

What Is Substance Abuse?

The simplest definition of “substance abuse” is that a substance has control over your life. In the language of the American Medical Association, it is the “compulsive use of a substance resulting in physical, psychological, or social harm . . . and continued use despite that harm” (Rinaldi et al., 1988). The substance may become more important than your relationships, your work, and all else.

Substance abuse is widely considered a medical illness. It is not due to being “bad,” “lazy,” or “just wanting to have a good time.”

No one fully understands why some people become addicted and others don’t. It may be due to biology, terrible life experiences, or some combination. Whatever the cause, it is essential to learn how to overcome the illness. It can be done!

Some people are unsure whether they truly have a problem with substances, or they may hear conflicting opinions from others. It may be helpful to ask yourself whether either of the following formal definitions seems true for you.

DO YOU HAVE A PROBLEM WITH SUBSTANCE ABUSE?

If you have a problem with substances, you have either *substance abuse* (a *mild* version of the disorder) or *substance dependence* (a *severe* version of the disorder). In popular language, “substance abuse” is used to refer to any problem with substances.

Substance Abuse

★ Check off (✓) any that are true for you, being really honest with yourself.

- Substance use that results in failure to fulfill obligations (e.g., work, parenting).
- Repeated substance use in situations that are physically dangerous (e.g., driving).
- Repeated legal problems resulting from substance use (e.g., disorderly conduct).
- Continued substance use despite repeated problems from it (e.g., arguments with people).

If any one above is true for you, you would be diagnosed with substance abuse.

Substance Dependence

★ Check off (✓) any that are true for you, being really honest with yourself.

- Q** Your **quantity** of substance use has increased.
- U** You are **unable to control** your substance use.
- I** Your substance use **interferes** with your responsibilities (e.g., home, work, parenting).
- T** Your **time** is heavily devoted to using the substance.
- N** You **need** more of the drug to obtain the same effect (“tolerance”).
- O** **Other aspects** of your life have been damaged by substance use (e.g., health, social life), but you continue to use.
- W** Physical **withdrawal** symptoms occur if you stop using the substance. Also, you may take the substance to try to manage your withdrawal symptoms.

If any three above are true for you, you would be diagnosed with substance dependence, which you can remember by the acronym “QUIT NOW.”

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How Substance Abuse Prevents Healing from PTSD

There is no doubt that you want to heal from PTSD. No one wants to live with the suffering of that disorder. But are you aware of how your substance abuse is preventing you from healing from PTSD? The following list may help.

★ Check off (✓) any that feel true for you.

ABUSING SUBSTANCES . . .

Makes PTSD symptoms worse. Substances can make you feel more depressed, more suicidal, and less stable. Even if substance abuse appears to “solve” some PTSD symptoms for a short while (such as getting to sleep or “numbing out” for a few hours), in the long run it never solves them.

Prevents you from knowing yourself. With substances, *you* get lost. To heal from PTSD, you need to become more and more aware of who you really are—without substances.

Does not get your needs met. You may be using substances to feel loved, to accept yourself, to feel less pain, or to feel nurtured. However, substances cannot give you these. You need to learn safe coping methods to gratify these very important needs.

Stalls your emotional development. Although you may be an adult in terms of your age, emotionally you may have become “stuck” somewhere earlier in your development, due to PTSD, substance abuse, or both. If you give up substances, you can keep growing emotionally.

Isolates you. You cannot have good relationships when high. One of the main features of PTSD is isolation: keeping secrets, having to lie about what happened, feeling alone. Substance abuse perpetuates that aloneness.

Keeps you from coping with feelings. It can feel unbearable to face the feelings associated with PTSD, and it may be tempting to use substances to “self-medicate” them. But true healing means learning to gain control over your feelings through safe coping. Healing *is* possible if you can give up substances that are getting in the way.

Takes away your control. One of the most difficult aspects of PTSD is that you had no control over the trauma. The very nature of substance abuse is that it also takes away your control—it runs your life. Take back your power by giving up substances!

Makes you hate yourself. You can’t feel good about yourself when you are being controlled by a substance. With PTSD, you may already dislike yourself; substance abuse just adds to that.

Is a way of neglecting yourself. Using substances impairs your health, your mind, your relationships, your self-worth, and your spirituality. If you suffered childhood neglect or abuse, substance abuse may be a repetition of that pattern, except that now you are doing it to yourself.

Healing from PTSD requires all of your care and attention—substance abuse keeps you stuck.

Choose a Way to Give Up Substances

→ **Quit all at once.** This is the abstinence model developed in AA; it's also called quitting "cold turkey." It works well for some people. It may feel harder to start, but may be easier to stick to.

→ **Try an experiment.** Try this "warm turkey" rather than "cold turkey" method—give up substances just for a week to see what it's like. Then reevaluate it in therapy.

→ **Cut down gradually.** This is called harm reduction. Making progress, even slowly, is better than staying where you're at. If you're using every day, you can start by using every other day. If you're using cocaine and marijuana, you can give up cocaine but keep using marijuana. Eventually, you can give up substances completely once you achieve these smaller successes.

A key question: "Do I have to give up substance use completely?" It is clear that people with PTSD and substance abuse need to quit substances completely—at least for a while—to successfully heal from PTSD. Later, once their PTSD recovery is complete, they can explore whether any use is safe for them or not. Many people find that once they recover from PTSD, they no longer even want to use. In the substance abuse field, there is a lot of controversy about whether people with a history of substance abuse can ever use safely. Some people believe that "moderation management" or "controlled drinking" are possible, meaning that using may be okay as long as it is kept within certain limits. However, this is not considered safe for anyone who has a history of severe substance use. At this point, just know that you need to give up substances to heal from your PTSD.

★ *What plan can you commit to starting today? Choose one below, then fill in the "Notes."*

(1) Quit all at once (the AA or "cold turkey" model).

(2) Try an experiment (the "warm turkey" model). Please write down *how long* you'll give up substances: ____ week(s).

(3) Cut down gradually (the "harm reduction" model). Write down on the back of this page exactly what substance(s) you'll cut down or give up. Also, write down how much and how often you'll be using at most (you can always use less, but not more!).

Notes:

(a) I also agree to throw out my _____ (substances) and all related paraphernalia.

(b) I also agree to ask _____ (people in my life) not to offer me substances or use around me.

Signed: _____ Dated: _____

 *If I cannot stick to my plan, I will leave a _____ [phone message? note?] for my _____ [therapist? sponsor? partner? friend?] to let him or her know within ____ hours.*

(cont.)

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SUGGESTIONS

☞ ***Get rid of substances in your environment to help your plan work.*** Throw out your stash of substances and tell people in your life not to offer you any.

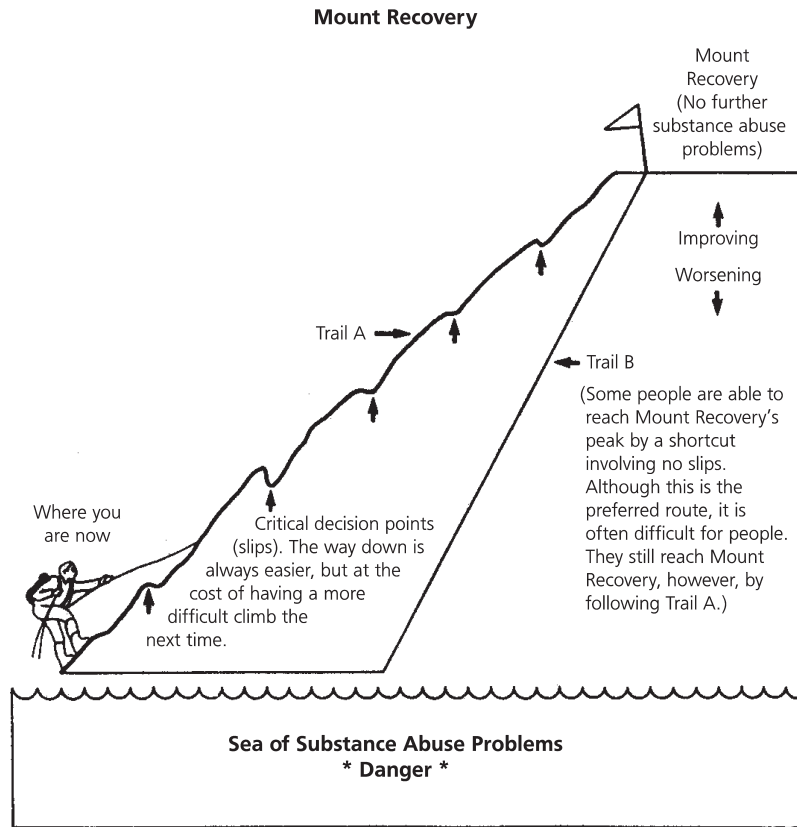
☞ ***You can combine “Try an experiment” and “Cut down gradually” if you need to.*** If you are extremely afraid of reducing your use, you can try to give up a little just for a short time.

☞ ***Keep in mind that many people have strong opinions about how to give up substances.*** However, at this point, no one truly knows what works best, for whom, and how. Any of the three methods above may work as long as you keep at it. If you try one way and it doesn't work, you can reevaluate it with your therapist and then try another plan.

No matter what happens, you can cope safely without substances!

Climbing Mount Recovery

RECOVERY FROM SUBSTANCE ABUSE IS LIKE CLIMBING A MOUNTAIN



★ What do you notice about Trail A and Trail B?

*Trail A is trial and error—mistakes along the way, but people eventually make it to the top.
Trail B is perfect—no problems, just a direct path to the top. Very few people do it this way!*

The message: Either trail will get you there.

If you do not like to imagine mountain climbing, select another image that works for you: A trip to a foreign country? Running a marathon? Learning to drive a car? Or none at all?

PREPARING FOR YOUR TRIP

As with any other journey, you need to be prepared. Just as for climbing a mountain you need to take hiking boots, food, a tent, and a flashlight, for your recovery trip you will need to do the following:

→ **Tell everyone close to you where you’re heading** and ask them to help you with it (e.g., not using substances around you, never offering you substances).

(cont.)

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→ **Be prepared for “bad weather.”** Some people find that as they stop using substances, their PTSD gets worse for a while. Just like a storm, this does *not* last forever. It simply means that you need to face feelings that have been hidden by substance abuse. Accept and honor those feelings. Strive to cope with them as best as you can without using.

→ **Take your list of Safe Coping Skills**—they’re just as vital as food to survive on this mountain! It’s also best to pack a list of reasons not to use substances, and a list of rewards for yourself for each day you don’t use. Keep all of these in your wallet for easy access.

→ **Be prepared for down times.** On all adventures, there are times that are not fun. When you give up substances, you may feel miserable and deprived. Just keep climbing up the mountain—better times await you ahead. The view from the top is incredible!

→ **Take “maps.”** Just like having maps and a tourist guide, you’ll need to learn everything you can about your journey—from self-help groups, books, educational videos, and talking to people who have recovered.

→ **Carry a phone so that you can reach out for help if you get stranded.**

→ **Set a starting date.** How about today?

→ **Don’t take guilt, self-hatred, blame**—these weigh you down.

→ **Remember that there is never a good reason to use.** Even if you’re homeless, had a fight, and lost all of your money in a single day—none of this means “It’s okay to use.” Using a substance will not get you a home, get you out of a fight, or get your money back . . . but it *will* make you *less* able to cope with your problems.

→ **Remember that as you reduce substance use, your PTSD may get worse;** be prepared for this, seek help, and remember that it won’t last forever.

→ **Surround yourself with safety**—safe people, safe places, safe things.

→ **Never “test” yourself by seeing whether you can turn down a substance.** Just as you should never test your safety by walking down a dark alley at night, you should never test your recovery by walking into a substance abuse situation.

→ **Know that cravings are normal.** As long as you don’t actually use, you’re okay.

→ **Fight “AVE” (the “abstinence violation effect”).** This is a common pattern in recovery: If you use once, you think you might as well keep using because you’ve already failed. No—don’t keep using! Just stop and pick yourself up. Having 1 drink is better than having 10 drinks.

→ **Remember the bottom line: To heal from PTSD, strive to be substance-free!**

→ **Memorize the “Three Main Thoughts That Lead to Substance Use” (see the box below).** They are like snakes in the grass—they will jump out and hurt you when you’re not looking.

THREE MAIN THOUGHTS THAT LEAD TO SUBSTANCE USE:		
⌈ “I’ll just have one” ⌋		
	‡ “I can handle this alone” ‡	
		⊗ “I don’t care” ⊗

★ Is there anything else you need for your journey? _____

Mixed Feelings

★ *What do you think? Circle "true" or "false," then see the answers at the bottom of the page.*

- | | | |
|--|------|-------|
| 1. It's best to wait until you feel motivated to give up substances. | True | False |
| 2. Most people have mixed feelings about giving up substances. | True | False |
| 3. There's something wrong with you if you still want to use substances. | True | False |
| 4. People who recover are totally sure they want to give up substances. | True | False |

◆ **You may have mixed feelings about giving up substances.** You may alternate between wanting to recover from substance abuse and then not wanting to. Such mixed feelings are called "ambivalence." This is a very common stage in early recovery. Despite all the suffering you go through with substance abuse, it is familiar. Giving up substances can feel like the loss of a close friend. *Most* people who give up substances frequently have mixed feelings about it. If you talk to people who have succeeded in achieving long-term abstinence, they too felt mixed about it when they were in early recovery.

◆ **With PTSD, there may also be mixed feelings about getting better.** PTSD can feel very familiar, and can even become your identity. It can be scary to move forward and let go of it: "If I keep feeling pain, this shows how bad the trauma was," "If I get better, it's like my abuser has won," "I don't have a right to get better when my buddies died on the battlefield." To let go of such suffering may feel as though it invalidates what happened to you.

◆ **How can you cope with mixed feelings?** You can have lots of mixed feelings; it is normal to have them. But always remember that no matter what you *feel*, you need to focus your *actions* on safety. This means not using substances, sticking with treatment, and talking about your mixed feelings openly. You don't have to *feel* like giving up substances or PTSD symptoms. Isn't that a relief?

[Answers to questions: F, T, F, F]

Self-Understanding of Substance Use

If you use a substance, the key is to understand *why*. No shame, no blame, no guilt, no “beating yourself up”—these all prevent you from understanding yourself.

Note, however, that *understanding* substance use does not mean *excusing* it. It does not mean that it was right or okay to use. Substance use is never a safe way of coping for someone who is in recovery from PTSD and substance abuse. Thus, “seek explanations but not excuses.”

Here are some ways to seek understanding about your substance use.

NOTICE THE CHOICE POINT

Every time you use, you make a decision to do so. “Own” the decision—notice what you said to yourself to justify it. If you listen closely, every time you use a substance, you’ll hear a need that’s being neglected: a need for pleasure, connection, relaxation, love, celebration, symptom relief. Some examples: “When my friend passed the joint, I felt like I wanted to be part of things,” or “I saw the liquor store and said, ‘I’m stressed and just want one drink.’” These are all legitimate needs that deserve attention, but not with substances. Also, it may be helpful not to talk about your substance use as “slips” or “backsliding”—these make it sound as though they were accidents. Using a substance is never an accident; it is always a choice. Owning the choice can help you understand yourself and your needs.

Explore your unconscious. There may be times when you use and you truly do not know how it happened. Particularly for people who dissociate (which is common in PTSD), you may find yourself sitting at a bar with a drink in hand, not knowing how you got there. The best strategy for this is to explore what unconscious *part* of yourself led you to use. This is sometimes called the “Jekyll–Hyde personality” or the “split self”—there are feelings that you are having trouble letting yourself feel, and they sneak up and surprise you. For example, you may be having urges to use but denying them (“I shouldn’t feel this way, so I won’t let myself think about it”); or you may be angry but not fully aware of it (“I don’t have a right to be angry”). Just know that every time you use and are not conscious of it, you *can* become more conscious with effort. Here too, listen for unmet needs that require attention.

REPLAY THE SCENE IN SLOW MOTION

As if you are watching a movie in slow motion, describe everything that led up to using, trying to understand what motivated you to use and being *really* honest with yourself:

- Who were you with?
- Where were you?
- What happened that day?
- What were you feeling and thinking?
- What time was it?
- What coping did you attempt?
- What was the dialogue you went through, either with yourself or others?

Now try to figure out a better way to cope next time—replay the movie in slow motion, but this time with a better ending. Again, no shame or blame—just identify how you can treat yourself better next time. Look at the Safe Coping Skills list to identify better solutions.

(cont.)

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For example, if you used because . . .

You felt upset . . . then talk to someone.

You can't sleep at night . . . then talk to a doctor who specializes in sleep problems.

Your sister just died and you miss her . . . then let yourself cry and mourn the loss.

EXPLORE THE MEANING OF YOUR SUBSTANCE USE

For people with PTSD, substance use can have many meanings. Substance use can be a way of getting to sleep, numbing the pain, giving you control, helping you feel accepted by people, committing slow suicide, getting back at an abuser, crying out for help, showing others how much pain you feel, blotting out memories, accessing memories . . . or many other meanings. Each time you use, try to understand the meaning.

NOTICE THE COST

Just as there's "no free lunch," there is no free substance use. Both emotionally and financially, substance use has a cost. Using may feel good for a few minutes or hours, but you'll pay the cost later. Think about the *interpersonal costs* (who is it hurting?); the *financial costs* (is this a good use of your money?); and the *emotional costs* (how will it make you feel about yourself?).

NOTICE HOW YOU RELATE TO YOURSELF AFTER USING

Many people with PTSD "beat themselves up" after using. They attack, reject, shame, and yell at themselves. This prevents growth because you're not able to hear, with an open heart and open mind, your needs and motivations for using. Another destructive pattern is perfectionism: If you use once, you harshly view it as failure and so keep on using, turning 1 drink into 10. Notice the voice in your head after you use: Is it the voice of someone who is kind and caring? Or harsh and judgmental? (And does the voice remind you of anyone who treated you harshly when you were growing up?)

Self-Help Groups

Some people love self-help groups, some don't. Such groups include Alcoholics Anonymous (AA), Narcotics Anonymous (NA), Cocaine Anonymous (CA), SMART Recovery, Dual Diagnosis, Rational Recovery, Secular Organization for Sobriety (SOS), Gamblers Anonymous (GA), Sexaholics Anonymous (SA), Emotions Anonymous, Al-Anon, Alateen, Parents Anonymous, and Co-Dependents Anonymous.

*** If you've never tried self-help groups, you owe it to yourself to check them out.**

*** A group may help.** Anything to support your recovery is worth doing. A self-help group can give you a community of people who are struggling as you are, education about substance abuse, hope for the future, and wisdom from people who have recovered.

*** If you've tried a group and don't like it, try other groups** to see if you can find one you like. The culture of each group is different. There are also a lot of specialty groups: meetings for women, gays, combat veterans, beginners, nonsmokers, and others. Meetings also have different formats, such as speaker meetings, step meetings, and discussion meetings. Discover what works for you.

*** If you don't like the spirituality of twelve-step groups, try alternatives** such as SMART Recovery, Rational Recovery, or SOS. Many people who don't like AA like these, because they take a rational rather than spiritual approach and do not view addiction as a lifelong disease.

*** Set a weekly goal that's realistic for you, and then stick to it.** Better to promise yourself two meetings a week and go, than to promise yourself seven and not go at all.

*** Remember that self-help groups are designed to focus only on addiction, not PTSD.** Use the groups for what they can give, and don't feel that you need to talk about your PTSD unless it is welcome there. Many people don't understand PTSD, so don't be surprised by that.

*** Sometimes you may hear people take an antimedication stand** ("Using Prozac is just as bad as using cocaine") or an antitherapy stand ("All you need is AA"). This is not the official policy of self-help groups, and you can ignore that advice.

*** Some people with PTSD have difficulty with self-help groups** because they can't be around a lot of people due to social fears or paranoia, because they get drawn into unhealthy relationships with people there, or for any number of other reasons. If you've really tried to get involved in self-help and still don't like it, that's okay. No one should make you feel bad or wrong for not going. It is a personal choice, and there are many paths for healing.

Substance Abuse and PTSD: Common Questions

Because the link between substance abuse and PTSD has only recently been studied, you may hear many things about this dual diagnosis. Below are some ideas to help sort out what you hear.

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Question: *Is it true that I have to get clean from substances before I can work on my PTSD?*

Response: This is one of the most common messages. However, experts generally believe that the two disorders *can* and *should* be treated at the same time. This is called integrated treatment and can prevent the “revolving door” problem—you get clean, become overwhelmed by the PTSD, use substances again, and keep going around and around.

You can work on both disorders at the same time, as long as the focus is on safety throughout your recovery. Everyone can benefit from “current-focused treatment.” This means learning to cope with both PTSD and substance abuse in the present (e.g., learning about the two disorders, practicing new skills to gain control over them, and becoming aware of how they impact each other). In addition, for some people “past-focused treatment” may also be useful; this means talking in detail about your past (sometimes called “exposure therapy” or “mourning”). Note, however, that such treatment is very upsetting; it is important to work with your therapist to assess whether you are safe to do such work now, or should wait until later in your recovery. (See the next question below for more on this issue.)

It is also important to emphasize that most experts agree that getting clean *is* necessary in the long term for full healing from PTSD (see the topic *PTSD: Taking Back Your Power* for more on full healing). Using substances prevents healing from PTSD.

You may be aware that some people—and usually well-meaning people—will tell you a very extreme message, such as “You cannot work on PTSD until you have been abstinent for a certain number of months, such as 6 months or a year.” Or they may say, “The only problem that really matters is your substance abuse—that’s the only thing you need to focus on.” If you have been involved in treatment that deals only with PTSD but not substance abuse, you may have heard the reverse message. Again, the key point is that working on both disorders at the same time is currently believed to be the best treatment for this dual diagnosis. Both your PTSD *and* your substance abuse matter, and learning to cope safely with both right now is highly recommended.

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Question: *Is it helpful to talk about my painful trauma memories right away in treatment?*

Response: For some people it may be helpful; for others it may not. This is a complex issue, and too little is known about it at this point. However, “integrated treatment” (treating both PTSD and substance abuse at the same time) does not mean that you have to delve into painful memories of the past while you are trying to get “clean.” For some people this is too overwhelming, and clinical experience suggests that it may lead to relapsing on substances if adequate coping skills are not in place. That is why the *Seeking Safety* treatment is designed to teach you coping skills that can make it possible to talk about painful material later, when you may be more able to handle it.

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Question: Do I have to go to AA or other self-help groups?

Response: Some people with PTSD and substance abuse find them extremely helpful; some dislike them; and some are neutral. If you like them, that's terrific. If you have tried them and do not like them, that is okay too—there are many ways to get clean and sober, and you need to find the ways that work for you (e.g., psychotherapy, drug counseling, medications). Sometimes people feel pressured to go to self-help groups, and this pressure can make them feel bad about themselves (which does not help their PTSD!). It is entirely valid to have your own views on self-help groups, particularly if you have given them a chance. If you have not tried them, it is important to give them a chance. However, some people with severe social anxiety may first need to make progress in individual treatment, such as psychotherapy, before trying them. In short, people heal in many different ways, and you need to respect your own path and find what fits you as a person. The best bet is to shop around.

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Question: I have problems other than just substance abuse and PTSD; is it okay to focus on those too?

Response: Not only is it okay, it is recommended. You are a person, not a label. People with substance abuse and PTSD often have additional problems, such as other addictions (e.g., gambling, eating disorders) and other general life problems (e.g., lack of a job, homelessness, medical problems, domestic violence). Working on whatever problems are most important to you right now and most central to your survival is usually the best. Also, be aware that you can apply the *Seeking Safety* treatment to any problems for which you find it helpful.

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Question: I'll feel better once I'm abstinent, right?

Response: You may or may not in the short term, but over the long term you will. Not enough is known at this point about the typical pattern, but clinical experience suggests that some people feel worse before they feel better. This is important to remember, because if you get clean and start to feel bad, you can know that it truly will go away over time: Just hang in there, get support, and cope, cope, cope. Sometimes people talk about dual diagnoses as if they are all the same, and they may tell you that you'll feel better quickly with abstinence. But dual diagnoses are not all the same. For example, people with substance abuse and depression sometimes find that as soon as they get "clean," their depression goes away. With PTSD, this is believed to be less likely.

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Question: Is it true that substance abuse is "self-medication" of my PTSD?

Response: Many people report this. They experienced trauma, then became addicted to substances as a misguided attempt to cope with the psychological pain of the trauma. However, other people had substance abuse first and experienced trauma after that (sometimes due to the substance abuse, such as hanging out with unsafe people or getting into danger when high). For others, they grew up in homes where both trauma and substance abuse were always present. Regardless of which way the two disorders originally developed, once you have both, they often become intertwined. This means that right now you need help with both.

Keep in mind that much more research is needed to turn these responses into facts. These are emerging views based on what we know so far from research and clinical writings. However, it is important to keep conducting research and learning from people who actually have PTSD and substance abuse to understand more about these topics. Just as you need to keep learning, so too do the fields of substance abuse and mental health!

Acknowledgments: In Handout 1, the definitions of substance use disorders are derived from the American Psychiatric Association (1994). In Handout 3, the ways to give up substances are drawn from Miller and Page (1991). In Handout 4, the title and illustration are from Sobell and Sobell (1993) (copyright 1993 by The Guilford Press; reprinted by permission) and "Three Main Thoughts That Lead to Substance Abuse" are from DuWors (1992). Ask your therapist for guidance if you would like to locate any of these sources.

Ideas for a Commitment

Commit to one action that will move your life forward!

*It can be anything you feel will help you, or you can try one of the ideas below.
Keeping your commitment is a way of respecting, honoring, and caring for yourself.*

- ✦ Option 1: Try a twelve-step group meeting, such as AA, and see how you like it.
- ✦ Option 2: Read the following quotation:

"What can be imagined can be achieved."

—T. Peavey

Write a description of your life as a person who is able to overcome PTSD and substance abuse. What would your day-to-day life be like? How would you relate to others? How would you manage frustrations and disappointments? If you want, give this "person" a name to better remember this vision.

- ✦ Option 3: Create a list of rewards for yourself to choose from for every day you don't use substances—then really give yourself a reward if you earn it.
- ✦ Option 4: Take a piece of paper. Draw a line down the middle. In the left column, write a list of "advantages" of using substances. In the right column, write a list of "disadvantages" of using substances. Which side matters more?
- ✦ Option 5: Imagine the following scene:

You have made a commitment to "try an experiment" and not use any substances for a week. By Wednesday, you feel overwhelmed, you can't sleep, and you desperately want to feel better for a little while. You fight with yourself, but end up smoking a joint.

Rehearse how you could seek self-understanding about this incident (or any other relevant scene from your life). If possible, rehearse it out loud with a friend, sponsor, or therapist and get feedback.

Quotation

**“Not to laugh,
not to lament,
not to judge,
but to understand.”**

—Baruch Spinoza
(17th-century Dutch philosopher)