. NY: Guilford Press. *

12. Many of the books and guides mentioned previously address anger. See also: Daley DC (2004). Managing Anger Workbook, 3rd ed. Export, PA: Daley Publications.

13. See Anderson & Anderson 2003.

14. See Daley 2011.

15. Many books written about feelings, emotions or moods include sections on anger. Some books and guides focus specifically on anger since it is a common problem across a range of disorders. Examples include:
    a. Goleman D (1997). Healing Emotions. Boston, MA: Shambhala Publications, Inc.
    b. Goleman D (2003). Destructive Emotions: How Can We Overcome Them? NY: Bantam Books.

c. See Anderson & Anderson 2003; Daley 2004; Goleman 1997; Linehan 1993; and Spradlin 2003.

16. Anger problems are common among individuals with addiction as well as personality disorders, mood disorders and other psychiatric disorders. These problems show in many ways from one extreme in which angry feelings are distorted and acted on inappropriately to the other extreme in which these feelings are suppressed and avoided.

17. While there are several different anxiety disorders, each with a specific cluster of symptoms, anxiety is common among all of these disorders. These disorders are described in:
    a. American Psychiatric Association (APA, 2000). Diagnostic and Statistical Manual of Mental Disorder, DSM TR-IV. Washington, DC: APA.
    b. See Stein, Hollander & Rothbaum 2010.
    c. See also references in footnote #5.

18. See APA 2000.

19. See Daley & Douaihy 2009.

20. There are many books and recovery guides available for anxiety and the various anxiety disorders including those combined with an addiction. Materials on specific disorders can be found at major bookstore or on-line booksellers. A few examples include:
    a. Daley DC (2011). Co-Occurring Disorders Recovery Workbook, 4th ed. Independence, MO: Independence Press.
    b. Hope DA, Heimberg RG, Juster HR & Turk CL (2000). Managing Social Anxiety: Client Workbook. NY: Oxford University Press.
    c. See Antony, Craske & Barlow 2006; Daley & Douaihy 2009; Daley & Salloum 2003; and Zinbarg, Craske & Barlow 2006.

21. Many guides on recovery from addiction address boredom as a potential relapse risk factor for individuals in recovery. Examples include.
    a. Daley DC (2009). Surviving Addiction Workbook: Recovery from Alcohol or Drug Problems, Revised edition. Export, PA: Daley Publications.
    b. See Daley 2011 (Relapse Prevention Workbook).

22. Daley & Marlatt 2006; Daley 2011 (Co-Occurring Disorders Recovery Workbook).

23. See Daley & Douaihy 2006 and 2009; Thase & Lang 2004.

24. Daley, Douaihy & Donovan (2009). Recovery from Cocaine or Meth Addiction. Export, PA: Daley Publications.*

25. See Daley & Douaihy 2006.

26. Many studies have been conducted on CBT and IPT and show that these are very effective treatments for depression. See Stein DJ, Kupfer DJ & Schatzberg AF 2006 for a review of this treatment and relevant clinical studies.

27. Many books and recovery guides provide helpful information on strategies a person can use to manage a clinical depression or symptoms of depression that cause some distress in their life. For example, see Daley & Douaihy 2006; Daley & Douaihy 2009; Daley DC & Thase ME 2002; Rosenthal 2002; and Thase & Lang 2004.

28. Daley DC & Douaihy A (2005). Managing Emotions. Export, Pa: Daley Publications.*

29. Greenspan M (2003). Healing Through the Dark Emotions: The Wisdom of Grief, Fear, and Despair. Boston, MA: Shambhala Publications, Inc. * Daley DC & Douaihy A (2010). Grief Journal: Living with the Loss of a Loved One. Export, PA: Daley Publications.*

30. See APA 2000 and footnote #5 for references on PTSD.

31. See Greenspan 2003; Daley & Douaihy 2010.

32. Daley DC & Marlatt GA (2006). Overcoming Your Alcohol or Drug Problem: Client Workbook. NY: Oxford University Press.*

33. See Daley & Douaihy 2005; Daley & Marlatt 2006.

34. Seligman M (2011). Flourish. NY: Simon & Schuster.*

35. See Goleman 2006; Anderson & Anderson 2003; Seligman 2011; Lewis, Hauland-Jones & Barrett, 2008.

36. In the past decade the Positive Psychology movement has increased the focus on positive feelings in relationships. The general belief is that the expression of positive feelings can improve mental and physical health and impact on the quality of life. Examples related to a broad range of positive feelings include:

    a. Diener E & Biswas-Diener R (2008). Happiness: Unlocking the Mysteries of Psychological Wealth. Malden, MA: Blackwell Publishing.V
    b. Enright RD (2001). Forgiveness is a Choice: A Step-by-Step Process for Resolving Anger and Restoring Hope. Washington, DC: American Psychological Association.*
    c. Frederickson B (2009. Positivity: Top-Notch Research Revels the 3 to 1 Ration That Will Change Your Life. NY: Three Rivers Press.
    d. Kohn A (1990). The Brighter Side of Human Nature: Altruism & Empathy in Everyday Life. NY: Basic Books.*
    e. Lyubomirsky S (2008). The How of Happiness: A Scientific Approach to Getting the Life Your Want. NY: The Penguin Press.*
    f. McDermott D & Snyder CR (1999). Making Hope Happen: A Workbook for Turning Possibilities Into Reality. Oakland, CA: New Harbinger.*
    g. Miller MC (editor, 2009). Positive Psychology. Boston, MA: Harvard Health Publications.
    h. Seligman M (1998). Learned Optimism. NY: Pocket Books (Simon & Schuster).

i. Seligman MEP (2002). Authentic Happiness: Using the New Positive Psychology to Realize Your Potential for Lasting Fulfillment. NY: The Free Press.*
j. Snyder CR (1994). The Psychology of Hope. NY: The Free Press.*

37. Emmons RA (2007). Thanks! How the New Science of Gratitude Can Make You Happier. NY: Houghton Mifflin Company.*

38. Daley DC & Douaihy D (2010). Gratitude Workbook. Export, PA: Daley Publications.

39. See Peterson & Seligman 2004 (Chapter 24 on Gratitude).

40. See Emmons 2007; Daley & Douaihy 2010; Peterson & Seligman 2004.

41. Fromm E (1989). The Art of Loving. NY: Perennial.

42. Glasser W (1989). Choice Theory: A New Psychology of Personal Freedom. NY: Harper.

43. Gottman J (1995). Why Marriages Succeed or Fail. NY: Simon & Schuster.

44. See Fredrickson 2006 and references in footnote #36.

45. See Anderson & Anderson 2003; Goleman 1995; Fredrickson 2006.

46. Adler RB & Towne N (2010). Looking Out Looking In: Interpersonal Communication, 13th edition. NY: Harcourt Brace College Publishers.

47. See Gottman 1995 and 1999. See also Gottman references d & e below in footnote #48.

48. Many of the books referenced in this workbook include sections on relationships and strategies to build positive relationships. See for example Anderson & Anderson 2003; Goleman, 2006; Gottman 1999; Seligman 2011. See also the following:
a. Daley DC (2012). Improving Communication and Relationships, Revised edition. Murrysville, PA: Daley Publications.*
b. Daley DC & Douaihy A (2010). Sober Relationships and Support Systems in Recovery: For Substance Use and Co-occurring Disorders. Revised edition. Murrysville, PA: Daley Publications.*
c. Gottman JM (1999). The Seven Principles for Making Marriage Work. NY: Crown Publishers.*
d. Gottman JM (2001). The Relationship Cure: A 5 Step Guide for Building Better Connections with Family, Friends and Lovers. NY: Crown Publisheers.*
e. Gottman JM & Gottman JS (2006). 10 Lessons to Transform Your Marriage. NY: Crown Publishers.

49. Valliant GE (2008). Spiritual Evolution: How We Are Wired for Faith, Hope, and Love. NY: Broadway Books.*

Appendix C
Internet Resources

The following websites offer information on addiction or mental health problems. You can also go on the internet and use a search engine to find more resources on any specific feeling, emotion or mood, or any type of emotional or mood disorder.

- Alcoholics Anonymous – www.aa.org
- Anxiety Disorders Association of America – www.adaa.org
- CHAANGE (Anxiety Treatment) – www.chaange.com
- Depression and Bipolar Support Alliance – www.dbsaliance.org
- Dr. David Kessler – www.davidkessler.org
- Dr. Dennis C. Daley – www.drdenniscdaley.com
- Dual Recovery Anonymous – www.draonline.org
- Emotions Anonymous – www.emotionsanonymous.org
- Freedom From Fear – www.freedomfromfear.org
- Grief – www.griefandrecovery.com
- Happiness – www.authentichappiness.sas.upenn.edu
- International OCD Foundation – www.ocfoundation.org
- Kindness – www.randomactsofkindness.org
- Narcotics Anonymous – www.na.org
- National Alliance for Mentally Ill – www.nami.org

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Rabinowitz, J. A., Ellis, J. D., Strickland, J. C., Hochheimer, M., Zhou, Y., Young, A. S., Curtis, B., & Huhn, A. S. (2023). Patterns of demoralization and anhedonia during early substance use disorder treatment and associations with treatment attrition. Journal of Affective Disorders, 335, 248-255. https://doi.org/10.1016/j.jad.2023.05.029

Sinha, R. (2024). Stress and substance use disorders: Risk, relapse, and treatment outcomes. Journal of Clinical Investigation, 134(16), e172883. https://doi.org/10.1172/JCI172883

Sugarman, D. E., Meyer, L. E., Reilly, M. E., & Greenfield, S. F. (2022). Women's and men's experiences in group therapy for substance use disorders: A qualitative analysis. American Journal on Addictions, 31(1), 9-21. https://doi.org/10.1111/ajad.13242

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Whitt, Z. T., Sturgeon, T., Rattermann, M. J., Salyers, M., Zapolski, T., & Cyders, M. A. (2022). Mapping recovery: A qualitative node map approach to understanding factors proximal to relapse among adolescents in a recovery high school. Journal of Substance Abuse Treatment, 138, 108750. https://doi.org/10.1016/j.jsat.2022.108750

Zengin İspir, G., Danışman, M., Sezer Katar, K., Gökçer Tulacı, R., & Özdel, K. (2024). Emotion dysregulation and affective temperaments in opioid use disorder: A 1-year follow-up study. Journal of Addictive Diseases, 42(4), 464-471. https://doi.org/10.1080/10550887.2023.2267157

Appendix A: Coping with Feelings and Moods

Directions: To receive credits for this course, you are required to take a post test and receive a passing score. We have set a minimum standard of 80% as the passing score to assure the highest standard of knowledge retention and understanding. The test is comprised of multiple choice and/or true/false questions that will investigate your knowledge and understanding of the materials found in this CEU Matrix – The Institute for Addiction and Criminal Justice distance learning course.

After you complete your reading and review of this material, you will need to answer each of the test questions. Then, submit your test to us for processing. This can be done in the following manner:

Submit your test via the Internet. All of our tests are posted electronically, allowing immediate test results and quicker processing. First, you may want to answer your post test questions found at the end of this appendix. Then, return to your browser and go to the Student Center located at:

http://www.ceumatrix.com/studentcenter

Once there, log in as a Returning Customer using your Email Address and Password. Then click on 'View Lesson Quiz' and you will be presented with the electronic exam.

To take the exam, simply select from the choices of "a" through "e" for each multiple choice question. For true/false questions, select either "a" for true, or "b" for false. Once you are done, simply click on the submit button at the bottom of the page. Your exam will be graded and you will receive your results immediately. If your score is 80% or greater, you will receive a link to the course evaluation. You will also receive a link to the Certificate of Completion. This is the final step in the process, and you may save and / or print your Certificate of Completion.

If, however, you do not achieve a passing score of at least 80%, you will need to review the course material and return to the Student Center to resubmit your answers.

NOTE: THE EXAM QUESTIONS AND /OR ANSWERS MAY BE IN A DIFFERENT ORDER IN THE ONLINE EXAM

Answer the following questions by selecting the most appropriate response.

1. Emotional health is affected by _____ factors.
a) social
b) environmental
c) physical
d) economic
e) all of the above

2. Low levels of a brain chemical called _____ can play a role in anxiety or depression.
a) dopamine
b) norepinephrine
c) serotonin
d) melatonin
e) bradykinin

3. When a person gets sober, they are less likely to be aware of their feelings.
a) True
b) False

4. _____ include the ability to identify your feelings, label them so you know what they are, assess their intensity, and manage these in healthy ways.
a) Physical traits
b) Social skills
c) Trade skills
d) Emotional skills
e) Withdrawal symptoms

5. Emotional intelligence refers to the ability to recognize, understand and manage emotions.
a) True
b) False

6. Feelings are conveyed better with spoken words than in a facial expression or tone of voice.
a) True
b) False

7. In recovery it is essential to _____ the amount of negative feelings, _____ negative feelings in healthy ways, and _____ the amount of positive feelings.
a) decrease, ignore, increase
b) increase, manage, decrease
c) decrease, manage, increase
d) decrease, manage, decrease
e) increase, ignore, decrease

8. Coping strategies are _____, _____, and _____.
a) verbal, instructed, cognitive
b) verbal, flexible, cognitive
c) verbal, behavioral, societal
d) verbal, non-verbal, cognitive
e) verbal, behavioral, cognitive

9. Anger is a(n) _____ feeling when you feel mad, miffed or pissed about something or someone.
a) primary
b) secondary
c) tertiary
d) suppressed
e) expressed

10. Anger should not be used as a motivator to set or reach goals.
a) True
b) False

11. While closely related, _____ refers to the mental side and _____ refers to the physical side.
a) pity, sympathy
b) sympathy, pity
c) anger, fear
d) worry, anxiety
e) anxiety, worry

12. _____ anxiety can be very debilitating and refers to anxiety associated with thinking ahead of time and what may happen in the future.
a) Participatory
b) Anticipatory
c) Potential
d) Over-reactive
e) Severe

13. Anxiety disorders include:
a) panic disorders
b) obsessive-compulsive disorders
c) panic attacks
d) phobias
e) all of the above

14. Depression is closely associated with addiction.
a) True
b) False

15. Clinical depressions involves feeling depressed or being unable to experience pleasure _____.
a) while at work
b) for a day or two
c) for several weeks or longer
d) after taking medication
e) during therapy

16. Strategies for managing feelings of depression include:
a) keeping active
b) evaluating relationships
c) making amends
d) none of the above
e) all of the above

17. You should always deal with grief in recovery immediately, waiting can only inhibit a stable recovery.
a) True
b) False

18. _____ refers to feeling bad about yourself.
a) Guilt
b) Depression
c) Boredom
d) Shame
e) Empty

19. _____ refers to feeling bad about your behaviors.
a) Shame
b) Guilt
c) Grief
d) Jealousy
e) Boredom

20. High levels of positive feelings (especially a ratio of at least _____ positive to _____ negative feeling) can lead to better health.
a) 3, 1
b) 6, 1
c) 2, 1
d) 10, 1
e) 1, 3

21. _____ is the feeling of being thankful for or appreciating something someone has done for you.
a) Remorse
b) Caring
c) Gratitude
d) Reciprocation
e) Elation

22. Love is simply a feeling or emotion, no more.
a) True
b) False

23. This person discovered that there are several principles that make marriage and other relationships successful.
a) Dr. Barbara Frederickson
b) Dr. William Glasser
c) Dr. Erich Fromm
d) Dr. Sigmund Freud
e) Dr. John Gottman

24. _____ requires trust of another person and a willingness to let them in your personal world.
a) Friendship
b) Happiness
c) Recovery
d) Self-disclosure
e) Relapse

25. Successful relationships such as marriages or intimate partnerships require sharing _____.
a) goals
b) values
c) meaningful experiences
d) none of the above
e) all of the above