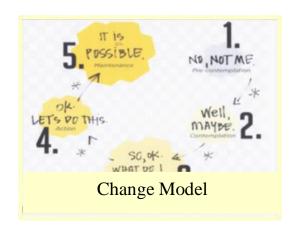
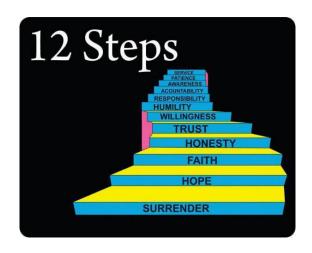
Is this just a bad habit or an issue of concern?

Substance use concerns:

Your own? Family? Friends? Co-workers? Clients?







Telka Arend-Ritter LMSW 11 Page Self-help Resource

Telka's Substance Use Information Kit

Dear reader,

This material includes the most common, basic information that my clients have found useful during my years as a dual diagnosis, mental health professional. My post graduate career began at an outpatient substance abuse clinic treating adolescents and their families. I then worked briefly as a pediatric medical social worker before settling into 20+ years in an outpatient hospital setting working with dual diagnosis—mental health and substance abuse patients. For the past 15 years, as an owner of a solo solution-focused, CBT practice, my focus has been on treating the friends, families, and coworkers of those who struggle with bad habits and addiction, as well as relapse prevention with those who successfully maintain healthy lifestyles.

Because I have never worked in a Methadone clinic, I have not encountered clients with active opioid addictions. Experts in the treatment of opioid addiction are better equipped to address those concerns.

The material in this kit is most applicable to people who are concerned about differentiating bad habits from abuse of alcohol or marijuana. This information may also apply to the abuse of prescriptions medications in some cases, depending on the medication and the medical condition. Use this information as a guide to assist you with moving forward while seeking the appropriate level of medical, psychiatric, legal and community assistance necessary to address your concern.

In this kit you will find:

Page 3-4Substance use disorder terminology

Page 5-7.... Bad habit inventory & coping skills inventory

Page 8 Replace bad habits with coping skills

Page 9..... DSM-5 Criteria for Substance Use Disorder

Page 10 Your 4 choices to bad habits and substance use disorders

Page 11... Problems? Now what?

Page 12-15... Enabling and other FAQ

Page 16 Letting Go, Detach with Love

Bad Habit? Substance abuse? A Coping Toolkit.

Social Use? Substance Abuse? Addiction? When is substance use a "disorder?"

Let's begin this toolkit with understanding the terminology used by doctors, hospitals, and treatment centers to define exactly what addiction is and is not.

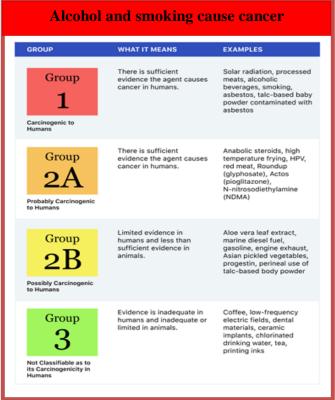
"Substance Use Disorder" is the terminology used for problems related to any *mood-altering substance* including tobacco, caffeine, stimulants, alcohol, marijuana, opioids and even prescription medications such as benzodiazepines and narcotics.



Binge drinking: According to The *Dietary Guidelines for Americans 2020-2025*, binge drinking is defined as "5 or more alcoholic drinks for males or 4 or more alcoholic drinks for females on the same occasion (i.e., on the same day or within a couple of hours of each other) on at least 1 day in the past month."

Denial: *Don't even know I am lying* "A psychological defense mechanism in which confrontation with a personal problem or with reality is avoided by denying the existence of the problem or reality."

Moderation: According to The *Dietary Guidelines for Americans* 2020-2025, "for adults of legal drinking age, moderation is limiting intake to 2 drinks or less in a day for men and 1 drink or less in a day for women, when alcohol is consumed." We now know that alcohol consumed in any amount is a Group 1 carcinogen, causing 7 different types of cancers. This information may, or may not, impact your decision regarding usage.





And what about Marijuana?

Although marijuana is legal in some states, the FDA has not published dietary guidelines for its use. Check out this website for more information:

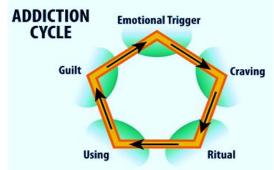
What You Need to Know (And What We're Working to Find Out) About Products Containing Cannabis or Cannabis-derived Compounds, Including CBD | FDA

In an attempt to offer some clarity on what would be considered safe or social use, Mayo Clinic had this to say:

- Marijuana use impairs attention, judgement, and coordination. Don't drive or operate machinery when using marijuana.
- Marijuana use might worsen manic symptoms in people who have bipolar disorder. If used frequently, marijuana might increase the risk of depression or worsen depression symptoms.
- Research suggests that marijuana use increases the risk of psychosis in people who have schizophrenia.
- Smoking marijuana can affect your memory and cognitive function and cause harmful cardiovascular effects, such as high blood pressure. Long-term marijuana use can worsen respiratory conditions.

Now that you know the medical implication of substance use, let's apply this to a more personal level. Are you or someone you know using some type of "mood altering" substance in a way that concerns you?

- ☐ Too much time wasted?
- ☐ Broken promises, lost trust and frequent arguments?
- ☐ Classes dropped or failed?
- ☐ Money blown on cigarettes, cannabis, alcohol or pills ?
- ☐ Jobs and opportunities missed or lost?
- ☐ Hangovers/health problems/blackouts?



Recovery is based on the belief that each person is responsible for his or her own behavior. This means that the best recovery outcome is from *internal* motivation (personal choice to change), not *external* motivation (attempts to help, force, coerce or manipulate someone else.). . Bottom line: You cannot change other people, but you can improve your own coping skills and strive to role model the best version of yourself. "Be the change you seek." Gandhi

What if it's not a disorder? What is a Bad Habit? Coping Skills versus Bad Habits (Is your behavior aligned with your values?)



When does playing a video game, checking social media, or watching TV become a bad habit? How many hours define a "workaholic"? Is an occasional glass of wine or edible a bad habit? Where do you draw the line before hobbies, electronics, shopping, clutter, gambling, partying, and even exercise or eating become bad habits? When does a relationship become unhealthy, a poor role

model or even an addiction?

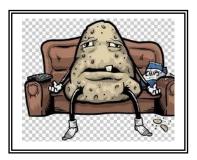
The *consequences* of an activity or relationship determine whether it is harmful. Activities and relationships become bad habits when they are excessive, illegal, cause damage, create chaos in your life or have other harmful effects on your mental, physical health or your dignity.

Determine if your Activity/Relationship (A/R) has crossed the line into a bad habit. **Answer each question by circling Yes or No.** (If you are not sure, ask someone you respect to check over your answers)

- **Yes** No 1. Does your A/R negatively impact your ability to meet your basic financial responsibilities?
- Yes No 2. Does your A/R cause you to feel embarrassed, anxious, sad, remorseful, or defensive?
- **Yes** No 3. Are loved ones complaining about the amount of time or money you invest in your A/R?
- **Yes** No 4. Has your A/R been the focus of arguments or fights with people who you respect?
- **Yes No** 5. Does your A/R result in physical harm to your body or damage to your overall health and well-being?
- **Yes** No 6. Do you find yourself hiding or minimizing the amount of time, energy or money spent on your A/R?
- **Yes** No 7. Does your A/R interfere with your responsibilities at work?
- **Yes** No 8. Does your A/R interfere with your responsibilities at home?
- **Yes** No 9. Has your A/R negatively affected your self-esteem or self-respect?
- **Yes** No 10. Does your A/R conflict with your life goals, professional standards, spiritual beliefs, or personal values?

Scoring: Answering "yes" may indicate that your activity or relationship has crossed the line into a bad habit or addiction. Continue inventorying your bad habits on the next page.

Bad Habit Inventory



Bad habits begin with making the decision to do a questionable behavior then continuing to repeat that behavior over and over until the behavior becomes habitual, damaging, or destructive.

Observe and Listen: Place a check mark \square next to each sentence that is *currently* true for you. Be honest with yourself. Your answers are private. Observe your physiological response as you answer each question.

1. I eat to fill emotional emptiness, loneliness, boredom, or anxiety. I blame my un-healthy weight on my genetics, my environment, my stress level, or other factors out of my control.*
2. I use caffeine to stay awake. Lots of caffeine. I drink more than 250 mg a day.* (8 oz of coffee = 65 to 110 mg of caffeine, soda = 34-70 mg of caffeine.)
3. I <i>abuse</i> alcohol, nicotine, cannabis, medications or other mood-altering substances.*
4. My sexual behaviors or interests create moral, physical, or legal problems.*
5. I use my rage to let off steam. I tantrum, yell, throw things, swear, or threaten.*
6. I procrastinate. I avoid taking action on tasks that seem overwhelming or boring.*
7. I drive aggressively. I drive as if I own the road. I feel entitled to my anger and blame other drivers for my rage.*
8. I don't even want to know how much gambling has cost me. I'm out of control.*
9. I am often shopping, spending, or buying stuff to feel good. I spend too much.*
10. I am never happy with what I have. I am always looking for something else "out there" to fix what feels empty "in me." *
11. I must compulsively clean, wash, organize, order, or count things to feel in control.*
12. I fuel my bad habits with thoughts of guilt, shame, and poor body image. If I believe <i>I am not good enough</i> , I am able to justify and continue my bad habits.*
13. I surround myself with stress and chaos so that I never "have time" to relax, listen to my own thoughts or take responsibility for growth or change.
14. I give my power away to others then I blame them for taking it.

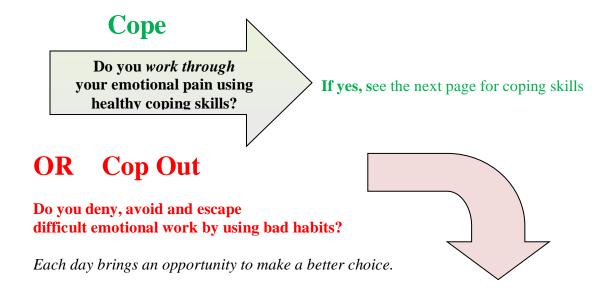
15. I avoid healing my fear of being alone by making sure that I am never alone.
16. I avoid conflict. When a conflict arises, I shut down, give in, blame, run or hide.
17. I live in the past. I have not accepted the present nor envisioned my future.
18. I am never satisfied with myself. I must always "do more." I stay busy to outrun my self-loathing and my fear of not being good enough.
19. I play the victim. I have an excuse for everything.
20. I use denial regularly. I pretend I do not see it so maybe it will just go away. (And I don't have any of the bad habits on this list. I don't need this stupid test!).
Total number of items checked.

Scoring: A perfect score is (0). Each checked item reflects an opportunity to improve.

Application

- 1. Discuss checked items #1 through #12 with your therapist or healthcare provider.
- 2. Continuing bad habits and addictions creates self-loathing.

You decide when to stop your self-defeating cycle. You always have a choice.



Replace Your Bad Habits with Healthy Coping Skills

"When we are no longer able to change a situation—we are challenged to change ourselves." Viktor E. Frankl

Coping skills healthy habits, behaviors, thoughts, resources, or tools to assist you in the process of working through painful emotions. Place a check in the box of each coping skill you currently practice. Circle the strategies you intend to begin using. Set alarms in your phone to remind you or download an app. ☐ Finish that craft or project ☐ Visit a library or museum □ Relax with herbal tea ☐ Draw, paint or create ☐ Practice a sport ☐ Talk out feelings ☐ Plan & make healthy meals □ Walk. hike, jog, run ☐ Enjoy a bath or shower ☐ Make a budget, pay bills ☐ Bike, ski, skate □ Write ☐ Rekindle a hobby ☐ Use exercise equipment □ *Meditate or pray ☐ Connect with loved ones ☐ Stretch, yoga, cardio ☐ Have a "good" cry ☐ Clean, de-clutter, organize ☐ Swim, float, canoe, boat ☐ Practice self-compassion ☐ Attend social event ☐ Care for animals ☐ View inspirational stuff □ Volunteer, join something ☐ Do home improvements ☐ Listen to inspirational stuff ☐ Tutor, mentor, or coach ☐ Plan your calendar ☐ Sing, dance ☐ Seek a support group ☐ Rake, mow, weed, garden ☐ Educate yourself ☐ Create a bucket list ☐ Help someone □ Read ☐ Appreciate nature, explore □ Play ☐ Polish your nails ☐ Listen to or make music ☐ Recycle & donate ☐ Take a nap or rest *Meditation questions: 1. What motivates you to use the coping strategies you marked in the columns above? 2. What triggers you to slip away from using your best coping skills? 3. How would you like to maintain your healthy coping skills? (Check all that apply): □ **Support.** Surround yourself with people who have similar goals and successful intention. ☐ **Prioritize.** Schedule time for the most important goals, including relaxation and fun. □ Accountability. Document, record or discuss progress with yourself and with others □ **Routines.** Practice maintaining healthy habits (Check to see if there is an app for that!)

 \square Embrace \rightarrow your emotions and experiences with self-compassion and curiosity.

DSM-5 Criteria for Substance Use Disorder

Concerned about your own use? Someone else's use? What exactly constitutes a concern? ✓ Check all statements below that are true (occurring within a 12-month period). Share your results with the heathcare provider of your choice.

□ 1. Substance use causes reduction or impairment in the ability to fulfill major social, family, school, or job duties. Why is this hard to spot sometimes? Both users and enablers judgement may be clouded by denial. Entire families and even communities normalize impairment. Examples: "Everyone" gets drunk at the sporting event, gets high at the concert, or has drinks after work etc. It's expected! \square 2. Continuing to use despite the objections of others or evidence that use is causing **problems.** Hard to spot when "problems" are normalized. "Everyone gets a DUI or MIP" □ 3. Increased tolerance: ability to ingest more without feeling the effects or experiencing hangovers. Addiction thinking refers to increased tolerance as a good thing, like knowing how to "hold your liquor" or "ability to party." Sneaky distorted thoughts mess with the mind. ☐ 4. Withdrawal symptoms: cravings, irritability, anxiety, mood swings, sleep disturbance, illness. Addicts and enablers usually fail to accurately label withdrawal symptoms. Instead, they blame symptoms on stress, fatigue, or something else—but not their usage. \square 5. Using greater amounts than intended or using more frequently than intended. Denial limits insight. Addicts believe use is a choice or preference, but not an addiction. ☐ 6. Unsuccessful efforts to control, reduce or quit using. This creates broken promises, lost trust and shame.. that again, is rationalized by distorted thinking and denial. □ 7. Excessive amounts of time involved in obtaining, using, or recovering from the substance. Examples include: Majority of free weekends involved in partying, frequent day drinking or routine nightly use after work or before bed, frequent hangovers. A "hangover" includes excessive fatigue, low motivation and irritability following an episode of binge use. □ 8. Use in potentially dangerous situations: Examples include: Child or animal endangerment, use while operating machines or using sharp objects, driving under the influence, accidental overdose and use escalating into neglect, injury, or violence. □ 9. Use results in an inability to fulfill a major obligation. Examples include: Excessive absenteeism, failing school or college, underemployment, or inability to maintain employment, financial problems, eviction, failed relationships, neglect of pet's or children's needs, divorce, recurrent health problems, restricted or lost driver's license, criminal record, incarceration. ☐ 10. Recurrent legal problems.

Scoring: 2-3 Ø = a mild substance use disorder, 4-5 Ø symptoms = moderate substance use disorder 6+ Ø symptoms = severe substance use disorder.

The 4 Choices: Applied to Bad Habits, Substance Use and Recovery

Stimulus: *External Stimulus* refers to what's happening outside of your body. *Internal Stimulus* refers to what's inside of your body: thoughts, feelings, sensations.

Choice: You can't control the stimulus—Life happens, and your biology is what it is. But you can choose your response to life, your thoughts and your feelings (aka your emotional self-regulation). Problem with mood altering substances is that they will trick your mind with distorted thoughts

You have 4 response choices: Use these steps below as a guide.

Stimulus

Two kinds:

External Stimulus:

Everything
happening outside
of your body and
all around you—
all the people,
places, and things
of
adult life

Internal Stimulus:

Everything inside of your body, (automatic, not within your control)

Physical sensations
Thoughts
Feelings

Choice

Pause. Think.

What is your intention?

How do you wish to respond?

Response: You always have four choices

☐ Complain/Blame/Anger

- Stuck in blame, resentment, and anger—perfect excuse to self-destruct or act out.
- Complain, judge, worry or nag → "They are the problem!"
- Bully, punish or control to "make them stop"

□ Enabler/Codependent/Victim

- Distorted Enabling thoughts: False belief that if you do enough "right" things you can change other people.
- Obsessive focus on others' *faults*, *needs* Excusing, defending, financing, cleaning up, caretaking, rescuing, focus on *them* instead of taking care of own business.

□ Bad Habits and Self-Defeating Behavior

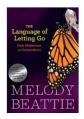
Excessive: working, social media, spending, shopping, eating, drinking, smoking, drugs. Dysfunctional relationships: gossip, betrayal, codependency, affairs, tantrums, violence.

☐ Recovery, Healthy Coping Response

- Work 12-step recovery (Alanon, OA, AA)
- Role model healthy coping skills.
- Self-compassion replaces self-sabotage.
- Problem-solve rather than complain, blame.
- Consider stress an opportunity to learn.
- Create environment that supports recovery.

Problem with drugs/alcohol? Now what?

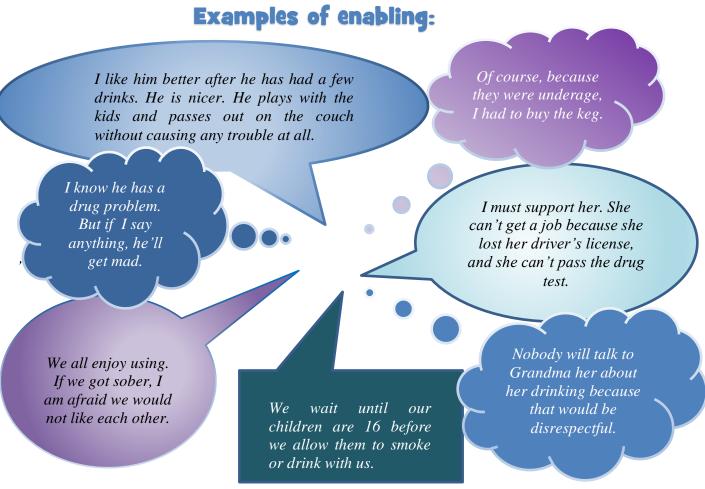
- 1. Speak up, reach out, get help. You are not alone.
- Search for free resources available in the Twelve-Step Recovery Programs such as: <u>Alcoholics</u> Anonymous and Al-Anon, Nar-Anon, ACOA.
- Consult with an addiction specialist whether the addiction struggle is your own or someone you love's. You may choose to learn your healthiest *response* to addiction.
- Inform family and friends of the addiction. Discuss how the entire support system can work together to address substance use concerns. Utilize the 12-step recovery options that apply and consult with health care providers to address potential dangers and medical needs.



- Check your library or internet for literature dealing with addiction and recovery. Become an expert on understanding enabling, codependency and stages of addiction and recovery. Understand the "family dynamics" of addiction and recovery including the term ACOA. (Adult Children Of Alcoholics.) 12-step recovery programs have chat rooms and meetings online.
- Do not excuse or overlook substance use disorders because of stress, depression, or other medical problems. Dual diagnosis means mood disorder AND substance use disorder. Depression, anxiety, and addiction all require treatment. Students with attention deficit disorder have a higher risk for substance use, as do trauma survivors suffering from PTSD. Diabetics have greater health risks with alcohol use, asthmatics increase health risk with smoking.
- Seek help for minors. Everyone with helpful information should be included in your support network. Access the school, physician, community youth programs, athletic coaches, religious or spiritual community, the legal system, area hospitals and addiction counselors.
- When legal protection is necessary, contact an attorney or legal aid regarding risks and rights. This is particularly important when you share marital, parental, business, financial, or other legal obligations with a substance abuser. Ask your legal advisor the following questions:
 - √ Could police arrest me if my relatives or friends' do drugs/alcohol in my vehicle or on my property?
 - √ Am I responsible for debts incurred from my partner's or dependents' substance use?
 - ✓ Could substance use jeopardize my career, education, future opportunities, credit rating, retirement, pension, or life savings?
 - √ Could the state remove minor children or dependents because of substance abuse?

2. Refuse to participate in D.E.N.I.A.L.—Don't Even Notice I Am Lying.

- **Do not hide this concern.** When yours or anyone's use causes problems, the "party" is over.
- Speak the truth whenever you or anyone else is too drunk, stoned, or hungover to honor a commitment. Example: Do not glamorize a "hangover." Reality check: hangovers are alcohol poisoning. Substance abuse is a serious medical condition.
- Never nag. Follow through with consequences, not lectures, blame, or shame. Be specific about naming the use as a medical illness, then focus on health, problem-solving, and treatment options. Love and concern rather than judgement and control.
- **3. Refuse to enable:** Enable = "Any action by another person or an institution that intentionally or unintentionally has the effect of facilitating the continuation of an individual's addictive process." University of Pennsylvania Health System.



• Establish household rules regarding mood altering substances. Maintain a "no tolerance rule" of underage drinking, smoking, illegal drug use or adult intoxication in your home or on your property. This rule may apply to your vehicles, and vacation property. Your rules should be stated in advance. Have this conversation with your neighbors, adult children, extended family, coworkers—whoever is arriving to visit or live with you.

- Let substance abusers experience the financial consequences of their addictive lifestyles. Do not fund substance abuse or addiction. Paying their bills allows them to spend more money on alcohol or drugs. If financial consequences of addiction raise concern for health or safety, seek professional guidance.
- Let substance abusers experience their own messes. Do not clean up their urine, vomit, or spilled fluids. Do not "help" by cleaning their apartment, house, car, or office. If the "mess" poses health or safety concerns, seek professional guidance.

4. No driving while intoxicated or impaired

• In Michigan, driving with a blood alcohol content (BAC) above .08 is illegal. Use one of the BAC websites to learn safe levels of consumption. These websites help approximate blood alcohol levels using weight, sex, the type of drink and the number of drinks consumed over a specific time period.



- Refuse to become a frequent taxi service for intoxicated friends and family. While designated drivers are wonderful for social drinking, notice if your offer to drive is inadvertently enabling binge drinking, public intoxication, alcoholism, or drug addiction.
- Insist that maintaining an alcohol and drug free lifestyle is a prerequisite to becoming a licensed driver. Do not allow a minor with a substance abuse history to obtain a driver's license, own a car or obtain insurance. Confiscate the license of a minor at the first indication of underage drinking or drug use.
- Contact authorities when a driver insists on driving under the influence, refuses to relinquish keys or becomes a danger to self or others.
- Refuse to allow children to ride as passengers with drivers who have open intoxicants, illegal substances in their possession or who are driving under the influence of moodaltering substances. Instruct minors to call a trusted adult if anyone attempts to transport them with open intoxicants or while under the influence.
- Do not allow teenagers to chauffeur intoxicated parents/family/friends. Intoxicated
 passengers create an unnecessary physical, legal, and emotional burden for underage,
 inexperienced drivers.

5. Provide honest feedback and firm guidelines about substance use:

- st "I miss you. I miss our relationship. When you are using or hungover, I can't relate to you."
- * "I can't control your choices, but I choose not to live with addiction in my life. I plan to take the time I need to think through my options."

- * "We would love to include you in our (wedding/holiday/birthday/dinner/celebration/party, etc....), but we want to avoid the problems that have popped up in the past when too much use ruined the day. You are welcome to join us if you plan to remain clean and sober."
- * "I am attending Alanon to learn how to cope with your addiction. I understand I cannot change or control your decision to use. I need to learn how I can remain healthy and safe regardless of your disease"
- * "I do not expose my minor children to smoking, drinking, or drug use."
- * "I will inform Children's Protective Services if you are intoxicated/stoned with the baby."
- * "I will go with you, but I will not watch you get drunk/stoned. If you choose to use, I will leave."
- * "Smoking marijuana before we had kids did not bother me, but now the kids are old enough to smell it and ask questions, I have to decide if my values have changed with parenthood."
- * "I love your friends and family, but I am bored when I am the only sober person in the room. I have decided to leave the holiday gathering early before trouble starts."
- * "I agree that our sex life could be better. I only enjoy sex with you when you are sober, showered and don't taste of beer and smoke.

Frequently Asked Questions

Question: "I'm afraid that if I talk to him about his drinking, he will get very mad. He might hurt himself or hurt us. Talking about it might push him over the edge!"

C.J., age 48

Answer: If he presents a danger to himself or others, you need professional help. Contact professionals immediately to secure resources and support. Choose not to participate in emotional blackmail (threats of self-harm or violence). <u>Alanon</u> or a <u>domestic violence</u> shelter may help you sort out your healthiest response to a loved one's addiction. Your fear of his anger and your fear of "pushing him over the edge" indicates that you are taking responsibility FOR his feelings and actions. Feeling responsible FOR him causes you to want to control *HIS* response. Instead, choose YOUR response. Get safe. Get help. Get healthy.

Question: "I struggle with anger and blame. How do I let go of anger when it really is their fault?" Shantaya, age 29

Answer. Maybe it is their fault. For example, let's say that you blame your parents for drinking away your childhood or you blame your spouse for your child's accident and both examples are true. Now what? You could not control what they did, but you can choose your response. Emotional health requires that you take responsibility for *working through* your thoughts and feelings. Blaming others creates an illusion of control or superiority. Blame may also represent the

bargaining stage of grief. You may be holding on to blame to avoid facing your feelings of loss, vulnerability and helplessness. Anger is a signal that you have deeper emotional work ahead. Seek professional counseling if meditating, journaling or 12-Step recovery meetings are not enough to help you work through your anger.

Question "If I "let go" of what they did to me, they're off the hook. Why should I give them the satisfaction of my "letting go" of the past as if their evil actions never occurred?

Jessie, age 40

Answer: You are not letting go of what they did, you are releasing the need to be a victim. Your anger does not keep anyone else on a hook, it impales you. "Letting go" allows you to release the power that others hold over you. Marianne Williamson has a term she refers to as "Positive Denial". She says:

"You do not deny what happened; you deny its power over you today."

You had no choice about "what they did." You do; however, have a choice about how to respond to what they did. You may choose to work through then release your pain. Letting go of loss, grief, fear, regret, guilt...anger is a way to set yourself free. Your suffering for one more moment does not serve the world.

You have the right to choose self-acceptance, inner peace and self-love. *Letting go* of the anger is the gift you give *yourself*. Ask yourself this: If they had violated your best friend, what would you say to help your friend find inner peace now?

"Refusing to forgive, is like drinking rat poison, then waiting for the rat to die."

Ann Lamott

Question "I keep getting sucked back into their numerous problems, drama, and chaos. I'm drained and exhausted. I don't know how to help, and I don't know how to let go.

What should I do?" Hanna, age 35

⇒Getting sucked into problems, drama and chaos is a form of <u>codependence</u>. When you follow someone down into the drama pit of problems and chaos, you both get exhausted. You will know that you failed to set boundaries when *you* suffer with *their* problems. The good news is that when you are tired enough, you will be ready to change. Discomfort is a motivator for change. You wrote that you don't know how to help and you don't know how to let go. You may not know what to do, but I bet you know what to stop doing. Make a list of those things. Start there.

⇒ The key to healing your codependence is to admit that you are powerless over other peoples' problems. Understand that their progress, recovery, success or future is not in your hands. Only YOUR success is in your hands. When you release the need to focus on other's problems, you have energy left to focus on your own personal growth and well-being (your own personal recovery). Your healthy actions will serve as a ladder up and out of that pit of chaos. Once you are out, you become a healthy role model. Role modeling is your most powerful teaching tool. For more help with "letting go", check out the poem on the next page.



Letting go with Love

"Letting go" refers to the ability to <u>focus only on what is your business</u>, <u>your right and within your control</u>. *Letting go* means that you understand that other <u>people's thoughts</u>, <u>actions and emotions belong to them and are their responsibility</u>, not yours. You have no control over what other people think, how they feel, or what they do. Use the following poem to affirm the "thoughts of letting go.

To "Let Go" Takes Love

To "let go" does not mean to stop caring. It means I cannot do it for someone else.

To "let go" is not to cut myself off. It is the realization that I cannot control another.

To "let go" is to admit powerlessness, which means the outcome is not in my hands.

To "let go" is not to try to change or blame another. It is to make the most of myself.

To "let go" is not to care for, but to care about.

To "let go" is not to fix, but to be supportive.

To "let go" is not to judge, but to allow another to be a human being.

To "let go" is not to be in the middle arranging all the outcomes, but to allow others to affect their own destinies.

To "let go" is not to be protective. It is to permit another to face reality.

To "let go" is not to deny, but to accept.

To "let go" is not to nag, scold or argue, but instead to discover my own shortcomings and to correct them.

To "let go" is not to adjust everything to my desires, but to take each day as it comes and to cherish myself in it.

To "let go" is not to criticize and regulate anybody, but to try to become what I dream I can be.

To "let go" is not to regret the past, but to grow and live to the future.

To "let go" is to fear less and to love more.

Author Unknown

"Detaching with love," "Tough Love" and "Letting Go with Love" are terms commonly used in the Alanon community and parenting literature. Need more substance use resources and ideas? Google it! You have so many options now that you have decided to learn and grow!!!!