



Part V

Other Possible Situations

Seminar # 32

“Harm Reduction”

Harm Reduction

Harm reduction is a set of practical strategies and ideas aimed at reducing negative consequences associated with drug use.

Harm Reduction is also a movement for social justice built on a belief in, and respect for, the rights of people who use drugs.

Harm reduction incorporates a spectrum of strategies from safer use, to managed use to abstinence to meet drug users “where they’re at,” addressing conditions of use along with the use itself. Because harm reduction demands that interventions and policies designed to serve drug users reflect specific individual and community needs, there is no universal definition of or formula for implementing harm reduction.

Syringe Access:

Syringe access is an essential component in the prevention of HIV and hepatitis C among people who inject drugs.

Research consistently demonstrates the effectiveness of syringe access in preventing transmission of infectious disease and skin and soft tissue infections, while also supporting the overall health and wellbeing of drug users through linkages to drug treatment, medical care, housing, overdose prevention and other vital social services.

Overdose

Read online below and download the entire manual as a PDF.

<https://harmreduction.org/issues/overdose-prevention/tools-best-practices/manuals-best-practice/od-manual/>

Harm-Reduction Medications

Methadone is one of the oldest harm-reduction medications available. This particular drug works on the same receptors used by heroin, providing users of this drug with relief from cravings and symptoms of withdrawal without providing them with an intense high. This drug has been proven remarkably effective in keeping heroin users alive, even while they’re trying to recover from a devastating disease. For example, in one study^[5] published in 2001, researchers came to this conclusion:

“Harm-reduction-based methadone treatment, in which the use of illicit drugs is tolerated, is strongly related to decreased mortality from natural causes and from overdoses.”

That’s a remarkable statement, and it demonstrates just how innovative a methadone strategy might be in helping people to recover from the use and abuse of these powerful drugs.

Buprenorphine is similar, in that it also works on the same receptors used by opiates like heroin, but this drug also has a ceiling effect, meaning that people can’t take massive doses of this drug in order to get high. They can take the drug to ameliorate cravings and withdrawal, but it’s not designed for abuse. The makers of this drug sometimes make that abuse-resistance potential yet stronger by adding in naloxone, which kicks in at high doses and keeps users from overdosing.

Medications containing buprenorphine have been proven effective^[6] in helping people to stay motivated to enter treatment programs. They’re also considered an ideal form of long-term treatment, as they can be prescribed by a medical doctor, rather than an addiction treatment professional. In some cases, people can even take these medications at home, rather than walking into a clinic or a pharmacy for a daily dose.

But some drug users resist the idea of replacing a drug they love with a prescription medication that only modifies the high they can feel. These users might benefit from access to naltrexone. This medication, whether delivered by shot or via nasal spray, [can block an overdose in progress by kicking all active bits of drugs from their receptors](#). It’s typically given by an emergency responder, like an ambulance driver,^[7] but making the drug widely available could allow drug users to treat one another in the case of an overdose, and that might result in the saving of thousands of lives.

These are just a few of the medications available for pharmaceutical control of addictions. Naltrexone and Antabuse are others, and they work in much the same way and bring about the same kinds of benefits.

The practice of mindfulness can trace its origins back to Buddhist meditations (and, indeed, Buddhism itself has been used as a form of substance abuse therapy), but a secular approach to thinking about mindfulness was developed by Jon Kabat-Zinn, Professor of Medicine Emeritus, and creator of the Stress Reduction Clinic and the Center for Mindfulness in Medicine, Health Care, and Society at the University of Massachusetts Medical School.^[5] Kabat-Zinn developed a program he calls Mindfulness-Based Stress Reduction, which combines meditation, yoga and psychotherapy techniques to teach people the art of mindfulness to reduce their stress and improve their relaxation and quality of life.^[6]

meditation

While relaxation is always good, the focus of mindfulness has dozens of precise health benefits that make it a valuable tool in the recovery armamentarium. A study published in the Journal of Psychosomatic Medicine found that 25 patients who had eight weeks of training in mindfulness had better immune systems than 16 patients who received no such training.^[7] This is relevant because of the effect that drug and alcohol abuse has on the immune system. Alcohol, for example, reduces the effectiveness of white blood cells in their function of killing germs. The more alcohol a patient drinks, the fewer white blood cells can multiply and attack an invasive diseases.

Similarly, methamphetamine and excessive marijuana consumption can damage the body's ability to fight off infection, by directly attacking the immune system and weakens the lungs, respectively.[8]

A patient who has just completed a course of detoxification has a very weak immune system (which is one of many reasons why detox should not be tempted in a domestic environment).

Teaching mindfulness as part of the therapeutic stage of recovery will have a significant effect on the patient's recovery, both from the physical and psychological effect of drugs and alcohol on their system.

Mindfulness and Healthy Eating in Recovery

Another area of physical care in recovery has to do with diet. Drugs and alcohol abuse wreak havoc on a body's digestive system, often depriving key organs and systems of the nutrients they need to function. The National Institute of Alcohol Abuse and Alcoholism explains that the liver and the pancreas can be especially compromised.[9] A patient who is detoxing will be very physically weak, due to the diarrhea and vomiting associated with the withdrawal process. For that reason, food rich in carbohydrates, vitamins, and amino acids are very important. Good nutrition can help a patient's body to strengthen during recovery, and bad eating habits can even lead to a relapse.[10]

Mindfulness can be incorporated into a treatment program to help patients practice "mindful eating." Instead of unwittingly replacing an alcohol addiction with a food addiction, patients can learn how to savor the food they have, by being aware of their bodies' hunger cues, and learning where those cues come from and what causes them. Then, instead of simply indulging in more food, the patients can apply this greater understanding to better address the underlying causes of their compulsion to overeat. In doing so, they can improve their eating habits, lose weight and avoid a relapse pitfall.[11]

In this way, mindfulness can also be the primary method of treatment for patients who have an eating disorder. Mindfulness can help a patient focus on her "internal hunger," in the words of a professor emeritus of psychology at Indiana State University, and not their "external hunger." The idea is that by focusing on eating a small (or moderate) amount of food mindfully, patients can enjoy the experience much more than if they ate a larger amount. Addicts, who by nature have demonstrated impulse control issues (as with eating and substance abuse disorders), can benefit from the heightened sense of awareness that mindfulness teaches them about recognizing their levels of hunger and fullness.

Mindfulness and Emotional Regulation in Relationships Affected by Addiction

Since emotional regulation is a big part of the mindfulness approach, the effect that mindfulness has on relationships also plays a key role in recovery.

Couples who embark on mindfulness training together report being more satisfied with their relationships, and individual partners have a greater sense of optimism and relaxation within their union. A study published in the journal Behavior Therapy found that mindfulness helped couples enjoy deeper levels of satisfaction with (and within) the relationship – benefits that persisted three months after the training concluded. Happiness and stress levels were improved, as well as the effectiveness of various methods of coping with stress.[12]

The psychological effects of drug or alcohol dependency on addictions are well known, but the physiological effects of what such substances do are complex. A 2013 study by the University of Granada of 605 men (550 of whom abused drugs) discovered that male drug addicts were sexually impotent even after completing rehabilitation. The study's authors wrote in the Journal of Sexual Medicine that the abuse of cocaine, heroin, and alcohol (the substance that has the greatest negative impact on a man's ability to perform sexually) caused long-term negative impact on sexual climax in men.[14]

Such a form of sexual dysfunction is problematic on its own, but the damage it does to a relationship can be immense. A November 2002 survey conducted by the Journal of Urology on 168 men with erectile dysfunction found that men who reported their impairment having any effect on their lives also reported suffering from depression and anxiety.[15]

Issues like these demonstrate how mindfulness can help couples who are going through recovery together.

Mindfulness and Dialectical Behavior Therapy

The idea of regulating emotions that mindfulness espouses is a cornerstone of Dialectical Behavior Therapy, one of the main lines of therapy that is used in drug and alcohol recovery.

When looked at through the perspective of Dialectical Behavior Therapy (or DBT), mindfulness is used to help patients accept their emotions. This may seem like an easy concept, but the idea of denying the reality behind experiencing powerful impulses to engage in self-destructive and harmful behavior is what often drives patients to seek comfort and relief in that harmful behavior. Instead, mindfulness teaches them to nonjudgmentally acknowledge what they are feeling, and then to use that

acknowledgement as a stepping-stone toward regulating themselves.

For example, a patient might attempt to control his behavior by setting limits or goals for himself. This is admirable on its own, but when those plans inevitably go awry (perhaps through no fault of his own), he reacts with negativity and frustration, feeling compelled to give up on the idea of learning to regulate his behavior.

Mindfulness encourages patients to try again, by teaching them that there is never a point of no return. Even after a failure, the patient is still capable of trying again – a perspective he may have been robbed of by his compromised state of mind.

Dialectical Behavior Therapy was developed by Marsha M. Linehan, who wrote on the subject that patients who cannot regulate their emotions become trapped by inflexible patterns of thoughts, which compel them to focus on negative perceptions.

Mindfulness plays a vital role in the administration of DBT, because it teaches patients to be in the present moment – not rigidly dwelling on their impressions of depression or stress, but accepting those impressions as part of a bigger picture, and then using the other dynamics in that picture to better control their emotions and thoughts.[16]

Mindfulness in Treating Violent Moods

This is also why mindfulness has found success in helping prison inmates reduce their anger, hostility, and unpredictable moods. As inmates understand how and why they react as antagonistically as they do, mindfulness plays a vital role in not only their recovery (in the cases of substance abuse), but also in their rehabilitation and reintegration following their release from prison. A mindfulness program at the Lowell Correctional Institute for Women in Ocala, Florida, yielded inmates who learned how to:

Consider their thoughts before acting

Be more aware of their emotions and physical sensations

Manage their panic and anger more effectively, making the choice to not only withdraw from confrontation, but to also help talk down other inmates who were about to engage in fights[17]
man in an angry mood

A 2007 study published in *The Prison Journal* enrolled 1,350 inmates in drug units in six prisons in the Massachusetts Department of Corrections in 113 mindfulness-based stress reduction courses. Inmates self-reported “highly significant” improvements in measures of hostility, self-esteem, and emotional regulation. The authors of the study were encouraged by the effectiveness of mindfulness-based stress reduction and called for greater implementation of such programs.[18]

Mindfulness: ‘Significantly Greater Extent’

With drug and alcohol recovery itself, mindfulness therapy has enjoyed a great amount of success and validation from the mental health community. The journal of *Substance Use & Misuse* published two articles in April 2014 on the topic: one that found mindfulness-based interventions reduced the consumption levels of opiates, cocaine, marijuana, alcohol, cigarettes and amphetamines to a “significantly greater extent” than other treatment methods; and another that said that substance abuse programs are either making mindfulness a standalone component to their methods, or using mindfulness in conjunction with other treatment models.[19],[20]

In the slightly more technical terms of *Frontiers in Psychology*, “Mindfulness Training Targets Neurocognitive Mechanisms of Addiction.” Modern science, says the article’s authors, has only just begun to understand the many ways that mindfulness training addresses the connections between addiction, thoughts, and emotions.[21]

How Is Mindfulness Achieved?

When a patient feels strong emotions that threaten to overwhelm her, her therapist might suggest that she concentrate on breathing. Simply being aware of the action of breathing in and breathing out can divert feelings of panic and anger and calm the patient down.

Achieving mindfulness

Next, the patient will be told to pay close and specific attention to every sense she can: sights, sounds and smells that would normally be lost in the noise of stress or muffled by depression can help ground the patient and give her something tangible to focus on.

Similarly, being aware of the physical sensations on the body achieves the same purpose. It could be as simple as focusing on the tactile feeling of clothes on skin, or the way the body rests on a chair or couch. Little details like these provide a sense of reality that the patient can use as a lifeline.

Lastly, and with encouragement, the patient should acknowledge that even the most harmful or overpowering thoughts are momentary at worst. At best, they do not define the patient. This may be incredibly difficult to remember, or even accept, for some patients, but guided and curated insights like those are the key to breaking the hold of negative thought patterns.

A specific form of meditation known as “mindfulness meditation” can impart all of these lessons. Psychology Today explains how such a practice can improve the amount of activity in the amygdala, the part the brain that deals with regulating emotions. A healthy amygdala is necessary for moderating the body’s natural anxiety response. Even in stressful moments, the heart rate will slow, breathing will become deeper, and the body’s release of adrenaline slows down. While such flight-or-fight responses have their uses, uncontrolled reactions can be very harmful to people who do not know how to calm themselves down.

With practice, mindfulness meditation can strengthen the region of the brain that is responsible for feelings of optimism and well-being. In this way, mindfulness can actually rewire a suffering brain by teaching it new and better ways to respond to problems.[22] The senior author of a study conducted by the Massachusetts General Hospital, and published in *Psychiatry Research: Neuroimaging*, said that just two months of mindfulness meditation provides active psychological benefit to patients, in the areas of improving their senses of self and empathy, and decreasing their stress levels.[23]

Amygala

Continue Reading

Yoga and Recovery

Acceptance and Commitment Therapy

Borderline Personality Disorder and Addiction

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FAMILY MEMBER HARM REDUCTION:

Self-care includes all of the things we do for ourselves to stay well – and to keep ourselves on the road of recovery. Self-care is an essential skill – especially in our work as peer supporters. Why is it so important? Because we know stress has detrimental effects on both our mental and physical health.

The proven effects include:

- Increased levels of cholesterol
- Production of the fat-producing hormone cortisol
- Increased susceptibility to depression and other mental health conditions

- Increased susceptibility to other illnesses including influenza, headaches, heart disease, high blood pressure, diabetes, colds and even cancer
- Increased job absenteeism
- Decreased life enjoyment and satisfaction

Conversely, we know that if one is able to both reduce stress and enjoy life, the following benefits can result:

- Resilience from mental health conditions
- Resilience from physical health conditions
- Greater success on the job
- Better interpersonal relationships

- A longer, more satisfying life Stress management Learning to manage stress and living an enjoyable life are two separate issues and involve varying—and often overlapping—skills. To manage stress, consider the following recommendations:
- Learn to identify when you are stressed (a daily journal in which you can record stressful times during the day can be helpful).
- Learn to identify (and if possible avoid) events, people, places or circumstances that increase your stress.
- Know that YOU CAN decide what you will be stressed about.
- Create a lifestyle that minimizes stress. Recovery to Practice Participant Workbook–v1 April 2014 Page 1-15 Module 1: The Transforming Power of Recovery
- Use creativity and/or your sense of humor to deal with stressful situations.
- Plan time for fun.
- Plan time to meditate or just relax, alone or with others, depending upon what works best for you.
- Know that you ARE WORTHY of taking the time and effort necessary to reduce and manage stress in your life.

Life enjoyment Happiness is often thought of as a temporary mindset. It can last a few seconds, minutes, hours or days. Research has shown, however, that happiness is often fleeting. Enjoying life, however, is creating a lifestyle that maximizes happiness. Interestingly, studies have shown that our minds work in terms of contrast. This means adversity (such as dealing with an addiction and/or mental health condition) can actually help us learn to appreciate happiness more and more often and, thus, create an enjoyable life.

External vs. internal happiness Seminars, television shows, documentaries, lectures, CDs, books and other forms of communication have focused on creating a happier life and studies have given birth to “positive psychology.” But research has shown that despite these efforts, long-term effects are negligible.

Even when people know what they have to do to create a more enjoyable lifestyle, they rarely do so. One apparent problem is how our society generally defines happiness. For many, it is financial success, material possessions, appearance or status (academic achievements, respected occupations, etc.). But even when these are achieved, we tend to set the bar higher and want more. Researchers have called this the “hedonic treadmill” where we seek more and more and are never satisfied. Interestingly, material possessions, financial success and status account for only 10 percent of our ability to be happy. The other 90 percent relates to our values, attitudes and behaviors—things we can change.

Recovery to Practice Participant Workbook–v1 April 2014 Page 1-16 Module 1: The Transforming Power of Recovery The “hedonic treadmill” that accounts for 10 percent of our ability to be happy is largely “extrinsic.” That means they are “outside” of ourselves. The remaining 90 percent are “intrinsic.” That means they are “within” us.

You might think of it as the difference between enjoying the aroma of a freshly mowed lawn and the drive that makes you work extra hours so you can afford to own acres of a finely trimmed lawn to impress neighbors.

Happiness brings success New happiness theories are flipping traditional paradigms. The traditional thought that one will be happy with occupational success is incorrect. Instead, it is happiness that brings the success—not the other way around.

To create an enjoyable lifestyle, researchers have identified the following components:

- **Gratitude:** By learning to recognize the good things in life and taking time to intentionally appreciate them, we can cultivate an “attitude of gratitude” that can lead us to evaluate our values in a way that can lead to a lifestyle change.
- **Compassion:** Performing acts of kindness is an important element of an enjoyable life. We can gain pleasure from simple acts such as holding a door open for someone or just smiling at another. More intentional and planned acts can bring greater levels of happiness. These acts may include volunteering, helping someone with chores, or giving a gift (especially handcrafted gifts or meals).

Random Acts of Kindness: can include animals. Most people find it difficult to be depressed when they are petting a dog furiously wagging its tail in appreciation. These acts of kindness are not only appreciated by those receiving them but as much or more by the giver. Many who perform acts of kindness report a “helper’s high” as dopamine floods our central nervous system. This high can last a few minutes or even a few days if we intentionally act to keep the memories and feelings alive. •

Exercise: Walking, jogging, playing sports or other activities are linked to our happiness. If one regularly plans to be active, it can become a most healthy habit. Although aerobic exercise that increases our heart rates Recovery to Practice Participant Workbook–v1 April 2014 Page 1-17 Module 1: The Transforming Power of Recovery and causes us to breathe deeply is best, even modest exercise offers considerable benefits.

- **Mindfulness:** Taking time for ourselves to be in a quiet, comfortable environment and think a single thought can help us reduce stress and teach us that we are indeed capable of controlling our thoughts and behaviors. Unfortunately, our society values “multi-tasking,” which is often a significant contributor to stress. Reducing the number of tasks we perform and thoughts we think (i.e.: simplifying our lives by prioritizing) can help us reduce stress, focus on important tasks and live healthier, more satisfying lives.

- **Diversity:** Changing our routines, even slightly, can help us learn and take greater steps to creating a different lifestyle. It has been said: Life begins at the end of our comfort zones. Personal growth is fostered by trying new things, experimenting and learning how even difficult life challenges can become opportunities for change and growth. •

Relationships: Relationships, especially those that are healthy and supportive, can lead to new support networks and opportunities to share activities with others. One researcher studied what persons with mental health conditions preferred to do for enjoyment. He discovered that most people cared little about the activity but were more interested in having someone with whom they could share it. Studies have also shown that happy people attract other happy people. With a positive attitude, it appears you will be more successful in attracting like-minded people.

• **Humor:** With practice, and perhaps with the help of good-natured friends and family, we can find humor in even the most difficult circumstances. The neighbor who complains about where you put your trash on pickup day, the boss who constantly nitpicks your work, or that cousin who jams your e-mail account with social media requests are interactions that can be viewed with frustration or with a slight shift in perspective can all be viewed in a humorous light. Humor is a great antidote to stress. Pick up a good joke book and learn some stupid jokes to share with others. Laughter is contagious! Recovery to Practice Participant Workbook–v1 April 2014 Page 1-18 Module 1:

The Transforming Power of Recovery

• **Meaning:** Meaning in our lives is vital. And meaning is subjective. One may find bird-watching a meaningless activity while others find it extremely meaningful. In our society, we value (even over-value) work. While many may say bringing home a big paycheck by selling vacuum cleaners is meaningful, others may not. Consider that couples with young children are, according to research, somewhat less happy than childless couples. Yet couples continue to have children. Why is that? It is because children bring meaning to our lives (in addition to much frustration). Researchers, unfortunately, have not thoroughly addressed this happiness component but, if they did, they would likely discover that children bring us much intrinsic happiness, which is difficult to measure.

Creating an enjoyable life Again, knowing the benefits of happiness and an enjoyable lifestyle, what you enjoy, and planning a different lifestyle are not enough. It takes long-term action to actually create an enjoyable lifestyle. For many with an addiction or mental health history, lifestyle change is not new. That puts you in a good position to understand what it is you have to do to create an enjoyable lifestyle filled with happiness. What follows is a checklist of enjoyable activities used in a recent research project. Assignment #5: Fun things to do Go through the following checklist and mark the appropriate boxes.

People who have completed the checklist have found it an enjoyable experience. They say it is enjoyable just to think about enjoyable activities and it can be a planning tool for self-care as you may discover you have not recently engaged in enjoyable activities you once did. The checklist may also cause you to think about what you COULD be doing to enhance your life. Save the checklist and complete it again in a week or so. You are likely to find you have thought about it and may think of new activities to enjoy. You can also share the checklist with people you support to get a better idea of the kinds of things they enjoy and would like to do more often. Recovery to Practice Participant Workbook–v1 April 2014 Page 1-19 Module 1:

The Transforming Power of Recovery FUN THINGS TO DO CHECKLISTS The following checklists contain things you may have enjoyed in the past, enjoy now, or hope to enjoy in the future. Please check all boxes that apply (more than one box may be checked per row/activity). There are no right or wrong answers. If there are fun activities missing, add them in the blank spaces. (There is a blank copy in the Appendix of this module that you can copy and use.)

Out and About I enjoy now I have enjoyed in the past I hope to enjoy in the future Does not apply
Go shopping Go biking Go to a party Go to lunch or dinner with friends Go to a park Go on a date
Volunteer or work Go to a movie, play or concert Explore a city or neighborhood Travel Go for a drive
Swim Jog/run Walk outdoors Go camping Go to church Meet new people Go hunting or fishing Visit a museum or library
Other Recovery to Practice Participant Workbook–v1 April 2014 Page 1-20 Module 1: The Transforming Power of Recovery
Do During Quiet Time I enjoy now I have enjoyed in the past I hope to enjoy in the future Does not apply
Soak in a bathtub Listen to music Watch television Dream about the future Do puzzles Read Lie in the sun Draw or paint
Grow plants Meditate Light candles Write poems/stories/letters Other Do With Family or Friends I enjoy now I have enjoyed in the past I hope to enjoy in the future Does not apply
Play board games Play cards Hang out Go on a picnic Play sports

Other Recovery to Practice Participant Workbook–v1 April 2014 Page 1-21 Module 1: The Transforming Power of Recovery Return to these checklists in a week or so and fill them out again. You are likely to find you have thought about new activities to enjoy that you can add to the list. In your practice as a peer supporter, you can copy and share a blank copy of these checklists (found in the Appendix of this module) with the people you support to get a better idea of the kinds of things they enjoy and would like to do more often. Do Anywhere Anytime I enjoy now I have enjoyed in the past I hope to enjoy in the future Does not apply
Repair broken things Exercise Sing Dress up in nice clothes Make crafts Play with pets Watch other people Play with children Perform an act of kindness Snuggle with someone Make someone smile Cook Collect things Take pictures Play a musical instrument Buy gifts for others Dance Watch animals
Other Recovery to

Practice Participant Workbook–v1 April 2014 Page 1-22 Module 1: The Transforming Power of Recovery Self-Care Planning Because self-care is essential, the ability to plan for self-care for ourselves and to demonstrate good self-care planning for others is an important skill.

There are a number of peer-created programs that can help identify self-care strategies that can not only be helpful for you but can also be shared with those you support. Many of these programs provide support and instruction for you to create a plan for self-care like the Wellness Recovery Action Plan or WRAP¹ , PATHWAYS TO RECOVERY² , THIS IS YOUR LIFE³ , PERSONAL MEDICINE/COMMON GROUND⁴ , and WHAM⁵ .

Links for all of these programs are provided in the footnote section below and can also be found in the Resources section for this module. With any of these approaches, it can be helpful to work together in a small group to brainstorm (or as you will learn in the training, heartstorm) to identify self-care tools and techniques and get new ideas to create action plans. Having a recovery buddy to share ideas with who will hold you accountable for following your self-care plans can help too. Note: The Wellness Recovery Action Plan (WRAP™) community has a program called WRAP PALS (Peers Advocating, Listening, and Supporting) in which two WRAP-trained individuals work together on creating and following through with their WRAPs. You can learn more about WRAP™ PALS by visiting www.copelandcenter.com or www.mentalhealthrecovery.com. 1 Wellness Recovery Action Plan™ WRAP™ (Copeland Center for Wellness and Recovery) 2 Pathways to Recovery – Strengths Recovery Workbook – University of Kansas School of Social Welfare 3 This Is Your Life: Creating a Self-Directed Life Plan – University of Illinois at Chicago 4 Common Ground / Personal Medicine Toolkit – Pat Deegan Associates 5 Whole Health Action Management (WHAM) – SAMHSA Center for Integrated Health Solutions Recovery to Practice Participant Workbook–v1 April 2014 Page 1-23 Module 1: The Transforming Power of Recovery For Further Study: Resilience Resilience6 refers to the ability to bounce back from highly stressful or traumatic situations. Resiliency depends in many ways on the kinds of “protective” factors that one has in their life, which back to self-care strategies. For example: • Happiness • Satisfaction with Life • Humor • Supportive family and friends • Motivation Self-care creates the kind of protective factors that can lead to more resilience and modeling self-care can help do the same for others. A recommended TED video speaks to the nature of resilience.

It is called The Power of Vulnerability: Teachings on Authenticity, Connection, and Courage by Brené Brown7 . http://www.ted.com/talks/brene_brown_on_vulnerability. Sampling of articles on developing resilience • What is resilience and why does it matter?8

<http://psychology.about.com/od/crisiscounseling/a/resilience.htm>

<http://psychology.about.com/od/crisiscounseling/p/resilience-2.htm> •

A resilience quiz – how resilient are you?9 <http://psychology.about.com/library/quiz/bl-resilience-quiz.htm> • 10 ways to become more resilient.10

<http://psychology.about.com/od/crisiscounseling/tp/become-moreresilient.htm> • Readers share strategies for staying emotionally resilient in the face of stress11

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<http://stress.about.com/u/ua/readerresponses/resilient.htm> Recovery to

Practice Participant Workbook–v1 April 2014 Page 1-24 Module 1: The Transforming Power of Recovery For Further Study: Communication Skills Perhaps the most important skill for a peer support provider to develop is the ability to listen with sensitivity and communicate clearly.

There are many skill building programs that have designed to increase the “technical” ability to communicate clearly but there is more to good communication than techniques. As a peer support provider, our job is to convey compassion and understanding for those who are going through what we have been through ourselves.

Our ability to authentically share we’ve “been there” can make the difference in reaching someone else. A few programs that came highly recommended during the pilot stage of this course were:

- eCPR
- Non-Violent Communication | Compassionate Communication
- Alternatives to Violence Project A brief summary of these three programs is provided for further investigation if a program sounds like it may benefit your practice of peer support or help others to increase their ability to communicate with compassion.



Part V

Other Possible Situations

Seminar # 32

“Harm Reduction”

The Seminar Goals:

1. The attendee will be able to name the four (4) domain parts in the family system.
2. The attendee will be able to identify how the degree of functionality and potentiality of each family member will impact the outcome of dealing with a family issue.

Psychologists, social workers, counselors and addiction specialists can provide a number of innovative therapies to help people overcome their brain chemistry deficiencies so they can live a life that's free of drugs. But even so, many people who have addictions simply don't want to pursue a life of abstinence. For example, in the 2010 National Survey on Drug Use and Health, of those illicit drug users who didn't enter treatment, 30.1 percent stated that they simply weren't ready to stop using drugs.[2] Even if treatment was available, these people didn't want to take part.

Those who regularly engage in non-suicidal self-injury (NSSI) say that it offers temporarily relief from overwhelming emotions and negative thoughts as much as 90 percent of the time, as reported by [Current Psychiatry](#). It is important to understand that although this seems like it might be helpful, it is not a healthy outlet for relieving stress and should be treated. It can be a symptom of a greater issue and many who suffer from NSSI also may have substance abuse problems as well. Some of the warning signs of this condition are:

- Noticeable wounds that aren't easily explained
- Wearing long-sleeved clothing at inappropriate times in an attempt to hide wounds
- Avoidance of social situations
- Isolation or a lot of time locked in a room or bathroom
- Impulsivity
- Feelings of worthlessness or hopelessness
- Personal identity issues

- Tools such as razors, bits of glass, lighters, knives or scissors in places they don't belong and usually in easily accessible places

Typical locations for cuts and burns are on the arms, legs and stomach; all of which are places that are easily accessible and can be covered up. Social media sites are also flooded with cases of self-harm, and some even glorify it. Cases of celebrity self-mutilation continue to pop up, and self-harming behavior seems to be rising everywhere. Excessive visits to pro-self-harm websites could be a warning sign for a bigger problem. [If you or someone you know is presenting these warning signs, it is time to get help.](#)

Self-harming behavior can be difficult to notice, diagnose and treat. Only recently has the disorder really hit the public eye. Many times, episodes of self-harm are indicative of an underlying psychological disorder, but not always. When self-injurious behavior is coupled with addiction, treatment can be even more difficult. Those who struggle with addiction as well as self-harming behaviors need specialized treatment that simultaneously addresses both afflictions.

Dual diagnosis treatment understands the unique pressures that can lead individuals to want to harm themselves. Cognitive Behavioral Therapy may be an effective tool along with group, family and individual therapies. If someone suffering from self-harming behaviors has a traumatic event or trigger in their past or current life, dual diagnosis treatment can work to uncover the issues and help patients to cope in a healthier way.

Psychology Today explains what mindfulness is: actively paying attention to the present moment, taking stock of what you're thinking and feeling, and offering no criticism or judgment. Mindfulness is simply making a neutral, comprehensive inventory of what you're experiencing. The idea of "living life in the moment" comes from the idea of being mindful.[1]

There are three primary components of mindfulness:

It is intentional. The patient has to make a conscious effort to catalog what he is going through, from one moment to another.

It is accepting. The patient cannot deny what she is sensing.

It is nonjudgmental. A patient who criticizes himself for what he is feeling is not being truly mindful, in the same way that a patient who thinks highly of his emotions has not achieved actual mindfulness.[2]

By achieving this sense of balance, patients learn how they can regulate their emotions and thoughts. While this has a number of applications in everyday life, mindfulness can play a very important role in substance abuse recovery: patients learn how to rethink the nature of stressful situations and stimuli that may otherwise trigger a harmful train of thought that leads to drinking or using. Prior to a mindfulness intervention, patients may

have been oblivious to the various factors that start the chain reaction of negative thought and unhealthy behavior. Mindfulness treatment gives them the chance to examine those factors on a level playing field, in a calm, supportive and safe environment. In time, the triggers become less daunting and more manageable.

A Comprehensive Harm Reduction package:

What is the Comprehensive Package of Interventions?

An effective and evidence-based response is required to curtail the rapid spread of HIV among drug using populations, but also to prevent transmission to the general population. In order to achieve

these goals, according to UNODC, WHO and UNAIDS, the implementation of a 'comprehensive

package' of nine interventions for the prevention, treatment and care of HIV among people who

inject drugs is essential. This package – also widely referred to as the 'harm reduction' approach –

consists of interventions for which there is a wealth of scientific evidence supporting their **efficacy in**

preventing the spread of HIV2:

Comprehensive Package:

1. Needle and syringe programmes (NSPs) - access to clean injecting equipment.
2. Opioid substitution therapy (OST – e.g. Methadone Maintenance, Buprenorphine, Suboxone, Naltrexone...) and other drug dependence treatment.
3. HIV testing and counseling.
4. Antiretroviral therapy (ART).
5. Prevention and treatment of sexually transmitted infections.
6. Condom distribution programs for people who inject drugs and their sexual partners.
7. Targeted information, education and communication for people who inject drugs and their sexual partners.

8. Vaccination (as available), diagnosis and treatment of viral hepatitis (HBV, HCV).

9. Prevention, diagnosis and treatment of tuberculosis (TB).

A broader view – especially for young people?

The nine components above grew out of concern for the link between HIV and IDU.
What about

other aspects that can impact on risk, and/or make prevention and treatment more difficult for

young people who use drugs?

For young people, and those who do not inject their drugs, it is important to add:

For example:

Unstable or unsuitable accommodation

Poor physical health, including

nutrition

Poor mental health

Poor child care

Inadequate education

Poor access to training

Poor access to employment

Poor access to legal assistance

Parenting

Reducing transitioning to IDU

Building community intervention

capacity to enhance diversion from

closed settings

IEC - information, education and communication (IEC) programs on HIV, drug use and other blood-borne infections for people who inject drugs Community mobilisation and outreach to reach people who inject drugs who do not or cannot access

health services

“Opening Doors” A toolkit

Enhancing Youth-Friendly Harm Reduction 2011

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Advocacy for harm reduction and access to services

A study in the journal Clinical Psychology Review found that constant worry or stress directly leads to depression and anxiety (which in turn can lead to substance abuse); and mindfulness therapy is effective in reducing the worry that many depressive and addicted patients feel.[3],[4]

VIDEO ONE:



ASSIGNMENT VIDEO: On www.youtube.com/

Search Title: The harm reduction model of drug addiction treatment | Mark Tyndall

Duration: 16:32 min

Link: <https://www.youtube.com/watch?v=cfzkBGgxXGE>

Why do we still think that drug use is a law-enforcement issue? Making drugs illegal does nothing to stop people from using them, says public health expert Mark Tyndall. So, what might work? Tyndall shares community-based research that shows how harm-reduction strategies, like safe-injection sites, are working to address the drug overdose crisis. Check out more TED Talks: <http://www.ted.com>