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January, 2000

Chapter Six

After treatment: mapping the future

After treatment: mapping the future

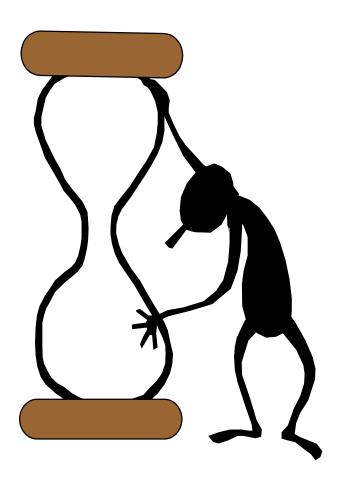
Time: After the third month of treatment

Materials: Copies for each participant of "Keeping Myself From
Relapsing," "If I Do Relapse..," "My Plan for Getting a Sponsor," The
"Critical Action List." Previously completed copy of "Treatment Plan
Map A " and enough "Solutions Map" for 6 copies to each participant.
Overheads of all.

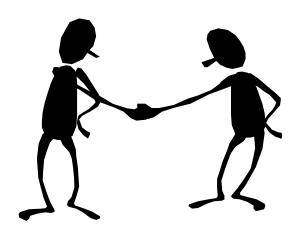
Dr. C:

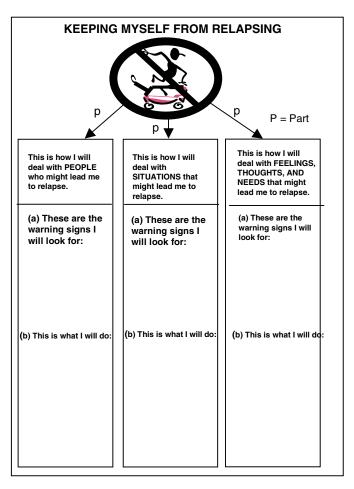
You are almost finished with your in-patient treatment. You've been here three months working on things that are important to you. Now it's time to make some concrete plans for what you will do when you leave here. I'm giving you maps to help with this planning process because maps are easier to remember. You can't make plans work if you don't remember them.

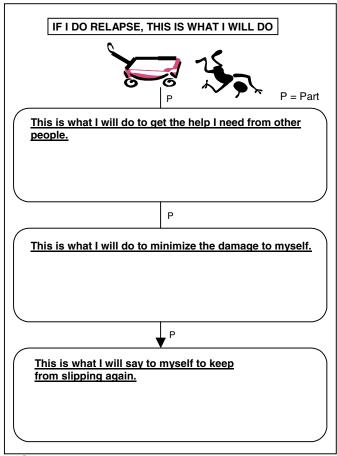
Do the maps in this 'Transition' package over the next two weeks. Then we'll talk about them in group."

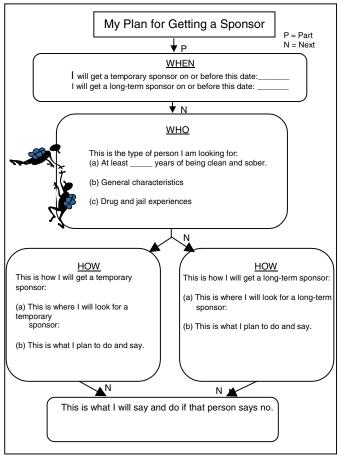


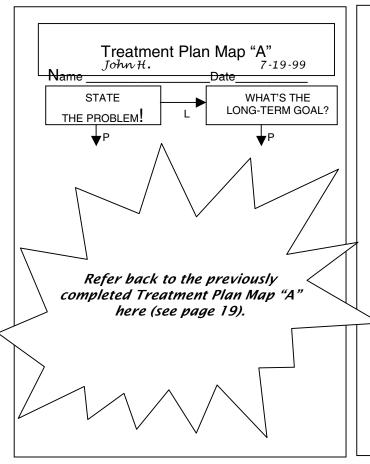
A Quick Sketch of Maps for Mapping the Future

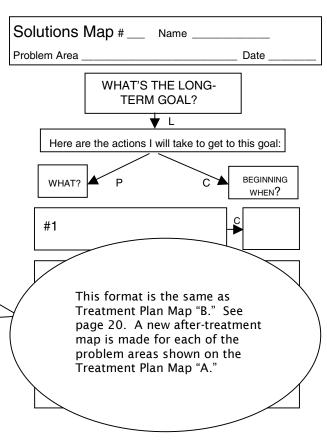


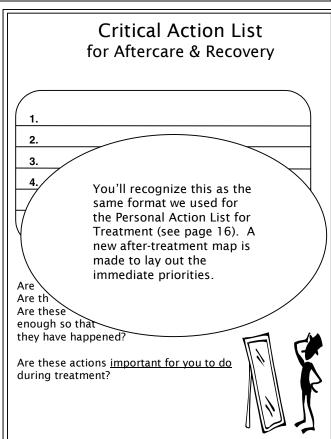


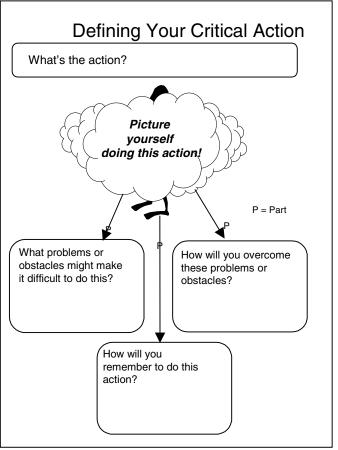




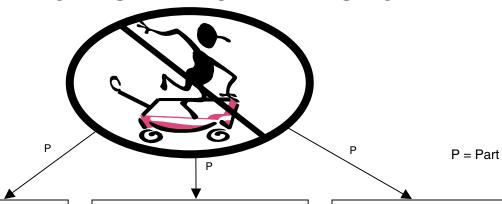








KEEPING MYSELF FROM RELAPSING



This is how I will deal with PEOPLE who might lead me to relapse.

(a) These are the warning signs I will look for:

Joe, Chuy, Bubba

My mom, who makes me crazy.

(b) This is what I will do:

Avoid these dudes.

Ask Mom to not talk to me about drinking, my job, or my girl-friends. Leave the house if she does. Ask Dad to help.

This is how I will deal with SITUATIONS that might lead me to relapse.

(a) These are the warning signs I will look for:

Invitations to parties.

Unexpected changes in plans that leave me with people I don't like in places that are bad for me.

Things people say at work or at home that make me feel inadequate.

(b) This is what I will do:

I will avoid parties for at least a year. Then I will only go to friends' parties & I won't leave except to go home.

I will say, "I'm sick; I need to go home. Now." It will be true.

I will remember: I know who I am. They don't. I am just fine. I will think of a good thing I did & then move on.

This is how I will deal with FEELINGS, THOUGHTS, AND NEEDS that might lead me to relapse.

(a) These are the warning signs I will look for:

Getting sad, depressed.

Not feeling good physically.

Getting really angry at somebody \mathcal{E}_{1} not being able to let go of it.

Saying to myself "I need a fix."

Saying to myself "I am no damn good."

(b) This is what I will do:

Stay busy. Rent a funny movie & watch it 3 or 4 times when I first start feeling that way.

Get more sleep.

Use my "STOP!!" strategies.

Learn to say "That's baloney!" when I say something stupid to myself.

IF I DO RELAPSE, THIS IS WHAT I WILL DO



This is what I will do to get the help I need from other people.

Call my sponsor. Explain to my wife and ask for her help... again.

Ρ

This is what I will do to minimize the damage to myself.

I will keep telling myself that one slip is not the same as going down the tubes for eternity.

I'll watch for the negative junk I lay on myself when I screw up. Some of it I need and deserve. The rest just makes me want to drink.

Ρ

This is what I will say to myself to keep from slipping again.

One hour at a time. One day at a time.

Get a life. Get the list. (My list of things to think about or do when I hit a situation or a feeling that makes me want to drink or do drugs. I'm going to memorize it.

My Plan for Getting a Sponsor

Р

P = Part N = Next

WHEN

I will get a temporary sponsor on or before this date: <u>10-15-99</u>

I will get a long-term sponsor on or before this date: 11-15-99

Ν

WHO

This is the type of person I am looking for:

(a) At least 5 years of being clean and sober.

(b) General characteristics
A guy, not too old. Not like my father.
Easy to talk to who doesn't look down on me.
Somebody I can trust, depend on.

(c) Drug and jail experiences

If he's been in jail, then it should have been a long time ago or I can't be with him.

Ν

HOW

This is how I will get a temporary sponsor:

- (a) This is where I will look for a temporary sponsor: Glass House AA
- (b) This is what I plan to do and say.

I'm new here. I want to be sober and I am willing to work at it real hard. I need a temporary sponsor. Will you do that for me?

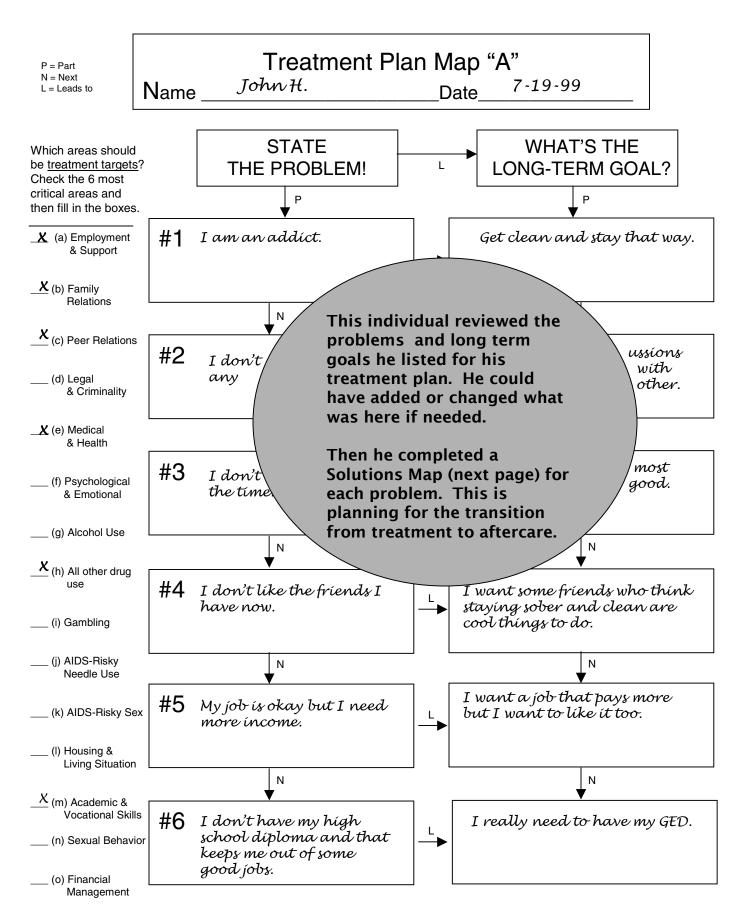
<u>HOW</u>

This is how I will get a long-term sponsor:

- (a) This is where I will look for a long-term sponsor: same place
- (b) This is what I plan to do and say.
 I have heard you talk and we have some things in common. I am impressed with what you have done with your life. I'm ready to work hard to clean up my life.
 Will you be my sponsor?

Ν

This is what I will say and do if that person says no. I understand. It takes a lot of time. Do you know someone who might be a good sponsor for me?



SEE TREATMENT PLAN "B" MAPS (1-6) FOR MAJOR STEPS TO THE LONG-TERM GOAL.

Solutions Map # _2_

Name _____John H.

Problem Area

B- Family Relations

Date 9-5-99

WHAT'S THE LONG-TERM GOAL?

I want to be able to have discussions that aren't arguments with my mother and daughter.

P = Part N = Next L = Leads to

Here are the actions I will take to get to this goal:

↓ ∟

WHAT?

BEGINNING WHEN?

#1 I will show my mother and daughter the ideas that I wrote down my during treatment about what to do so that we don't argue so much. I will show them the rules I learned in treatment about how to have a fair discussion, not a fight.

After I have been home 1 day.
Sooner if it looks like we are going to argue.

#2 I will ask for my mother's and daughter's help to overcome our "argument" problem.

In the first week I'm home.

С

С

С

#3 We will make Critical Action Lists or Planning Rockets for each of us so we will be straight on what we need to do to avoid making a hell of each other's lives.

In the first week I'm home.

#4 I will talk about this problem with my aftercare counselor so I will have some support as I try to change. I will also bring the problem to my aftercare group meeting and see what ideas other people have.

Start next Monday night.

Critical Action List for Aftercare & Recovery

- 1. I will attend all my AA meetings.
- 2. I will find a sponsor.
- 3. I will take action to make things better with my family.
- 4. I will find a higher-paying job.
- 5. I will review my treatment materials once a week before my Tuesday group meeting.
- 6. I will ask my counselor for help when I am confused.

Check it out!

Are these actions that you can really do?

Are the actions stated in positive terms?

Are these actions <u>clear and specific</u> enough so that it is easy to tell when they have happened?

Are these actions important for you to do for your recovery?

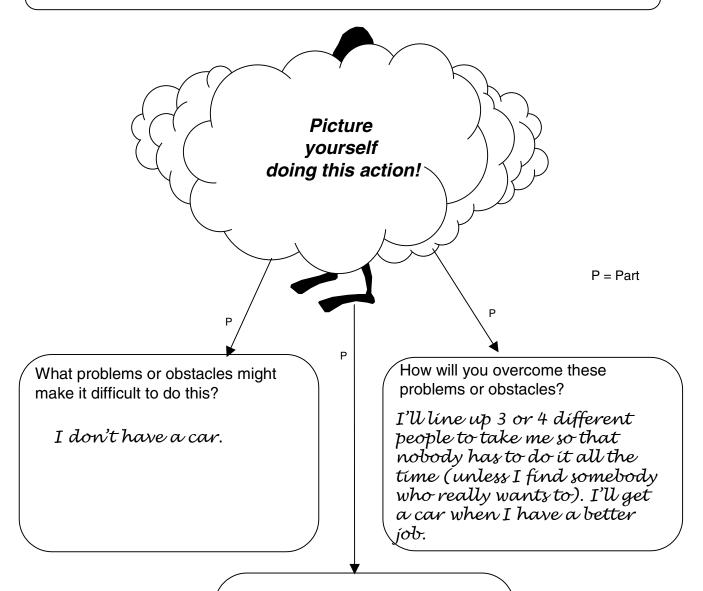


This is the list that the group member takes into aftercare. Then, for each action, the individual completes a "Define Your Critical Action" map. The intent is to produce a realistic plan for the <u>immediate</u> future.

Defining Your Critical Action

What's the action?

I will attend all of my A.A. meetings. One a day for 2 months.



How will you remember to do this action?

I'll walk to the first few meetings. That's about 3 miles one way. I'll remember then.

Post script to the treatment sequence......

Putting maps to work. If he has assigned a map to all members of the group to do individually, Dr. C will initiate a group discussion centered on that map. Group discussion would also follow "map projects," an assignment to work with one or several other group members to complete a map. When he assigns specific maps to individuals, Dr. C follows up with one-on-one talks, using the map as a starting point.

What will you do? We have found that counselors like to experiment with maps before they decide on their own approach to the tool. Although we think the general plan shown here, with treatment planning, during treatment, and post-treatment planning maps is good, you may discover some unique approaches to mapping that work especially well with your style and the needs of your clients.

What not to do?

- 1. Don't write off guide maps as "too simple."
- 2. Don't file this manual on the bookshelf.
- 3. Don't skip over the next chapter: read it and see what using this graphic approach has done in treatment settings.
- 4. <u>Do</u> copy a few of the maps in the last chapter and give it a try. We think you will be pleased with the results.

