

Action Planning for Prevention and Recovery (APPR)

Participant's Workbook

Workbook

Introduction

Every aspect of your life—the place you live, the people you live with, your friends and acquaintances, the things you do or don't do, the things you own, your work, even things like pets, music, and color affects how you feel. If you are concerned about your mental health or the quality of your life, you can do many things and make changes in your life that will help you to feel much better. This booklet will help you think about those areas of your life that may need to be changed and possible changes you could make.

Do you experience feelings and symptoms that are upsetting, that keep you from being the way you want to be and doing the things you want to do? Many people who have troubling emotional, psychiatric, or physical challenges have made great advances in learning how to do things to help themselves get well and stay well.

One of the most frustrating stages of recovering your health is when you realize that you can do many things to help yourself stay well but you

can't figure out a way to do them regularly.

It is easy to forget simple things that you know, especially when you are under stress or when your symptoms are beginning to flare up. The action plans for prevention and recovery described in this booklet were devised by people who experience emotional, physical, or mental health challenges. They developed ways to deal with their need for structure in their lives that actively support their health. The plans are simple, low-cost, and can be changed and added to over time as you learn more and more. Anyone can develop and use these plans for any kind of health concern.

People using this system report that by being prepared and taking action as necessary, they feel better more often and have improved the overall quality of their lives dramatically. One person said, *“Finally, there’s something I can do to help myself.”*

**“SELF-CARE IS NOT SELFISH. YOU CANNOT
SERVE FROM AN EMPTY VESSEL.”**

— ELEANOR BROWN

Action plans for prevention and recovery work because they are:

- Easy to develop and easy to use
- Individualized—you develop your plan for yourself. No one else can do it for you; however, you can reach out to others for assistance and support
- A way to improve your ability to communicate effectively with your family members and health care providers
- Directly addressing the feelings, symptoms, circumstances, and events that are most troubling to you with plans to respond to them
- A way to renew your sense of hope that things can and will get better, and that you have control over your life and the way you feel

“I HAVE COME TO BELIEVE THAT CARING FOR MYSELF IS NOT SELF-INDULGENT. CARING FOR MYSELF IS AN ACT OF SURVIVAL.”

— AUDRE LORDE

Welcome

Please use this booklet to help guide you through creating and using your Action Plan. We have found in our own recovery that using an Action Plan helps in developing and using tools that aid us in our everyday life. It is an invaluable aid when working through difficult times. No one action plan works for everyone, so this book has things that may apply to you, and also things that don't. This is your plan—yours will be different from others, and that's not only okay, but it's also to be expected.

This guide is usually used in a class or group, but also can be done by yourself. If you are working with a peer supporter, therapist, or counselor, it may be something you want to share with them. However, it can be totally private. Sometimes, it is helpful to share a part of the plan, so that you have a trusted provider, friend, or family member who can advocate on your behalf should that become necessary.

This process of creating your Action Plan can at times seem overwhelming or a difficult task. If that occurs, take time to take care of yourself. Take a break, and come back to it when you're able. It will pay dividends once you have it completed.

We hope you find that the Action Plan assists you to plan for prevention and recovery.

This booklet contains information, ideas, and strategies that people from all over the country have found to be helpful in relieving and preventing troubling feelings and symptoms. The information in this booklet can be used safely along with your other health care treatment. You may want to read through this booklet at least once before you begin working on developing your own action plans for prevention and recovery. This can help enhance your understanding of the entire process. Then you can go back to work on each section. You may want to do this slowly, working on a portion of it and then putting it aside and revising it on a regular basis as you learn new things about yourself and ways you can help yourself to feel better. Blank space has been provided on some pages for you to use as you see fit.

Your Wellness Toolbox

This section is called the Wellness Toolbox. In it you identify and list the things you use to help yourself feel better when you are having a hard time. Some of them are things you know you must do, like eating healthy meals and drinking plenty of water; others are things you could choose to do to help yourself feel better. You can also list things you would like to try using to keep yourself well or to help yourself feel better. You will refer to this list for ideas as you develop more of your Action Plan. Some ideas for your Wellness Toolbox might be:

- eating three healthy meals a day
- doing a relaxation exercise
- taking medications

You can get more ideas for your Wellness Toolbox by noticing the good things you do as you go through your day, by asking your friends and family members for suggestions, and by looking into online or print resources.

**“WELLNESS IS A CONNECTION OF PATHS:
KNOWLEDGE AND ACTION.”
— JOSHUA HOLTZ**

Your Wellness Toolbox, con't.

Write down everything, from easily accessible things, like taking deep breaths, to things you only do once in a while, like getting a massage. This is a resource list for you to refer back to when you are developing your plan. Your Wellness Toolbox works best for you if you have enough entries so you feel you have an abundance of choices. Just how many entries you have is up to you. If you feel positive and hopeful

when you look at the list, then you have enough. You can continue to refine your Wellness Toolbox over time, adding to your list whenever you get an idea of something you'd like to try, and crossing things off your list if you find they no longer work for you. Here is space to get you started. Take some time and write down the things that make you feel your best.

Daily Maintenance Plan

Feeling Well

On this page, describe yourself when you are feeling alright. If you can't remember, or don't know how you feel when you are well, describe how you would like to feel. Make it easy. Make a list.

Some descriptive words that others have used include:
bright, talkative, outgoing, energetic, humorous, or reasonable.

Now, when you aren't feeling very well you can refer back to how you want to feel. Review this list from time to time, and add other things that describe you when you are feeling really well.

Daily Maintenance Plan, cont.

Dreams and Goals

Some people use their plans to make a list of their dreams and goals, too. If you think you would find it helpful, make a list of goals you could work toward. You can write down far-fetched goals or more easily achievable ones. It is really helpful to remember your goals and dreams so you always have something to

look forward to. Then, you can identify steps to take to achieve them and incorporate these small steps into your daily maintenance plan.

List a few dreams or goals that you would like to include in your plan:

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“WITHOUT LEAPS OF IMAGINATION OR DREAMING, WE LOSE THE EXCITEMENT OF POSSIBILITIES. DREAMING, AFTER ALL IS A FORM OF PLANNING.”

— GLORIA STEINEM

Daily Maintenance Plan, cont.

Optional Activity: Some people find a vision board helpful. On a piece of poster board or using a Windows or Google tool, paste images that give you hope, lift your spirit or have goals you would like to achieve.

Daily Maintenance Plan

Daily List

Next, describe those things you need to do every day to maintain your wellness. Use your Wellness Toolbox for ideas. Writing these things down and reminding yourself daily to do them is an important step toward wellness. When you start to feel “out of sorts,” you can often trace it back to “not doing” something on this

list. Make sure you don’t put so many things on this list that you couldn’t possibly do them all. Remember, this is a list of things you need to do, not things you would choose to do. Below are some examples you may or may not want to include in your list.

I need to:

- get exposure to outdoor light for at least 30 minutes
- spend at least half an hour enjoying a fun, affirming, and/or creative activity
- check in with myself: “how am I doing physically, emotionally, spiritually?”

Make your list here:

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Stressors

Stressors are external events or circumstances that may produce very uncomfortable emotional or psychiatric symptoms, such as anxiety, panic, discouragement, despair, or negative self-talk. Reacting to stressors is normal, but if we don't recognize them and respond to them appropriately, they may actually cause a downward spiral, making us feel worse and worse. This section of your plan is meant to help you become more aware of your stressors and to develop plans to avoid or deal with stressors events, thus increasing your ability to cope and staving off the development of more severe symptoms.

Identifying Stressors

Write down those things that, if they occur, might cause an increase in your symptoms. They may have caused or increased symptoms in the past. It may be hard to think of all of your stressors right away. Add stressors to your list whenever you become aware of them. It is not necessary to project catastrophic things that might happen, such as war, natural disaster, or a huge personal loss. If those things were to occur, you would use the actions you describe in the stressors action plan more often and increase the length of time you use them.

Some examples of common stressors are:

- The anniversary dates of losses or trauma
- Too much to do, feeling overwhelmed
- Family friction

Here is where you can start a list of your stressors. If this section feels too hard to do all at once, come back to it from time to time as you feel able to continue to make your list.

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Stressors Action Plan

In this section, develop a plan of what you can do if a stressor comes up to comfort yourself and keep your reactions from becoming more serious symptoms. Include tools that have worked for you in the past, plus ideas you have learned from others, and refer back to your Wellness Toolbox. You may want to include things you must do at these times, and things you could do if you have time or if you think they might be helpful in this situation.

Your plan might include:

- make sure I do everything on my daily maintenance list
- call a support person and ask them to listen while I talk through the situation
- do a half-hour relaxation exercise

If you are stressed and do these things and find them helpful, then keep them on your list. If they are only somewhat helpful, you may want to revise your action plan. If they are not helpful, keep looking for and trying new ideas until you find the most helpful. You can learn new tools by attending workshops and lectures, reading self-help books, and talking to your healthcare provider and others who experience similar symptoms.

Begin your Stressor Action Plan here:

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Early Warning Signs

Early Warning Signs are internal and may or may not arise in reaction to stressful situations. In spite of your best efforts to take care of yourself, you may begin to experience early warning signs, subtle signs of change that indicate you may need to take further action. If you can recognize and address early warning signs right away, you often can prevent more severe symptoms. Reviewing these early warning signs regularly helps you to become more aware of them.

Identifying Early Warning Signs

On this page, make a list of early warning signs you have noticed in yourself in the past. How do you feel when you know you are not feeling quite right? How did you feel just before you had a hard time in the past or when you noticed that your habits or routines changed? Your early warning signs might include things such as:

- forgetfulness
- avoiding others or isolating
- displaying of irrational thought patterns

Are there early warning signs that you recognize in yourself? Write them here:

If you want to, ask your friends, family members, and other supporters for early warning signs that they've noticed.

You can develop an action plan for responding to your early warning signs, referring to your Wellness Toolbox for ideas. Some of the things you list may be the same as those you wrote on your Stressor Action Plan. If you notice these symptoms, take action while you still can.

The following is a sample plan for dealing with Early Warning Signs:

- do the things on my daily maintenance plan, whether I feel like it or not
- tell a supporter/counselor how I am feeling and ask for advice. Ask them to help me figure out how to take action
- do at least three 1a-minute relaxation exercises each day (simple exercises that help you relax through deep breathing)

Early Warning Signs, cont.

I also might, depending on the circumstances:

- check in with my physician or other health care professional
- read a good book
- dance, sing, listen to good music, play a musical instrument, exercise, go fishing, or fly a kite

If you use this plan and it doesn't help you feel better, revise your plan or write a new one. Use your Wellness Toolbox and other ideas from workshops, online or print resources, your health care providers, and other people who might experience similar challenges.

Your Early Warning Sign Plan:

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When Things Are Breaking Down or Getting Worse

In spite of your best efforts, your challenges may progress to the point where they are very uncomfortable, serious, and even dangerous. This is a very important time. It is necessary to take immediate action to prevent a crisis or loss of control. You may be feeling terrible and others may be concerned for your wellness or safety, but you can still do the things that you need to do to help yourself feel better and keep yourself safe.

Signs that things are breaking down:

Make a list of challenges or feelings that indicate to you that things are breaking down or getting much worse. Remember that symptoms and signs vary from person to person. What may mean “things are getting much worse” to one person may mean a “crisis” to another.

- feeling very oversensitive and fragile
- responding irrationally to events and the actions of others
- being unable to sleep/sleeping all the time

Below, write a list of signs that you might experience:

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When Things Are Breaking Down or Getting Worse, cont.

Now you can write an action plan that you think will help reduce your crisis feelings when they have progressed to this point. **The plan now needs to be very direct, with fewer choices and very clear instructions.**

Some ideas for an action plan are:

- call my doctor or other health care professional, ask for and follow their instructions
- call and talk for as long as necessary to my supporters
- make arrangements to get help right away if my symptoms worsen

As with the other plans, make note of the parts of your plan that work especially well. If something doesn't work or doesn't work as well as you wish it had, develop a different plan or revise the one you used—when you are feeling better. Always look for new tools that might help you through difficult situations. Once you are past the crisis, review your wellness plan and plan for When Things are Breaking Down or Getting Worse. Add additional items that may help you if you find yourself in that situation again.

When Things Are Breaking Down or Getting Worse Plan:

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Crisis Planning

Identifying and responding to symptoms early reduces the chances that you will find yourself in crisis. It is important to confront the possibility of crisis, because in spite of your best planning and assertive action on your own behalf, you could find yourself in a situation where others will need to take over responsibility for your care. This is a difficult situation—one that no one likes to face. In a crisis, you may feel as if you are totally out of control. Writing a clear crisis plan when you are well, to instruct others about how to care for you when you are not well, helps you maintain responsibility for your own care. It will keep your family members and friends from wasting time trying to figure out what to do for you. It relieves the guilt that may be felt by family members and other caregivers who may have wondered whether they were taking the right action. It also ensures that your needs will be met and that you will get better as quickly as possible.

You need to develop your crisis plan when you are feeling well. However, you cannot do it quickly. Decisions like this take time, thought, and often collaboration with health care providers, family members, and other supporters. Over the next

few pages, information and ideas that others have included in their crisis plans will be shared. It can help you develop your own crisis plan.

The crisis plan differs from the other action plans in that it will be used by others. The other four sections of this planning process are implemented by you alone and need not be shared with anyone else; therefore you can write them using shorthand language that only you need to understand. However, when writing a crisis plan, you need to make it clear, easy to understand, and legible. While you may have developed other plans rather quickly, this plan is likely to take more time. Don't rush the process. Work at it for a while, then leave it for several days and keep coming back to it until you have developed a plan you feel has the best chance of working for you.

Once you have completed your crisis plan, give copies of it to the people you name in this plan as your supporters.

This crisis plan sample has nine parts to it, each addressing a particular concern.

Part 1 - Feeling Well

Write what you are like when you are feeling well. You can copy it from your Daily Maintenance Plan. This can help educate people who might be trying to help you. It might help someone who knows you well to understand you a little better, and for someone who doesn't know you well—or at all—it is very important.

Part 1 - When I am Feeling Well, I:

Crisis Planning, cont.

Part 2 - Symptoms

Describe symptoms or signs that would indicate to others that they need to take over responsibility for your care and make decisions on your behalf. This is hard for everyone.

No one likes to think that someone else will have to take over responsibility for his or her care. Yet, through a careful, well-developed description of symptoms or signs that you know would indicate to you that you can't make smart decisions anymore, you can stay in control even when things seem to be out of control. Allow yourself plenty of time to complete this section. Ask your friends, family members, and

other supporters for input, but always remember that the final determination is up to you. Be very clear and specific in describing each symptom in a way others can observe.

Don't just summarize; use as many words as it takes. Your list of symptoms might include:

- neglecting personal hygiene (for how many days?)
- not understanding what people are saying
- thinking I have the ability to do something I don't

When I am experiencing the following symptoms or signs, I may need assistance from others to help me:

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Part 3 - Supporters

In this next section of the crisis plan, list those people who you want to take over for you when the symptoms you listed in the previous section arise. Before listing people in this part of your plan though, talk with them about what you'd like from them and make sure they understand and agree to be in the plan. They can be family members, friends, or health care providers. They should be committed to following the plans you have written. When you first develop this plan, your list may be mostly health care providers. But, as you work on developing your support system, try to add more family members and friends because they will be more available.

It's best to have at least five people on your list of supporters. If you have only one or two, when they go on vacation or are sick, they might not be available when you really need them. If you don't have that many supporters now, you may want to work on developing new and/or closer relationships with people.

In the past, health care providers or family members may have made decisions that were not according to your wishes. You may not want them involved in your care again. If so, write on your plan "I do not want the following people involved in any way in my care or treatment." Then, list those people and why you don't want them involved. They may be people who have treated you badly in the past, have made poor decisions, or who get too upset when you are having a hard time.

Crisis Planning, cont.

Part 3 - Supporters (cont.)

Many people like to include a section that describes how they want possible disputes between their supporters settled. For instance, you may want to say that if a disagreement occurs about a course of action, a majority of your supporters can decide, or a

particular person will make the determination. You might also request that a consumer or advocacy organization become involved in the decision-making. If that is something you think is important, indicate it on this page.

When I am in crisis or not feeling well, my supporters and decision-makers include:

Name:	Contact Info:
Relationship:	
Name:	Contact Info:
Relationship:	
Name:	Contact Info:
Relationship:	
Name:	Contact Info:
Relationship:	
Name:	Contact Info:
Relationship:	

Crisis Planning

Part 3 - Supporters (cont.)

In the past, health care providers or family members may have made decisions that were not according to your wishes. You may not want them involved in your care again.

List those people and why you don't want them involved. They may be people who have treated you badly in the past, have made poor decisions, or who get too upset when you are having a hard time.

I **do not** want the following people involved in any way in my care or treatment:

Name:	Relationship:
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Reason for refusal:

Name:	Relationship:
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Reason for refusal:

Name:	Relationship:
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Reason for refusal:

Crisis Planning

Part 4 - Health Care Providers and Medications

Name your physician, pharmacist, and other health care providers, along with their phone numbers:

Name:	Phone Number / Contact Information:
Name:	Phone Number / Contact Information:
Name:	Phone Number / Contact Information:

Then list the following:

- the medications you are currently using, the dosage, and why you are using them
- the medications you would prefer to take if medications or additional medications became necessary—like those that have worked well for you in the past—and why you would choose those
- the medications that would be acceptable to you if medications became necessary and why you would choose those
- the medications that must be avoided—like those you are allergic to, that conflict with another medication, or that cause undesirable side effects—and give the reasons they should be avoided.

Also list any vitamins, herbs, alternative medications (such as homeopathic remedies), and supplements you are taking. Note which should be increased or decreased if you are in crisis, and which you have discovered are not good for you.

Crisis Planning, cont.

Part 4 - Health Care Providers and Medications (cont.)

I **currently** take the following medications:

Name (brand or generic)	Reason for taking	Dosage	Frequency

I **refuse** to take the following medications:

Name (brand or generic)	Reason for refusal

Crisis Planning, cont.

Part 4 - Health Care Providers and Medications (cont.)

Medications I would **prefer** to take if needed:

Name (brand or generic)	Reason for taking	Dosage	Frequency

Medications that are **acceptable** to take if needed:

Name (brand or generic)	Reason for taking	Dosage	Frequency

Crisis Planning, cont.

Part 5 - Treatments

There may be particular treatments that you like in a crisis situation and others that you would want to avoid. The reason may be as simple as “this treatment has or has not worked in the past,” or you may have some concerns about the safety of this treatment. Maybe you just don’t like the way a particular treatment makes you feel. Treatments here can mean medical procedures or the many possibilities of alternative therapy (such as injections of B vitamins, massages, or cranial sacral therapy).

In this part of your crisis plan, list the following:

- treatments you are currently undergoing and why
- treatments you would prefer if treatments or additional treatments became necessary and why you would choose those
- treatments that would be acceptable to you if treatments were deemed necessary by your support team
- treatments that must be avoided and why

Treatments I **would not accept** and why:

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Treatments I **would prefer** be used and why:

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Crisis Planning, cont.

Part 6 - Planning For Your Care

Describe a plan for your care in a crisis that would allow you to stay where you like. Think about your family and friends. Would they be able to take turns providing you with care? Could transportation be arranged to health care appointments? Is there a program in your community that could provide you with care part of the time, with family members and friends taking care of you the rest of the time? Many people who would prefer to stay at home rather than be hospitalized are setting up these kinds of plans.

You may need to ask your family members, friends, and health care providers what options are available. If you are having a hard time coming up with a plan, at least write down what you imagine the ideal scenario would be. For example, you may prefer to stay in a certain place or not in another.

If I need assistance in my care, I would prefer the following plan of care:

Crisis Planning, cont.

Part 7 - Treatment Facilities

Describe the treatment facilities you would like to use if family members and friends cannot provide you with care, or if your condition requires hospital care. Your options may be limited by the facilities available in your area and by your insurance coverage. If you are not sure which facilities you would like to use, write down a description of what the ideal facility would be like.

Then, talk to family members and friends about the available choices and call the facilities to request information that may help you in making a decision. Also include a list of treatment facilities you would like to avoid—such as places where you received poor care in the past.

When choosing a health care facility, I **prefer** one of the following:

Name:	City / State:
Name:	City / State:

Description of the **ideal** facility for me.

I would like to **avoid** the following facilities:

Name:	City / State:
Name:	City / State:

Crisis Planning, cont.

Part 8 - What You Need From Others

Describe what your supporters can do for you that will help you feel better. This part of the plan is very important and deserves careful attention. Describe everything you can think of that you want your supporters to do (or not do) for you. You may want to get more ideas from your supporters and health care professionals.

Things others could do for you that would help you feel more comfortable might include:

- listen to me without giving me advice, judging me, or criticizing me
- let me pace myself
- lead me through a relaxation or stress-reduction technique

Include a list of specific tasks you would like others to do for you, who you would like to do which task, and any specific instructions they might need. These tasks might include:

- buying groceries
- paying the bills
- taking out the garbage or trash

You may also want to include a list of things that you do not want others to do for you—things they might otherwise do because they think it would be helpful, but that might even be harmful or worsen the situation. These might include:

- forcing you to do anything, such as walking
- scolding you
- taking away your cigarettes or coffee

Some people also include instructions in this section on how they want to be treated by their caregivers. These instructions might include statements such as “kindly, but firmly, tell me what you are going to do,” “don’t ask me to make any choices at this point,” or “make sure to take my medications out of my top dresser drawer right away.”

Crisis Planning, cont.

Part 8 - What You Need From Others

What I Need From Others:

What I Don't Want Others to Do for Me:

How I Want to be Treated by My Caregivers:

Crisis Planning, cont.

Part 9 - Recognizing Recovery

In the last part of this plan, give your supporters information on recognizing when you have recovered enough to take care of yourself, and they no longer need to use this plan. Some examples are:

- when I am eating at least two meals a day
- when I am taking care of my personal hygiene needs daily
- when I can carry on a good conversation

How I Look and Act When I Can Take Care of Myself:

You have now completed your crisis plan.

Update it when you learn new information or change your mind about things. Date your crisis plan each time you change it and give revised copies to your supporters.

Crisis plans may not be legally binding.

It is recommended that you use your crisis plan in the development of an **advanced directive**.

You can find more information about advanced directives at Honoring Choices® Virginia (<https://honoringchoices-va.org/>).

You can also call them at 804.622.8141.

“THERE IS NEVER GOING TO BE AN END POINT. BUT DEFINITELY, I AM HAPPY TO COMPLETE A CERTAIN PART OF MY JOURNEY, AND THAT’S SOMETHING I WANT TO CELEBRATE.”

— HARSHVARDHAN RANE

Post-Crisis Planning

You have now done lots and lots of work. The experience you have gained through this process will guide you with ease through the Post-Crisis Plan. Post-crisis/relapse planning is the last part of your Action Plan for Prevention and Recovery. It is different from the other parts of your action plan because your needs change as you get better and better. You may want to think about and work on this plan in advance. However, because each difficult time you experience is different, your recovery from that time will also be different. Therefore, you will want to work on refining this part of the plan as soon as you begin to feel better.

Those people who have supported you through this hard time may be helpful in this process. If you are in a treatment facility and are working with staff to develop a discharge plan, you may want to let them know about your Post-Crisis Plan. Share your plan with people who are supporting you as you heal. Refer to your Wellness Toolbox and other parts of your Action Plan for Prevention and Recovery as you work on your Post-Crisis Plan. The next several pages include questions you may want to consider when creating your Post-Crisis Plan.

Arriving at Home/Feeling Better

- What are some things I might need as soon as I get home or as soon as I start feeling better?
- What can I ask others to do for me?
- What are some things that can wait until I feel better?
- Is there anything that needs to be done before I return home?
(such as asking someone to dispose of any alcohol left behind)
- What do I need to do for myself every day while I am recovering from this difficult time?
- What things and people do I need to avoid while I am recovering?
- What signs would show me that I may be beginning to feel worse?
- What wellness tools will I use if I am starting to feel worse?
- What actions do I need to take if I feel like I might return to alcohol or drug use?

Post-Crisis Planning, cont.

- What might I need to do to prevent further repercussions from this crisis-and when will I do these things?
- Who are the people I might need to thank?
- Who are the people I might need to apologize to? When and how might I do that?
- Who are the people I might need to make amends with and when and how will I do that?
- What possible medical, legal, or financial issues might need to be resolved and how will I do that?
Are there resources that I can draw on to help?
- What might I need to do to prevent further loss?
- How will I know when this phase is over and I can return to using my Daily Maintenance Plan as my guide to things to do for myself every day?
- Are there any changes in the first four sections of my Action Plan for Prevention and Recovery that might help prevent such a crisis in the future?
- Is there anything in my Post-Crisis Plan that I might need to change?

Also think about the following questions that can be answered only after the difficult time:

- What did I learn from this crisis?
- Am I beating myself up and using negative talk because of the crisis/relapse?
What do I need to do to accept it and move on?
- Are there changes I want to make in my lifestyle or life goals?

Post-Crisis Planning, cont.

Post-Crisis Plan

Using the answers to the previous questions and your Wellness Toolbox, develop as much of this plan as you want at this time.

Post-Crisis Plan:

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I am well enough to use the Post-Crisis Plan when I...

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Using Your Action Plan

You have now completed your action plans for prevention and recovery!

At first, you may need to spend 15-20 minutes each day reviewing your plans. People report that the morning, either before or after breakfast, is the best time to review the book. As you become familiar with your daily list, triggers, symptoms, and plans, you will find the review process takes less time and that you will know how to respond without even referring to this book.

Begin with Section 1. Review the list of how you are if you are all right. If you are all right, do the things on your list of things you need to do every day to keep yourself well. Also refer to the page of things you may need to do to see if anything “rings a bell” with you. If it does, make a note to yourself to include it in your day.

If you are not feeling all right, review the other sections to see where the symptoms you are experiencing fit. Then follow the action plan you have designed. For instance, if you feel very anxious and know that it is because one of your triggers happened, follow the plan in the triggers section. If there weren't any particular triggers but you noticed some early warning signs, follow the plan you designed for that section. If you notice symptoms that indicate things are breaking down, follow the plan you developed there.

If you are in a crisis situation, the plans can help you realize it so you can let your supporters know they should take over. However, in certain crisis situations, you may not be aware or willing to admit that you are in crisis. This is why having a strong team of supporters is so important. They will observe the symptoms you have reported and take over responsibility for your care, whether or not you are willing to admit you are in a crisis at that time. Distributing your crisis plan to your supporters and discussing it with them is absolutely essential to your safety and well-being.

You may want to take your plan or parts of your plan to the copy shop to get a reduced-size copy to carry in your pocket, purse, or glove compartment of your car. Then you can refer to the plan if triggers or symptoms come up when you are away from home.

People who are using these plans regularly and updating them as necessary are finding that they have fewer difficult times, and that when they do have a hard time, it is not as bad as it you are in a crisis situation, the plans can help you realize it so you can let your supporters know used to be and it doesn't last as long.

Further Resources

Vocal Virginia

www.vocalvirginia.org
Phone: 804-343-1777

NAMI Virginia

www.namivirginia.org
Phone: 888-486-8264

Substance Abuse and Addiction Recovery Alliance of Virginia (SAARA)

www.saara.org
Phone: 804-762-4445

Mental Health America of Virginia

www.mhav.org
Warm Line: 866-400-MHAV (6428)
Addiction Recovery Support
Warm Line: 833-4PEERVA (473-3782)

Substance Abuse and Mental Health Services Administration (SAMHSA)

Website: www.samhsa.gov

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Disclaimer

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