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[www.seekingsafety.org](http://www.seekingsafety.org) (section Training / Materials / Handouts)

## PTSD

**DSM-V definition:** After a trauma (the experience, threat, or witnessing of physical harm, e.g., rape, hurricane), the person has each of the following key symptoms for over a month, and they result in decreased ability to function (e.g., work, social life): intrusion (e.g., flashbacks, nightmares); avoidance (not wanting to talk about it or remember); negative thoughts and mood; and arousal (e.g., insomnia, anger).

Simple PTSD results from a single event in adulthood (DSM-V symptoms); Complex PTSD is not a DSM term but may result from multiple traumas, typically in childhood (broad symptoms, including personality problems)

**Rates:** 10% for women, 5% for men (lifetime, U.S.). Up to 1/3 of people exposed to trauma develop PTSD.

**Treatment:** if untreated, PTSD can last for decades; if treated, people can recover. Evidence-based treatments include cognitive-behavioral-- coping skills training and exposure, i.e., processing the trauma story.

## Substance Abuse

“The compulsion to use despite negative consequences” (e.g., legal, physical, social, psychological). Note that neither amount of use nor physical dependence define substance abuse.

**DSM-V term** is “substance-related and addictive disorder”, which can be mild, moderate, or severe.

**Rates:** 35% for men; 18% for women (lifetime, U.S.)

It is treatable disorder and a “no-fault” disorder (i.e., not a moral weakness)

Two ways to give it up: “cold turkey” (give up all substances forever; abstinence model) or “warm turkey” (*harm reduction*, in which any reduction in use is a positive step); *moderation management*, some people can use in a controlled fashion-- but only those not dependent on substances, and without co-occurring disorders).

## The Link Between PTSD and Substance Abuse

### About PTSD and substance abuse

**Rates:** Of clients in substance abuse treatment, 12%-34% have current PTSD. For women, rates are 33%-59%.

**Gender:** For women, typically a history of sexual or physical childhood trauma; for men, combat or crime

**Drug choice:** No one drug of choice, but PTSD is associated with severe drugs (cocaine, opioids); in 2/3 of cases the PTSD occurs first, then substance abuse.

### Recommended treatment strategies

Treat both disorders at the same time. Research supports this and clients prefer this.

Decide how to treat PTSD in context of active substance abuse. Options: (1) Focus on present only (coping skills, psychoeducation, educate about symptoms) [safest approach, widely recommended]. (2) Focus on past only (tell the trauma story) [high risk; works for some clients] (3) Focus on both present and past

Know that treatments helpful for either disorder alone may be problematic if someone has both disorders (e.g., emotionally intense exposure therapies, benzodiazepines), and should be evaluated carefully prior to use.

### Diversity Issues

In the US, rates of PTSD do not differ by race (Kessler et al., 1995). Substance abuse: Hispanics and African-Americans have lower rates than Caucasians; Native Americans have higher rates than Caucasians (Kessler et al., 1995, 2005). Rates of abuse increase with acculturation. Some cultures have protective factors (religion, kinship).

It is important to respect cultural differences and tailor treatment to be sensitive to historical prejudice. Also, terms such as “trauma,” “PTSD,” and “substance abuse” may be interpreted differently based on culture.

## Seeking Safety

### About Seeking Safety

✧ A present-focused model to help clients (male and female) attain safety from PTSD and substance abuse.

✧ Up to 25 topics that can be conducted in any order, doing as many as time allows:

- Interpersonal topics: Honesty, Asking for Help, Setting Boundaries in Relationships, Getting Others to Support Your Recovery, Healthy Relationships, Community Resources
- Cognitive topics: PTSD: Taking Back Your Power, Compassion, When Substances Control You, Creating Meaning, Discovery, Integrating the Split Self, Recovery Thinking

- Behavioral topics: Taking Good Care of Yourself, Commitment, Respecting Your Time, Coping with Triggers, Self-Nurturing, Red and Green Flags, Detaching from Emotional Pain (Grounding)
  - Other topics: Introduction/Case Management, Safety, Life Choices, Termination
- ✧ Designed for flexible use: can be conducted in group or individual format; for women, men, or mixed-gender; using all topics or fewer topics; in a variety of settings; and with a variety of providers (and peers).

### Key principles of *Seeking Safety*

- ☞ Safety as the goal for first-stage treatment (later stages are mourning and reconnection)
- ☞ Integrated treatment (treat both disorders at the same time)
- ☞ A focus on ideals to counteract the loss of ideals in both PTSD and substance abuse
- ☞ Four content areas: cognitive, behavioral, interpersonal, case management
- ☞ Attention to clinician processes: balance praise and accountability; notice your own emotional responses (fear, wish to control, joy in the work, disappointment); all-out effort; self-care

### Additional features

- \* “Headlines, not details” in relation to trauma.
- \* Identify meanings of substance use in context of PTSD (to remember, to forget, to numb, to feel, etc.)
- \* Optimistic: focus on strengths and future
- \* Help clients obtain more treatment and attend to daily life problems (housing, AIDS, jobs)
- \* Harm reduction model or abstinence
- \* 12-step groups encouraged, not required
- \* Empower clients whenever possible
- \* Make the treatment engaging: quotations, everyday language
- \* Emphasize core concepts (e.g., “You can get better”)

### Evidence Base

Seeking Safety is an evidence-based model, with over 40 published peer-reviewed study articles and consistently positive results. See [www.seekingsafety.org](http://www.seekingsafety.org), section Evidence. Studies include pilots, randomized controlled trials, multi-site trials.

**Resources on *Seeking Safety***. All below are available from [www.seekingsafety.org](http://www.seekingsafety.org).

- ✧ **Implementation / research articles / Fidelity Scale** can be freely downloaded.
- ✧ **Training**: training calendar and information on setting up a training (section Training).
- ✧ **Consultation**: on clinical implementation, research studies, evaluation projects.
- ✧ **Book**: *Seeking Safety: A Treatment Manual for PTSD and Substance Abuse*. Has the clinician guide and all client handouts. Also available in over 10 languages including **Spanish, French, German, Chinese**.
- ✧ **DVD training series**
- ✧ **Online learning**
- ✧ **Teaching Guide to Introduce Seeking Safety to your agency**
- ✧ **Poster**: poster of over 80 safe coping skills, full-color, scenic background; large format (24 x 30”) or 1-page format (in English or Spanish).
- ✧ **Card deck**: all of the safe coping skills and quotations on cards, with ideas for games. English or Spanish.
- ✧ **Magnets, key chain** to remind clients of the skills.

### Contact Information

Contact: *Treatment Innovations*, 28 Westbourne Road, Newton Centre, MA 02478; 617-299-1610 [phone]; [info@treatment-innovations.org](mailto:info@treatment-innovations.org) [email]; [www.seekingsafety.org](http://www.seekingsafety.org) or [www.treatment-innovations.org](http://www.treatment-innovations.org) [web]

**Would you like to be added to the Seeking Safety website to list that you conduct Seeking Safety?** If so, please email [info@seekingsafety.org](mailto:info@seekingsafety.org) your basic information OR fill out the online entry on the website. *Example*: Boston, MA: Karen Smith, LICSW; group and individual Seeking Safety; private practice with sliding scale. 617-300-1234. [Karensmith@netzero.com](mailto:Karensmith@netzero.com).

# Safe Coping Skills (Part 1)

from "Seeking Safety: Cognitive-Behavioral Therapy for PTSD and Substance Abuse"  
by Lisa M. Najavits, Ph.D.

- 1. Ask for help-** Reach out to someone safe
- 2. Inspire yourself-** Carry something positive (e.g., poem), or negative (photo of friend who overdosed)
- 3. Leave a bad scene-** When things go wrong, get out
- 4. Persist-** Never, never, never, never, never, never, never, never, never give up
- 5. Honesty-** Secrets and lying are at the core of PTSD and substance abuse; honesty heals them
- 6. Cry-** Let yourself cry; it will not last forever
- 7. Choose self-respect-** Choose whatever will make you like yourself tomorrow
- 8. Take good care of your body-** Eat right, exercise, sleep, safe sex
- 9. List your options-** In any situation, you have choices
- 10. Create meaning-** Remind yourself what you are living for: your children? Love? Truth? Justice? God?
- 11. Do the best you can with what you have-** Make the most of available opportunities
- 12. Set a boundary-** Say "no" to protect yourself
- 13. Compassion-** Listen to yourself with respect and care
- 14. When in doubt, do what's hardest-** The most difficult path is invariably the right one
- 15. Talk yourself through it-** Self-talk helps in difficult times
- 16. Imagine-** Create a mental picture that helps you feel different (e.g., remember a safe place)
- 17. Notice the choice point-** In slow motion, notice the exact moment when you chose a substance
- 18. Pace yourself-** If overwhelmed, go slower; if stagnant, go faster
- 19. Stay safe-** Do whatever you need to do to put your safety above all
- 20. Seek understanding, not blame-** Listen to your behavior; blaming prevents growth
- 21. If one way doesn't work, try another-** As if in a maze, turn a corner and try a new path
- 22. Link PTSD and substance abuse-** Recognize substances as an attempt to self-medicate
- 23. Alone is better than a bad relationship-** If only treaters are safe for now, that's okay
- 24. Create a new story-** You are the author of your life: be the hero who overcomes adversity
- 25. Avoid avoidable suffering-** Prevent bad situations in advance
- 26. Ask others-** Ask others if your belief is accurate
- 27. Get organized-** You'll feel more in control with lists, "to do's" and a clean house
- 28. Watch for danger signs-** Face a problem before it becomes huge; notice red flags
- 29. Healing above all-** Focus on what matters
- 30. Try something, anything-** A good plan today is better than a perfect one tomorrow
- 31. Discovery-** Find out whether your assumption is true rather than staying "in your head"
- 32. Attend treatment-** AA, self-help, therapy, medications, groups- anything that keeps you going
- 33. Create a buffer-** Put something between you and danger (e.g., time, distance)
- 34. Say what you really think-** You'll feel closer to others (but only do this with safe people)
- 35. Listen to your needs-** No more neglect- really hear what you need
- 36. Move toward your opposite-** E.g., if you are too dependent, try being more independent
- 37. Replay the scene-** Review a negative event: what can you do differently next time?
- 38. Notice the cost-** What is the price of substance abuse in your life?
- 39. Structure your day-** A productive schedule keeps you on track and connected to the world
- 40. Set an action plan-** Be specific, set a deadline, and let others know about it
- 41. Protect yourself-** Put up a shield against destructive people, bad environments, and substances
- 42. Soothing talk-** Talk to yourself very gently (as if to a friend or small child)

With appreciation to the Allies Program (Sacramento, CA) for formatting this Safe Coping List.

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# Safe Coping Skills (Part 2)

from "Seeking Safety: Cognitive-Behavioral Therapy for PTSD and Substance Abuse"  
by Lisa M. Najavits, Ph.D.

- 43. Think of the consequences-** Really see the impact for tomorrow, next week, next year
- 44. Trust the process-** Just keep moving forward; the only way out is through
- 45. Work the material-** The more you practice and participate, the quicker the healing
- 46. Integrate the split self-** Accept all sides of yourself; they are there for a reason
- 47. Expect growth to feel uncomfortable-** If it feels awkward or difficult you're doing it right
- 48. Replace destructive activities-** Eat candy instead of getting high
- 49. Pretend you like yourself-** See how different the day feels
- 50. Focus on now-** Do what you can to make today better; don't get overwhelmed by the past or future
- 51. Praise yourself-** Notice what you did right; this is the most powerful method of growth
- 52. Observe repeating patterns-** Try to notice and understand your re-enactments
- 53. Self-nurture-** Do something that you enjoy (e.g., take a walk, see a movie)
- 54. Practice delay-** If you can't totally prevent a self-destructive act, at least delay it as long as possible
- 55. Let go of destructive relationships-** If it can't be fixed, detach
- 56. Take responsibility-** Take an active, not a passive approach
- 57. Set a deadline-** Make it happen by setting a date
- 58. Make a commitment-** Promise yourself to do what's right to help your recovery
- 59. Rethink-** Think in a way that helps you feel better
- 60. Detach from emotional pain (grounding)-** Distract, walk away, change the channel
- 61. Learn from experience-** Seek wisdom that can help you next time
- 62. Solve the problem-** Don't take it personally when things go wrong- try to just seek a solution
- 63. Use kinder language-** Make your language less harsh
- 64. Examine the evidence-** Evaluate both sides of the picture
- 65. Plan it out-** Take the time to think ahead-it's the opposite of impulsivity
- 66. Identify the belief-** For example, shoulds, deprivation reasoning
- 67. Reward yourself-** Find a healthy way to celebrate anything you do right
- 68. Create new "tapes"** Literally! Take a tape recorder and record a new way of thinking to play back
- 69. Find rules to live by-** Remember a phrase that works for you (e.g., "Stay real")
- 70. Setbacks are not failures-** A setback is just a setback, nothing more
- 71. Tolerate the feeling-** "No feeling is final", just get through it safely
- 72. Actions first and feelings will follow-** Don't wait until you feel motivated; just start now
- 73. Create positive addictions-** Sports, hobbies, AA...
- 74. When in doubt, don't-** If you suspect danger, stay away
- 75. Fight the trigger-** Take an active approach to protect yourself
- 76. Notice the source-** Before you accept criticism or advice, notice who's telling it to you
- 77. Make a decision-** If you're stuck, try choosing the best solution you can right now; don't wait
- 78. Do the right thing-** Do what you know will help you, even if you don't feel like it
- 79. Go to a meeting-** Feet first; just get there and let the rest happen
- 80. Protect your body from HIV-** This is truly a life-or-death issue
- 81. Prioritize healing-** Make healing your most urgent and important goal, above all else
- 82. Reach for community resources-** Lean on them! They can be a source of great support
- 83. Get others to support your recovery-** Tell people what you need
- 84. Notice what you can control-** List the aspects of your life you do control (e.g., job, friends...)

## Detaching From Emotional Pain (Grounding)

### WHAT IS GROUNDING?

Grounding is a set of simple strategies to *detach from emotional pain* (for example, drug cravings, self-harm impulses, anger, sadness). Distraction works by **focusing outward on the external world**-- rather than inward toward the self. You can also think of it as “distraction,” “centering,” “a safe place,” “looking outward,” or “healthy detachment.”

### WHY DO GROUNDING?

When you are overwhelmed with emotional pain, you need a way to detach so that you can gain control over your feelings and stay safe. As long as you are grounding, you cannot possibly use substances or hurt yourself! Grounding “anchors” you to the present and to reality.

Many people with PTSD and substance abuse struggle with either feeling too much (overwhelming emotions and memories) or too little (numbing and dissociation). In grounding, you attain balance between the two-- conscious of reality and able to tolerate it.

#### Guidelines

- ◆ Grounding can be done any time, any place, anywhere and no one has to know.
- ◆ Use grounding when you are: faced with a trigger, having a flashback, dissociating, having a substance craving, or when your emotional pain goes above 6 (on a 0-10 scale). Grounding puts healthy distance between you and these negative feelings.
- ◆ Keep your eyes open, scan the room, and turn the light on to stay in touch with the present.
- ◆ Rate your mood before and after to test whether it worked. Before grounding, rate your level of emotional pain (0-10, where means “extreme pain”). Then re-rate it afterwards. Has it gone down?
- ◆ No talking about negative feelings or journal writing. You want to distract away from negative feelings, not get in touch with them.
- ◆ Stay neutral-- no judgments of “good” and “bad”. For example, “The walls are blue; I dislike blue because it reminds me of depression.” Simply say “The walls are blue” and move on.
- ◆ Focus on the present, not the past or future.
- ◆ Note that grounding is *not* the same as relaxation training. Grounding is much more active, focuses on distraction strategies, and is intended to help extreme negative feelings. It is believed to be more effective for PTSD than relaxation training.

### WAYS TO GROUND

#### Mental Grounding

- ☞ Describe your environment in detail using all your senses. For example, “The walls are white, there are five pink chairs, there is a wooden bookshelf against the wall...” Describe objects, sounds, textures, colors, smells, shapes, numbers, and temperature. You can do this anywhere. For example, on the subway: “I’m on the subway. I’ll see the river soon. Those are the windows. This is the bench. The metal bar is silver. The subway map has four colors...”
- ☞ Play a “categories” game with yourself. Try to think of “types of dogs”, “jazz musicians”, “states that begin with ‘A’”, “cars”, “TV shows”, “writers”, “sports”, “songs”, “European cities.”
- ☞ Do an age progression. If you have regressed to a younger age (e.g., 8 years old), you can slowly work your way back up (e.g., “I’m now 9”; “I’m now 10”; “I’m now 11”...) until you are back to your current age.
- ☞ Describe an everyday activity in great detail. For example, describe a meal that you cook (e.g., “First I peel the potatoes and cut them into quarters, then I boil the water, I make an herb marinade of oregano, basil, garlic, and olive oil...”).
- ☞ Imagine. Use an image: *Glide along on skates away from your pain; change the TV channel to get to a better show; think of a wall as a buffer between you and your pain.*
- ☞ Say a safety statement. “My name is \_\_\_\_; I am safe right now. I am in the present, not the past. I am located in \_\_\_\_; the date is \_\_\_\_.”
- ☞ Read something, saying each word to yourself. Or read each letter backwards so that you focus on the letters and not on the meaning of words.
- ☞ Use humor. Think of something funny to jolt yourself out of your mood.
- ☞ Count to 10 or say the alphabet, very s..l..o..w..l..y.
- ☞ Repeat a favorite saying to yourself over and over (e.g., the Serenity Prayer).

### **Physical Grounding**

- Run cool or warm water over your hands.
- Grab tightly onto your chair as hard as you can.
- Touch various objects around you: a pen, keys, your clothing, the table, the walls. Notice textures, colors, materials, weight, temperature. Compare objects you touch: Is one colder? Lighter?
- Dig your heels into the floor-- literally “grounding” them! Notice the tension centered in your heels as you do this. Remind yourself that you are connected to the ground.
- Carry a *grounding object* in your pocket-- a small object (a small rock, clay, ring, piece of cloth or yarn) that you can touch whenever you feel triggered.
- Jump up and down.
- Notice your body: The weight of your body in the chair; wiggling your toes in your socks; the feel of your back against the chair. You are connected to the world.
- Stretch. Extend your fingers, arms or legs as far as you can; roll your head around.
- Walk slowly, noticing each footstep, saying “left”, “right” with each step.
- Eat something, describing the flavors in detail to yourself.
- Focus on your breathing, noticing each inhale and exhale. Repeat a pleasant word to yourself on each inhale (for example, a favorite color or a soothing word such as “safe,” or “easy”).

### **Soothing Grounding**

- ❖ Say kind statements, as if you were talking to a small child. E.g., “You are a good person going through a hard time. You’ll get through this.”
- ❖ Think of favorites. Think of your favorite color, animal, season, food, time of day, TV show.
- ❖ Picture people you care about (e.g., your children; and look at photographs of them).
- ❖ Remember the words to an inspiring song, quotation, or poem that makes you feel better (e.g., the Serenity Prayer).
- ❖ Remember a safe place. Describe a place that you find very soothing (perhaps the beach or mountains, or a favorite room); focus on everything about that place-- the sounds, colors, shapes, objects, textures.
- ❖ Say a coping statement. “I can handle this”, “This feeling will pass.”
- ❖ Plan out a safe treat for yourself, such as a piece of candy, a nice dinner, or a warm bath.
- ❖ Think of things you are looking forward to in the next week, perhaps time with a friend or going to a movie.

### **WHAT IF GROUNDING DOES NOT WORK?**

- 
- Practice as often as possible, even when you don’t “need” it, so that you’ll know it by heart.
  - Practice faster. Speeding up the pace gets you focused on the outside world quickly.
  - Try grounding for a loooooonnnnnngggg time (20-30 minutes). And, repeat, repeat, repeat.
  - Try to notice whether you do better with “physical” or “mental” grounding.
  - Create your own methods of grounding. Any method you make up may be worth much more than those you read here because it is *yours*.
  - Start grounding early in a negative mood cycle. Start when the substance craving just starts or when you have just started having a flashback.

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## Taking Good Care of Yourself

Answer each question below “yes” or “no.”; if a question does not apply, leave it blank.

### DO YOU...

- ♥ Associate only with safe people who do not abuse or hurt you? YES \_\_\_ NO \_\_\_
- ♥ Have annual medical check-ups with a:
  - Doctor? YES \_\_\_ NO \_\_\_
  - Dentist? YES \_\_\_ NO \_\_\_
  - Eye doctor? YES \_\_\_ NO \_\_\_
  - Gynecologist (women only)? YES \_\_\_ NO \_\_\_
- ♥ Eat a healthful diet? (healthful foods and not under- or over-eating) YES \_\_\_ NO \_\_\_
- ♥ Have safe sex? YES \_\_\_ NO \_\_\_
- ♥ Travel in safe areas, avoiding risky situations (e.g., being alone in deserted areas)? YES \_\_\_ NO \_\_\_
- ♥ Get enough sleep? YES \_\_\_ NO \_\_\_
- ♥ Keep up with daily hygiene (clean clothes, showers, brushing teeth, etc.)? YES \_\_\_ NO \_\_\_
- ♥ Get adequate exercise (not too much nor too little)? YES \_\_\_ NO \_\_\_
- ♥ Take all medications as prescribed? YES \_\_\_ NO \_\_\_
- ♥ Maintain your car so it is not in danger of breaking down? YES \_\_\_ NO \_\_\_
- ♥ Avoid walking or jogging alone at night? YES \_\_\_ NO \_\_\_
- ♥ Spend within your financial means? YES \_\_\_ NO \_\_\_
- ♥ Pay your bills on time? YES \_\_\_ NO \_\_\_
- ♥ Know who to call if you are facing domestic violence? YES \_\_\_ NO \_\_\_
- ♥ Have safe housing? YES \_\_\_ NO \_\_\_
- ♥ Always drive substance-free? YES \_\_\_ NO \_\_\_
- ♥ Drive safely (within 5 miles of the speed limit)? YES \_\_\_ NO \_\_\_
- ♥ Refrain from bringing strangers home to your place? YES \_\_\_ NO \_\_\_
- ♥ Carry cash, ID, and a health insurance card in case of danger? YES \_\_\_ NO \_\_\_
- ♥ Currently have at least two drug-free friendships? YES \_\_\_ NO \_\_\_
- ♥ Have health insurance? YES \_\_\_ NO \_\_\_
- ♥ Go to the doctor/dentist for problems that need medical attention? YES \_\_\_ NO \_\_\_
- ♥ Avoid hiking or biking alone in deserted areas? YES \_\_\_ NO \_\_\_
- ♥ Use drugs or alcohol in moderation or not at all? YES \_\_\_ NO \_\_\_
- ♥ Not smoke cigarettes? YES \_\_\_ NO \_\_\_
- ♥ Limit caffeine to fewer than 4 cups of coffee per day or 7 colas? YES \_\_\_ NO \_\_\_
- ♥ Have at least one hour of free time to yourself per day? YES \_\_\_ NO \_\_\_
- ♥ Do something pleasurable every day (e.g., go for a walk)? YES \_\_\_ NO \_\_\_
- ♥ Have at least three recreational activities that you enjoy (e.g., sports, hobbies— but not substance use!) ?  
YES \_\_\_ NO \_\_\_
- ♥ Take vitamins daily? YES \_\_\_ NO \_\_\_
- ♥ Have at least one person in your life that you can truly talk to (therapist, friend, sponsor, spouse)? YES \_\_\_ NO \_\_\_
- ♥ Use contraceptives as needed? YES \_\_\_ NO \_\_\_
- ♥ Have at least one social contact every week? YES \_\_\_ NO \_\_\_
- ♥ Attend treatment regularly (e.g., therapy, group, self-help groups)? YES \_\_\_ NO \_\_\_
- ♥ Have at least 10 hours per week of structured time? YES \_\_\_ NO \_\_\_
- ♥ Have a daily schedule and “to do” list to help you stay organized? YES \_\_\_ NO \_\_\_
- ♥ Attend religious services (if you like them)? YES \_\_\_ NO \_\_\_ N/A \_\_\_
- ♥ Other: \_\_\_\_\_ YES \_\_\_ NO \_\_\_

YOUR SCORE: (total # of “no’s) \_\_\_\_\_

**Notes on self-care:**

Self-Care and PTSD. People with PTSD often need to learn to take good care of themselves. For example, if you think about suicide a lot, you may not feel that it’s worthwhile to take good care of yourself and may need to make special efforts to do so. If you were abused as a child you got the message that your needs were not important. You may think, “If no one else cares about me, why should I?” Now is the time to start treating yourself with respect and dignity.

Self-Care and Substance Abuse. Excessive substance use is one of the most extreme forms of self-neglect because it directly harms your body. And, the more you abuse substances the more you are likely to neglect yourself in other ways too (e.g., poor diet, lack of sleep).

Try to do a little more self-care each day. No one is perfect in doing everything on the list at all times. However, the goal is to take care of the most urgent priorities first and to work on improving your self-care through daily efforts. “Progress, not perfection.”

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### Creating Meaning in PTSD and Substance Abuse

<b>MEANINGS THAT <i>HARM</i></b>	<b>DEFINITION</b>	<b>EXAMPLES</b>	<b>MEANINGS THAT <i>HEAL</i></b>
<b>Deprivation Reasoning</b>	Because you have suffered a lot, you deserve substances (or other destructive behavior).	-- <i>I've had a hard time, so I'm entitled to get high.</i> -- <i>If you went through what I did, you'd cut your arm too.</i>	<b>Live Well.</b> A happy, functional life will make up for your suffering far more than will hurting yourself. Focus on positive steps to make your life better.
<b>I'm Crazy</b>	You believe that you shouldn't feel the way you do	-- <i>I must be crazy to be feeling this upset.</i> -- <i>I shouldn't have this craving.</i>	<b>Honor Your Feelings.</b> You are not crazy. Your feelings make sense in light of what you have been through. You can get over them by talking about them and learning to cope.
<b>Time Warp</b>	It feels like a negative feeling will go on forever.	-- <i>This craving won't stop.</i> -- <i>If I were to cry, I would never stop.</i>	<b>Observe Real Time.</b> Take a clock and time how long it really lasts. Negative feelings will usually subside after a while; often they will go away sooner if you distract with activities.
<b>Actions Speak Louder than Words</b>	Show distress by actions, or people won't see the pain.	-- <i>Scratches on my arm show what I feel</i> -- <i>An overdose will show them.</i>	<b>Break Through the Silence.</b> Put feelings into words. Language is the most powerful communication for people to know you.
<b>Beating Yourself Up</b>	In your mind, you yell at yourself and put yourself down.	-- <i>I'm a loser.</i> -- <i>I'm a no-good piece of dirt.</i>	<b>Love—Not Hate--Creates Change.</b> Beating yourself up does not change your behavior. Care and understanding promote real change.
<b>The Past is the Present</b>	Because you were a victim in the past, you are a victim in the present.	-- <i>I can't trust anyone.</i> -- <i>I'm trapped.</i>	<b>Notice Your Power.</b> Stay in the present: I am an adult (no longer a child); I have choices (I am not trapped); I am getting help (I am not alone).

<b>The Escape</b>	An escape is needed (e.g., food, cutting) because feelings are too painful	<i>--I'll never get over this; I have to cut myself. --I can't stand cravings; I have to smoke a joint.</i>	<b>Keep Growing.</b> Emotional growth and learning are the only real escape from pain. You can learn to tolerate feelings and solve problems.
<b>Ignoring Cues</b>	If you don't notice a problem it will go away.	<i>--If I just ignore this toothache it will go away --I don't abuse substances.</i>	<b>Attend to Your Needs.</b> Listen to what you're hearing; notice what you're seeing; believe your gut feeling.
<b>Dangerous Permission</b>	You give yourself permission for self-destructive behavior.	<i>--Just one won't hurt. --I'll just buy a bottle of wine for a new recipe</i>	<b>Seek Safety.</b> Acknowledge your urges and feelings and then find a safe way to cope with them.
<b>The Squeaky Wheel Gets the Grease</b>	If you get better you will not get as much attention from people	<i>--If I do well, my therapist won't notice me. --No one will listen to me unless I'm in distress.</i>	<b>Get Attention from Success.</b> People love to pay attention to success. If you don't believe this, try doing better and notice how people respond to you.
<b>It's All My Fault</b>	Everything that goes wrong is due to you.	<i>--The trauma was my fault --If I have a disagreement with someone, it means I'm wrong.</i>	<b>Give Yourself a Break.</b> Don't carry the world on your shoulders. When you have conflicts with others, try taking a 50-50 approach (50% is their responsibility, 50% is yours).
<b>I am My Trauma</b>	Your trauma is your identity; it is more important than anything else	<i>--My life is pain. --I am what I have suffered..</i>	<b>Create a Broad Identity.</b> You are more than what you have suffered. Think of your different roles in life, your varied interests, your goals and hopes.