Three Types of People Who Can Influence Your Recovery

Supportive people help your recovery.

They truly care They listen without judging They never offer you substances if you ask them not to They want to help you get better They believe you about the trauma.
Who is supportive of your recovery?
 Neutral people neither help nor harm your recovery.
They may be too involved in their own lives to support you They may not know how to be supportive, but they are basically good people who don't want to hurt you.
Who is neutral toward your recovery?
× <u>Destructive people</u> harm your recovery.
They undermine you They offer you substances after you tell them not to They abuse you emotionally or physically They tell you to "just get over it" They blame you, judge you They criticize your attempts to get treatment They tell you the trauma never happened.
Who is destructive of your recovery?

A SIMPLE GOAL

- 1 Increase the supportive people in your life and
 - ↓ Decrease the destructive people in your life.

HELPING OTHERS TO HELP YOU

You may need to educate people about what you need for recovery.

- Give A Letter to People in Your Life (Handout 2) to someone in your life, or write a letter of your own.
- ◆ Tell people directly and specifically what you need. Some examples:
 - "Please never offer me drugs or alcohol."
 - "Please do not tell me your opinions about my recovery."
 - "Please do not ask me to take on new demands right now."

(cont.)

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- "Please do not criticize me right now. Only supportive statements are helpful to me."
- "Please accept that sometimes I need to cry and get upset."
- "Please do not use drugs or alcohol when you are around me."
- "I need you to respect where I am right now; it is my recovery process."
- "Please do not ask me about my trauma."
- "Please do not get 'on my case' about going to AA—I'll go if I want to." (Or: "Please remind me to go to AA—I find that helpful.")
- "This is a difficult time—you can be helpful by [fill in here: picking up the kids from school, coming with me to my appointments, checking in by phone]."
- "The best way for you to help is to read about PTSD and substance abuse. I will give you material to read."
- "You can help me by going to Al-Anon so that you get more support."

A Letter to People in Your Life

HELPING SOMEONE RECOVER FROM PTSD AND SUBSTANCE ABUSE

- * Your genuine support can make all the difference in the world.
- * Posttraumatic stress disorder (PTSD) is a medical condition. It is a devastating illness that occurs after someone has been through a trauma. A "trauma" is a terrible life event in which some sort of physical harm or threat was present that was out of the person's control (e.g., child abuse, accident, fire, crime victimization, combat, rape, hurricane). Symptoms of PTSD include sleep problems, nightmares, intense negative feelings, difficulty functioning in life, physical distress, and other problems.
- * Substance abuse is also a medical condition. It means that a person cannot stop using a substance even though it is causing clear damage to the person's life (e.g., physical or emotional harm, legal or financial problems, inability to work or take care of family responsibilities). Substance abuse is not about "laziness," "being bad," or "just wanting to have a good time."
- * The combination of PTSD and substance abuse is very common. Among women with substance abuse, up to 59% have PTSD; among men, up to 38% have PTSD. It is not yet known what causes people to develop PTSD and substance abuse. Biological reasons, life circumstances, or some combination can lead to developing these problems.
- * Recovery from PTSD and substance abuse is difficult. Recovery is definitely possible, but it is not easy. The person you care about suffers a great deal of emotional pain. The person may have "roller-coaster" mood swings, self-destructive behavior, difficulty trusting people, and intense negative feelings. These are common problems after surviving trauma. PTSD and substance abuse are sometimes called "double trouble" because it is so difficult to fight both disorders at the same time.
- * The goal of this treatment is safety above all. Safety includes ending substance use and other self-harm, learning to take better care of oneself, gaining control over intense feelings, and establishing trusting relationships. In the treatment, we spend time practicing coping skills to achieve safety. Some of the topics are Honesty, Asking for Help, Setting Boundaries in Relationships, Taking Good Care of Yourself, Compassion, Recovery Thinking, Creating Meaning, Self-Nurturing, and Respecting Your Time.
- * The worst thing you can say is "Just get over it and move on." If it were that easy, it would have been done long ago. The path of recovery may be slow, with many ups and downs. The only way out is by steady progress. Ignoring PTSD or substance abuse, or pretending that they are not serious problems, does not make them go away; it makes them more destructive in the long run.
- * You can help the person you care about in specific ways if the person wants your help. Remember, however, that it is entirely up to the person to decide if and how you can help.
 - ★ Encourage the person to complete commitments between sessions. Commitments are goals the person agrees to complete between sessions to move forward in recovery. If the person wants to, it may help to go over them with you.
 - ★ Read about PTSD and substance abuse so you can understand these disorders better. Go to a library, search the Internet, or call some of the resources listed at the end of this handout for more information.
 - * Read the handouts from this treatment to know what the person is learning. If desired, work on them together. You can help the person practice the treatment skills outside of sessions.
 - ★ Encourage the person you care about to attend treatment. It is normal for the person to have mixed feelings about treatment, but the only way to move forward is to show up and talk about those feelings.

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* Recognize the two main themes for people with PTSD and substance abuse.

- Secrecy is the need to hide important feelings, memories, thoughts, and behaviors. The more you earn
 the person's trust, the more she or he can confide these to you directly. To earn trust you need to listen
 without judgment, without "solving" the problem, and without being offended by what is said. Also, respect what the person does and does not want to tell you. For example, if the person does not want to
 talk to you about substance use, it will likely only lead to lying if you insist on it.
- Control is the need to feel power after having been powerless for so long (both in trauma and in substance use). The more you allow the person to take healthy control, the better. Avoid power struggles (arguments, coercion), as they rarely help and often harm.
- * In this stage of treatment, called "early recovery," do not ask for details about the trauma. It is important to honor the person's boundaries. It may be too upsetting to reveal what happened. And what happened is less important right now than learning to cope with current problems. Respect that the person may choose to tell you when he or she is ready.

* With substance abuse it is best if you:

- * Never offer substances of any kind.
- ★ Encourage honesty about substance use, but recognize that it may not always be possible. In substance abuse recovery, it is normal to feel intense shame over using; hiding or lying about use is common.
- ★ Never blame, attack, or judge the substance use. Using substances has been a way for the person to cope with the severe pain of trauma; it may take a while to learn other ways to cope.
- * Never "enable" the substance abuse. This means that you should never lie about the person's substance use to protect him or her, buy substances for the person, pretend the substance abuse is not a problem, promote substance use in any way, or agree to anything that violates your values.
- * Remember that you cannot force the person to recover. It is up to the person to find the motivation to move forward. You cannot force recovery through guilt or punishment. Know that recovery may take a long time, and that most people "slip" (use substances) sometimes along the way.
- * If you notice any dangerous behavior, please contact the therapist or take the person to the nearest emergency room. Dangerous behavior includes suicidal actions (or an immediate and definite plan to commit suicide), abuse of other people such as children, or an extreme increase in substance use.

Name of therapist.	Name of therapist:	Therapist emergency phone number:	
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- * It is natural to become frustrated at times by someone with such major problems. However, to the extent that you can focus on the person's needs, listen nonjudgmentally, and give the person time and space to focus on recovery, you will be making a valuable contribution.
- * If you notice yourself frequently having intense negative feelings toward the person, consider getting help. A list of resources for you is provided below. For example, Al-Anon provides self-help to families and friends of people who abuse substances. Or you may want to consider brief therapy to help you manage the stress of the relationship. People in recovery from just one disorder—PTSD or substance abuse—can be challenging to deal with; people in recovery from both may be doubly challenging.
- * If you feel you cannot be helpful during recovery, it is best to do nothing rather than to be destructive. Also, respect the person's feedback about how helpful or destructive you are. There is no right or wrong to these views; it is how the person feels, and that is very real, even if you do not agree with it. If the person asks you to back off, back off.
- * Above all, treat the person you care about with great kindness and respect. "A loving heart is the truest wisdom."

ORGANIZATIONS THAT CAN BE HELPFUL

The following are all free, nonprofit, national resources dedicated to helping people. Included are advocacy organizations, self-help groups, and newsletters.

Substance Abuse/Addictions

Al-Anon Family Groups (for relatives, friends, and teen relatives of alcoholics); www.alanon.org	800-344-2666 OR 800-356-9996
Alcoholics Anonymous (World Service); www.aa.org	212-870-3400
American Council for Drug Education; www.acde.org	800-488-DRUG
American Council on Alcoholism; assistedrecovery.com	800-527-5344
Center for Substance Abuse Treatment: National Drug Information, Treatment and Referral Hotline; www.samhsa.gov/treatment	800-662-HELP OR 800-729-6686
Cocaine Anonymous (World Service); www.ca.org	310-559-5833
Co-Dependents Anonymous (addictive relationships); www.coda.org	602-277-7991
Division on Addiction-Harvard Medical School; divisiononaddictions.org	781-306-8600
Families Anonymous (for families with substance abuse); www.familiesanonymous.org	800-736-9805
Gamblers Anonymous (GA); gamblersanonymous.org	213-386-8789
Harm Reduction Coalition; harmreduction.org	212-213-6376
Highland Ridge Helpline	800-821-4357
Join Together (for communities working to reduce substance abuse); www.drugfree.org/join-together	617-437-1500
Narcotics Anonymous (World Service); na.org	818-773-9999
National Council on Alcoholism and Drug Dependence; ncadd.org	800-NCA-CALL
National Institute on Drug Abuse (NIDA); www.nid.nih.gov	
Rational Recovery (main office); rational.org	530-621-2667
Secular Organization for Sobriety/Save Our Selves (SOS); www.cfiwest.org/sos	323-666-4295
SMART Recovery (national office); smartrecovery.org	866-951-5357
Sexaholics Anonymous (national office); sa.org	866-424-8777

Trauma/PTSD/Anxiety Disorders

Anxiety Disorders Association of America; www.adaa.org	240-485-1001
Cavalcade Videos (on trauma, for patients and therapists); www.cavalcadeproductions.com	800-345-5530
International Society for Traumatic Stress Studies; www.istss.org	847-480-9028
Many Voices (trauma survivors newsletter); www.manyvoicespress.com	513-751-8020
National Center for PTSD and PILOTS Database (extensive literature on PTSD); www.ptsd.va.gov/professional/pilots-database/pilots-db.asp	802-296-6300; and www.ncptsd.org
National Center for Trauma-Informed Care; www.samhsa.gov/nctic	866-254-4819
National Center for Victims of Crime; www.ncvc.org	202-467-8700
National Institute of Mental Health Information Line; www.nimh.nih.gov	800-615-6464
PTSD Research Quarterly (summary of new research); www.ptsd.va.gov/professional/newsletter/ptsd-rq.asp	
Sidran Traumatic Stress Foundation (trauma information, support); www.sidran.org	410-825-8888

Domestic Violence

National Domestic Violence Hotline; www.thehotline.org	800-799-7233
National Resource Center on Domestic Violence; www.nrcdv.org	800-537-2238

Mental Health

Grief Recovery Helpline; www.ggcoa.org	800-445-4808
Mental Health America; www.nmha.org	800-969-6642
National Alliance for the Mentally III; www.nami.org	800-950-6264
National Institute of Mental Health Information Resource Center	800-421-4211

HIV/AIDS/Sexually Transmitted Diseases (STDs)

AIDS Hotline; www.aac.org/hotline	800-235-2331
American Social Health Association (sexually transmitted diseases); www.ashastd.org	919-361-8400
Centers for Disease Control National AIDS Hotline; www.cdc.gov/hiv	800-232-4636

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Gay Men's Health Crisis Hotline; www.gmhc.org	212-367-1000
National Prevention Information Network; cdcnpin.org	800-458-5231
Planned Parenthood; www.plannedparenthood.org	800-230-7526

Parenting/Relationships

American Academy of Husband-Coached Childbirth; bradleybirth.com	800-4A-BIRTH
Child Abuse Prevention Center; childabusepreventioncenter.org	214-370-9810
International Childbirth Education Association; www.icea.org	800-624-4934
National Adoption Center; www.adopt.org	800-TO-ADOPT
National Child Traumatic Stress Network; www.nctsn.org	310-235-2633
Parents Helping Parents (free self-help support groups); www.parentshelpingparents.org	800-632-8188