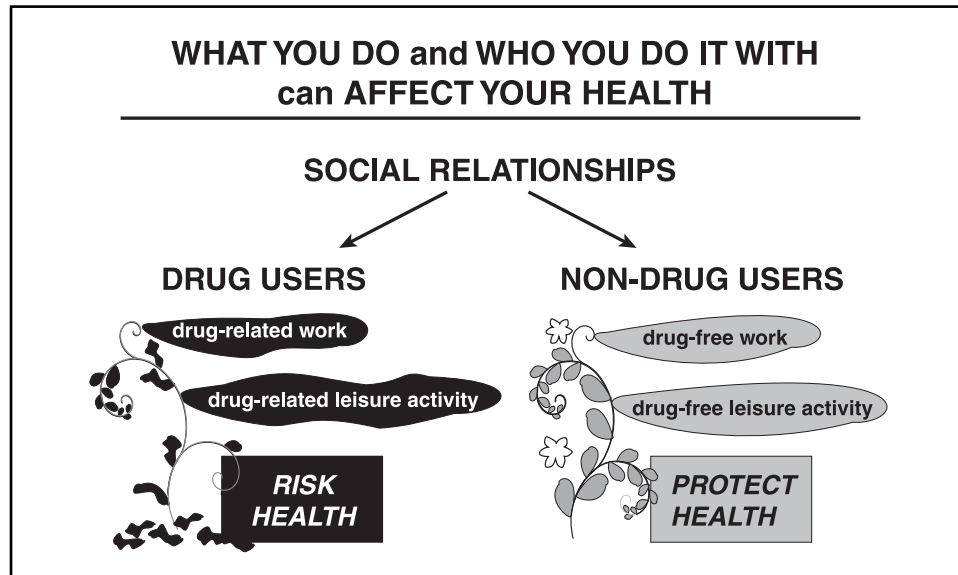


HEALTHY SOCIAL RELATIONSHIPS AND ACTIVITIES

Skills to Be Learned

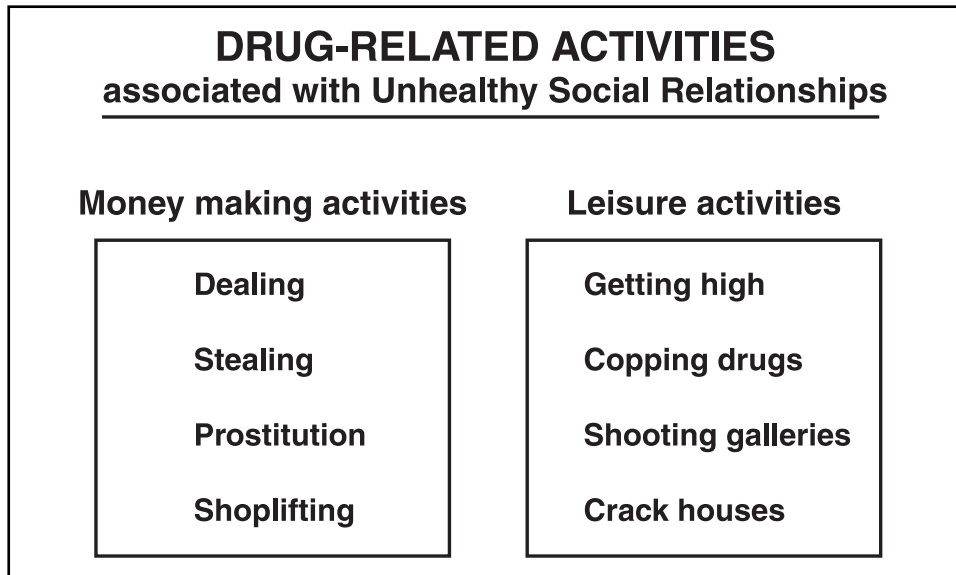
- Identifying and Maintaining Healthy Social Relationships
- Communicating HIV Status
- Identifying and Engaging in Healthy Social Activities

In previous chapters we have talked about how your thoughts, feelings, and behavior can influence your health. In this chapter we are going to talk about how your social relationships can also affect your health. As you know, addiction and the lifestyle it entails inevitably harms your social relationships with non-drug using family and friends. Your non-drug-using family and friends may have difficulty understanding your addiction. They may also have difficulty accepting that you are HIV-positive, or you may have trouble telling them. These difficulties can create further distance between you and your non-drug using friends and family members, and may draw you even closer to other drug-users. However, when your relationships with active drug users outnumber your relationships with non-drug-users, your recovery and your health are in great peril. The reason for this is that your social relationships reflect shared values, attitudes, and activities. Who you associate with influences what you do and what you value in your life.



When your social relationships are predominantly with active drug-users, you are more likely to be immersed in the addictive lifestyle and to be engaging in various drug-related behaviors that place your health at great risk. On the other hand, social relationships with non-drug users lead to non-drug related values, attitudes, and behaviors that are more likely to help you protect your health and the health of others. Indeed, research has shown that people facing a personal health crisis fare much better if they have supportive relationships. Therefore, an important part of your decision to pursue a healthy lifestyle is to develop healthy social relationships that support your recovery and to participate in health-promoting leisure and work-related activities. We will be talking about how to do this in this chapter. First though it is important to identify those social relationships that are unhealthy and what unhealthy activities are involved in these relationships.

Let's begin by considering the daily life of our hypothetical friend Pat who is HIV-positive, addicted to heroin, and has recently been on a cocaine run. It is a pretty safe assumption that Pat is not spending much time with drug-free friends and family, and is not currently pursuing a childhood hobby of stamp collecting. Instead, Pat is likely to be involved in quite a different lifestyle.



This illustration suggests some of the activities that Pat might be involved in currently. One column lists the ways Pat might make money, such as dealing drugs, stealing, prostitution, shoplifting. In the second column are some leisure activities Pat might be engaged in with drug-related friends and acquaintances such as getting “high,” copping drugs, going to shooting galleries and crack houses.

Questions to Consider

What other money-making activities might Pat get involved in while using drugs with drug using “friends” and acquaintances?

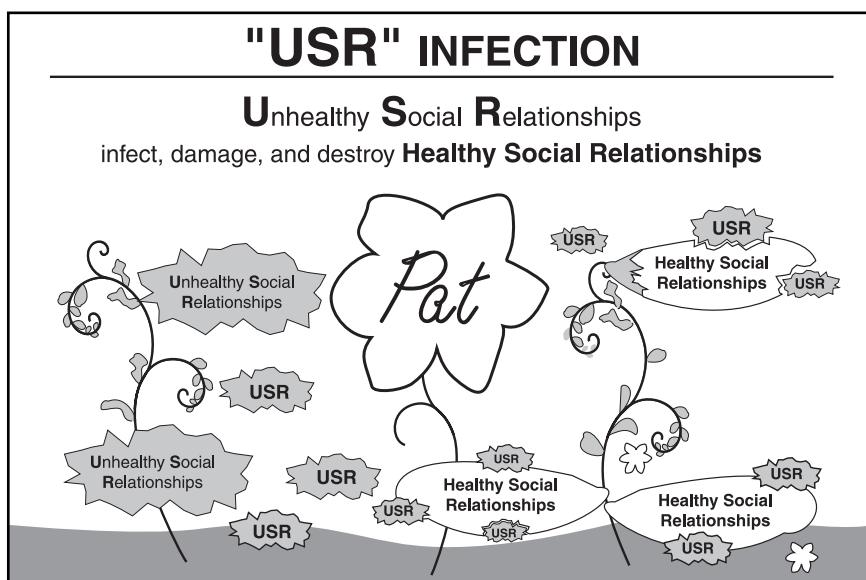
What other leisure activities is Pat likely to be involved in with other drug-users?

Do you think these activities will have any effect on Pat's health?

As we discuss in detail in other chapters, the effects on Pat's health are likely to be devastating. Clearly, drug use, drug-related social relationships, and drug-related activities may all contribute to a deterioration in Pat's health.

Do you think these drug-related social relationships and drug-related activities will have any effect on Pat's healthy (drug-free) social relationships?

Think of unhealthy social relationships as being similar to becoming infected with a potentially deadly virus. Remember how HIV infects the cells of your body, multiplies rapidly, and eventually overwhelms those cells of your immune system that are there to protect you and your health. You can think of unhealthy social relationships the same way. Unhealthy relationships infect, damage, and destroy your healthy social relationships, leaving you vulnerable and without protection.



As this illustration shows, when you surround yourself with people who use drugs, you can quickly become immersed in the “addict” lifestyle. The addict lifestyle changes your values, attitudes, and your social activities, and, without a doubt, it will have a negative effect on your health. You therefore need to remain extremely vigilant in order to protect yourself against “infection with **USR**—Unhealthy Social Relationships.” You also need to protect and nurture your healthy social relationships because they will support you in your recovery and will help you to maintain your health.

Practice Exercise: Are You Infected with USR's?

Instructions:

At the end of this chapter you will find a Worksheet entitled “Are you infected with USRs?” The first page is the same as the last illustration showing the effect of Pat's unhealthy relationships. The reverse side of the Worksheet provides instructions for the exercise. Write your own name (instead of Pat) in the center of the page and then consider which of your

relationships are unhealthy and could threaten your healthy relationships (identify both your healthy and unhealthy relationships using initials next to the symbol). Then answer “yes” or “no” to the three questions asked on the reverse side of the Worksheet. This exercise is designed to help you to consider which of your relationships are health-promoting and which are potentially damaging your health. It is important to be honest with yourself. At the conclusion of the exercise you may need to make a life-changing decision—between keeping an unhealthy relationship or protecting your health.

Remember, of course, that just because a friend or family member is drug-free this is not a guarantee that the relationship is healthy and health-promoting. The emotional distress caused by dysfunctional relationships with non-drug using family and friends can trigger drug use and drug-related activities just as surely as being with active drug users. It is therefore important to be selective, to rid yourself of the relationships that are unhealthy, and to nurture those relationships that are potentially healing.

Developing new healthy relationships and healing old relationships that have been damaged by addiction takes skill. We’ll discuss some of these skills now.

Maintaining healthy supportive relationships can be a challenge especially for people struggling with addiction and HIV. Many people who have been drug abusers or who are HIV-positive find it hard to ask for help from old friends and family members because they may have disappointed people in their lives who have provided a source of support in the past. As the addictive lifestyle takes over, values, attitudes, and activities previously shared with non-drug using family and friends are rejected and anger, guilt, shame, and loss of trust become the defining characteristics of the relationship. Healing these damaged relationships is not easy, it requires skill, practice,

**HEALING DAMAGED RELATIONSHIPS
DO'S and DON'TS**

DO

- state your desire to heal the relationship
- demonstrate your commitment to healing the relationship
- remain open to suggestions for how to heal relationship
- be patient

DON'T

- expect support immediately
- expect to be trusted
- get defensive
- argue over history

and patience.

As shown in the illustration, when trying to reconnect with important people in your life who have been harmed by your addictive behavior, there are several things to remember. Let's go over them. We'll start with the **DON'Ts**.

- Don't expect to get immediate support from the other person.

State your commitment to healing the relationship, but let the other person set the pace. Be patient, but realize that the outcome may not be the one you desire.

- Don't expect the person to trust you.

Trust must be earned. It is your responsibility to work on being trustworthy. Remember it will take longer for the person to believe that you are trustworthy than for you to become trustworthy. Often we expect others to trust us before we even trust ourselves. Being able to tolerate the other person's doubts about you is extremely important in your recovery. Also remember that trust is a two-way street—work on your own level of trust in the other person.

- Don't get defensive or put the other person on the defensive.

Accept criticism gracefully and don't criticize or accuse the other person. Own your feelings rather than make accusations. For example, if you have experienced pain in the relationship, don't accuse the other person of doing something to hurt you. Instead, use "I" statements, be specific about what you found hurtful, and acknowledge why the other person may have acted as he or she did. Example: Pat's mother stopped inviting Pat to important family gatherings because Pat was always "high" and caused a scene. Instead of saying "*You* hurt me when you reject me," Pat might say something like: "I feel rejected when I don't get invitations to family gatherings, but I can understand why you might not want me there."

- Don't argue over history.

Challenging the accuracy of the other person's version of past events is a losing proposition and can divert you from what the person is actually trying to communicate. Listen instead for what the person's recollections tell you about the hurt that you caused and that needs to be acknowledged.

Now let's go over the list of **DOs**.

- **Do**—State your desire to heal the relationship.
- **Do**—Demonstrate that you are committed to healing the relationship.
- **Do**—Remain open to suggestions as to how to facilitate the healing process.
- **Do**—Allow the other person sufficient time to join you in the healing process; be patient.

In summary, remember that actions speak louder than words. Don't let the other person's response to you deter you from your goal and don't expect the other person to exhibit good communication skills. On the contrary, be prepared for criticism and even rejection. Remember that it was your decision to attempt to heal the relationship, not the other person's. Just keep your eye on your goal and use all your skills to achieve it, so that no matter what the outcome, you will know you did everything you could to heal the relationship. At the end of this chapter you will find a Family Information Sheet. Write down the names, ages, and birth dates of your family members. Remembering special occasions such as birthdays and holidays can be a meaningful way to reconnect with estranged family members.

Getting Support

Once you have established healthy relationships you need to consider how to get the support you need.

REQUESTING THE SUPPORT YOU NEED

WHO?

- develop a support team, include an NA sponsor
- don't expect one person to provide all the support you need
- identify who can provide the specific support you need

WHAT?

- identify what you need and then ask for it clearly
- be specific
- don't expect others to read your mind

WHERE AND WHEN?

- choose an appropriate time and place to ask for support
- check that the timing is convenient for the other person

As shown in this illustration, just **Remember...Who, What, Where, and When.**

Who: Develop a good support team. Don't expect one person to provide all your social support needs. Some people will be able to provide you with moral support, others can support your recovery from addiction, others can provide various kinds of support concerning HIV, others can provide information, and so forth. If you expect any one person to be your sole source of support, you are unlikely to get all of your needs met and you may place a heavy burden on that relationship. Become familiar with service organizations in your community to help you with issues such as entitlements, housing, food, utilities, transportation, health care, HIV/AIDS support groups, and add these people to your support team. Also get an NA/AA sponsor. Your sponsor can provide basic information about NA and the 12 step philosophy, and can steer you toward meetings that may be helpful. Make sure your sponsor has been abstinent for at least a year and is actively working on maintaining recovery. It's easy to get a sponsor—just go to a meeting, wait for announcements, and state clearly that you need a sponsor. That brings us to the next point...

What: Identify what you need and then ask for it clearly, and be specific. If you don't take time to identify what you really need, you may ask for one thing but actually need something else. For example, we often ask friends for advice when in fact we just want their moral support, not their advice, and may even resent them for advising us. Do not assume that the other person knows what you need. We've all heard people say "he or she should have known what I wanted, I don't think I should have to ask." Not only is this approach unrealistic, it can cause serious damage in close relationships.

Where and When: Timing and location are also important to consider. Make sure you choose an appropriate time and place to ask for the support you need. If you ask for help when the other person cannot give you his/her full attention you are unlikely to get the response you desire. So, always check to ensure that the time and place are convenient. If not, ask the person when it would be convenient to talk.

At the end of this chapter you will find a worksheet entitled "My Social Support." Write the names of drug-free individuals in your support network and identify what kind of support each can provide. Don't forget, no one person can provide all kinds of support. Let's consider now how to implement the skills we have just covered.

Imagine the following scenario: Pat is HIV-positive and an IV drug user in a recovery program. Pat's sister knows Pat has a drug problem; they used to be very close until Pat's addictive behavior drove her away. She

doesn't know that Pat is now infected with HIV. Pat wants to heal the relationship, disclose HIV status, and request moral support. Below are two different approaches that Pat might have used:

Approach Number One

- Pat:** Hey, Sis, how you doing; haven't seen you in a while.
- Sister:** Right, not since you and your friend stole my TV and took my rent money out of my purse.
- Pat:** I never took your rent money. How come you have to bring up all that stuff now, can't you see I'm trying to patch things up between us.
- Sister:** Yeah, that'll be the day. Anyway, I'm in a hurry. I gotta go.
- Pat:** Come on, Sis. Things are different now, honest. I'm in treatment and haven't used for over a week.
- Sister:** Yeah, yeah, I've heard that one before too.
- Pat:** Figures you wouldn't believe me. Guess I might just as well go out and use, it's too late for me now anyway.
- Sister:** Whatever rows your boat.
- Pat (angrily):** You just don't get it, do you. I came here to tell you that I've got the virus and that I'm really trying to turn my life around but I can see none of that matters to you. See you around, Sis.

What's wrong with Approach Number One?

Arguing history: Pat immediately argued when sister recalled a stolen TV and money, and didn't acknowledge that she was actually communicating her hurt and anger.

Timing: Pat didn't acknowledge that this was not a convenient time for his sister to talk.

Impatient for trust: Pat couldn't tolerate his sister's doubt that he is now drug-free.

Indirect reference to health problem: Pat did not directly disclose his HIV status, until he became angry with her because she did not understand.

Puts sister on defensive: Pat places blame for a potential relapse on his sister's lack of understanding.

Pat was deterred by sister's response: Pat provides no time or opportunity for his sister to respond to and digest what he has told her. Pat also was not clear that only moral support will be requested of her; thus, she is likely to be suspicious of Pat's motives.

Let's see if Pat does any better using Approach Number Two.

Approach Number Two

Pat: Hey, Sis, how you doing? Haven't seen you in a while.

Sister: Right, not since you and your friend stole my TV and took my rent money out of my purse.

Pat: Yeah, I know I've done a lot of bad things to you in the past, but I really want to patch things up. Do you have time to talk?

Sister: No, I'm in a hurry.

Pat: Okay, I'll wait until you have more time. When would be good for you?

Sister: Well, I guess I could give you a couple of minutes now. What's up?

Pat: Well, I wanted to tell you that I'm in treatment and haven't used for over a week.

Sister: Yeah, yeah, I've heard that one before.

Pat: I can understand why you wouldn't believe me. But it really is different now. I found out I've got the virus—HIV—and so I'm really trying to turn my life around before it is too late for me.

Sister: You got HIV? I don't know what to say.

Pat: You don't have to say anything. I just wanted to tell you that our relationship still means a lot to me and that I'm going to

work hard to regain your trust and stay healthy. I'm not here to ask for any favors. I just want you in my life again. Can I give you a call in a couple of days? Perhaps we could talk about what I can do to help get our relationship back on track.

Pat demonstrated many of the skills described in this chapter. Is there anything else Pat could have done at this point?

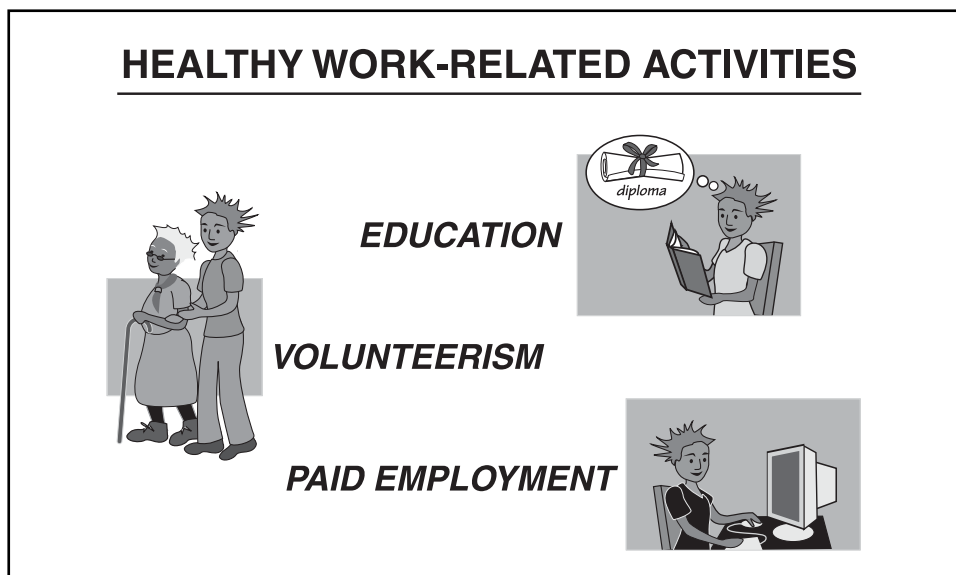
Healthy Activities

Remember, actions speak louder than words. One way that Pat can demonstrate a commitment to healing the relationship is to end any drug-related social relationships and to begin actively engaging in drug-free activities with individuals who are drug-free. Earlier we talked about unhealthy drug-related activities—those that are money making and those that are recreational, all of which are damaging to your health. Let's focus now on healthy activities—those that are potentially health-promoting. First, let's consider work as a healthy activity.

Work

Work can be health-promoting on many levels. Work is a means by which individuals can become contributing, productive members of society. Work can also help individuals facing a chronic illness, such as HIV, to stay active and can provide a source of self-esteem.

For a variety of reasons, a large percentage of HIV-positive drug users are not gainfully employed, and may in fact be unable to engage in work for pay. However, there are healthy alternatives to paid employment.



As shown in the illustration, education and volunteerism are also healthy work-related activities in addition to paid employment.

Let's begin with education:

Continuing your education is a healthy drug-free work-related activity. Some people may want to earn a high school equivalency diploma, others may wish to go on to college, others may simply wish to take a course or two on topics that particularly interest them, still others may want to sample the wide variety of topics available for study in order to identify their own interests and talents.

What opportunities are there for adult education in your community?

Volunteering is also a healthy, drug-free, work-related activity that can contribute substantially to your own physical and emotional well-being as well as to the well-being of others. It permits you to contribute to society while also providing social support to others. You've heard the expression "what goes around, comes around." Well, if you expect to receive social support in your own life, you need to provide support to others. When you provide support to another person you can also learn from that person how, and how not, to seek and acknowledge help appropriately. For example, carefully observe how the person responds to your support. What did the person do that contributed to your feeling of well being and a desire to maintain the relationship. Also observe what, if anything, the other person did that made the relationship aversive and contributed to you wishing to terminate the relationship.

What opportunities are there for volunteer work in your community?

Paid employment. You may also find that once you have been drug-free for a while, you are able to seek gainful employment. Having a job that you enjoy and that can help support your new lifestyle can also contribute to your health and well being. However, you need to be very careful not to do this too soon. People in recovery from addiction may return too quickly to old jobs that may have contributed to their use of drugs. Unless you have gained the necessary coping skills, returning to an old job may contribute to relapse and jeopardize your recovery. In addition, making money can be a trigger for drug use. If this is true for you, you have to have a plan in place **before you return to work** for what you will do with your paycheck. So work on your recovery first; then, once you are stable and have acquired the necessary skills, consider your paid employment options carefully. Perhaps you will decide to change jobs. Being in treatment is an opportunity for you

to make major changes in your lifestyle and, if appropriate, this may include employment. Don't think it is ever too late to begin preparing for a new occupation. Long-term survivors of HIV describe how they create an image of a possible future and then work hard to make that image a reality. This is a valuable approach for you to use when creating and sustaining your new healthy lifestyle.

What are the opportunities for paid employment in your community?

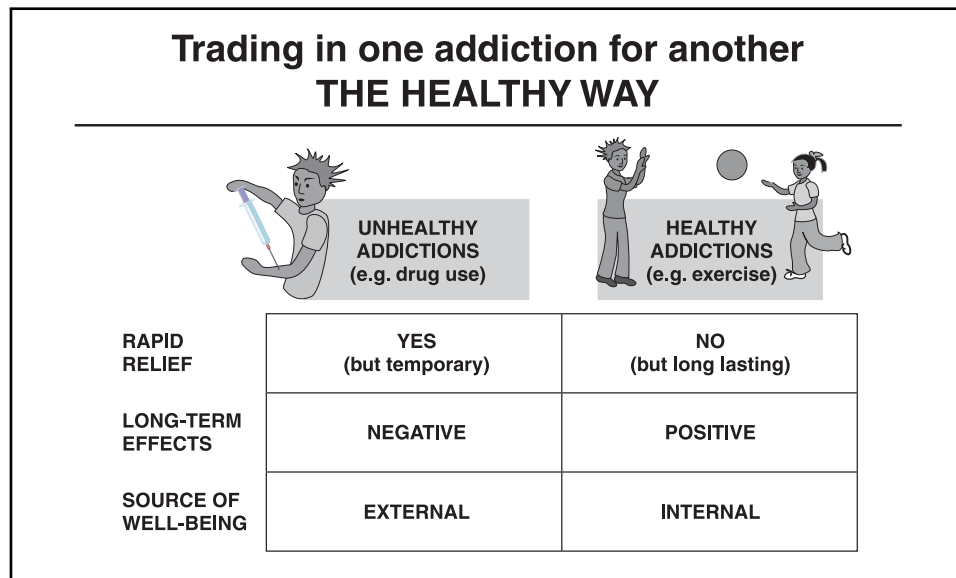
At the end of this chapter you will find a worksheet entitled "Education/Employment History." Complete the worksheet so that you will have this information readily available when you seek further education or paid or voluntary employment.

Review

Let's review what we've covered so far. We talked about how our social relationships reflect shared values, attitudes, and activities, and that developing healthy, drug-free, social support is extremely important in your recovery. Although it is not easy to heal relationships that have been damaged by your addiction, it can be done with skill and patience. Important points to remember are: Don't expect to get immediate support from the person harmed by your addiction in the past; Don't expect others to trust you immediately—focus instead on becoming trustworthy; Don't get defensive or put others on the defensive; and Don't argue over history—listen for the message not just to the words. Do express and demonstrate your commitment to healing the relationship and remain open to suggestions from others as to how to facilitate the healing process. When you need support from others, remember Who, What, When and Where. Clearly identify what you need, develop a support team, don't expect one person to provide every kind of support. Select an appropriate person on your team to help you, choose an appropriate time and place to ask for help, and then ask for what you need being direct and specific. We also talked about how the activities you engage in with other people can affect your health. Social relationships with drug-users are likely to lead to unhealthy activities, whereas social relationships with non-drug-users are likely to lead to healthy, drug-free, activities. We also discussed healthy work-related activities, and said that even if you are unable to work for pay, you should consider continuing your education or volunteerism, each of which may help you to identify drug-free talents and interests, contribute to society, and provide support to others. Let's turn our attention now to healthy leisure activities.




Healthy Leisure Activities

As you know, drug addiction is all-consuming. Getting drugs becomes your full-time job, taking drugs becomes your primary form of recreation, and the drug itself and the people who use drugs become your most important relationships. When addicted individuals give up their drug of choice, they may find that instead of overcoming addiction, they just replace one addiction with another. We've all met people who try to stop using heroin, and in the process get hooked on "benzos," alcohol, or cocaine. They trade in their old addiction for an addiction to something else that also damages their health. To prevent this from happening to you, you will need to replace your addiction to drugs with an "addiction" to healthy leisure activities. It may seem highly improbable to you, at this point in your recovery, that any leisure activity could ever replace drug use or the powerful, all-consuming, role it has played in your life. However, if you are serious about your recovery, you will understand that if you don't begin to pursue healthy activities, in no time at all unhealthy activities will begin to fill the void in your life left by your addictive lifestyle, and may lead you back to drug use or risk your health in other ways. So, let's talk about how to trade in your unhealthy addiction to drugs for a healthy addiction.



As shown in the illustration, addiction to drugs begins, and is sustained, because it offers “a quick fix for whatever ails you.” It promises immediate relief. Healthy addictions are different. They usually don't provide a quick fix—at least not initially. In fact, they may not feel good at all when you begin. However, unlike addiction to drugs, healthy addictions have very positive long-term consequences. An example of a healthy addiction is exer-

cise. Initially your muscles may feel sore, but the long-term health benefits are clear, and if you persevere, eventually you will also experience a feeling of well-being during and after exercising. You have probably heard of the “runner’s high.” This is the result of a release of chemicals in your brain (called endogenous opioids or endorphins). These chemicals are your internal source of heroin-like substances that are free, always available to you, and won’t harm your health. So healthy addictions actually provide you with access to an inexhaustible supply of “feel-good” chemicals. Think about it. Instead of having to rely on external sources of chemicals to make you feel good that ultimately have an extremely negative effect on your health, you can learn how to feel good by developing your own ability to create a feeling of well-being that ultimately has substantial health benefits. It’s your choice. Remember you don’t have to become a marathon runner to get these benefits. There are many activities that you can do no matter what your current level of fitness that will have these positive effects.

EXAMPLES OF HEALTHY, DRUG-FREE, LEISURE ACTIVITIES		
ACTIVITY LEVEL		
HIGH	MEDIUM	LOW
 <ul style="list-style-type: none"> jogging swimming hiking sports dancing 	 <ul style="list-style-type: none"> yoga tai chi walking gardening weight lifting 	 <ul style="list-style-type: none"> music art crafts board games reading

The illustration shows a number of activities that can become “healthy addictions.” Notice that they are grouped by level of physical activity required, so you don’t have to be physically fit to begin trading in your addiction to drugs for a healthy addiction. It is also important to try something new—something you don’t usually do because even drug-free activities that you already engage in may be associated with your old lifestyle and therefore with drug use. So, be creative. Experiment with healthy activities until you find the one that you can pursue passionately and that can become an important part of your new lifestyle.

What other activities can you engage in that are affordable, non-drug-related, and health-promoting?

Be careful! (don't forget some leisure activities may be associated with gambling or alcohol use which can lead to unhealthy addictions).

Practice Exercise: Planning a Fun-Day

Instructions:

1. At the end of this chapter you will find a “Fun-Day Worksheet.”
2. Your task is to plan a full day of drug-free activities (a minimum of 5 hours) that you can engage in with family or friends this weekend.
3. However, in the exercise, as in life, you have to keep to a strict budget—Your budget for the exercise is \$30. The entire day's activities cannot cost more than \$30 for everyone.
4. To get some ideas, you can look in the local newspaper for free or inexpensive activities available this weekend in the community (e.g., concerts, picnics, museums, sporting event, movie).
5. Then on your Worksheet, select the day (Saturday or Sunday), list each activity, and block out an appropriate amount of time for each activity, and add up the total hours at the bottom of the column. Don't forget to plan sufficient activities to last at least 5 hours.
6. In the next column, you will estimate the cost of each activity. Add up the total costs at the bottom of the column (Remember total costs should not exceed \$30).
7. Then, in the last column, list any tasks that need to be completed in preparation for the weekend's activities (e.g., reserving tickets, making phone calls, preparing food, making reservations, arranging transportation, and so forth).
8. Put your plan into practice this weekend.

Remember, it takes effort to change your lifestyle. Make a commitment to yourself that you will make a concerted effort to engage in a variety of drug-free leisure activities this weekend. You should also have a back-up plan in the event that one or more activities have to be cancelled. The void left by your addiction is “hungry” and will fill very quickly with unhealthy activities unless you take control. Don't forget, you can take control by filling this void with social relationships and activities that support your recovery and protect your health.

Quiz

- 1. Social relationships reflect shared values, attitudes, and activities.**
 - a. True
 - b. False

- 2. To heal a relationship that was harmed by your addiction, you should:**
 - a. expect to be trusted immediately
 - b. deny that your addiction caused any harm to others
 - c. put the other person on the defensive
 - d. demonstrate your commitment to healing the relationship

- 3. When you need help from someone on your social support team:**
 - a. always ask the same person
 - b. ask for help indirectly (hint at what you need)
 - c. ask for help when the person is busy
 - d. none of the above

- 4. Health-promoting work-related activity includes:**
 - a. continued education
 - b. volunteerism
 - c. paid employment
 - d. all of the above

- 5. Healthy addictions are different from drug addiction in which of the following ways:**
 - a. They always feel good immediately.
 - b. They have long-term positive consequences.
 - c. They don't provide any "feel-good" chemicals.
 - d. All of the above

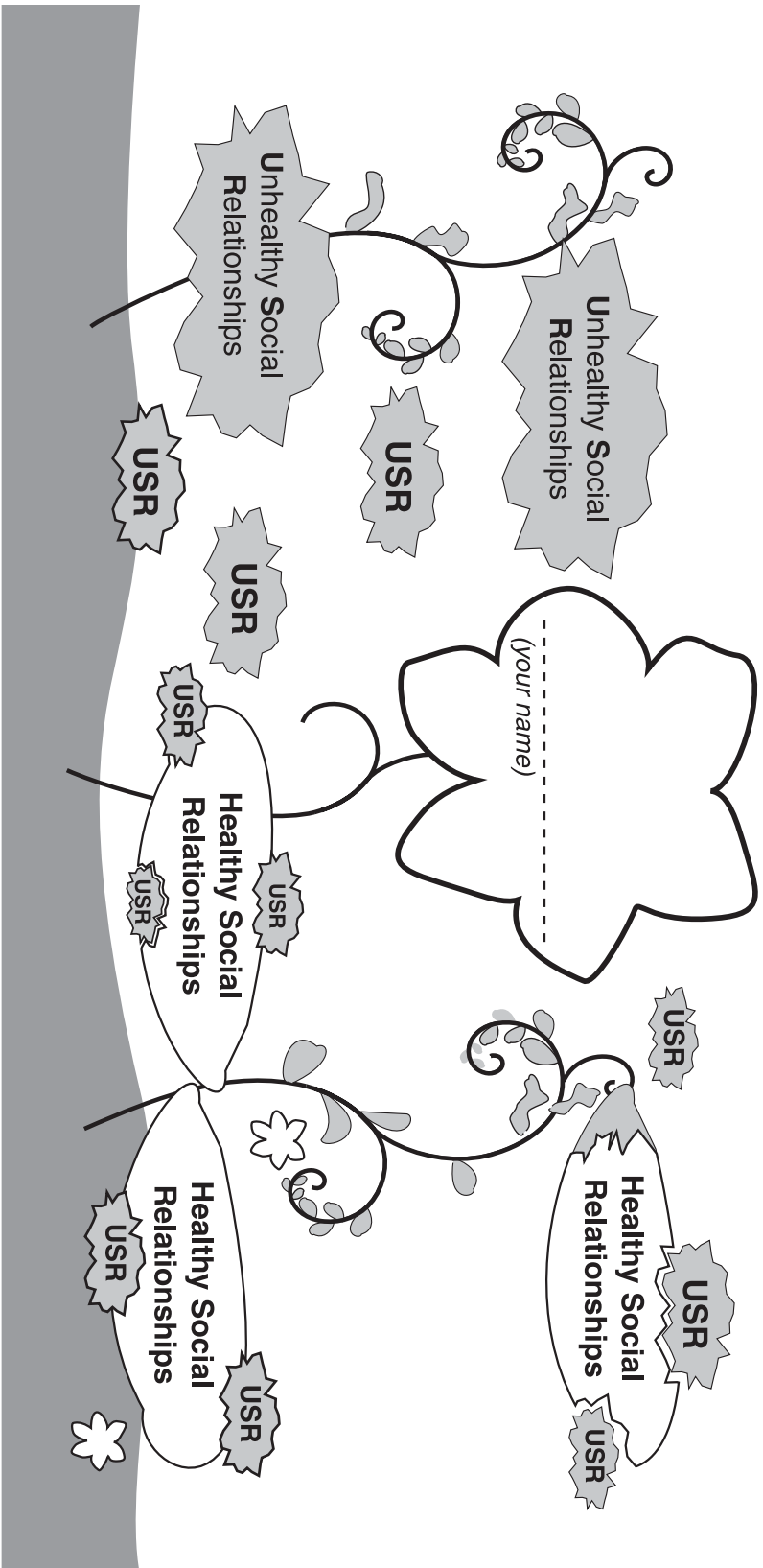
Practice Exercise: Stress Management/Relaxation

We recommend that you conclude each chapter by doing a 10-minute relaxation exercise. Use this time to practice mediation or deep breathing, or to play an audiotaped relaxation or visualization technique. Dim the lights, get comfortable in you chair, uncross your legs, and sit quietly with your eyes closed. Remember that learning to relax is a skill that takes practice, so if you feel restless at first, just remind yourself that this is a 10 minute gift of quiet time that you give to yourself. With practice, you can use meditation and relaxation in many areas of your life. For example, you can use this time to establish a “healthy addiction” to daily meditation, which can provide you with a source of serenity and well-being, while also protecting your health.

ARE YOU INFECTED WITH "USR'S"?

Unhealthy **S**ocial **R**elationships

infect, damage, and destroy **Healthy Social Relationships**



Are You Infected with USR's?



1. On the reverse side of this worksheet, write your first name in the center.
2. Identify your unhealthy and healthy relationships (using the person's initials).

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

3. Then answer the following questions:
 - a) Does the number of drug-users you spend time with outnumber the number of non-drug users you spend time with?
Yes No
 - b) Do the activities you engage in with your drug-using “friends” and acquaintances help you to protect your health?
Yes No
 - c) Does the person you spend **the most** time with encourage you and help you to protect your health?
Yes No

If you answered “yes”, protect and nurture this relationship. If you answered “no”, it may be time to make an important decision—to choose between this relationship or your recovery.

“Fun-day” Worksheet



Select day for activities: Saturday Sunday

Time	Specify the Activity	Estimate Cost	Preparations Required
10:00 AM			
10:30			
11:00			
11:30			
12:00			
12:30			
1:00			
1:30			
2:00			
2:30			
3:00			
3:30			
4:00			
4:30			
5:00			
5:30			
6:00			
6:30			
7:00			
7:30			
8:00			
Total hours _____ (minimum 5 hrs)		Total cost \$ _____ (maximum \$30)	

My Social Support Network



Name: _____ **Phone:** _____

Type of support: _____

Name: _____ **Phone:** _____

Type of support: _____

Name: _____ **Phone:** _____

Type of support: _____

Name: _____ **Phone:** _____

Type of support: _____

Name: _____ **Phone:** _____

Type of support: _____

Name: _____ **Phone:** _____

Type of support: _____

Name: _____ **Phone:** _____

Type of support: _____

Educational/Employment History



School Name	Dates Attended	Diploma/Degree
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Most recent place of employment.

Company: _____

Name and phone no. of superior: _____

Dates employed: _____

Job responsibilities: _____

Special skills: _____

Hobbies: _____

Family Information Sheet



Children's Names	Age	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Grandchildren's Names	Age	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Brothers' Names	Age	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Sisters' Names	Age	Date of Birth
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

HHRP⁺

wishes you well
in your journey
of recovery.

Quiz Answers

Chapter 1: Reaching Your Goals

1. Which of the following is an example of a memory aid? The answer is **(d)** all of the above (a relaxation exercise, a grocery list, and your client workbook are all examples of memory aids);
2. When you schedule an activity that will help you accomplish an important goal, you should do what? The answer is: **(d)** all of the above (you should write it on your “to do” list, set a realistic deadline, and block out time on your calendar.
3. Establishing priorities means listing your goals in order of importance. The answer is **(a)** true
4. When you have several large goals to achieve, what should you do? The answer is **(d)** you should break down each large goal into small manageable tasks.
5. If you can't get started on an activity, what should you do: The answer is **(c)** relax and visualize yourself engaging in the activity.

Chapter 2: Reducing the Harm of Injection Drug Use

1. What is the best way to protect yourself from the harm of injection drug use? The answer is **(a)** abstinence.
2. How can you reduce the harm of injection drug use? The answer is **(d)** all of the above—always use new needles, if no new needle, clean the needle with bleach, and never share needles or works.
3. Can someone who is already HIV-positive be re-infected with a type of HIV that does not respond well to the newer medical treatments? The answer is **(a)** true. Don't assume you are safe if you only share needles or works with someone else who is HIV-positive. You could be sharing with someone who has developed a mutation of the virus that is resistant to a certain medication, and you can also then become infected with this mutation and show the same drug resistance. So sharing works can place your own life at risk, as well as the lives of others, and can greatly reduce your treatment options.
4. How long should you leave the bleach in the syringe? The answer is **(c)** 30 seconds. Remember—less than 30, it's still dirty.
5. This question asks about craving. The answer is **(d)** all of the above. Craving in response to seeing a needle, syringe, or other "works" is an automatic conditioned response; it is also a signal to engage in a non-

drug-using activity, and it will decrease over time as long as you stop injecting drugs.

Chapter 3: Harm Reduction with Latex

1. What body fluids should you avoid sharing during sexual activity? The answer is **(d)** all of the above—semen, vaginal secretions, and blood.
2. Is this statement true or false—"An HIV-positive drug user should use a condom even if his or her partner is also HIV-positive"? The answer is **(a)** true. – even if your partner is also HIV-positive you should use condoms to protect both of you against additional infections.
3. What are some of the reasons why a person who is HIV-positive should care about practicing safer sex? The answer is **(d)** all of the above—a compromised immune system makes you vulnerable to infections, you should be altruistic—care about the welfare of others, and you'll want to avoid risk of re-infection with a strain of HIV that is resistant to treatment.
4. What are the three little words to remember before having sex? The answer is **(c)** latex, latex, latex.
5. Which of those listed was an unsafe sexual practice? The answer is **(d)** all of the above—oil-based lubricants damage latex condoms, lambskin condoms don't protect against HIV, and opening a condom package with your teeth can tear a latex condom.

Chapter 4: Negotiating Harm Reduction with Partners

1. What does successful negotiation depend on? The answer is **(d)** all of the above—mutual trust, intention, and persuasive ability (TIP).
2. What should you do if your partner refuses to engage in safer sex? The answer is **(a)** refuse to have unsafe sex.
3. How are you more likely to persuade your partner to use latex? The answer is **(d)** all of the above—show respect for your partner's concerns, know how to eroticize latex, and have accurate information about risk and risk reduction.
4. When should safer sex negotiations begin? The answer is **(c)** when you are sober.
5. Is condom negotiation unnecessary if both you and your partner are HIV-positive? The answer is **(b)** false. Even if both of you are HIV-positive there are still many reasons to use latex protection.

Chapter 5: Preventing Relapse to Risky Behavior

1. What is recovery? The answer is **(a)** a journey of many steps or decisions.
2. How do you prepare for a journey of recovery? The answer is **(d)** all of the above; you need to acquire the necessary tools and skills, learn how to interpret signs on the road that will warn you of danger ahead, and you need to have a plan in case of an emergency.
3. What are some internal warning signs that you may enter a risky situation? The answer is **(b) HALT** – hungry, angry, lonely, tired. The others are external warnings.
4. What does S.I.D. stand for? The answer is: **Seemingly Irrelevant Decision.**
5. Was the statement about relapse true or false? The answer is **(a)** true: relapse doesn't just happen; it begins with a decision (a seemingly irrelevant decision) that at the time may seem to have had nothing to do with drug use or other risky behaviors.

Chapter 6: Health Care Participation

1. Is the statement about cocaine true or false? The answer is **(a)** true; cocaine use can speed progression of HIV.
2. Which of the items listed are communication skills. The answer is **(d)** all of the above—you should prepare a list of issues to discuss, ask for information to be written down for you, and make sure your body language shows that you are an active partner in your health care.
3. What is the first thing you should do if you develop side-effects to medications. The answer is **(c)**—immediately inform your health care provider; don't tinker with your dose and don't self-medicate.
4. Which of the statements provided is true. The answer is **(a)**—medication resistance can develop if you don't take medications as prescribed. The other statements are false. You can be reinfected with a different strain of HIV, you can also infect someone else even if your viral load is reduced to an undetectable level.
5. Which of the items listed is a memory aid. The answer is **(d)** all of the above—pill organizers, alarms, and post-it notes can all help you remember to take your medications as prescribed.

Chapter 7: Healthy Lifestyle Choices

1. What is the essential **first** step to a healthier lifestyle? The answer is **(b)** making the decision to be drug free.

Quiz Answers

2. What are the health consequences of not coping well with stress? The answer is **(d)** all of the above. It can increase your susceptibility to infection and heart disease and can interfere with making healthy choices.
3. Even if the stressful situation is uncontrollable, what do you know? The answer is **(d)** all of the above. You know that you have control over how you respond to the stress, you can use relaxation to reduce the negative effect of stress, and you can redefine it as something you can control.
4. What should you do to prevent food-borne illnesses? The answer is **(c)** wash everything—hands, utensils, cutting boards. The other responses increase your risk for illness.
5. How should you complete the sentence? The answer is **(a)** increase the number of calories and protein in meals. The other responses are false.

Chapter 8: Introduction to the 12-Step Program

1. What do you ask for in the serenity prayer. The answer is **(d)** all of the above—serenity to accept what can't be changed, courage to change what can be changed, and wisdom to know the difference between what can and cannot be changed.
2. What does it mean to be powerless over your addiction. The answer is **(b)**; if you use drugs you are powerless to change the effect of the drug; the drug is in control.
3. Do you need to be religious to benefit from working the 12 steps? The answer is **(b)** false. You do not need to be religious. Interpret the steps in the way that is meaningful to you.
4. What is a person's higher power? The answer is **(d)** any of the above. It may be God, nature, love, life force, an inner source of strength. No one can interpret this for you.
5. What does making amends include? The answer is **(d)** all of the above; forgiveness, honesty, acknowledging harm to yourself and others, and then letting that part of your life go, remembering that you may not necessarily be able to repair the damage done.

Chapter 9: Overcoming Stigma

1. Is it a self-fulfilling prophecy if you behave as predicted? The answer is **(a)** true. Self-fulfilling prophecy is when you behave as predicted by a label.
2. What can being stigmatized influence? The answer is **(d)** all of the above. It can influence how you think, feel, and behave, and result in self-fulfilling prophecy.

3. What can fulfilling your potential result in? The answer is **(d)** none of the above; a, b, and c (low self-esteem, depression, anxiety, stress, stress-related illness, and substance abuse), can all result when you **do not** fulfill your potential.
4. Is the use of self-affirmations a positive, health-promoting form of brainwashing? The answer is **(a)** true. Self-affirmations are a positive form of brainwashing because you use them to change your core beliefs.
5. How do you begin getting in touch with your “core” self? The answer is **(a)** you identify “ideal” characteristics and create a mental image of your “ideal” self.

Chapter 10: Motivation for Change: Overcoming Helplessness

1. Does “Learned helplessness” mean feeling powerless to help yourself now and in the future due to an experience of being powerless in the past? The answer is **(a)** True.
2. Which of the following decisions are under your control? The answer is **(d)** all of the above—not using drugs, not exchanging body fluids, and participating actively in your health care. You have personal control over each of these.
3. If you are already HIV-positive, why should you bother changing your behavior now? The answer is **(e)** all of the above. Remember the reasons to **C.A.R.E.**—compromised immune system makes you vulnerable to other infections; altruism is your desire to protect others; there is also the potential for you to become reinfected with a different strain of HIV that is resistant to treatment; and, finally, there is strong evidence from research that you are not powerless to protect your health and the health of others.
4. What should you think or do if you feel “ambivalent” about using condoms? The answer is **(c)** you should weigh the costs and benefits of using condoms to try to tip the balance in favor of change. The other answers are not correct—ambivalence **is** normal and it does **not** mean that you will never decide to use condoms.
5. If your friend is still using drugs, and has no intention to stop, what stage of change is your friend in? The answer is **(d)** none of the above. Your friend is in the pre-contemplation stage, which is not listed.

Chapter 11: Moving Beyond Grief

1. Is grief a normal human response to loss of any kind. The answer is **(a)** true.

2. Which of the items listed is a stage of grief? The answer is **(d)** all of the above—denial and anger, bargaining and depression, acceptance and hope are the 6 stages of grief.
3. Which of the statements listed is true about fear? The answer is **(d)** all of the above—fear can lead to harmful self-fulfilling prophecies; fears may not accurately reflect reality; and fear can prevent you from protecting your health.
4. Which of the items listed describes a healthy way to reduce the power of fear about HIV? The answer is **(c)** become knowledgeable about HIV and its treatment. The other statements are **not** healthy ways to reduce the power of fear.
5. Which of the items listed is a way to grow spiritually? The answer is **(e)** all of the above—prayer, meditation, imagery, and ritual.

Chapter 12: Healthy Social Relationships and Activities

1. Do social relationships reflect shared values, attitudes, and activities? The answer is **(a)** True. That's why it is so important to develop and maintain healthy supportive social relationships.
2. What should you do to try to heal a relationship that was harmed by your addiction? The answer is **(d)** Demonstrate your commitment to healing the relationship. Remember actions speak louder than words. Do not expect to be trusted immediately; do not argue history by denying you caused any harm; and don't put the other person on the defensive.
3. What should you do when you need help from someone on your social support team? The answer is **(d)** none of the answers provided is correct; all are wrong. Remember Who, What, Where, and When. Identify what you need and the appropriate person to provide the support (not always the same person); select a convenient time and place, and ask directly for what you need, being specific.
4. Which of the items listed are health-promoting work-related activities? The answer is **(d)** all of the above. Continued education, volunteerism, and paid employment are all potentially health-promoting activities.
5. In what way are healthy addictions different from drug addiction? The answer is **(b)** They have long-term positive consequences. The other answers are **not** correct. They do not always feel good immediately and they **can** provide a **internal** source of "feel-good" chemicals called endogenous opioids.

Acknowledgements

This manual-guided Holistic Health Recovery Program (HHRP⁺) was made possible by grants to:

Yale University School of Medicine from the National Institute on Drug Abuse, National Institutes of Health (DA-00277, DA10851, and P50-DA09241). The individuals listed below participated in the development and/or evaluation of HHRP⁺:

Principal Investigators: S. Kelly Avants, Ph.D. and Arthur Margolin, Ph.D.;

Project Director: Lara A. Warburton, Ph.D.;

Co-Investigators: Bruce J. Rounsaville, M.D., Julia Shi, M.D., and Keith A. Hawkins, Psy.D.

Program staff: Doug Gruber, Lenore Hammers, Jennifer Johns, Margery Mills, Brian Sibilio, Stacey Thomas, Joanna Vincent, Amy Weiss, June Marie Weiss.

We also thank Dominick DePhillippis, Ph.D., Elizabeth Boback, Sarah Carney, Connie Nickou, Psy.D., and Kim Sass, Ph.D. for their contributions to an earlier version of this treatment manual, and Mark Saba and Wendolyn Hill of Med Media Services at the Yale University School of Medicine.

Finally, we gratefully acknowledged the invaluable contributions and support of the staff and clients of the APT Foundation, Inc., New Haven, CT.

This treatment manual encompasses diverse approaches to substance abuse treatment and incorporates cognitive remediation strategies more commonly used with individuals with mild head injury. The techniques and treatment approaches used in this manual were adapted from a number of sources including those listed below:

Ashton, M., & Varga, L. (1993). *101 Games for Groups*, Tucson: AZ: The Psychological Corporation.

Bartlett, J.G. & Finkbeiner, A.K. (1991). *The guide to living with HIV infection*. Baltimore, MD: The Johns Hopkins University Press.

Des Jarlais D C, et al. (1993). Harm reduction: A public health response to the AIDS epidemic among injecting drug users. *Annu Rev Public Health*;14:413-50.

Dohrmann, V.S. (1994). *Treating memory impairment. A memory book and other strategies*. Tucson, AZ: The Psychological Corporation.

Fisher, J.D. and W.A. Fisher, *Changing AIDS-risk behavior*. *Psychological Bulletin*,1992. 111:455-474.

Kelly, J.A. (1995). *Changing HIV Risk Behavior: Practical strategies*. NY: The Guilford Press.

Marlatt, G. A. & Gordon, J.R. (1985). *Relapse Prevention. Maintenance Strategies for the Treatment of Addictive Behaviors*. New York, Guilford.

NIDA, *Outreach / risk reduction strategies for changing HIV-related risk behaviors among injection drug users. The National AIDS Demonstration Research (NADR) Project*. 1994, Washington, DC: NIH Publication No. 94-3726.

Miller, L. (1993). *Psychotherapy of the brain injured patient*. NY: W.W. Norton & Co.

Miller, W.R., & Rollnick, S. (1991). *Motivational Interviewing. Preparing People to Change Addictive Behavior*. New York: Guilford.

Monti, P.M., Abrams, D.B., Kadden, R.M., & Cooney, N.L. (1989). *Treating Alcohol Dependence*. New York: Guilford.

Parker, V.S., & TenBroek, N.L. (1987). *Problem solving, planning and organizational tasks: Strategies for retraining*. Tucson, AZ: The Psychological Corporation.

Kubler-Ross, Elizabeth (1969). *On Death and Dying*. NY: MacMillan.

Seligman, M.E.P., *Helplessness*: 1975, San Francisco: W.H. Freeman.

Toglia, J.P., & Gollis, K.M. (1990). *Cognitive rehabilitation: Group games and activities*, Tucson, AZ: The Psychological Corporation.