





TeamSolutions

Recognizing and Responding to Relapse



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Content Objectives:

After completing this workbook, participants will be familiar with:

1. What relapse means and the potential personal cost of relapse.
2. Warning signs and how to monitor for possible signs of relapse.
3. How to respond to warning signs of relapse.
4. How to develop a plan and illness management strategies to reduce the risk of relapse.

Treatment Plan Objectives:

1. Participants will acquire knowledge during each session as evidenced by improving at least 25% from pre- to post-Topic Assessment.
2. Participants will choose and use knowledge as evidenced by selecting and attaining one personal practice goal per session.
3. Participants will demonstrate skill acquisition as evidenced by demonstrating, choosing, and using at least one strategy for recognizing and responding to relapse.



Family Friendly Session – good for use in family sessions or groups

1

What Does Relapse Mean? Facilitator Notes

Main Learning Points:

This is the first session. Every session except this one will begin with a review of the Main Learning Points from the last session.

Tips for this Session

1. Emphasize that relapse is a common experience with many long-term illnesses.
2. Discuss how a relapse might get in the way of what a person wants in life.

Potential Problem for this Session

Participants seem unable to identify how learning about relapse might be helpful to them.

Possible Responses

Encourage openness to peer ideas.

1. Perhaps as others share their answers, they might hear something that fits for them.
2. As participants listen to other people's answers, they may come up with an idea of their own.

Suggestion for Topic Introduction and Relevance to Participants

"Today we are going to begin a new workbook, 'Recognizing and Responding to Relapse.' The first session is titled 'What Does Relapse Mean?'"

"Do you know someone who had a bad cold or some other illness? He may have started feeling a lot better and thought he wasn't sick any more. But then he relapsed, and it was even worse the second time. Has that ever happened to someone you know?"

(Listen to responses. Do not confirm the meaning of relapse if you are using the pre- and post-topic assessment, as one of the questions is the definition of "relapse.")

"Today we're going to talk about relapse and what it means for us."

"Let's answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. C 2. C 3. B 4. A

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Relapse means:

- A. Going to the bank.
- B. Taking any medicine.
- C. Getting sick again.
- D. Feeling calm and collected.

2. When people relapse:

- A. They always end up in the hospital or jail.
- B. They should be ashamed and never mention it.
- C. They get sick again.
- D. It is always because they stop taking medicine.

3. What is important for managing any long-term illness?

- A. Learning how to cure the illness.
- B. Learning to recognize and respond to relapse.
- C. Knowing when to stop taking medicine.
- D. Taking fewer pills if side effects bother you.

4. People with many different kinds of illnesses have relapses.

- A. True B. False

Topic Assessment



5. I am confident I know how to keep from having a relapse.

- | | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree | Unsure |

6. This information is important for me to know.

- | | | | | |
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| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

What Does Relapse Mean?

Objectives for this Session

1. Define relapse.
2. Identify 3 of your signals of possible relapse.

Relapse means getting sick again. Anyone who has a long-term illness can have a relapse. When people go through a relapse, the symptoms of their illness get stronger, and symptoms that had gone away may come back. The main goal of treatment is to manage the illness, meaning to keep it under control, so symptoms do not get in the way of reaching life goals.

Main Learning Point #1

Relapse means getting sick again.

Learning to recognize and respond to relapse is important for managing any long-term illness. Reducing the chances of relapse is very important. A relapse is likely to be a setback for most people. Relapse can make it hard for you to get what you want out of life.

Main Learning Point #2

Learning to recognize and respond quickly to relapse is important.

People with many different kinds of illnesses have relapses. Relapse does not happen only to people who have a mental illness. It is very common for people who have long-term illnesses to have relapses. Examples of long-term illnesses are high blood pressure, diabetes, high cholesterol, and asthma.

What Does Relapse Mean?

(continued)

Example: Fred had been treated with medicine for high blood pressure for several years. He thought he was doing well. When he went to see his doctor recently, Fred found out that his blood pressure was too high again. Fred had a relapse. Fred told his doctor that because he was feeling well, he was only taking his medicine every other day. His doctor recommended that he keep cutting down on salt and take his medicine daily as he should. Fred agreed to do both. The changes helped Fred get his blood pressure back to normal again.



What are other examples of relapse? _____

Main Learning Point #3

People with many different kinds of illnesses have relapses.

Describing relapse. Relapse isn't exactly the same from person to person. People who are recovering from a mental illness have described their own relapses in many ways:

1. "I have trouble sleeping, and my symptoms get worse."
2. "My mood changes quickly, and I don't always know why."
3. "I feel like I'm sliding back down into the illness."
4. "I start thinking that people are talking about me or watching me."
5. "I get grouchy and irritable with other people."
6. "I don't need to sleep as much, but I still have a lot of energy."

What Does Relapse Mean?

(continued)



Discussion:

Have you ever experienced a relapse?

Whether you have never had a relapse or have had several, this workbook is written for you. How might learning about relapse be helpful to you?

Review & Moving Forward



The *main learning points* of this session are:

1. _____
2. _____
3. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support network. I will ask _____ to read it and talk with me about relapse.
- ☐ **3. WRITE.** I will write down my thoughts and feelings about what relapse means to me. _____

- ☐ **4. OTHER:** _____

If there is time left before the end of the session, you might talk about your personal practice goals. How will you **remember** and **complete** your goal by the next session?

2

Personal Cost of Relapse
Facilitator Notes**Main Learning Points from last session:**
What Does Relapse Mean?

1. Relapse means getting sick again.
2. Learning to recognize and respond quickly to relapse is important.
3. People with many different kinds of illnesses have relapses.

Review Personal Practice Options from last session.**Remember**

It is important to acknowledge and discuss participants' successes, progress, and challenges.

Tips for this Session

At the end of the session, or if you want to extend this material to two sessions, consider having a group activity. Participants could look for pictures from magazines and catalogs or make drawings that represent their life goals. The group could talk about the pictures together and make one collective collage, or each person could make his or her own collage.

General Tip

"People remember more of what they learned if they were actively involved in an emotionally gratifying learning experience."
— Alice Medalia, Ph.D.

Part of the opportunity in choosing to be a mental health professional is being able to "create a sense of community" by including all participants in different creative ways.

For example, in this session, there are two lists, which is a good opportunity to ask people to read aloud. Remember, you might help reduce stress if you have participants read in an orderly fashion (for example, the person on the far right starts, the person sitting next to him or her reads next, and so on). In this way, people can anticipate when it will be their turn to read.

Suggestion for Topic Introduction
and Relevance to Participants

"You may know of someone who has lost a job, quit school, or had some other problem because of a relapse. Has that ever happened to you or someone you know? Would anyone like to tell us about it?"

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. B 2. C 3. A 4. B

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 1: What Does Relapse Mean?



Main Learning Points of Session 1

What were the main learning points of Session 1? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Relapse means getting s_____k again.
2. Learning to r_____e and respond to relapse is important.
3. People with many different kinds of i_____s have relapses.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Managing relapse:

- A. Means never going to the hospital.
- B. Can help me stay in control of my life and reach my goals.
- C. Means taking medicine just when I think I need it.
- D. Always means I should take extra pills on a bad day.

2. Most people want to manage their illness so they can:

- A. Stop taking medicine.
- B. Stay out of jails and hospitals.
- C. Get and keep what they want in life.
- D. Be cured forever.

3. Meeting life goals is a reason for people to work to get better and stay well.

- A. True B. False

4. Relapse never gets in the way of reaching life goals.

- A. True B. False

5. I am confident I understand the importance of managing relapse.

- | | | | | | |
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| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree | Unsure |

Topic Assessment



6. This information is important for me to know.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

At the **end** of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Personal Cost of Relapse

Objectives for this Session

1. Identify 2 ways relapse might affect your ability to reach your personal goals.
2. Identify 2 things you might lose if you have a relapse.

Managing relapse means being able to recognize early signs that you might be getting sick again. It also means acting quickly to get the right help to lower your risk of getting sicker. Managing relapse can help you reach your goals.

Recognizing and responding to relapse quickly may help you move your life forward.

Main Learning Point #1

Managing relapse can help you reach your goals.

Most people want to take care of their illness so they can get and keep what they want in life. When an illness is not well managed, the symptoms might be more bothersome and upsetting. When symptoms are worse, it can be more difficult to reach your life goals.



Personal life goals. Most people have certain goals they want to achieve in life. Some of your goals might be to get things that you want. You might also have goals to keep certain things that are important to you. Mark your personal life goals:

- ☐ I want to get or keep a close friendship.
- ☐ I would like to get or keep a boyfriend or girlfriend.
- ☐ I hope to continue my education.
- ☐ I would like to become or remain an active member of a church, synagogue, mosque, or other place of worship.
- ☐ I want to get or keep my own place to live.
- ☐ I would like to get or keep a job.
- ☐ I want to be a good parent or grandparent.
- ☐ It is important to me to get or stay healthy.

Personal Cost of Relapse (continued)



- ☐ My goal is to get or stay independent.
☐ Other: _____

Main Learning Point #2

Most people want to take care of their illnesses so they can get and keep what they want in life.



Pick one goal that is most important to you: _____

Relapse means getting sick again. A relapse can get in the way of reaching life goals. For most people, the personal cost, or consequence, of relapse is very high. When you relapse, you are likely to have a serious setback. You lose sight of, or fall behind on, your goals. However, relapse does not mean that you can never reach your life goals.



Have you thought about what might happen if you were to have a relapse?

If I had a relapse:

- ☐ I might lose my apartment or home.
☐ I could have more problems in my relationships with family and friends.
☐ I might do or say things that I will regret later.
☐ I would probably lose my job.
☐ I would probably lose some of my independence.
☐ I might fall behind in school.
☐ I would be very discouraged.
☐ I think I would be less motivated to keep working toward recovery.
☐ I would not be able to drive my car.
☐ Other: _____

Which one of these is most important to you? _____

Personal Cost of Relapse (continued)

Main Learning Point #3

A relapse can get in the way of reaching life goals.



Everyone has different reasons for wanting to manage their illness and reduce the chance of getting sick again. Write or talk about the most important reason you want to manage your illness: _____

Review & Moving Forward



The *main learning points* of this session are:

1. _____
2. _____
3. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask _____ to talk with me about my past relapses, how I got off track, and how it made it harder to reach my goals.
- ☐ **3. WRITE.** I will think about and write down what is most important for me to keep in my life, and how I can keep it by managing relapse. I will bring it with me to my next session.
- ☐ **4. OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ **5. CREATE.** I am going to create a poem, essay, song, poster, painting, or drawing about my life goals. I will bring it to the next session to share with other members of the group.

Motivate to Practice. How will practicing help me?

3

Medication Changes Can Cause a Relapse Facilitator Notes

Main Learning Points from last session: *Personal Cost of Relapse*

1. Managing relapse can help you reach your goals.
2. Most people want to take care of their illnesses so they can get and keep what they want in life.
3. A relapse can get in the way of reaching life goals.

Review Personal Practice Options from last session.

Remember

You can refer to the “*Facilitator’s Delivery Checklist*” when using Team Solutions materials as a reminder of important facilitator tips.

Tips for this Session

1. If time permits, consider role-playing conversations that will provide experiential learning and bring the main points of this session to life. Examples:
 - a. Involve participants in a role-play asking a pharmacist about whether a certain cold medicine will interfere with their medicine.
 - b. Engage participants in a role-play talking to someone on their treatment team about how they can remember to take medicine as prescribed without skipping or forgetting doses.
 - c. Provide coaching as participants role-play talking honestly with their prescriber about the reasons they stopped or cut down on their medicine.
2. Remember that everyone learns differently. Look for places in the session where participants can read, write, or respond to you. We all learn best by *doing* rather than just *listening*.

Suggestion for Topic Introduction and Relevance to Participants

"Many people have trouble taking medicine as prescribed, regardless of what illness they have. What are some problems that get in the way of taking medicine?"

(Wait for responses.)

"Can you think of a time you stopped taking your medicine or you did not take all of your medicine? What were some of the reasons you stopped? What was going on?"

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. C 2. A 3. B 4. D

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 2: Personal Cost of Relapse



Main Learning Points of Session 2

What were the main learning points of Session 2? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Managing r_____e can help you reach your goals.
2. Most people want to take care of their i_____s so they can get and keep what they want in life.
3. A relapse can get in the way of reaching life g_____s.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Taking over-the-counter medicine:

- A. Is never a good idea because it might not mix with my medicine.
- B. Is always okay as long as I am careful about taking the right amount of what I need.
- C. Might cause a relapse, so I will talk to my treatment team before taking any over-the-counter medicine.
- D. Will always help me get better, so I should just take some as quickly as I can.

2. Taking over-the-counter medicine might cause a relapse.

- A. True B. False

3. Changing medicines:

- A. Is always 100% safe, and the new medicine is guaranteed to work better than the old one.
- B. Might cause a relapse, so I will keep an eye on my symptoms during medicine changes.
- C. Means I am sicker than I thought, and I will never get better.
- D. Is rare because most people take one medicine for life.

Topic Assessment



4. Skipping, forgetting, or taking less medicine:

- A. Is no big deal as long as I do not stop taking it.
- B. Will not make any difference because if I take it most of the time, it is good enough.
- C. Is okay on days I feel good because I do not need as much.
- D. Can cause a relapse.

5. I am confident I know the types of medicine changes that might trigger a relapse.

- | | | | | | |
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| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree | Unsure |

6. This information is important for me to know.

- | | | | | |
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| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Medication Changes Can Cause a Relapse

Objectives for this Session

1. Identify 3 different kinds of medicine changes that can cause a relapse.
2. Talk about at least 1 way to reduce your risk of relapse.

Many relapses are started by medicine changes. Knowing about the kinds of medicine changes that could trigger a relapse can help you make wise choices and reduce your risk of relapse. The choices you make each day can help you move forward in your recovery.

Taking over-the-counter medicine may cause a relapse. Some medicines, even ones you can buy at the supermarket, might keep your prescribed medicines from working and make your symptoms worse. Diet pills and cold medicines are examples of non-prescription medicines that may get in the way of your recovery. It is a good idea to talk with your nurse, pharmacist, or prescriber before you take any over-the-counter medicines.

Main Learning Point #1

Taking over-the-counter medicine may cause a relapse.



What over-the-counter medicines have you taken in the past? _____

Which member of your treatment team would you ask about whether it is okay to take a certain over-the-counter medication? _____

Medication Changes Can Cause a Relapse

(continued)

Changing medicines might trigger a relapse. Many people go through medication changes on their way to recovery. Your prescriber may want to change your medicine from time to time. Usually, the goal is to find a medicine that works better for you. Other times the goal is to choose a medicine with fewer unwanted side effects. The chance to feel better may make it worth a change in medication.

Unfortunately, there is no way of knowing if a different medicine will work well for you. It is possible that a new medicine might not control your symptoms as well as expected. Pay close attention to your symptoms whenever your medication is changed. Talk with your treatment team if your symptoms don't improve. Let them know if your symptoms get worse.

Main Learning Point #2

Changing medicine might cause a relapse.

Skipping, forgetting, taking less, or stopping medicine can trigger a relapse. Sometimes people change the amount of medicine they take. Many people who have long-term illnesses have trouble remembering to take their medicine as prescribed. Sometimes they take less medicine on purpose. Other times they may accidentally take less medicine. Either way, it is not something to be ashamed of.

Medication Changes Can Cause a Relapse (continued)



Taking an honest look at your medicine habits can help you choose and practice better habits that support your recovery goals. What medicine changes have you made in the past?

- ☐ 1. **I have skipped doses.** Sometimes I skip medicine. I do not always take it the right way. In the past week, I have skipped ____ doses.
- ☐ 2. **I have forgotten doses.** Once in a while, I forget to take some of my medicine. I want to take it the right way, but it is hard to remember to take it correctly. In the past week, I have forgotten to take ____ doses.
- ☐ 3. **I have taken less.** In the past, I cut down on how much medicine I took. I kept taking it, but I took less than was prescribed. The last time I cut down on my medicine was _____.
- ☐ 4. **I have stopped taking medicine.** In the past, I stopped taking one or more of the medicines that were prescribed for me. The last time I stopped taking some of my medicine was _____.

Write or discuss your answers to the questions below.
Describe a example of one of the answers you marked above:

What ideas do you have for how to solve these problems without making medicine changes on your own?

Medication Changes Can Cause a Relapse (continued)



Talk with Your Treatment Team. Unfortunately, not taking all your medicine is likely to make it harder for you to get better. There could be a lot of different reasons for taking less medicine. If you have reasons for taking your medication differently than prescribed, talk with your treatment team. They can help you solve problems and figure out ways to take your medicine the right way.

When I have reasons for changing my medicine, the member of my treatment team I will talk to is _____. I will discuss my reasons for wanting to make changes and talk about ways to solve the problems I'm having.

Main Learning Point #3

Skipping, forgetting, taking less, and stopping medicine can cause a relapse.

Take medication the right way every day, even when symptoms go away.
When it is working well, medicine does a good job of controlling your symptoms. When your symptoms aren't bothering you, that means your medicine is doing its job.

Main Learning Point #4

Take medicine the right way every day, even when symptoms go away.



In your own words, write your experiences and thoughts about taking medicine to reach your recovery goals: _____

Review & Moving Forward



The *main learning points* of this session are:

1. _____
2. _____
3. _____
4. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about over-the-counter medicines I am taking.
- ☐ **3. PLAN.** I will talk with my prescriber about the medicine I stopped taking and work out a medicine plan we both agree on.
- ☐ **4. OTHER:** _____

4

Substances Make Relapse More Likely Facilitator Notes

Main Learning Points from last session: *Medication Changes Can Cause a Relapse*

1. Taking over-the-counter medicine may cause a relapse.
2. Changing medicine might cause a relapse.
3. Skipping, forgetting, taking less, and stopping medicine can cause a relapse.
4. Take medication the right way, even when symptoms go away.

Review Personal Practice Options from last session.



Note

This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

Tips for this Session

If time permits, consider having participants make a poster. Involve participants in drawing a poster that illustrates the substances that are commonly used in their community.

Suggestion for Topic Introduction and Relevance to Participants

"Today we are going to keep talking about what can trigger a relapse. What are substances? Who can give me an example of a substance?"

(Encourage responses. If all responses are around drugs and alcohol, ask, "Are all substances street?" Be prepared to talk about tobacco and caffeine, if someone asks about legal substances.)

"What do you think would happen if you lived totally substance-free for three weeks? How hard or easy would that be for you to do? What changes do you think you would notice? What do substances have to do with recovery and relapse? How might learning about substances and relapse be helpful to you?"

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. A 2. B 3. A 4. C

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 3: Medication Changes Can Cause a Relapse



Main Learning Points of Session 3

What were the main learning points of Session 3? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Taking o_____r-the-counter medicine may cause a relapse.
2. C_____g medicine might cause a relapse.
3. Skipping, forgetting, taking less, and s_____g medicine can cause a relapse.
4. Take medication the r_____t way every day, even when symptoms go away.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Substances keep medicine from working and make symptoms worse.

- A. True B. False

2. The more substances I use:

- A. The less medicine I will need.
B. The more medication I will probably need to control my symptoms.
C. The fewer unwanted side effects I am likely to get.
D. The better my medicine will control my symptoms.

3. Using street drugs, alcohol, and caffeine makes relapse more likely.

- A. True B. False

4. Living substance-free:

- A. Is likely to increase my risk of relapse.
B. Can make it harder to control symptoms and relapse.
C. Helps me move closer to recovery.
D. Releases neurotoxins in the brain that increase the possibility of unwanted side effects.

5. I am confident I know the types of substances that can make a relapse more likely.

- | | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree | Unsure |

Topic Assessment



6. This information is important for me to know.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

At the **end** of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Substances Make Relapse More Likely

Objectives for this Session

1. Identify 4 examples of substances that can make a relapse more likely.
2. Recognize the impact substances can have on recovery and relapse.



Substances are part of most people's life. Caffeine, tobacco, and alcohol are probably the most frequently used substances in our lives. It is easy to get into the habit of drinking caffeine, smoking cigarettes, and drinking alcohol. Many people do. How about you? What substances do you use?

- ☐ **Caffeine.** I drink soda, tea, coffee, hot chocolate, or other things with caffeine.
- ☐ **Tobacco.** I smoke cigarettes, chew tobacco, smoke a pipe, dip snuff, or smoke cigars.
- ☐ **Alcohol.** I drink beer, wine, whiskey, mixed drinks, liquors, wine coolers, or other things with alcohol.
- ☐ **Street Drugs.** I use street drugs such as pot, crack, speed, cocaine, LSD, angel dust, methamphetamine, or other similar substances.
- ☐ **None of the above.** I never drink caffeine, use tobacco, drink alcohol, or take street drugs.

Most of the time, we do not think about caffeine and tobacco as addictive substances. Many substances are such a regular part of life that they do not seem to have any effect. You might not notice that they do much of anything, especially after you use them for a long time. What happens when you stop using one of the substances you marked above?

Substances Make Relapse More Likely (continued)

Substances keep medicine from working and make symptoms worse. Even though you might not realize it, substances are probably getting in the way of your recovery. Substances can make it a lot harder to keep your brain chemistry in balance, even if you only use them once in a while. That is because caffeine, alcohol, and street drugs all work by changing brain chemistry. That is what substances do. They change the chemical balance in your brain.



What are your thoughts about how substances affect your recovery? _____

Main Learning Point #1

Substances keep medicine from working and make symptoms worse.

The more substances you use, the more medicine you will probably need to control symptoms. Substances are addictive, so the body slowly demands more and more over time. Your substance use tends to go up instead of down. Substances keep medicine from working and make symptoms worse. So, using more substances usually means more medicine is needed to control symptoms. Substance use also makes it harder to treat the illness.



What are disadvantages of taking more medicine to control symptoms? _____

Main Learning Point #2

The more substances you use, the more medicine you may need to control your symptoms.

Substances Make Relapse More Likely

(continued)

Using street drugs, alcohol, and caffeine make relapse more likely. Substances increase the risk of relapse. Since substances work by changing brain chemistry, they keep medicine from working. When medicine is less effective and does not work as well as it should, relapse is more likely. It does not take much to trigger a relapse when brain chemistry is already out of balance.

Cut Back or Quit? People who are recovering from mental illnesses often ask questions about substances, such as “How much is too much?” or “How much is okay?” The answer is less is better and zero is best. Cutting down on substance use is a good idea. Quitting is the choice that is most likely to give you the best chance of controlling your symptoms.

Choosing to quit or cut down on one substance at a time can help you reach your recovery goals. The choice is yours whether to gradually cut down on a substance or quit “cold turkey.” Make sure you discuss your decision with your treatment team.



Which do you think is best choice for you: Cut back or quit? _____

Main Learning Point #3

Using substances makes relapse more likely.



Living substance-free helps you move closer to recovery. For most people who have a mental illness, choosing not to use substances is an important step in recovery. Which substance habits are you ready and willing to change to help you move closer to your recovery goals?

- ☐ **Caffeine.** I will stop drinking coffee, soda, tea, or other drinks that have caffeine.
- ☐ **Tobacco.** My goal is to stop smoking. I will talk to my treatment team for help.
- ☐ **Alcohol.** I will talk to my treatment team and get help with my goal to stop drinking alcohol.
- ☐ **Street Drugs.** I will talk to my treatment team about the help I need to reach my goal of getting off street drugs.
- ☐ **Not Ready Yet.** I am not ready to change any of my substance use yet.
- ☐ **None of the above.** I am already living a substance-free lifestyle.

Substances Make Relapse More Likely

(continued)

Main Learning Point #4

Living substance-free will help you move closer to recovery.



Which change is most important to you right now? _____

Review & Moving Forward



The main learning points of this session are:

1. _____
2. _____
3. _____
4. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once. I will think about what I need to be able to do, to get and keep the roles I want in life.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about any substances I use.
- ☐ **3. PLAN.** I'm going to come up with a plan to stop or cut down on _____ (substance) and take at least the first step in my plan.
- ☐ **4. OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ **5. TRACK.** I will count the amount of _____ I use for two or three days to get a better idea of how much I am using.

Tip: Consider putting this piece of paper some place where you will see it at least once a day. It will remind you of your commitment to practice. Renewing your commitment will help motivate you to complete your personal practice option.

5

Too Much Stress Can Lead to Relapse Facilitator Notes

Main Learning Points from last session: *Substances Make Relapse More Likely*

1. Substances keep medicine from working and make symptoms worse.
2. The more substances you use, the more medicine you may need to control your symptoms.
3. Using substances makes relapse more likely.
4. Living substance-free will help you move closer to recovery.

Review Personal Practice Options from last session.

Remember

It is important to acknowledge and discuss participants' successes, progress, and challenges.

Note



This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

General Tips

If time permits, consider practicing a coping skill with participants during the session. Experiential learning is a powerful way to build skills and facilitate change.

1. Place your hands on your belly, so you can feel it expand when you take a deep breath.
2. Take a slow, deep breath in through your nose.
3. Hold the breath for a count of three.
4. Slowly blow the air out through your mouth.
5. Repeat.

Note

For more information about stress, refer to Team Solutions - Workbook 6 - *Managing Stress and Problems*.

Suggestion for Topic Introduction and Relevance to Participants

"The title of today's session is 'Too Much Stress Can Lead to Relapse.' As you can tell from the title, we will talk about possible causes of relapse. What is one example of a stressful situation you have been through recently? How do you usually cope with stress?"

(Encourage all responses, including positive and negative ways to cope with stress. Look for answers such as eating, drinking, smoking, biting nails, crying, being angry, exercising, talking to someone, deep breathing, etc. Compliment positive responses and normalize less helpful responses.)

"How could this session be helpful for you?"

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. **D** 2. **A** 3. **C** 4. **B**

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 4: Substances Make Relapse More Likely



Main Learning Points of Session 4

What were the main learning points of Session 4? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Substances keep medicine from working and make s_____s worse.
2. The more substances you use, the more medicine you may need to c_____l your symptoms.
3. Using s_____s makes relapse more likely.
4. Living substance-free will help you move closer to r_____y.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Stress:

- A. Should be avoided as much as possible.
- B. Only comes from bad things.
- C. Is always overwhelming and can't be managed.
- D. Can't be avoided because it is a fact of life.

2. Making too many changes at once can lead to relapse.

- A. True
- B. False

3. Coping instead of avoiding:

- A. Can make it harder to solve problems and reduce stress.
- B. Is likely to get me into trouble with other people.
- C. Can reduce my risk of relapse.
- D. Is a lie. I can't cope with stress or problems.

4. Avoiding instead of coping with stress can reduce my risk of relapse.

- A. True
- B. False

5. I am confident I know how stress can make a relapse more likely.

- | | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree | Unsure |

Topic Assessment



6. This information is important for me to know.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

At the **end** of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Too Much Stress Can Lead to Relapse

Objectives for this Session

1. Identify 2 types of stress.
2. Choose at least 1 coping skill for managing stress.

Stress can't be avoided. It is a fact of life. There are two kinds of stress: The good kind (when you are happy and excited about something) and the bad kind (when something bad happens). There is no way to avoid all stress. Both kinds of stress can upset the balance of your brain chemistry and lead to relapse unless you manage the stress in your life.

Main Learning Point #1

Stress can't be avoided. It is a fact of life.

Good stress. The idea of good stress may be new to you. It might seem odd to think of stress as good. Making a big change in life is stressful for most people. Good stress happens when people go through positive changes. People might be excited about the change. They might even have trouble sleeping right before the change happens because they are so excited.



Here are some examples of things that can create good stress. Mark the changes you have been through and the changes you would like to make in your life:

- ☐ Being discharged from a treatment program.
- ☐ Moving.
- ☐ Losing weight.
- ☐ Going back to school.
- ☐ Getting a job or changing jobs.
- ☐ Quitting smoking.
- ☐ Being involved in a close relationship.
- ☐ Going to visit a family member or friend.
- ☐ Other: _____

Too Much Stress Can Lead to Relapse (continued)



Which change is the hardest for you to make? _____

When you had good stress in the past, what symptom changes did you notice?

Making too many changes at once can lead to relapse. Too much stress, even good stress, can sometimes lead to a relapse. Change can be stressful and sometimes too much to handle. That does not mean you should avoid making positive changes. If you plan to make some changes in your life, talk with your treatment team. Decide which change you will make first. Making one change at a time can help you move your life forward and lower your risk of relapse.



What are two changes that, when made together, might be too stressful to manage? _____

Main Learning Point #2

Making too many changes at once can lead to relapse.

Bad stress. This is the kind of stress we usually think of when someone says they are under a lot of stress. Unfortunately, things do not always turn out the way we want. Bad stress happens when we don't like the way things are.

Too Much Stress Can Lead to Relapse (continued)



Listed below are some examples of situations that can add bad stress to life. Mark the ones you have been through:

- ☐ Having an argument with someone.
- ☐ Having problems at work.
- ☐ Breaking up with someone or losing a friend.
- ☐ Not having enough money.
- ☐ Not liking where you live.
- ☐ Being treated badly.
- ☐ Other: _____

Resilience is coping with problems and stress. Each person has certain ways to deal with problems and stress. Some coping skills are healthy. Others are not helpful. Learning and practicing healthy coping skills help reduce the risk of relapse. If you have unhealthy coping skills, you can replace them with healthy ones. The more resilient you are, the more you are able to “bounce back” from problems and stress.



What is one healthy way you cope with stress?

What is one less helpful way to cope with stress?

Too Much Stress Can Lead to Relapse (continued)



Coping instead of avoiding can reduce your risk of relapse. Working to solve problems, practicing relaxation skills, and talking with other people are usually helpful ways to deal with stress. Less helpful ways include avoiding or ignoring problems, eating because you are upset, and using substances. Listed below are examples of how some people choose to manage stress in good ways. Choose at least one new healthy coping skill that you can practice to help you manage stress.

When I have stress, I will:

- ☐ Write down my thoughts and feelings.
- ☐ Use problem-solving skills.
- ☐ Practice a relaxation skill to stay calm.
- ☐ Exercise to reduce my stress.
- ☐ Talk to my family or a friend.
- ☐ Practice ways to control my anger.
- ☐ Get help from my treatment team.
- ☐ Other: _____

Main Learning Point #3

**Coping instead of avoiding can help
reduce your risk of relapse.**



You can learn new coping skills. If there are skills listed above that you have not yet learned, talk with your treatment team about how to learn them. You can learn and practice coping skills, manage stress, and reduce the risk of relapse.

One new coping skill I want to learn about is

Review & Moving Forward



The *main learning points* of this session are:

1. _____
2. _____
3. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about it.
- ☐ **3. PLAN.** I will talk to _____ about the coping skills I am interested in, and figure out how I could learn skills that can help me manage stress.
- ☐ **4. OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ **5. EXERCISE.** I am going to exercise each day to help me cope with stress in my life.

If there is time left before the end of the session, you might talk about your personal practice goals. How will you **remember** and **complete** your goal by the next session?

6

Health, Wellness, and Relapse Facilitator Notes

Main Learning Points from last session: *Too Much Stress Can Lead to Relapse*

1. Stress can't be avoided. It is a fact of life.
2. Making too many changes at once can lead to relapse.
3. Coping instead of avoiding can help reduce your risk of relapse.

Review Personal Practice Options from last session.

Note



This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

Tips for this session

If time permits, consider engaging participants in the following interview experience:

1. Pair up the participants.
2. Instruct participants to interview each other using the question, “What is one thing that you will do to take better care of your health and wellness?”
3. Write the question on the board, if needed.
4. Suggest that each person take notes about his or her partners' answers to the question.
5. Ask people to report their partners' answers.

Suggestion for Topic Introduction and Relevance to Participants

"The title of today's session is 'Health, Wellness, and Relapse.' As the title suggests, we will be finishing our discussion about possible causes of relapse. Let's think about the reasons for relapse that we have talked about so far."

(For example, medicine changes, too much stress, and substance use.)

"What are some other things that might affect your overall health and trigger a relapse?"

(Encourage participation. If participants do not think of physical health and wellness issues, say something like, "That's okay, we will find out together."
If they do think of physical health and wellness say,)

"Excellent. Today we will talk about physical health and how the way you take care of yourselves can affect relapse."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. C 2. A 3. A 4. B

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 5: Too Much Stress Can Lead to Relapse



Main Learning Points of Session 5

What were the main learning points of Session 5? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. S _____s can't be avoided. It is a fact of life.
2. Making too many c _____s at once can lead to relapse.
3. Coping instead of a _____g can help reduce your risk of relapse.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Not taking care of myself:

- A. Is okay, as long as I get enough sleep.
- B. Will not get in the way of my recovery.
- C. Can make relapse more likely.
- D. Is just the way it is because I can't change.

2. Physical health problems:

- A. Can start a relapse.
- B. Have nothing to do with recovering from a mental illness.
- C. Make it impossible to recover from a mental illness.
- D. Keep people from ever being able to control their symptoms of mental illness.

3. Symptom cycles can trigger a relapse.

- A. True B. False

4. Practicing healthy habits will not help reduce my chances of relapse.

- A. True B. False

5. I am confident I will take better care of my health to reduce the chance of relapse.

- | | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree | Unsure |

Topic Assessment



6. This information is important for me to know.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Health, Wellness, and Relapse

Objectives for this Session

1. Identify 3 reasons for relapse.
2. Talk about the impact healthy habits can have on recovery and relapse.

Most of us could take better care of ourselves. We all have some habits that we could choose to change. Most of us could take better care of our health by practicing healthy habits. It is very easy to be unhealthy without realizing it.



Mark the statements that are true about you:

- ☐ I sleep fewer than 7 hours most nights.
- ☐ I almost never practice deep breathing, meditation, muscle tensing, yoga, or other types of relaxation.
- ☐ I usually do not exercise 30 minutes a day or do extra physical activities.
- ☐ I smoke or chew tobacco, or dip snuff.
- ☐ Most of the time I eat without planning to eat healthy foods.
- ☐ The soda, coffee, or tea that I usually drink has sugar, caffeine, or both.
- ☐ I don't have a balanced schedule of meaningful things to do each day.
- ☐ I drink alcohol and/or use street drugs.
- ☐ I drink fewer than 6–8 glasses of water each day.
- ☐ Other: _____

Not taking care of yourself can make you less resilient. When you do not take care of your health, you tend to be less resilient. Being less resilient means you have a harder time “bouncing back” from problems and stress. This is true for most people, whether or not they have an illness. However, not managing health is harder on people who have an illness.

Not taking care of your health can make relapse more likely.

Main Learning Point #1

Not taking care of yourself can make relapse more likely.

Health, Wellness, and Relapse (continued)

Physical health problems can cause a relapse. You might have noticed that your symptoms seem to get worse when you are physically ill. That is one of the ways that your mind and body are connected. A toothache, the flu, or even a cold can make the symptoms of your mental illness worse. If you drink less water or develop diarrhea or vomiting during an illness, it can affect the level of some of your medicines and trigger a relapse. If you have a long-term illness, you may notice that when your physical symptoms get worse, so do your mental illness symptoms.

It is important to do all you can to take care of physical health problems. Tell your nurse and prescriber about any health problems you may have. Staying healthy helps you control your mental illness symptoms and reduce your risk of relapse. For most long-term health problems, it is important to take medicine as prescribed, eat right, and be physically active.



What physical health problems do you have?

- ☐ Diabetes.
- ☐ High blood pressure.
- ☐ Overweight.
- ☐ Asthma.
- ☐ High cholesterol.
- ☐ Other _____
- ☐ I don't have any physical health problems.

Main Learning Point #2

Physical health problems can start a relapse.

Symptom cycles can start a relapse. Some people notice that certain symptoms go away for a while, then come back, then go away for a while, then come back again. This may seem to happen over and over for no real reason. People who have this happen may have a “symptom cycle,” where some of their symptoms appear and disappear in a pattern or cycle. Although not everyone has a symptom cycle, some people do.

Health, Wellness, and Relapse (continued)

One way to find out if you have a symptom cycle is to track your symptoms every day for up to a year. This is called **symptom tracking** or **mood charting**. Your treatment team can help you find a form to make tracking easier if you are interested.

Another way is to think back and write down each time you had a relapse in the past few years. Look to see if there was a pattern. Recognizing if you have a symptom cycle can help you learn when your symptoms might start getting worse, and you can make a plan to respond to the next relapse before it begins. If you would like assistance with developing a plan, ask someone on your treatment team to help you.

Recognizing if you have a symptom cycle may also help you understand possible triggers that can make your symptoms worse. Triggers are events or situations that may cause symptoms to worsen. A trigger can be anything, such as a change in the weather, drinking alcohol, or being anxious about going to the dentist. Being aware of these events can help you learn how to avoid them or make a plan to manage them if they happen.



Do you think you might have a symptom cycle?

- ☐ Yes, I think I have a symptom cycle. My symptoms usually get worse and:
- ☐ A. I seem to relapse about once a month.
 - ☐ B. I usually relapse every spring.
 - ☐ C. I almost always relapse in the winter.
 - ☐ D. Other _____.
- ☐ No, I do not think I have a symptom cycle.
- ☐ I am not sure if I have a symptom cycle.

Can you think of any triggers that make your symptoms worse?

Main Learning Point #3

Symptom cycles can trigger a relapse.

Health, Wellness, and Relapse (continued)

Practicing healthy habits can help reduce your chances of relapse. The choices you make, and the things you do each day, can either help you recover or increase your risk of relapse. The more healthy choices you make, the better your chances are of controlling the illness. When you control your illness, you are more likely to move your life forward and reach your recovery goals.

Main Learning Point #4

Practicing healthy habits can reduce your chances of relapse.



What is one healthy habit you already practice? _____

What is one healthy habit you would like to do more often? _____

Review & Moving Forward



The main learning points of this session are:

1. _____
2. _____
3. _____
4. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ 1. **STUDY.** I am going to reread my handout at least once.
- ☐ 2. **SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about what I could do to take better care of my health.
- ☐ 3. **NEW HABIT.** I am going to start taking better care of my health by _____. I will share my choice(s) at the next session.
- ☐ 4. **OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ 5. **TRACK.** I will start to track my habits and symptoms. I will work with my treatment team over the next few weeks to monitor the tracking tool.

7

Reducing Your Risk of Relapse Facilitator Notes

Main Learning Points from last session: *Health, Wellness, and Relapse*

1. Not taking care of yourself can make relapse more likely.
2. Physical health problems can start a relapse.
3. Symptom cycles can trigger a relapse.
4. Practicing healthy habits can reduce your chances of relapse.

Review Personal Practice Options from last session.

Tips for this Session

To have an interactive session, you may want to put the recovery lifestyle habits (on page 65 of the participant materials) on strips of paper, like a fortune in a Chinese cookie. Fold each one and put all of them in a bowl (or hat, jar, or basket). At the beginning of the session:

1. Pass around the bowl and ask participants to each draw a fortune.
2. Have them read the recovery lifestyle habit they drew.
3. Coach or ask questions about each habit to help participants decide if it is one they already use or one they would like to use. Have them go ahead and mark it on the checklist in the session materials.

Other general questions you could use to facilitate this section:

1. How could that recovery lifestyle habit help a person get better?
2. How many people do you think practice this habit each day?
3. What could a person do to make that a daily habit?

Potential Problem

It is not unusual for people in acute phases of mental illness to give irrelevant, incoherent, or no answer to oral or written questions.

Possible Responses

1. Refocus the person's attention to the topic, question, or key point of the written exercise.
2. Repeat the question or instructions.
3. Move on.
4. Document your observations in a progress note.
5. Talk with the person's prescriber to determine what could be done to help the person participate and benefit from the sessions. Is medicine adherence a problem? If so, how can adherence be improved? Is it possible that a medicine adjustment might help the participant?

Suggestion for Topic Introduction and Relevance to Participants

“When we talk about ways to reduce the risk of relapse, what does that mean to you?”

(Look for responses such as “keeping appointments, participating in treatment, or taking medicine”)

“Who would like to talk about why it is important for you to reduce the risk of relapse and get better and stay well?”

“Let’s review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic.”

Topic Assessment Answer Key

1. C 2. A 3. D 4. B

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 6: Health, Wellness, and Relapse



Main Learning Points of Session 6

What were the main learning points of Session 6? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Not taking care of y_____f can make relapse more likely.
2. Physical h_____h problems can start a relapse.
3. S_____m cycles can trigger a relapse.
4. Practicing healthy habits can r_____e your chances of relapse.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn’t choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Recovery lifestyle habits:

- A. Mean you just take medicine to recover.
- B. Are things that would be good, but I can't do them.
- C. Support recovery and reduce the risk of relapse.
- D. Should be done once in a while to boost recovery.

2. Recovery lifestyle habits are an important part of managing symptoms and moving life forward.

- A. True B. False

3. It would be best for me to choose and practice:

- A. Just one recovery lifestyle habit because more than one isn't necessary.
- B. Healthy habits on the days I feel my best.
- C. Only the habits that are easy to do and skip the rest.
- D. Recovery lifestyle habits every day.

4. If I go to bed and sleep whenever I am tired, the more likely I am to manage my illness.

- A. True B. False

Topic Assessment



5. I am confident I understand how to reduce my risk of getting sick again.

- | | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree | Unsure |

6. This information is important for me to know.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|-------------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly
Disagree | Disagree | Neither Agree
Nor Disagree | Agree | Strongly
Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Reducing Your Risk of Relapse

Objectives for this Session

1. Identify 4 or 5 habits that can reduce your risk of relapse.
2. Identify 1 new habit that you will practice to help you reduce your risk of relapse.

Recovery lifestyle habits support recovery and reduce the risk of relapse.

Choosing and practicing recovery lifestyle habits can help reduce your chances of getting sick again. Recovery lifestyle habits are the things you do each day to manage your illness.



Mark the statements that are true about you:

- ☐ 1. **I believe.** I remind myself that I can get better, move my life forward and reach my life goals. I know that recovery is possible.
- ☐ 2. **I take medicine.** I take my medicine the right way every day, even when symptoms go away.
- ☐ 3. **I practice relaxation skills.** I practice deep breathing, meditation, muscle tensing, yoga, or guided relaxation every day or when I start to feel stressed.
- ☐ 4. **I choose sugar-free drinks and foods.** I usually choose drinks and foods that have little or no added sugar.
- ☐ 5. **I choose healthy foods.** I practice healthy eating habits most of the time.
- ☐ 6. **I am physically active.** I spend at least 30 minutes a day exercising on most days of the week.
- ☐ 7. **I get support.** I often call or spend time with people who support my recovery.
- ☐ 8. **I track my symptoms.** I pay attention to how well my symptoms are controlled, and I watch for early warning signs of relapse.
- ☐ 9. **I choose to be substance-free.** I avoid alcohol, street drugs, tobacco, and caffeine.
- ☐ 10. **I sleep well.** Most nights, I get 7-10 hours of sleep. I also make it a habit to go to bed and wake up at about the same times almost every day.

Reducing Your Risk of Relapse (continued)



- ☐ 11. **I stay busy.** I stay out of bed during the day and do things that move me toward recovery.
- ☐ 12. **I partner with my treatment team.** I work with my treatment team to achieve my goals.

Think, write, or talk about your answers to the following questions:

A. Which recovery lifestyle habit is most important for you to get better?

B. Describe how you have made that a daily habit:

C. Which recovery lifestyle habit is the hardest for you?

D. What makes that recovery lifestyle habit so hard for you? _____

Main Learning Point #1

Recovery lifestyle habits support recovery and reduce the risk of relapse.

Reducing Your Risk of Relapse (continued)



Choose and practice recovery lifestyle habits every day. Each day gives you new opportunities to move your life forward. Look over the list of recovery lifestyle habits again. Choose one new habit you are willing to start practicing today. Writing your plan can help strengthen your commitment to practicing the new habit.

- ☐ A. **My Choice.** Starting today, I am going to move my recovery forward by practicing one new habit: _____
- ☐ B. **My Plan.** My plan for practicing the new recovery lifestyle habit I have chosen is to: _____
- ☐ C. **My Motivation.** My new habit will help me: _____

Main Learning Point #2

Choose and practice recovery lifestyle habits every day.

Reducing Your Risk of Relapse (continued)

The more recovery lifestyle habits you practice, the more likely you are to control your illness. As you keep getting better, you can move your life forward by gradually choosing and practicing new recovery lifestyle habits. Here are some tips from other people who are moving forward with recovery:

"I go to sleep and wake up at the same time every day."

"I take a walk almost every day."

"I feel best when I eat at least two or three healthy meals each day."

"I now know I have to keep taking my medicine every day. Things got really bad when I stopped it the last time."

"If I am upset, I calm myself with deep breathing or meditation."

"I stay away from people who like to drink. I can really get into it when I am with them."

"I met a friend with the same problem that I have, and we talk to each other often."

Main Learning Point #3

The more recovery lifestyle habits you practice, the more likely you are to control your illness.



How many of the 12 habits are you already practicing? _____. You can slowly do them all, by choosing and practicing one new habit at a time.

Changing habits takes personal choice, a thoughtful plan, motivation, and lots of practice. Think, write, or talk about your thoughts on how gradually practicing each recovery lifestyle habit could help you. _____

Review & Moving Forward



The main learning points of this session are:

1. _____
2. _____
3. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ 1. **STUDY.** I am going to reread my handout at least once.
- ☐ 2. **SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about how I can reduce my risk of relapse.
- ☐ 3. **DISCUSS.** I am planning to talk with _____ about at least one recovery lifestyle habit.
- ☐ 4. **OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ 5. **NEW HABIT.** Starting today, the new recovery lifestyle habit I will practice is: _____

Motivation to Practice. How will practicing help you? _____

8

Recognizing Relapse Facilitator Notes

Main Learning Points from last session: Reducing Your Risk of Relapse

1. Recovery lifestyle habits support recovery and reduce the risk of relapse.
2. Choose and practice recovery lifestyle habits every day.
3. The more recovery lifestyle habits you practice, the more likely you are to control your illness.

Review Personal Practice Options from last session.



Tips for this Session

Creating visual representations can be a fun, interactive exercise to use with participants. Consider doing this activity as an entire session by itself, as “Session 8 – Part 2.”

Provide colored paper, markers, crayons, scissors, glue, tape, and other materials that can be used to make a personal “Early Warning Sign of Relapse.”

1. Hand out the materials after reading and talking about (or reviewing) the fourth main learning point.
2. Ask participants to talk about the different types of warning signs they might see in the world around them (for example, yellow caution light, red flag, yellow road sign, lighthouse, etc.)
3. Give participants brief instructions about using the materials to create their own personal “Early Warning Sign of Relapse,” using the kind of warning sign they want.
4. Have participants choose two or three of their most important signs of relapse and write them down on their personal “Early Warning Sign of Relapse.”
5. Give each person a chance to show his or her personal “Early Warning Sign of Relapse” to the group.

There is a long list at the end of this session. Don't rush through it, but read aloud, talk about, and help participants identify their signs of relapse.



Suggestion for Topic Introduction and Relevance to Participants

"Have you ever woken up with a scratchy throat, or a headache, or maybe had body aches or an upset stomach? What did you think was happening?"

(Encourage responses. Wait to hear an answer, such as they thought they were getting a cold or the flu.)

"That's good. So you recognized the symptoms of a cold or flu. Today we are going to talk about recognizing symptoms of relapse of a mental illness. Why is it important to recognize symptoms of relapse? What might happen if we do not recognize the start of a relapse? We could get sick again, couldn't we?"

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. D 2. C 3. A 4. D

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 7: Reducing Your Risk of Relapse



Main Learning Points of Session 7

What were the main learning points of Session 7? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Recovery lifestyle h_____s support recovery and reduce the risk of relapse.
2. Choose and p_____e recovery lifestyle habits every day.
3. The more recovery lifestyle habits you practice, the more likely you are to c_____l your illness.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. When a relapse happens:

- A. Persistent symptoms improve.
- B. Early residual remissions are a long way from recovery.
- C. It always means being hospitalized.
- D. Early warning signs appear.

2. During a relapse, persistent symptoms usually:

- A. Get better.
- B. Happen less often.
- C. Get worse.
- D. Are weaker, but last longer.

3. During a relapse, remitted symptoms usually return.

- A. True B. False

4. Recognizing relapse:

- A. Means covering it up so I do not end up in the hospital.
- B. Always includes asking my prescriber to increase my medicine.
- C. Is the same as practicing recovery lifestyle habits.
- D. Gives me a chance to take action before the illness takes control.

Topic Assessment



5. I am confident I can recognize my personal warning signs of possible relapse

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Recognizing Relapse

Objectives for this Session

1. Explain 3 ways to recognize relapse.
2. Name 1 common sign of relapse.

Recognizing relapse gives me a chance to take action before the illness takes control. Even though people do their best to reduce the risk of relapse, a relapse can still happen. It is hard to manage everything that might cause a relapse. So it is important to recognize relapse once it has started.

Three ways to recognize relapse. Although each person's experience is unique, there are usually three things that can warn you a relapse is happening. Often, these three things happen in a certain order. However, you may notice any or all of them happening at once.

- 1. Early warning signs appear.** Early warning signs are usually the first changes that tell you a relapse is happening. The first things you may notice could be small, but important. Shifts in moods, thoughts, attitudes, motivations, habits, memories, or behaviors might signal a relapse. For most people, the same early warning signs appear each time a relapse begins.



What is one early warning sign that appears when you start to relapse?

Main Learning Point #1

Early warning signs appear.

Recognizing Relapse

(continued)

- 2. Persistent symptoms get worse.** Many people have some symptoms that do not go away. The symptoms that keep happening, even when you take medicine, are called "persistent symptoms" of the illness. During a relapse, your persistent symptoms are likely to get stronger, last longer, or happen more often. One way to recognize that a relapse is coming is to notice that persistent symptoms are getting worse.



One persistent symptom that gets worse when I start to relapse is _____

Main Learning Point #2

Persistent symptoms get worse.

- 3. Symptoms return.** As a person's brain chemistry gets more and more out of balance, old symptoms may start to come back. Most of the time, symptoms are well managed by medicine and recovery lifestyle habits. You can probably think of certain symptoms that are in **remission** right now. These are symptoms that go away when you manage your illness. However, a relapse can bring these symptoms back again.



One symptom that returns when I start to relapse is _____

Main Learning Point #3

Symptoms that had gone away return.

Recognizing Relapse

(continued)

Some people might be uncertain about what early warning signs, persistent symptoms, or returning symptoms to watch for. Members of your treatment team and family might be able to help you figure out what to watch for.

Recognizing relapse gives you a chance to take action before the illness takes control. Think back to when you experienced a relapse or when you first started having symptoms. Mark the changes that you remember happening:



Recognizing my signs of relapse:

- ☐ I have trouble sleeping at night.
- ☐ I have a harder time focusing or keeping my mind on things.
- ☐ My moods are up and down. I can't stay leveled out. It is like a rollercoaster ride.
- ☐ I forget things more often than usual.
- ☐ I can't think as clearly as usual.
- ☐ My mind starts "racing" and ideas start coming faster than usual.
- ☐ The voices get stronger and it is harder to ignore them.
- ☐ I have more energy than usual and I do not need as much sleep.
- ☐ I am afraid of people, places, or experiences that I am usually comfortable with.
- ☐ I start getting edgy or angry, and I get into a lot more arguments.
- ☐ People say I start talking or acting strangely.
- ☐ I get nervous or worried all the time.
- ☐ I think people are talking about me or laughing at me.
- ☐ I start spending lots of money—more than I can afford—and I can't seem to stop myself.
- ☐ Other: _____
- ☐ Other: _____

Main Learning Point #4

Recognizing signs of relapse gives you a chance to take positive action.

Review & Moving Forward



The main learning points of this session are:

1. _____
2. _____
3. _____
4. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below (Don't choose #3 or #5 if you chose it last time.):

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and discuss what changes he or she notices when I start to relapse.
- ☐ **3. REVIEW.** I am going to ask _____ about the "Recognizing My Signs of Relapse" checklist so they can talk with me about it.
- ☐ **4. OTHER:** _____

Take an "Extra Step Forward" (optional)

- ☐ **5. WATCH SIGNS.** I will put my "Recognizing My Signs of Relapse" checklist where I will see it and think about it, so I can watch for relapse.

Motivation to Practice. How will practicing help you? _____

9

Monitoring Your Symptoms Facilitator Notes

Main Learning Points from last session: *Recognizing Relapse*

1. Early warning signs appear.
2. Persistent symptoms get worse.
3. Symptoms that had gone away return.
4. Recognizing signs of relapse gives you the chance to take positive action.

Review Personal Practice Options from last session.

Remember

You can refer to the “*Facilitator’s Delivery Checklist*” when using Team Solutions materials as a reminder of important facilitator tips.

Materials Needed to Accompany Participant Handout

1. *Symptom Tracker*.
2. *Recognizing My Symptoms*.

Tips for this Session

If you don’t have time to develop personal symptom trackers during today’s session, choose one of the following:

1. Spend the next session working with participants to develop their personal symptom trackers.
2. Encourage participants to work individually or with someone on their treatment team to create their symptom trackers. Be sure to alert your colleagues about this plan.
3. Meet one-on-one between sessions with individuals who need assistance with developing a personal symptom tracker.

Potential Problem

One or more participants are unable to identify any of their persistent or remitted symptoms.

Possible Responses

1. Use “*Recognizing My Symptoms*.” Provide participants with a copy of the handout included in this session.
2. Write examples on the board or flipchart. “*Let’s write a list of symptoms on the board. I will go around the room and call on people to suggest a symptom. When we are done with the list, you may recognize some symptoms to write on your tracker.*”

Suggestion for Topic Introduction and Relevance to Participants

“During today’s session, we will continue talking about how to recognize and respond to a relapse. The title of this session is ‘Monitoring Your Symptoms.’”

“What does it mean to monitor something?”

(Encourage responses and use definition below.)

“The definition of monitor means to watch for things that remind or warn us of something that may be changing. Why is it important to monitor symptoms? How might monitoring your symptoms be helpful to you?”

“Let’s review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic.”

Topic Assessment Answer Key

1. D 2. C 3. B 4. A

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 8: Recognizing Relapse



Main Learning Points of Session 8

What were the main learning points of Session 8? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Early w_____g signs appear.
2. P_____t symptoms get worse.
3. Symptoms that had gone away r_____n.
4. Recognizing signs of relapse gives you a chance to take p_____e actions.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Monitoring symptoms:

- A. Is only important to do if you have a relapse.
- B. Should only be done early in treatment when you first start taking medicine.
- C. Is best done for a week or two at the most.
- D. Can answer many important questions for you.

2. A symptom tracker can help me monitor:

- A. The increase in one specific brain messenger.
- B. My side effects from over-the-counter medicines.
- C. My personal symptoms.
- D. The amount of time I will be in the hospital.

3. Symptom monitoring should only be done for a few days, when I am starting to get sick.

- A. True B. False

4. Symptom monitoring can help me recognize and stop a relapse.

- A. True B. False

5. I am confident I know how to monitor my symptoms.

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly | Disagree | Neither Agree | Agree | Strongly | Unsure |
| Disagree | | Nor Disagree | | Agree | |

Topic Assessment



6. This information is important for me to know.

- | | | | | |
|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly Disagree | Disagree | Neither Agree Nor Disagree | Agree | Strongly Agree |

At the **end** of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|----------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly Disagree | Disagree | Neither Agree Nor Disagree | Agree | Strongly Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Monitoring Your Symptoms

Objectives for this Session

1. Select 2 or 3 symptoms you will monitor.
2. Explain 1 way monitoring symptoms could help you.

Monitoring symptoms can answer many important questions. There are many times during your recovery that you may decide to monitor (or track) your symptoms. Symptom monitoring helps answer questions that most people ask during certain times in their recovery.



Mark the questions that are important to you at this point in your recovery:

- ☐ 1. **How well is my medicine working?** Is the medicine that I am taking doing a good job of controlling the symptoms that bother me? How well does it work on the symptoms that might get in the way of reaching my goals?
- ☐ 2. **Will more medicine help?** Will an increase in medicine do a better job of controlling my symptoms? If my prescriber and I agree that I will take a higher dose, how will I know if taking more medicine works better?
- ☐ 3. **Will this new medicine work better?** Will this new medicine (that my prescriber recently started me on) help me control my symptoms better than the old one did? How will I know if it is helping me?
- ☐ 4. **Do I have a symptom cycle?** Do I have a regular, repeated pattern of increased symptoms or relapse? If so, when do the cycles happen? How often do I have them? How long does a cycle last? Will medicine adjustments and/or new recovery lifestyle habits reduce my cycles?
- ☐ 5. **Will I recognize relapse?** How will I know if I have a relapse? How could I notice if early warning signs appear? How will I realize that my persistent symptoms are getting worse? Will I notice if my symptoms return? How can I watch for signs of relapse?
- ☐ 6. **Other.** I have a different question that symptom monitoring might help me answer: _____.
- ☐ 7. **None of the Above.** None of the questions are important to me right now.

Monitoring Your Symptoms (continued)



Which of these questions is most important to you? _____

Main Learning Point #1

Monitoring symptoms can answer many important questions.

A symptom tracker can help you monitor your personal symptoms. One way to monitor symptoms is to make a list of the personal symptoms you want to track. You will see on the symptom tracker handout that there is room to track:

1. Persistent symptoms that bother you and get in the way of reaching your goals. (Rate how troublesome each symptom has been each day).
2. Early warning signs.
3. Important things to monitor daily.

It is usually best to monitor symptoms at the end of the day, and at about the same time. Some people, especially those with mood disorders, find it helpful to monitor symptoms twice a day. The best times are usually in the morning and in the evening. This can be helpful to determine if there is a daily pattern or cycle to your symptoms.

1. Rate how troublesome each symptom has been that day.
2. Add the symptom ratings and write a daily total.
3. Look to see if your daily score changes.

You will not want to do this forever, but you and your treatment team can decide how long you should monitor your symptoms. Once you are doing well for a period of time, you may decide to monitor your symptoms less often.

Main Learning Point #2

A symptom tracker can help you monitor your symptoms.

Monitoring Your Symptoms (continued)

If your symptom scores go down. If your symptom scores go down over time, that is great! Having your symptoms improve probably means that your medicine and recovery lifestyle habits are doing a good job of controlling your symptoms.

If your symptom scores stay the same. You might see that your symptom scores don't change very much from day to day. That is usually called "maintaining stability." If your symptom ratings are 0-1 then maintaining stability is probably good.

If your symptom ratings are 2-3, then maintaining stability might not be good enough. If your symptoms may be bothering you or interfering with reaching your life goals, talk to your prescriber or nurse. Changes in medicine and/or adjusting some of your daily habits might make your symptoms better. Greater symptom control may help you reach your recovery goals.

If your daily score goes up. If your daily score goes up, you might be starting to relapse. Call your treatment team immediately to take action right away.



Symptom monitoring can help you recognize and stop a relapse. Using a symptom tracker would be helpful to me because _____

Main Learning Point #3

Symptom monitoring can help you recognize and take action to interrupt a relapse.

A symptom tracker is included on page 88. Take a few minutes to look at it. If time permits, list your symptoms on the form.

Review & Moving Forward



The main learning points of this session are:

1. _____
2. _____
3. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about how symptom monitoring could help me.
- ☐ **3. DISCUSS and PLAN.** I will discuss this with _____ to get support and help with monitoring my symptoms.
- ☐ **4. OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ **5. TRACK.** I am going to make a list of my persistent symptoms, early warning signs, and symptoms so I can start using the symptom tracker this week.

Symptom Tracker

Symptom Severity: No symptom = 0 Mild = 1 Moderate = 2 Severe = 3

Symptom	Day							Week 1							Week 2							Week 3							Week 4						
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31				
a.m.																																			
p.m.																																			
a.m.																																			
p.m.																																			
a.m.																																			
p.m.																																			
Took medication as prescribed																																			
Was active today																																			
Used drugs or alcohol																																			
Hours I slept last night (please write down any problems you have with your sleep)																																			
Comments																																			

Week 1	Weight: _____	Weight: _____	Weight: _____	Weight: _____
	BMI: _____	BMI: _____	BMI: _____	BMI: _____
	Waist Circumference: _____	Waist Circumference: _____	Waist Circumference: _____	Waist Circumference: _____
	Blood Pressure: _____	Blood Pressure: _____	Blood Pressure: _____	Blood Pressure: _____

Identify the top three or four symptoms that you will monitor daily until your next meeting with your clinician. Please take a baseline weight, blood pressure, waist circumference, and BMI at the beginning of the month and then monitor weight bi-weekly. Please bring this sheet back with you for your first follow-up meeting so you can talk about it with your treatment team members.

Possible symptoms for daily monitoring by client:

These are only suggestions. There may be other symptoms that you want to monitor.

- | | |
|--|---|
| <ul style="list-style-type: none"> • I hear voices or noises and I don't know where they come from. • I think people are watching me or following me. | <ul style="list-style-type: none"> • I see things no one else seems to see. • Things sound or smell wrong. • I feel afraid. |
| <ul style="list-style-type: none"> • I don't want to do anything. • My mood is extremely happy or elevated. • I think about hurting myself. • I get easily irritated or annoyed. • I feel tired all the time. • I don't need to sleep. • My sex drive is very low, lower than normal. | <ul style="list-style-type: none"> • I feel hopeless. • I feel nervous or anxious. • I feel sad or unhappy. • My thoughts move so fast I cannot keep up with them. • People tell me I talk too fast or too much. • My sex drive is very high, higher than normal. |
| <ul style="list-style-type: none"> • I can't understand what people are saying to me. • I can't keep my mind on anything. • I don't know how to plan for things. | <ul style="list-style-type: none"> • I have trouble remembering things. • I have trouble learning things. |
| <ul style="list-style-type: none"> • I can't sleep. • I don't enjoy anything. • I don't brush my teeth. | <ul style="list-style-type: none"> • I don't shower. • I don't have anything to say to people. |

10

Dangers of Ignoring Relapse Facilitator Notes

Main Learning Points from last session:

Monitoring Your Symptoms

1. Monitoring symptoms can answer many important questions.
2. A symptom tracker can help you monitor your symptoms.
3. Symptom monitoring can help you recognize and take action to interrupt a relapse.

Review Personal Practice Options from last session.

Tips for this Session

Ask questions to assess and increase comprehension. Consider stopping at select points during the session to ask questions that will help you determine if each participant understands the content of the session.

1. Frame questions in ways that misstate a main learning point. For example, say, "So, if you think that you may have signs of relapse, you should wait to see what happens before doing anything, right?"
2. Ask questions that encourage participants to make comparisons that demonstrate understanding and comprehension. For example, say, "So what are the advantages of taking quick action instead of waiting if you see signs of relapse?"

Suggestion for Topic Introduction and Relevance to Participants

"Let's pretend we are traveling together on a bus. As we come to a railroad crossing, we see flashing lights, hear bells clanging, and see the crossing bar coming down."

"What is likely to happen if we just ignore the warnings and drive our bus across the tracks? Yes, we might get hurt by a train. And that is a very bad thing! Why is it important to pay attention to warning signs, like the flashing lights and clanging bells?"

(Listen to responses.)

"In the same way, why is it important to pay attention to the warning signs of relapse? What happens if we just ignore the warning signs? This session will give us the chance to begin thinking and talking about what our choices are when we notice signs of relapse."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. A 2. C 3. A 4. B

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 9: Monitoring Your Symptoms



Main Learning Points of Session 9

What were the main learning points of Session 9? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. Monitoring symptoms can answer many important q_____s.
2. A symptom t_____r can help you monitor your symptoms.
3. Symptom monitoring can help you r_____e and interrupt a relapse.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. It probably is:

- A. A good idea to talk with a treatment team member if my symptoms increase.
- B. Best to take an extra pill at bedtime if I am having a relapse.
- C. A good idea to figure out who is to blame if I have a relapse.
- D. A good idea to ignore an increase in symptoms.

2. Repeated relapse:

- A. Is really not a problem, because I can always start back on medicine in the hospital.
- B. Is better than putting up with side effects every day.
- C. Makes symptoms worse.
- D. Does not make any difference. People never get sicker just because they have a relapse over and over again.

3. Action, not delay, is the best way to keep relapse away.

- A. True B. False

4. Taking quick action to stop a relapse means my illness takes control and my life goals are ruined.

- A. True B. False

5. I am confident I can take action to prevent a relapse.

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly | Disagree | Neither Agree | Agree | Strongly | Unsure |
| Disagree | | Nor Disagree | | Agree | |

Topic Assessment



6. This information is important for me to know.

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly | Disagree | Neither Agree | Agree | Strongly |
| Disagree | | Nor Disagree | | Agree |

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

- | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly | Disagree | Neither Agree | Agree | Strongly |
| Disagree | | Nor Disagree | | Agree |

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Dangers of Ignoring Relapse

Objectives for this Session

1. Explain at least 1 disadvantage of ignoring relapse.
2. Name 1 way that recognizing relapse could help you.
3. Select at least 1 personal motivation for recognizing relapse.

It may be tempting to ignore relapse. Sometimes people want to believe that there is nothing wrong, even when they start to see early warning signs of relapse. There are many reasons for ignoring the signs of relapse. Here are some reasons other people have ignored early warning signs of relapse:

1. "I just hoped it would go away."
2. "I didn't want to have to go to the hospital again."
3. "I did not want to get sick again."
4. "I didn't want my family to know I was getting sick again."
5. "I did not want to believe it was happening to me all over again."



What is a reason that you might be tempted to ignore signs of a relapse?

Main Learning Point #1

It may be tempting to ignore relapse.



What are the problems with ignoring relapse?

- ☐ My symptoms won't go away.
- ☐ My persistent symptoms will get worse.
- ☐ My illness may start to control me.
- ☐ I will probably end up in the hospital or crisis unit.
- ☐ Relapsing will make it much harder to reach my goals.
- ☐ Other: _____

Dangers of Ignoring Relapse

(continued)



What is the most important reason that you won't ignore a relapse? _____

Repeated relapse can make symptoms worse. Unfortunately, the more times a person has a relapse, the harder it may be to control the illness. You may have heard the saying, "The more often you get sick, the sicker you get." The risk that this may happen is one of the most important reasons for taking action to stop a relapse as soon as you see the early warning signs.

Main Learning Point #2

Repeated relapse might make your symptoms worse.

Action, not delay, is the best way to keep relapse away. You might be tempted to ignore the early warning signs of relapse. But instead, you can take action to stop a relapse.



What are some good reasons to take action to stop relapse?

- ☐ I can start working toward feeling better sooner.
- ☐ I will have a better chance of keeping what is important to me, such as a job, a place to live, friends and family, and being on my own.
- ☐ I will be less likely to end up in the hospital or crisis unit.
- ☐ I can be more in control of myself and my life.
- ☐ I can keep moving my life forward to reach my goals.
- ☐ Other: _____

Main Learning Point #3

Action, not delay, is the best way to keep relapse away.

Dangers of Ignoring Relapse (continued)



What will motivate you to respond quickly to relapse? _____

Taking quick action to stop a relapse helps me stay in control and keep moving toward my life goals. The faster I respond to relapse, the better my chances are of remaining in control. A full-blown relapse is less likely.

Main Learning Point #4

Taking quick action to stop a relapse helps you stay in control.

Which path will you choose?



If I notice signs of relapse I will: _____

Review & Moving Forward



The main learning points of this session are:

1. _____
2. _____
3. _____
4. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and think about the most important reasons for taking quick action to stop a relapse.
- ☐ **3. DISCUSS.** I am going to talk to _____ about the advantages of taking quick action to stop a relapse.
- ☐ **4. OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ **5. WRITE.** I will write my own personal list of all the reasons I will take quick action instead of ignoring relapse. That will help me choose action if I relapse.

Motivation to Practice. How will practicing help you? _____

11

Responding to Relapse Facilitator Notes

Main Learning Points from last session: *Dangers of Ignoring Relapse*

1. It may be tempting to ignore relapse.
2. Repeated relapse might make your symptoms worse.
3. Action, not delay, is the best way to keep relapse away.
4. Taking quick action to stop a relapse helps you stay in control.

Review Personal Practice Options from last session.

Remember

You can refer to the *"Facilitator's Delivery Checklist"* when using Team Solutions materials as a reminder of important facilitator tips.

Tips for this Session

If time permits, consider involving participants in doing a role-play to practice each of the three steps in responding to relapse.

1. Ask participants to volunteer to play various members of the treatment team.
2. Come up with a simulation situation in which a person has relapsed.
3. Serve as the team's "coach" while participants role-play a "treatment team meeting" in which they use each of the three steps in responding to relapse.

Potential Problem for this Session

One or more participants have trouble letting go of blame and shame when identifying the reasons for relapse.

Possible Responses

1. Point out that we all learn by experience.

For example, say, *"Everyone does what they think is best in each situation they face. Sometimes we realize later that we could have done something else that might have worked out better in the long run."* or *"We all learn by experience when things do not turn out the way we hoped. It is an opportunity to learn and grow, not blame or feel ashamed."*

2. **Blame and shame hurt, not help.** *"It is okay to regret decisions and actions that do not work out the way we had hoped. Regret can motivate a different choice the next time. However, blame and shame only hurt us—they do not help."*

Suggestion for Topic Introduction and Relevance to Participants

"Suppose you see me at the grocery store. You recognize me, and I wave to you. What is the next thing you are likely to do?"

(Encourage responses.)

"How many different ways can you think of to respond to me, after I wave to you?"

(Wait for responses.)

"What I hear is that there are a lot of different ways to respond to someone that you recognize. Today we are going to identify several different ways to respond to relapse. Do you think a session about this will be helpful?"

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. A 2. D 3. B 4. B

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 10: Dangers of Ignoring Relapse



Main Learning Points of Session 10

What were the main learning points of Session 10? If you did not attend the last session, you may guess, and also write the answers as people say them:

1. It may be tempting to i_____e relapse.
2. Repeated relapse might make your symptoms w_____.e.
3. A_____n, not delay, is the best way to keep relapse away.
4. Taking q_____k action to stop a relapse helps you stay in control.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. Step 1 in responding to relapse is to:

- A. Call for help.
- B. Figure out whose fault it is.
- C. Take extra medicine.
- D. Wait to see if I am better in a few days.

2. Step 2 in responding to relapse is to:

- A. Call for help.
- B. Decide who is responsible for causing the relapse and let them know how I feel about getting sick.
- C. Ask for a medicine change.
- D. Figure out what caused the relapse.

3. Figuring out what caused the relapse usually means pointing the finger at me because I made a bad decision.

- A. True B. False

4. Step 3 in responding to relapse is to go to the hospital.

- A. True B. False

5. I am confident I know and will use steps for responding to relapse.

- | | | | | | |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Strongly | Disagree | Neither Agree | Agree | Strongly | Unsure |
| Disagree | | Nor Disagree | | Agree | |

Topic Assessment



6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the **end** of the session, answer these questions before turning in this paper:

7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Responding to Relapse

Objectives for this Session

1. List 3 steps for responding to relapse.
2. Identify 1 way to figure out what might have caused a relapse.
3. Select at least 1 action that may help stop a relapse.

Plan ahead. You can plan ahead and decide how you will respond to relapse. That will help you be ready when you recognize the early warning signs of relapse. Stopping a relapse may not be as hard as you think, if you follow three simple steps.

Three steps in responding to relapse are:

- Step 1. Call for help.
- Step 2. Try to Figure out what caused the relapse.
- Step 3. Take action to stop a relapse.

To help you feel prepared and confident about using these three steps, write answers to the questions on the next few pages. This information can help you be more successful in managing and responding to relapse.

STEP 1. Call for help. Once you recognize that you are having a relapse, the first step is to reach out for help. Call someone on your treatment team or a family member or friend. Tell that person you are starting to have a relapse. Explain that you need an appointment right away. Figure out a way to see someone on your treatment team as quickly as possible. Practice what you will say, so you will be ready to make the call when you recognize relapse.



The person on my treatment team that I will call is:

Name: _____

Phone number: _____

I will say: _____

Main Learning Point #1

Step 1 in responding to relapse is to call for help.

Responding to Relapse (continued)

STEP 2. Try to Figure out what caused the relapse. The next step is to think about what might have started the relapse.



Relapse Checklist. Mark the problems that may have helped start your relapse:

- ☐ 1. **Medication changes.**
 - ☐ A. I skipped or forgot doses.
 - ☐ B. I took less medicine than I was prescribed.
 - ☐ C. I stopped taking some (or all) of my medicine.
 - ☐ D. I changed to a different medicine.
 - ☐ E. I started taking over-the-counter medicine.
- ☐ 2. **Substance use.**
 - ☐ A. I drank alcohol.
 - ☐ B. I used street drugs.
 - ☐ C. I drank more caffeine than usual.
- ☐ 3. **Too much stress.**
 - ☐ A. I had a lot of good stress.
 - ☐ B. I had a lot of bad stress.
 - ☐ C. I made more than one change at a time.
- ☐ 4. **Not taking care of myself.**
 - ☐ A. I slept less than 7 hours most nights.
 - ☐ B. I was not practicing relaxation skills.
 - ☐ C. I was not physically active.
 - ☐ D. I was not eating healthy foods.
 - ☐ E. I didn't have a balanced daily schedule.
- ☐ 5. **Physical health problems.**
 - ☐ A. I got physically ill (for example, I had a cold or the flu).
 - ☐ B. My long-term illness got worse (for example, my diabetes or high blood pressure).
- ☐ 6. **Symptom cycle.**
 - ☐ A. I went through my regular period of increased symptoms (for example, I relapsed this winter like I do every winter).

Responding to Relapse (continued)

Main Learning Point #2

**Step 2 in responding to relapse
is to figure out what started
the relapse.**

STEP 3. Take action to stop a relapse. I will work with my treatment team to choose and use an action plan.



Relapse Action Plan. Mark the actions that you and your treatment team decide to take to stop the relapse:

- ☐ 1. **Medicine changes.**
 - ☐ A. Do something different so I don't skip or forget doses (for example, I will try a new habit, pill box, or shot).
 - ☐ B. Take my medicine the right way every day—no more and no less.
 - ☐ C. Start taking the medicine that I had quit taking (my prescriber might tell me how to slowly work back up to the right dose).
 - ☐ D. Work with my prescriber to decide to take a higher dose, use an add-on, or change to a medicine that works better.
 - ☐ E. Stop taking over-the-counter medicine or change to one that will not make my symptoms worse.
- ☐ 2. **Substance use.**
 - ☐ A. Get involved in dual recovery treatment to help me get better from mental illness and substance use.
 - ☐ B. Cut down or stop drinking caffeine.
- ☐ 3. **Too much stress.**
 - ☐ A. Learn and practice stress management skills.
 - ☐ B. Make just one change at a time.

(continued on next page)

Responding to Relapse

(continued)



- ☐ 4. **Not taking care of myself.**
- ☐ A. Make sure I get 7-9 hours of sleep every night.
 - ☐ B. Learn and practice deep breathing, muscle tensing, meditation, yoga, or guided relaxation.
 - ☐ C. Be physically active each day.
 - ☐ D. Choose and eat healthy foods.
 - ☐ E. Develop a balanced daily schedule.
 - ☐ F. Reach out and get support.
- ☐ 5. **Physical health problems.**
- ☐ Take care of my physical health problems.
- ☐ 6. **Symptom cycle.**
- ☐ Figure out how to deal with symptom cycles.
- ☐ 7. **Other:** _____

Main Learning Point #3

**Step 3 in responding to relapse
is to take action to interrupt
a relapse.**

Review & Moving Forward

The *main learning points* of this session are:

1. _____
2. _____
3. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ 1. **STUDY.** I am going to reread my handout at least once.
- ☐ 2. **SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and review the relapse checklist with me.
- ☐ 3. **DISCUSS.** I will talk to _____ about what could be done about a relapse, instead of having to go to the hospital.
- ☐ 4. **OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ 5. **REVIEW.** I plan to ask _____ to review relapses I have had and mark the relapse checklist. I might learn something about what might cause a relapse.

12

Help That You Prefer
Facilitator Notes**Main Learning Points from last session:****Responding to Relapse**

1. Step 1 in responding to relapse is to call for help.
2. Step 2 in responding to relapse is to figure out what started the relapse.
3. Step 3 in responding to relapse is to take action to interrupt a relapse.

Review Personal Practice Options from last session.**Note**

This session could be used for family/friend groups or sessions. It offers an opportunity for the participant and family to practice skill-building together.

Tips for this Session

If time permits, consider:

1. Engaging participants in deciding how they will let family, friends, and their treatment team know their preferences for how to receive help.
2. Providing role-play opportunities for participants to practice sharing their preferences with someone.
3. Engaging participants in talking about what qualities they appreciate in the people and places they prefer.

**Suggestion for Topic Introduction
and Relevance to Participants**

"Think of the person whom you most trust in the world. Is this someone you would want to help you if you had a problem? Would anyone like to share with the group who you would trust to help you if you needed help?"

(Encourage responses.)

"During a relapse, crisis, or emergency, it can be hard to let people know what you want, what is likely to help you, and what you do not want. These actions are also called 'preferences,' or what you prefer. Preference means 'the act of choosing,' or 'having a special liking for something.'"

"Today we will continue talking about ways to respond to relapse by talking about the people, places, and support that might be most helpful to you during a relapse. If you could choose the perfect person to help you deal with relapse, who would it be? How would that person help you? What would that person say or do that would be helpful? Today we will look at some of these, as well as some other choices you may want to make."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. A 2. C 3. A 4. B

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 11: Responding to Relapse



Main Learning Points of Session 11

What were the main learning points of Session 11? If you did not attend the last session, you may guess, and also write the answers as people say them:

Three steps in responding to relapse are:

1. Step 1 in responding to relapse is to call for h_____p.
2. Step 2 in responding to relapse is to figure out what s_____d the relapse.
3. Step 3 in responding to relapse is to take a_____n to interrupt a relapse.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. It is best to:

- A. Plan ahead and tell people what my preferences are.
- B. Wait and tell people my preferences during a relapse.
- C. Get a legal document drawn up by a lawyer that explains what my preferences are.
- D. Only talk to people who are on my preferred prescriber list about my preferences.

2. My list of preferences will probably include:

- A. My favorite foods and desserts.
- B. The amount of money I can afford for treatment.
- C. The family and friends I prefer to help me during a relapse.
- D. The time it takes to get to the nearest hospital.

3. My list of preferences will probably also include my preferred mental health providers.

- A. True B. False

4. The list of preferences should not include any medicines because my prescriber makes that choice.

- A. True B. False

Topic Assessment



5. I am confident I have a good plan in place in case I start to have a relapse.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the **end** of the session, answer these questions before turning in this paper:

7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Help That You Prefer

Objectives for this Session

1. Identify at least 1 person you would want to help you during a relapse.
2. Choose at least 1 prescriber or place that you think would be most helpful to you during a relapse.

Plan ahead and make your preferences known. An important part of responding to relapse is deciding ahead of time the people, places, and help that you want. Choose your preferences on the next few pages. Talk with your treatment team, family, and friends about your preferences for when you have a relapse.

Main Learning Point #1

Plan ahead and tell your treatment team about your preferences.

Preferred family and friends. During a relapse, it may be helpful to reach out to family, friends, and other people who support your recovery. Reaching out to people you trust could help you through hard times. Think about the people who support your recovery. You might reach out to your minister, a friend, someone from a support group, your neighbor, coworker, sister, brother, or parent. Make a list of names and phone numbers. Planning ahead might make it easier for you to reach out when you need to. This list of names and numbers might also help someone else make phone calls for you during a relapse.

Help That You Prefer

(continued)



Listed below are the family, friends, and other people I trust who support my recovery. I prefer that these people be called if I need help:

Name	Relationship	Phone Number(s)

24 hour Crisis Line: _____

Main Learning Point #2

Keep a list of preferred family and friends to call if you need help.

Preferred mental health providers. During a relapse, you may reach out to a wider group of mental health providers, as well as to your usual treatment team. The list of your preferred providers may include a certain therapist, nurse, or case manager. You may want to list a drop-in center, crisis team, hospital, emergency room, crisis unit, or other places you trust. Include the name, address, and phone number of each. If there are certain places or people you do not want to work with during a relapse, you may write that preference down too. Let your family and treatment team know where you want to go for help when you need it.

Help That You Prefer

(continued)



If I relapse, the mental health providers and places I prefer are:

Mental Health Provider	Name	Phone Number(s)	Address
Hospital			
Emergency Room			
Crisis Unit			
Crisis Team			
Mental Health Center			
Prescriber			
Therapist			
Nurse			
Case Manager			
Crisis Team			
Drop-in Center			
Other			
Other			

I prefer NOT to get help from: _____

Main Learning Point #3

Keep a list of preferred mental health providers to call if you need help.

Help That You Prefer (continued)

Preferred medicines. Talk with your treatment team about the specific medicines you think will help stop a relapse. Find out what people who know you well, such as your family and friends, think about using some extra medicine to help you manage a relapse. Find out if these are the same medicines that your treatment team thinks would help. Come up with a plan that all of you agree on that explains what medicines to use, when to use them, and for what symptoms or goals.



If I have a relapse, these are my medicine preferences:

Medicines I prefer to take, that are likely to help me during a relapse:	How this medicine usually helps me:
Medications I prefer NOT to take during a relapse:	Problems I had with this medicine in the past:



Do you already have some of the medicine that you can take, or will it be necessary to call your prescriber to get some? _____

What can you, your therapist, and prescriber do to plan ahead and be sure you can quickly and easily get the medication when you need it? _____

Help That You Prefer (continued)

There are many ways to deal with a relapse in addition to taking medicine. Medicine is an important tool, but medicine alone is rarely enough. Work with your treatment team to decide how medicine fits into your plan.

Today you are creating your own relapse action plan. You might also ask if someone on your treatment team has a preprinted plan that you could use. Some preprinted plans have great suggestions and offer options that you can choose to make your plan your own.

Main Learning Point #4

Prepare a list of preferred medicines to use if you need help.

Review & Moving Forward



The main learning points of this session are:

1. _____
2. _____
3. _____
4. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ 1. **STUDY.** I am going to reread my handout at least once.
- ☐ 2. **SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about what I will do if I need help.
- ☐ 3. **PLAN.** I will show my list of preferences to _____ and decide where the list will be kept, so we can both find it when needed.
- ☐ 4. **OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ 5. **CHART.** I will talk to _____ about my preferences and ask if a copy of my preferences could be put in my chart, medical record, recovery plan, or rehabilitation plan.

13

Answers to Common Questions Facilitator Notes

Main Learning Points from last session: *Help That You Prefer*

1. Plan ahead and tell your treatment team about your preferences.
2. Keep a list of preferred family and friends to call if you need help.
3. Keep a list of preferred mental health providers to call if you need help.
4. Prepare a list of preferred medicines to use if you need help.

Review Personal Practice Options from last session.

Tips for this Session

Consider directing participants to each choose one of the questions they would like to talk about during the session. Skip the ones that don't fit the interests of the participants. Be sure to save time to enable people to write their own questions.

General Tips

Myths about learning include:

1. Everyone starts with the same base of knowledge.
2. Everyone learns at the same pace.
3. Everyone learns better by listening.
4. Everyone can immediately link new knowledge to experience.
5. Everyone will learn on his or her own.
6. Learning is the transfer of knowledge from a teacher to a relatively passive learner.

Suggestion for Topic Introduction and Relevance to Participants

"Today we will discuss common questions that are asked about managing illness and relapse. Let's pretend we have a computer that will give us great, easy-to-understand answers to every question we ask about relapse. Let's think of some questions about relapse. What questions would you ask the computer?"

(Encourage responses. You may want to write their questions on the board or a flipchart. If no one thinks of a question, adjust the comment below to reflect they may hear questions and answers during the session that interest them.)

"As we go through the handout, let's see if any of our questions are answered in the workbook. Then we can talk about the unanswered questions that are left on the board."

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. B 2. A 3. B 4. B

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 12: Help That You Prefer



Main Learning Points of Session 12

What were the main learning points of Session 12? If you did not attend the last session, you may guess, and also write the answers as people say them:

Some of the topics I might discuss with my team include:

1. Plan a _____d and tell your treatment team about your preferences.
2. Keep a list of preferred f _____y and friends to call if you need help.
3. Keep a list of preferred m _____l health providers to call if you need help.
4. Keep a list of preferred m _____s to use if you need help.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. All medicines can be restarted at the same dose you were taking before you stopped taking it.

A. True B. False

2. It is best to avoid alcohol because it keeps medicine from working and makes symptoms worse.

A. True B. False

3. You should expect to be able to feel your medicine working immediately.

A. True B. False

4. Having side effects always means you are taking too much medicine.

A. True B. False

5. I am confident I know the answers to common questions about relapse.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

Topic Assessment



At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

8. What I liked about this session: _____

9. How this session could have been better for me: _____

Answers to Common Questions

Objectives for this Session

1. Recognize at least 1 commonly asked question about relapse.
2. Identify 1 common myth about side effects.
3. Identify 1 way that alcohol gets in the way of recovery.

You may have some questions and this is a great time to ask them. We have listed some of the questions that are often asked along with their answers:

Q1. Should I restart my medicine? If I stopped taking my medicine and think I may be having a relapse, is it okay to just start taking my medicine again?

A1. Some medicines have to be restarted at a low dose and gradually increased. It depends on the type of medicine you were taking and how long ago you stopped it. It is best to talk to your prescriber or nurse about starting it again.

Main Learning Point #1

Some medicines have to be restarted at a lower dose.

Q2. Is it okay to drink alcohol? Sometimes I like to drink beer with my friends. I heard it's not good to mix medicines and alcohol, so should I stop taking my medicine when I plan to go drinking?

A2. It is best to avoid alcohol because it keeps medicine from working and makes symptoms worse. As a general rule, it is wise to always take your medicine. Skipping even one dose can cause your brain chemistry to get out of balance. If you really want to drink with your friends, talk to your prescriber about it. Beer and other alcoholic drinks can be dangerous when combined with some medicines, especially anti-anxiety medicines. Your prescriber can tell you if it is dangerous to have a beer or other alcohol with the type of medicine you are taking.

Answers to Common Questions

(continued)

Main Learning Point #2

Alcohol can keep medicine from working and can make symptoms worse.

Q3. Is it OK for me to exercise? Can exercise make my symptoms worse?

A3. Exercising is a great idea and it is a healthy habit. Exercise can help improve mood, solve sleep problems, reduce tiredness, manage stress, lose weight, and reduce your risk of health problems. Just don't overdo it! It is a good idea to talk to your prescriber or nurse before you begin an exercise program, like lifting weights or doing aerobic exercise (such as marching in place or "race walking"). People tend to feel better after they are physically active. Taking a 10-minute walk or dancing to your favorite music are good ways to start!

Q4. What can I do to remember to take my medicine? I have a lot of trouble remembering to take my medicine. What should I do?



A4. There are several things you can do. Many people find some of these ideas work for them. Choose the idea that you think will be the best solution for you:

- ☐ **Use a pillbox.** Fill a weekly pillbox with your medicine once a week. Keep the pillbox in a place where you will see it often during the day, such as next to your favorite chair at home.
- ☐ **Put medicine next to your toothbrush.** Keep your medicine next to your toothbrush so you will remember to take it when you brush your teeth each day (which is a very important habit to have). Make sure this is a safe place for your medicine (out of the reach of children and pets).
- ☐ **Use shoes and a pillow.** Put your medicine with your shoes when you go to bed at night, so you will remember to take it when you put your shoes on the next morning. Then, put your medicine on your pillow each morning, so you will remember to take it at night when you go to bed. Make sure this is a safe place (out of reach of children and pets).

Answers to Common Questions

(continued)



- ☐ **Take medicine with meals.** If you have a habit of eating meals in a certain place, put your medicine in that spot, so you will remember to take it at meal time. Make sure this is a safe place (out of reach of children and pets).
- ☐ **Mark it down.** If you are using a symptom tracker, you may also want to use it to keep track of the medicine you have taken. After taking your medicine, put a checkmark on that day.
- ☐ **Post a reminder.** If you can't leave medicine out where you can see it (for example, because children may get it), then post a reminder note beside your favorite chair, next to your toothbrush, inside your shoe when you go to bed at night, or on your pillow when you get up in the morning.
- ☐ **Ask for help.** You may want to ask a friend or family member to hand you your medicine or remind you to take your medicine each day.
- ☐ **Ask about a shot.** Some medicines can be given by injection every 2-4 weeks instead of taking pills every day. If you think it would be better for you to get an injection, talk to your prescriber about this idea.

Q5. How can I tell if my medicine is working? I can't tell if my medicine is working. Does that mean it is not doing anything for me?

A5. Don't expect to feel your medicine working immediately. Your medicine is not like pain pills, cough medicine, or street drugs. Your medicine helps keep your symptoms under control without giving you a "buzz" or "high," and without numbing your body to pain. It may work quietly, without you really noticing that it helps, sort of like the medicine for high blood pressure or diabetes. You may not really see the difference from day to day. If you want to know if it works on the symptoms that are important to you, consider using a symptom tracker.

Main Learning Point #3

Don't expect to feel your medicine working immediately.

Answers to Common Questions

(continued)

Q6. What can I do if I have side effects? If I have side effects, like being too sleepy during the day, restlessness, increased appetite, or if my hands shake, does it mean I am taking too much medicine?

A6. Having side effects may NOT mean you are taking too much medication. All medicines can have unwanted side effects. Depending on the medicine you are taking, you may still have side effects, no matter how small of a dose you are taking. If you are bothered by side effects from your medicine, tell your prescriber or nurse. Some side effects go away as your brain adjusts to the medicine, so just taking it longer will help solve the problem. If not, then your prescriber may be able to help by adjusting the dose or giving you another medicine to relieve your side effects. Don't make changes to your medicine on your own. Talk to your prescriber if you have any ideas on how you would like to change your medication or dosage. Your prescriber is trained to work with you to find the medicine and dosage that is right for you.

Main Learning Point #4

Having side effects does not necessarily mean you are taking too much medicine.

My Own Questions.

Write the questions you have about relapse, medicine, substances, recovery lifestyle habits, and more. Ask your treatment team about your questions and write their answers below.



Q1. My question: _____

A1. My treatment team's answer: _____

Q2. My question: _____

A2. My treatment team's answer: _____

Review & Moving Forward



The main learning points of this session are:

1. _____
2. _____
3. _____
4. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. What will you do between now and the next session? Please choose one option from the list below:

- ☐ 1. **STUDY.** I am going to reread my handout at least once.
- ☐ 2. **SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about the questions that are most important to me.
- ☐ 3. **LIST.** I will make a list of my questions, talk about them with _____ and take notes of answers.
- ☐ 4. **OTHER:** _____

Take an “Extra Step Forward” (optional)

- ☐ 5. **TAKE ACTION.** I am going to write down a plan about how to remember to take my medicine. I will then discuss the plan with _____

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When You Are Feeling Your Best Facilitator Notes

Main Learning Points from last session: Answers to Common Questions

1. Some medicines have to be restarted at a lower dose.
2. Alcohol can keep medicine from working and can make symptoms worse.
3. Don't expect to feel your medicine working immediately.
4. Having side effects does not necessarily mean you are taking too much medicine.

Review Personal Practice Options from last session.

Remember

It is important to acknowledge and discuss participants' successes, progress, and challenges.

Tips for this Session

1. If you use the suggestion for topic introduction, you may want to write the two columns on the board or a flipchart before the session starts.
2. If time permits at the end of this session, consider asking participants to talk about what they have gotten out of the workbook. This ends another workbook, so mark the achievement.

Potential Problem

A participant just recently started attending sessions and has missed most of the information.

Possible Response

Example: “We are very happy you decided to join us. Keep attending, because we are about to start again with Session 1 when we meet the next time.”

General Tip

Once again, this is an opportunity to celebrate the completion of a workbook.

General Note

If you are interested in an outcomes measurement for this workbook, you may want to consider using the Personal Growth Initiative Scale (PGIS), developed by Christine Robitschek, Ph.D., the Quality of Life Index by Dr. W. O. Spitzer, 1980, or the COOP Chart for Primary Care Practices (Eugene C. Nelson, 1987).

The PGIS (Christine Robitschek, Ph.D) is a 9 question, self-report instrument that yields a single scale score for personal growth initiative. Personal growth initiative is a person's active and intentional involvement in changing and developing as a person. The PGIS consists of nine items that are rated on a Likert scale from 1 = Strongly Disagree to 6 = Strongly Agree. Item scores are summed to obtain a total PGI score. There is evidence that high scores on the PGIS are strongly positively related to psychological well-being and lower scores are related to psychological distress. Reliability and validity evidence has been strong. The PGIS takes about 5 minutes to complete, and there is no time limit. <http://www.ppc.sas.upenn.edu/ppquestionnaires.htm>

The Quality of Life Index, by Dr. W. O. Spitzer, has both a 5 topic self-rating scale and a 5 topic clinician scale, which allows clinicians to compare their impressions to a client's perception. The dimensions measured Activity, Daily Living, Health, Support, and Outlook. The clinician version measures from 0 - 2 with 0 indicating lower quality

Facilitator Notes (continued)

and 2 indicating higher quality of life. This instrument has been used in many studies and is considered a reliable and valid tool.

The COOP scales (The Dartmouth/Northern New England Primary Care Cooperative Information Project) were developed to create a system to measure health status in physicians' offices. One of the basic tenets of the charts is that the functioning of the person as a whole is more important than that of separate organ systems. You may have seen some of the graphic charts (e.g., the "face" charts to measure feelings). Other graphic charts measure daily activity levels, social activities, physical fitness, change in health, overall health, social support, and quality of life. These charts are widely used in studies and are found to have good reliability and high validity. They are rated as useful by high numbers of office staff and clients.

The editors believe this scale (or these scales) fit the content of this workbook well. These and other health measures can be found in McDowell, (2006).

Suggestion for Topic Introduction and Relevance to Participants

"When you are feeling your best, does that mean you do not need medicine any longer?"

(Encourage discussion among participants.)

"If you feel your best, does that mean you are cured? Let's assume that feeling your best is the opposite of relapse. Let's do an interactive exercise together."

1. Draw two columns on the board, "Feeling My Best" and "Relapse," and encourage participants to write the same information on paper.
2. Instruct participants to list three personal examples under each title.
3. Facilitate discussion among the participants about the things they will do in order to feel their best and to reduce their risk of relapse.

"Let's review the main points from our last session and answer the first six questions on the Topic Assessment before we start, just to see how familiar we are with this topic."

Topic Assessment Answer Key

1. B 2. A 3. B 4. C

T – topic introduction
R – relevance to participant
I – identify objectives
M – materials for session
M – motivate to use

Review of Session 13: Answers to Common Questions



Main Learning Points of Session 13

What were the main learning points of Session 13? If you did not attend the last session, you may guess, and also write the answers as people say them:

Some of the topics I might discuss with my team include:

1. Some medicines have to be restarted at a l_____r dose.
2. Alcohol can keep m_____e from working and can make symptoms worse.
3. Don't expect to feel your medicine w_____g immediately.
4. Having side effects does not necessarily mean you are taking too much m_____e.

Personal Practice Option Review:

What personal practice option(s) did you choose?

Did you complete your personal practice yet?

☐ 1. **Yes.** How did it go? _____

☐ 2. **No.** What got in the way of completing your practice?

If you still plan to complete your practice, when will you do it?

☐ 3. **I didn't choose a personal practice option.**

Topic Assessment



Mark one: ☐ Pre ☐ Post

Your Score:
+ ____ out of 4

Directions:

1. Read each question carefully.
2. Read every answer before marking one.
3. Mark only one answer to each question.

Name: _____

Date: _____

1. It is okay to cut back on medicine or stop taking it if my symptoms go away.

A. True B. False

2. Managing my illness can help me reach my life goals.

A. True B. False

3. If I start to notice my symptoms getting worse, I should wait for several days until I am sure before I tell anyone.

A. True B. False

4. I can reduce my risk of relapse by:

- A. Taking medicine just when I think I need it most.
- B. Stopping any medicine that causes me to be sleepy or uncomfortable.
- C. Keeping my symptoms under control.
- D. Waiting for the next appointment with my prescriber to talk about problems that got in the way of staying on my medicine.

5. I am confident I know how to reduce my risk of relapse when I am feeling my best.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree	Unsure

Topic Assessment



6. This information is important for me to know.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

At the end of the session, answer these questions before turning in this paper:

7. This session helped me.

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Strongly Disagree	Disagree	Neither Agree Nor Disagree	Agree	Strongly Agree

8. What I liked about this session: _____

9. How this session could have been better for me: _____

When You Are Feeling Your Best

Objectives for this Session

1. Identify 2 important ways to reduce the risk of relapse.
2. Understand 1 way managing your illness helps you.
3. Name 1 connection between reducing relapse and personal goals.

Take medicine the right way, even when symptoms go away.

When you are doing really well and feeling your best, that is when you need to be especially careful to do everything you can to reduce your risk of relapse. Sometimes when you are not having a lot of symptoms, it is easy to forget what it was like when your illness was out of control. It may be tempting to think you are cured and stop taking medicine. You might start to be less careful about avoiding alcohol or watching for signs of relapse.



How will you deal with the temptation to stop taking or cut down on your medicine when you are feeling your best? _____

Main Learning Point #1

Take medicine the right way, even when symptoms go away.

Managing your illness can help you reach life goals. Think of your medicine, recovery lifestyle habits, and other ways to manage a relapse as the bricks that build your future. Keep building to reach your goals every day. Continue to do everything you can to keep a relapse from happening, even if you've been successfully managing your illness for many years.



I will keep building toward my recovery by _____

When You Are Feeling Your Best (continued)

Main Learning Point #2

Managing your illness can help you reach life goals.

Recognizing and responding to relapse can help you move your life forward.

Millions of people take medicine for different kinds of health problems. Many have found that it is better and easier to prevent problems than to recover from relapse. Managing stress, taking medicine, avoiding substances, taking care of yourself, and monitoring your symptoms are the best things you can do to reduce your risk of relapse and reach your recovery goals.



The most important habit I will pay attention to and practice is _____

Main Learning Point #3

Recognizing and responding to relapse can help you move your life forward.

When You Are Feeling Your Best (continued)

You can reduce the risk of relapse by keeping symptoms under control.
Avoid substances. Take medicine the right way, even if symptoms go away. Pay attention to your symptoms because they can warn you if you are about to start a relapse. If you notice your symptoms are starting to get worse, tell someone on your treatment team. Don't wait. Do it right away. Quickly recognize and respond to relapse so you can continue to reach your recovery goals.

Main Learning Point #4

**You can reduce the risk of relapse
by keeping symptoms
under control.**



The most important point that I have learned from these sessions is _____

Review & Moving Forward



The *main learning points* of this session are:

1. _____
2. _____
3. _____
4. _____

Move Forward – Choose a Personal Practice Option

It's important to practice new knowledge and skills. Although this is the last session in this workbook, you may still want to practice this important subject. Please choose one option from the list below:

- ☐ **1. STUDY.** I am going to reread my handout at least once.
- ☐ **2. SHARE.** I will share my handout with someone in my support system. I will ask _____ to read it and talk with me about how to stay healthy even when I am feeling my best.
- ☐ **3. WRITE.** I will write a list of my life goals to remind me why it is so important to keep working on my recovery. I will put it someplace I can see it every day.
- ☐ **4. OTHER:** _____

Congratulations! You have finished the final session of this workbook!

Team Solutions

Certificate of Achievement

is presented to

for completion of

Recognizing and Responding to Relapse

Facilitator

Date

References

- Bisbee, C.C. (2001). *Educating patients and families about mental illness*. Montgomery, AL: CC Bisbee and Associates.
- Broderick P.J., Benjamin A.B., & Dennis L.W. (2005) Caffeine and psychiatric medication interactions: a review. *J Okla State Med Assoc.*, 98(8), 380-4
- Coutu D.L. (2002). How resilience works. *Harv Bus Rev*, 80(5), 46-50, 52, 55.
- Diamond, R & Scheifler P. (2007). *Treatment collaboration*. New York: WW Norton & Co.
- Gilmer T.P., Dolder C.R., & Lacro J.P., et al.(2004). Adherence to treatment with antipsychotic medication and health care costs among Medicaid beneficiaries with schizophrenia. *Am J Psychiatr.* 161(4),692-699.
- Kopelowicz, A; & Liberman, R.P.(2003). Integrating treatment with rehabilitation for persons with major mental illnesses. *Psychiatric Services*, 54(11), 1491-1498.
- Lamberti, J.S. (2001). Seven keys to relapse prevention in schizophrenia. *J Psychiatr Pract.*, 7(4), 253-9.
- Leete, E. (1994). Stressor, symptom, or sequelae? Remission, recovery, or cure? *The Journal of the California Alliance for the Mentally Ill*, A Vision of Recovery. 5(3).
- Liberman, R.P., & Kopelowicz, A. (2005). Recovery from schizophrenia: A concept in search of research. *Psychiatric Services*, 56(6), 735-742.
- Lyon, E.R. (1999). A review of the effects of nicotine on schizophrenia and antipsychotic medications. *Psychiatric Services*, 50(10),1346-50.
- Marzano R.J., Pickering D.J., & Pollock J.E., (2001). Classroom instruction that works: *Research based strategies for increasing student achievement*. Alexandria, VA: Association for Supervision and Curriculum Development.
- McDowell, (2006). *Measuring health: A guide to rating scales and questionnaires*, 3rd Edition. Oxford, NY; Oxford University Press.
- Ong A.D., Bergeman C.S., Bisconti T.L., & Wallace K.A. (2006) Psychological resilience, positive emotions, and successful adaptation to stress in later life, *J Pers Soc Psychol.*, 91(4),730-4.
- Richardson G.E. & Waite P.J. (2002) Mental health promotion through resilience and resiliency education. *Int J Emerg Ment Health*, 4(1), 65-75.
- Richardson G.E.(2002). The metatheory of resilience and resiliency. *J Clin Psychol.*, 58(3), 307-21.
- Scheifler, P.L. (2002). Relapse management: *A computerized workbook*. Sylacauga, AL: Partnership for Recovery. Retrieved 11/11/07 from <http://www.recovery.bz>.
- Scheifler, P. (2003). Helping yourself prevent relapse. In *Team solutions* (3rd ed.). Indianapolis: Eli Lilly and Company.
- Scheifler, P.L. & Bisbee C.C. (2007). *Symptom Tracker*, Sylacauga, AL: Partnership for Recovery. Retrieved 11/11/07 from <http://www.recovery.bz>.
- Scheifler, P.L. Recognizing Your Symptoms., Sylacauga, AL: *Partnership for Recovery*. Retrieved 11/11/07 from <http://www.recovery.bz>