

For people experiencing difficulties around alcohol use

This booklet is designed to help you reduce and control your alcohol use.

Aimed at:

- THOSE WHO ARE DEPENDENT ON ALCOHOL
- THOSE WHO ARE ENGAGING IN EXCESSIVE DRINKING WITH NEGATIVE CONSEQUENCES
- THOSE WHO CARRY OUT OFFENCES WHILST UNDER THE INFLUENCE OF ALCOHOL
- THOSE WHO WOULD LIKE TO ACHIEVE ABSTINENCE OR REDUCE AND CONTROL THEIR USE
- ANYONE WHO IS CONCERNED THAT THEIR DRINKING IS AFFECTING THEM IN A NEGATIVE WAY



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Alcohol Dependence vs Alcohol Abuse

Recreational Use

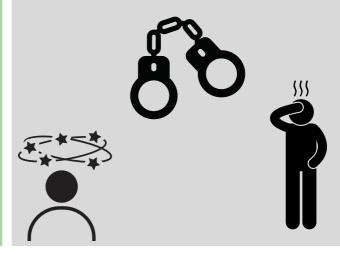
- Many people use alcohol recreationally. Recreational use can be occasional or regular but it tends to be regulated and controlled and the user is seeking the pleasure-producing qualities of alcohol.
- Guidelines recommend that individuals do not drink more than 14 units per week which should ideally be spread over
- at least 3 days. It is also recommended that on a single drinking occasion, males have no more than 7 units and females have more than 5 units. You should have a minimum of 2 alcohol-free
- days.
 Note that recreational use of alcohol can lead to dependence or problematic use over time.





Problematic Use / Abuse

- With problematic alcohol use, it is not necessarily the frequency of alcohol use that is the primary 'problem' but the effect that alcohol is having on a person's life.
 For example, a person may experience emotional, financial, legal, social, or physical problems as a result of their alcohol use.
- Problematic use / abuse often involves black-outs (not remembering what you did whilst under the influence of alcohol) and / or feelings of guilt, anxiety, remorse.
- Many people might not believe that their use of alcohol is problematic as at this stage as they are usually able to function in daily life without too many difficulties



Alcohol Dependence

- An individual can develop a psychological and / or physical dependence to alcohol.
- Some signs that you may be developing a dependence to alcohol include:
- 1. Worrying about where your next drink is coming from and planning social, family or work events around alcohol
- 2. Finding you have a compulsive need to drink and difficulty stopping once you start
- 3. Waking up and drinking or feeling the need to have a drink in the morning
- 4. Suffering from alcohol-withdrawal symptoms which stop once you drink alcohol.

Psychological Dependence

- Psychological dependence refers to the mental or emotional aspect of alcohol.
- If you are psychologically dependent on alcohol, you may experience psychological withdrawal symptoms when you stop drinking, such as depression, anxiety, irritability and insomnia.



Physical Dependence

- Physical dependence refers to way your body depends on alcohol to keep it feeling a certain way. If you are psychologically dependent on alcohol, it does not necessarily mean that you are physically dependent.
- Dependence is influenced by your genes as well as the environement e.g. stressful events
- Physical dependence is characterised by tolerance and withdrawal
- 1. *Tolerance:* needing more alcohol to achieve desired effect
- 2. *Withdrawal:* negative effects experienced if alcohol is not consumed e.g. sweating, shaking, sickness, seizures. These negative effects are relived by consuming more alcohol. Each withdrawal is potentially worse than the last.

Recovering from Alcohol Dependence

- It can take 3 months to a year to recover from the effects of alcohol withdrawal and even then the brain remains sensitive to alcohol.
- This is why we usually recommend that you don't start drinking again, even in moderation



Contents

1) Know your Stuff! (p 2-9)

- Alcohol dependence vs. alcohol abuse (p2)
- Know your units (p3)
- My current drinking (p4)
- Alcohol audit (p5)
- Blood alcohol concentration (p6)
- Mythbuster Did you know? (p7)
- Breaking the Stigma (p8)
- Harm reduction advice (p9)

2) Reducing and Controlling my Alcohol Use (p10-15)

- Why do I drink? (*p10-11*)
- Stay the Same, Cut Down or Quit? (p12)
- Strategies to Reduce and Control my Alcohol Use (p13)
- Drink-Diaries (p14)
- Alternatives to Drinking (p15)

3) Managing My Triggers and Cravings (p16-21)

- Urges / Cravings to Drink (p16)
- My Triggers (p17)
- My High Risk Situations (p18)
- Managing Cravings (p19)
- Urge Surfing Riding the Wave (p20)
- Craving Diary (p21)

4) Thinking about Change? (p22-25)

- The Cycle of Change (p22)
- Considering Change Pros and Cons (p23)
- What will change be like for me? (*p24-25*)

5) Alcohol-Related Consequences (p26-29)

- Consequences of My Drinking (p26)
- Alcohol and My Emotions (p27)
- Alcohol and Violence (p28)
- Alcohol and Risky Situations (p29)

6) Goal Planning (*p30-33*)

- My Goals (*p30*)
- Who can help me Achieve my Goals and How? (p31)
- My Plan *(p32)*
- Further Support (p33)

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Know Your Units

A unit is the term used to measure the amount of alcohol being consumed. A unit is 8mg (10ml) of pure alcohol. In the UK, it is recommended that both men and women do not exceed drinking more than 14 units per week in order to reduce risk of developing alcohol-related diseases. It is also important to have alcohol-free days.

Strength	Measure	Unit			
Beer, Lager, Cider					
2%	Bottle (330ml) Can (440ml) Pint (568ml) Litre	0.7 0.9 1.1 2			
4%	Bottle (330ml) Can (440ml) Pint (568ml) Litre	1.3 1.8 2.3 4			
5%	Bottle (330ml) Can (440ml) Pint (568ml) Litre	1.7 2.2 2.8 5			
6%	Bottle (330ml) Can (440ml) Pint (568ml) Litre	2 2.6 3.4 6			
9%	Bottle (330ml) Can (440ml) Pint (568ml) Litre	3 4 5.1 9			
	Wine, champagne, sparkling wine				
10%	Small Glass (125ml) Standard Glass (175ml) Large Glass (250ml) Bottle (750ml)	1.25 1.75 2.5 7.5			
11%	Small Glass (125ml) Standard Glass (175ml) Large Glass (250ml) Bottle (750ml)	1.4 1.9 2.8 8.3			
12%	Small Glass (125ml) Standard Glass (175ml) Large Glass (250ml) Bottle (750ml)	1.5 2.1 3 9			
13%	Small Glass (125ml) Standard Glass (175ml) Large Glass (250ml) Bottle (750ml)	1.6 2.3 3.3 9.8			
14%	Small Glass (125ml) Standard Glass (175ml) Large Glass (250ml) Bottle (750ml)	1.75 2.5 3.5 10.5			
Spirits e.g. gin, vodka, rum, whisky, tequila, sambuca, etc.					
Approx. 40%	Single (25ml) Double (50ml) 0.5 Litres 0.75 Litres 1 Litre	1 2 20 30 40			

My Current Drinking

What am I currently drinking?

How many units does this add up to?

Units are usually noted on the alcohol you are drinking. Alternatively you can use the table on the previous page or multiply the total volume of your drink (ml) by it's ABV (%) and divide the result by 1,000.

How many hours will it take for your body to process these units?

Particularly important for drivers. Generally, it takes one hour for one unit of alcohol to be processed by the body. However, age, gender, and other individual differences can influence the rate alcohol is broken down.





	0	1	2	3	4	Score
How often do you have a drink containing alcohol?	Never	Monthly or less	2-4 times a month	2-3 times a week	4+ times a week	
How many units of alcohol do you drink on a typical drinking day?	1-2	3-4	5-6	7-9	10+	
How often have you had 6 or more units (Female) or 8 or more units (Male) on a single occasion in the last year?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you found that you were not able to stop drinking once you had started?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you failed to do what was normally expected from you because of your drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you needed an alcoholic drink in the morning to get yourself going after a heavy session?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you had a feeling of guilt or remorse after drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
How often during the last year have you been unable to remember what happened the night before because you had been drinking?	Never	Less than monthly	Monthly	Weekly	Daily or almost daily	
Have you or somebody else been injured as a result of your drinking?	No		Yes, but not in the last year		Yes, during the last year	
Has a relative, friend, doctor or other healthcare worker been concerned about your drinking or suggested that you cut down?	No		Yes, but not in the last year		Yes, during the last year	
SCORING: 0-7 No or low risk 8-15 Increasing risk 16-19 Higher risk or harmful use 20+ Possible dependence	Note: This i to identify y alcohol-rela not to d whether dependent	/our risk of ated harm, iagnose you are	TOTAL SCORE:			

Blood Alcohol Concentration



The amount of units you consume over time determines your blood alcohol concentration (BAC). This, in turn, is what can lead to accidents or illness caused by alcohol. Read the effects at each BAC. Which ones can you relate to?

20mg%

40mg%

55mg%

60mg%

80-100

mg%

120mg%

200mg%

300mg%

450mg%

Light and moderate drinkers begin to feel subtle effects e.g. slight mood changes. This is the approximate level reached after 1 drink.

Light and moderate drinkers begin to feel relaxed. At this level, there is enough impairment of reaction time and fine motor skills that driving is affected.

Any positive genuinely positive effect of alcohol will already have occurred by the time 55mg% is reached. Above this, effects tends to turn negative - judgements, alertness and self-control deteriorate. Memory is affected and we become more selective; we forget the less positive effects that occur at higher BAC levels.

Judgement is impaired. We are less able to make rational decisions about our abilities and take more risks than we would when sober. Learning and memory are also impaired. This is recommended as the occasional limit maximum drinking ceiling. Lowered inhibition.

Definite impairment of muscle coordination, reaction time, memory and driving skills. We are more likely to get into accidents and other acute harms associated with loss of coordination.

Vomitting typically occurs unless this is reached slowly or there is high tolerance. Vomitting is the body's first defences against overdose. At 150mg% balance is imparied and most people have difficulty walking in a straight line.

Many people experience a black-out; they will have no memory of all or part of what happened during the time their BAC is at this level.

Most people lose consciousness - the body's last defence against overdose.

The average fatal overdose for adults; breathing and heartbeat stop.

Which effects can you relate to most?

Mythbuster – did you know?

Males and females differ in their ability to metabolise alcohol.

This is due to variations in the amount of activity of enzymes (alcohol dehydrogenase) responsible for the breakdown of alcohol. Males have highly active forms of this enzyme in their stomach and liver which can reduce the absorption of alcohol into the bloodstream by 30%! In contrast, females do not have this enzyme in their stomach and so absorb more alcohol into their bloodstream. Additionally, the enzymes in a female's liver are less active than in males. The result is that females have higher Blood Alcohol Concentrations than men if they both consume the same amount of alcohol, and hence it is easier for females to become intoxicated. Further, males tend to have more muscle tissue than women and women tend to have more fat tissue. Muscle tissue has better blood supply, meaning alcohol is more concentrated in females (especially as they generally have smaller livers and smaller circulatory volumes).

Alcohol impacts us differently as we age. As we age it can take twice as long for our bodies to metabolise alcohol. This can be due to a number of reasons including: sarcopenia, reduced enzymes, and reduced blood flow. Tolerance for alcohol decreases as we get older. This is due to steatorrhoea.

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Alcohol does not keep you warm.

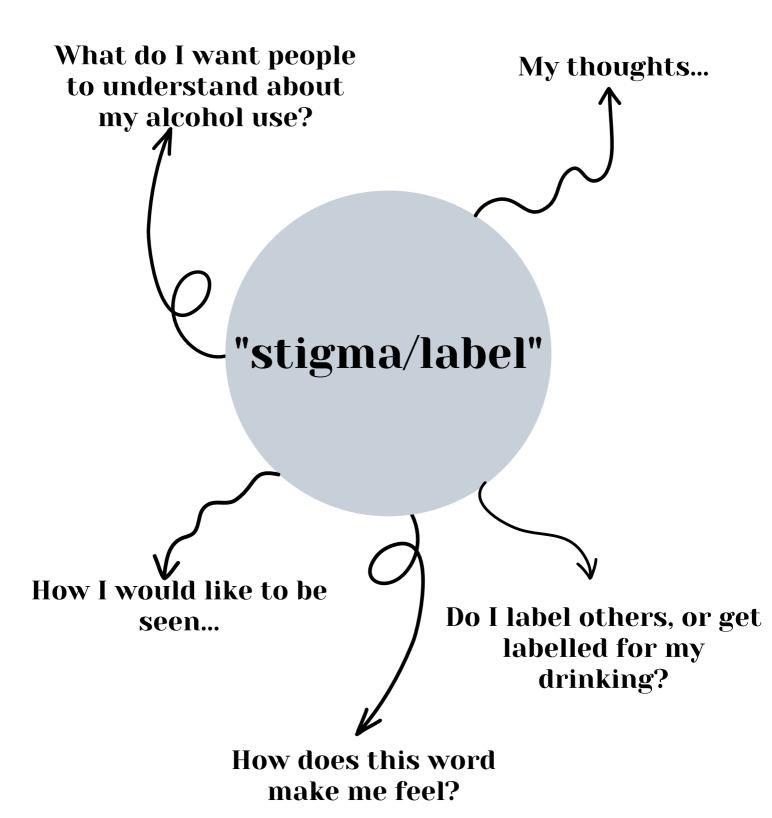
Alcohol can gives you a false sense of warmth. When you drink, your blood vessels dilate, sending more blood to your skin which makes you feel warmer but in fact you are losing heat to the enviornment faster.

Alcohol is the most costly drug in the UK.

This is due to the numbers of admissions to hospital and mental health units that are related to alcohol use.

Breaking the stigma

You might have heard, or may even use, the term 'alcoholic' to describe someone who drinks alcohol. This word is a label that could contribute towards stigma against people who need support with their alcohol use. What do you think?



Alcohol Harm Reduction Advice

How to Reduce Risk of Developing Dependence

- Take regular breaks from drinking i.e. alcohol-free days. Drinking regularly builds up a tolerance. This means you need more alcohol to get the same effects.
- Consider the reasons why you might drink to excess and do something about it. If you have been using alcohol as a coping mechanism for stress, boredom, past trauma, or to handle social situations then it might be worth talking to your GP to discuss any mental health related issues, learning new positive coping strategies, or finding things you enjoy doing.

Alcohol-Related Illnesses

- Alcohol use can increase your risk of developing high blood pressure, stroke, cancer, heart disease, liver disease and alcohol-related brain damage.
- There is no safe level of alcohol consumption. Alcohol is a causal factor in over 60 diseeases (WHO 2018).
- 85% of dependent drinkers have a thiamine (vitamin B1) deficiency. This is responsible for converting food to energy to keep the nervous system healthy. It is important to incorporate a thiamine-rich diet if your alcohol use is high. Alternatively, you can talk to your GP about accessing a thiamine prescription.
- If you are pregnant, it is safest to avoid drinking alcohol altogether to reduce risks to the baby. You can speak to your midwife for advice if you are concerned.



Physical Dependence

- If you experience aclohol-withdrawal symptoms you should sip at your alcohol until the sypmtopms subside.
- DO NOT let your symptoms get out of hand. If you start to experience palpitations, visual hallucinations (seeing things that aren't real), or seizures (fits) please go to A&E or call 999 as some withdrawal symptoms can be fatal.
- DO NOT stop drinking alcohol completely if you are physically dependent.

Symptoms of withdrawal

- Nausea/ vomiting
- Agitation
- Anxiety
- Shakes and sweats- short & frequent
- Tactile disturbances i.e. pins & needles
- Visual disturbances- what is the lighting like?
- Tremors
- Orientation & clouding of surrounding environment
- Headache
- Auditory disturbances
- Delirium Tremens: Nightmares, agitation, global confusion, disorientation, visual and auditory confusion, fever

Dangers of Poly-Drug Use

- Whilst it is not illegal, alcohol is a drug. When combined with other medications and / or illicit substances it puts you at higher risk of harm and overdose.
- Mixing alcohol with other depressants can slow down your breathing and result in overdose.
- Mixing alcohol with cocaine can create a toxic substance in your body called cocaethylene. This can put an extra 12 hours of stress on the liver.
- Mixing alcohol with any stimulant can mask the effects of alcohol, leading people to drink more and end up more intoxicated than they realise.
- Alcohol mixed with prescribed medication can overload the liver.
- Taking alcohol with any other drug can also make you feel more intoxicated more quickly and cause you to do things you wouldn't usually do.



Why do I drink?



It is important to think about the reasons you drink as this can be different for everyone. Identifying why you drink can help you to make a plan to address these reasons.

Why do I drink? (Tick those that apply)	Usually	Sometimes	Never
To feel more confident			
Because it makes me feel good			
Because everyone I associate with drinks			
To help me sleep			
Because I enjoy the taste			
To help me relax			
To relieve boredom			
Because I have to in order to feel well			
To forget my worries			
To celebrate			
To be sociable			
To cope with my emotions e.g. anger, stress, anxiety, depression			
To get drunk			
To block out the past			
Because it's a part of who I am			
Out of habit / routine			
Because I feel pressured			

Are there any other reasons why you drink? What are they?

What is your main reason(s) for drinking? How else could you address this?

Example: "My main reason for drinking is to relieve boredom. I could try to address my boredom by doing things I enjoy such as starting a new hobby and spending more quality time with my family."
 Example: "My main reason for drinking is because I will experience withdrawal symptoms if I stop. However, prior to this I drank because I was stressed. I could address these issues by seeking support for my mental health and implementing strategies to gradually reduce my use."

Stay the Same, Cut Down or Quit?

What changes would you like to make to your alcohol use? Are you hoping to achieve abstinence, or reduce and control your use? People have been successful at achieving both changes, but cutting down and controlling is usually the first step to achieving abstinence. It can be easy for reduced / controlled use to become problematic again over time. Abstinence can be a more effective option, but you can still relapse. This is why it was important that we considered the route causes of your drinking, as long-term abstinence is likely to involve new healthy routines and coping strategies that do not involve alcohol.



Reducing and Controlling my Alcohol Use

Small changes can make a big difference in reducing your chances of having alcohol-related problems. Whatever strategy you choose, give it a fair trial and if it doesn't work try something else. If you haven't made any progress reducing and controlling your drinking after 2-3 months you may want to consider giving alcohol up altogether.



Keep track of how much you drink. Find a way that works for you: carry a drink-diary in your wallet, make tick marks on a calendar, enter notes in a mobile phone or pad, or download a mobile app. Making note of each drink before you drink it may help you slow down when needed. Monitoring your drinking may also give you greater insight into your pattern of drinking and can provide insight when you have drank over your limit.

Count and Measure

Know the standard drink sizes and the number of units you are drinking. You can use the table you saw earlier in this booklet to help, or you can find the number of units you are drinking written on the side of the bottle or can (usually inside a picture of a bottle or glass).

%

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Switch to Lower Percentage Alcohol or Dilute Drinks

Stop drinking alcohol that has high alcohol concentration such as spirits and wine. Switch to drinks that are lower in percentage. This also applies to switching to lower percentage beer / cider. You can also try aclohol-free alternatives. Avoid drinks that can be drunk quickly such as shots, cocktails, and alcopops. If you are having difficulty switching to a lower percentage alcohol, you could try diluting drinks (e.g. with lemonade, water, tonic, or juice). By doing a 50:50 ratio, you can half the number of units you are having in one sitting.



Pace and Space your drinking.

When you drink, pace yourself. Sip slowly and have no more than one drink standard drink with alcohol per hour. Take small sips and put your glass down in between drinking. You can also have 'drink-spacers' which means making every other drink non-alcoholic e.g. water, soda, or juice. Try to ensure that you do not drink one drink in less than 30 minutes and always allow time between consuming one drink and the next.

Reducing and Controlling my Alcohol Use

Know how long you need to wait until your next alcoholic drink. On average, each unit you drink will stay in your bloodstream for approximately 1 hour. By knowing how many units you are drinking, you can work out how long it will take your body to process this and therefore how many units are in your system at one time. Set Realistic Goals and Plan Ahead Decide how many days a week you want to drink, and / or how many drinks you want to have on a drinking-day. Set an upper-limit. It's a good idea to work towards having non-drinking days. Each week, you can review your goals until you get your drinking down to a level you are happy with. People who stay within the government recommended guidelines (14 units per week) have the lowest rates of alcohol-related problems. You should also plan how to manage your cravings and how to avoid triggers. **Include Food and Water** Don't drink on an empty stomach. Eat some food so the alcohol will be absorbed into your system more slowly. Also, ensure you are drinking plenty of water in order to stay hydrated. **Find Alternatives** If drinking has occupied a lot of your time, then fill free time by developing new, healthy activities, hobbies, and relationships, or renewing ones you've missed. If you have counted on alcohol to be more confident in social situations, manage your mood or cope with problems, seek other healthy ways to deal with these areas of your life. Remember, you are likely to be offered a drink at times so you should 'know your NO'. The faster you say 'no thank you' to an offer the less time you have to think of excuses to go along with it. WHAT IF I GET ALCOHOL WITHDRAWAL SYMPTOMS WHEN TRYING TO CUT DOWN? If you experience aclohol-withdrawal symptoms (e.g. hand tremors ('the shakes'), sweating, nausea, palpitations, etc.) you should sip at your alcohol until the symptoms subside or have 1 unit per hour initially and then monitor the symptoms to see if you can lengthen the time between each drink. DO NOT let your symptoms get out of hand but attend to them when they begin. If you start to experience palpitations, visual hallucinations (seeing things that aren't real), or seizures (fits) please go to A&E or call 999. DO NOT stop drinking alcohol completely if you are physically dependent.



Drink-Diaries

It is good practice to keep a record of your drinking as part of a 'drink-diary'. Ask your practitioner to provide you with one. It will look similar to the one below. It is useful to keep a record particularly if you are interested in accessing clinical treatment for your alcohol use, but also as a tool for you to track and review your drinking over time and acknowledge any patterns.

	Date	What did you drink and how much? (amount / cost)	What times did you drink throughout the day?	Where were you?	Who were you with?	How did you feel before / after?
Monday						
Tuesday						
Wednesday						
Thursday						
Friday						
Saturday						
Sunday						

Alternatives to Drinking

Earlier in this booklet, you considered the reasons why you drink. Depending on your reasons for drinking, you will need to find other alternatives that work for you. This could be things that you enjoy doing that do not include alcohol, things you can do to disctract you from drinking alcohol, or things that help you achieve the same desired effects of alcohol (for example, things that help relax you or that make you feel more confident). There are some ideas below, and you can also think about your own

ideas!

Ways to distract myself

- Go for a walk
- Take a hot bath or shower
- Clean the house
- Watch TV
- Listen to music
- Run some errands
- Visit or phone a friend / family member
- Play a game
- Do some cooking
- Go to the shops
- Do some organising
- Start a journal or scrap book
- Practice mindfulness
- Read a book
- Learn something new
- Go to a new group or class
- Practice Self-Care

Things I enjoy doing without alcohol

- Exercise
- Sport
- Going out to eat
- Going to the cinema
- Shopping
- Meeting a friend for coffee
- Being creative e.g. painting, drawing, colouring, making things
- Computer games
- Knitting / sewing
- Writing
- Singing
- Dancing
- Reading
- Spending time with my family
- Walking the dog

Things that help me achieve the desired effect of alcohol

- Spending time by myself to relax
- Practicing self-care
- Practicing mindfulness / grounding techniques
- Looking after my appearance so I feel confident
- Spending time with people who care about me
- Working towards my goals
- Practicing grattitude tasks / positive thinking
- Going to places where I feel comfortable
- Buying new clothes

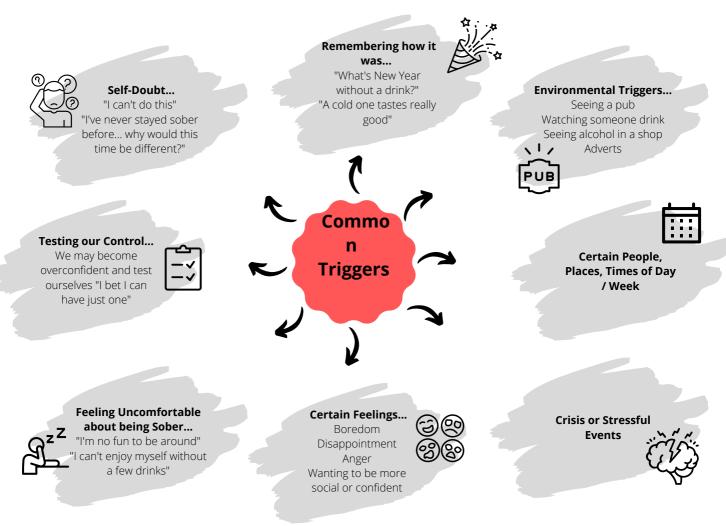
My Own Ideas

Urges / Cravings to Drink

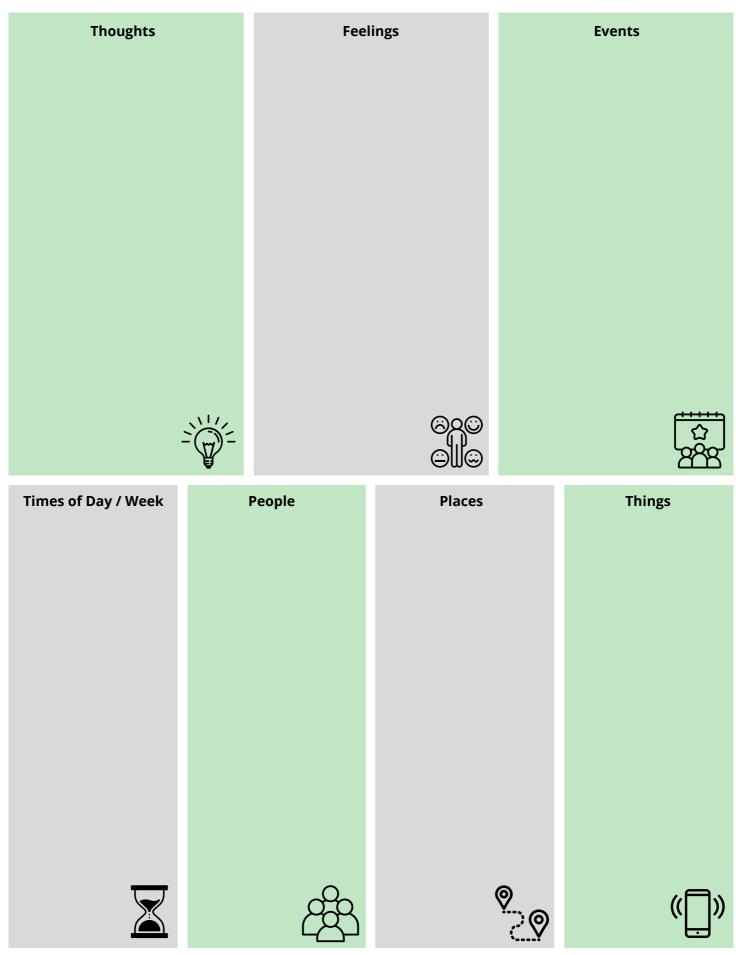
Urges or cravings to drink are normal for anyone who is learning to live without alcohol. The chances are, you will get them at some point . They vary in intensity, from a fleeting thoughts about alcohol to pacing around totally dominated by feelings and thoughts about drinking.

The good thing is that cravings do become less frequent and less intense over time. You can think about cravings like a hungry cat, the more you feed it, the more it keeps coming back. If you stop feeding it, it eventually stops coming back.

Urges and cravings are a warning sign that you need to take action and do something. The best thing you can do is learn about your own cravings, find out your triggers and learn what to do when you experience cravings to avoid giving in to them.



My Triggers



My High Risk Situations

SITUATIONS WHEN I AM MOST AT RISK OF DRINKING	HOW CAN I AVOID, COPE WITH, ESCAPE, OR PLAN AHEAD FOR THESE SITUATIONS?

Managing Cravings

Recognise the Craving

Immediately verbalise to yourself that you are having a craving. Think about your behaviour and feelings. This helps you reduce fear of the craving and gives you a chance to analyse it.

What thoughts went through your mind? What were you doing? How were you feeling?

How strong was the craving? How long did it last?



Change the Trigger Situation

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Think about your triggers and try to either: Plan ahead - think about how you are going to deal with any triggers in advance and make a plan. Avoid / replace the situation by doing something else. If drinking at home is a problem, keep litle or no alcohol there. Escape the situation - recognise when you are in the trigger situation and have a plan ready to leave.

Change your Thoughts

"I know I can't have just one and stop" "I don't have to drink to have a good time" "Is it worth testing myself?" "Look how far I've come, I haven't had a drink for a month" Challenge yourself!



Think about the Benefits of Not Drinking

Focusing on the benefits of change helps to weaken the urge. You could make yourself a list:



Better health Better family life More money Job stability

Recognise the Negative Consequences of Relapse

What would or could you lose? Think about what this would look like for you.



Delay

Cravings can go away after as little as 15 minutes. Don't act on any urges immediately, always try and wait at least 15 minutes. You can use this time to have some space and calm down. You can practice '*urge surfing*'. Imagine you are a surfer riding waves at the beach. As each craving wells up, ride over it and feel it 'crash' beneath you on the beach.

Distract Yourself

Do something that immediately takes your mind off drinking. It is best to do something that requires you to focus and concentrate. This is also a good way of helping you delay the craving until it goes away.



Call for Support

Phone a friend, family member, or professional for support. Ask if they can spend time with you or plan something to do. Use your support network.

Urge Surfing - Riding the Wave

Cravings are like waves they rise and build to a peak before eventually falling back down and crashing to the shore.

Like a wave, the urge you are experiencing to drink alcohol WILL fall, but you have to let it. Remember, intense cravings don't usually last longer than around 20 minutes.

This can take practice. You can use the diagram to practice experiencing an urge or craving, without giving in to it.

You can use mindfulness to imagine surfing the wave as it rises and crashes back down on the beach. What can you see or hear? What is the temperature like? What kind of thoughts are you having?

Keep practicing 'riding the wave' until you are able to do it and make the craving subside.



Craving Diary

It can be helpful to write down when you experienced a craving, what it was like and what you did (or didn't do) to try and stop it. This can help you to identify patterns of what craving-management strategies work for you. You can ask your practitioner for a copy of a craving dairy just like the one below!

Date	How strong was the craving out of 10?	What was I doing when the craving started?	What was I thinking / feeling when the craving started?	What did I do to stop the craving?
01/01/22	8	l was walking past the pub with a friend	"l could just pop in for one after a stressful day"	I challenged my thoughts - I know one is never really one and took my friend to a coffee shop instead.

LASTING CHANGE

New behaviour / change is fully integrated into my life

LAPSE / RELAPSE

'I have returned to old behaviuors' Opportunity for learning



MAINTENANCE

"I am maintaining the changes I have made" "I am relearning positive thinking"



'l am making changes in accordance with my plan for change'



The Cycle of Change

PRECONTEMPLATION

'I don't have a problem' 'I don't want to change'

CONTEMPLATION

'I'm not sure if I want to change' 'I've been thinking about the pros and cons'

PREPARATION

"I am determined to change and I have a \P

'I'm sure I want to change' 'I want to change but I'm worried' 'I'm not sure how to change'

DECISION

Which Stage am I in right now?

Write down some of your thoughts and feelings about change...



Considering Change -Pros and Cons

WHAT IS GOOD ABOUT MY ALCOHOL USE?	WHAT IS BAD ABOUT MY ALCOHOL USE?
WHAT WILL BE GOOD ABOUT	WHAT MIGHT BE BAD ABOUT
CHANGING?	CHANGING?

Ask Yourself:

Are there more positives or negatives of drinking for me?

What does this look like in the long-run? Often, there are short-term positives and long-term negatives.

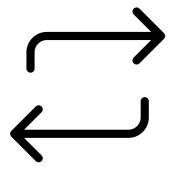
Are there more good things about changing than staying the same? Can I get support with anything that might be bad about changing?

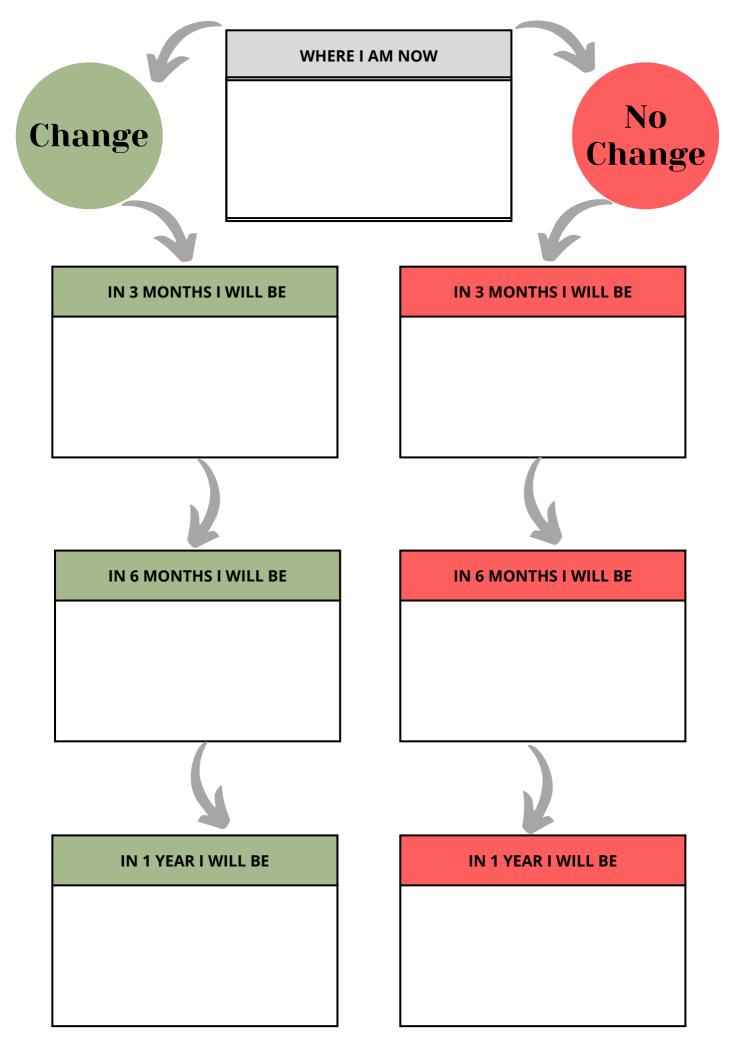
What will change be like for me?

The worst thing about change will be

The easiest thing about change will be	The hardest thing about change will be

What would you want to be different if you were able to change?





Consequences of My Drinking

Excessive drinking can lead to a range of difficulties in different areas of your life. It's important for you to acknowledge what these are to help develop a plan going forward. Remember, this is not about dwelling on the negatives, but learning from them to improve your future. Think about your:

Physical health Mental health Relationships Education / Training / Employment Finances Offending / Involvement with Criminal Justice services Memory

WHAT PROBLEMS HAS MY ALCOHOL USE ALREADY CAUSED?

WHAT FUTURE PROBLEMS COULD MY ALCOHOL USE CAUSE?

HOW CAN I LEARN FROM THIS?

Alcohol and My Emotions

Do you tend to feel a certain way before drinking alcohol? What emotions do you experience?

How do you feel after you drink? How long does this last?

How do you feel the following day?

Alcohol and Violence



- Alcohol can make us more aggressive
- It alters our brain chemicals so the social cues that we'd usually pick up on are misinterperated, which can cause a situation



Describe or draw an incident where you have become violent or aggressive

Describe or draw what happened in the lead up to this? What were you thinking and feeling?

Where were you? Who were you with?

How much did you drink? Any drugs?

What could you have done differently? How could you prevent a similar situation?

Alcohol and Risky Situations

- Are there any other risky situations you have got into whilst under the influence of alcohol? For example, self-harm, an accident, or unprotected sex?
- Drinking alcohol can mean you do things that you wouldn't usually do whilst sober, and that may cause you harm.

Describe or draw a time when you got into a risky situation due to being heavily intoxicated

Describe or draw what happened in the lead up to this? What were you thinking and feeling?

Where were you? Who were you with?

How much did you drink? Any drugs?

What could you have done differently? How could you prevent a similar situation?



My Goals

	My Goal	Changes I can make to Reach my Goal
RELATIONSHIPS		
HOUSING		
SUBSTANCE USE		
FINANCES		
RELATIONSHIPS		
EDUCATION / TRAINING / EMPLOYMENT		
HOBBIES / INTERESTS		
HEALTH		
OFFENDING		



My Plan

You can ask your practitioner for a plan, similar to the one below, to help you make decisions each week about your drinking.

Week commencing	l will drink this many units on a single drinking day	l will have this many alcohol- free days per week	l will stick to these types of alcohol	This is how I will manage triggers / cravings
03/01/22	2 on a week-day and 8 on the weekend	2 - Mondays and Thursdays	Low percentage wine (8%)	I will avoid buying more than one bottle at a time
07/01/22	2 on a week-day and 6 on the weekend	3 - Mondays, Wednesdays and Thursdays	Cider (5%)	I will start spending more time with my family
14/01/22	0 on a week-day and 4 on the weekend	5 - weekdays	Beer (4%)	I will take up a new hobby of cycling
21/01/22	0 on a week-day and 2 on the weekend	6 - Sun-Mon	Diluted beer (2% per drink)	l will practice self-care and good sleep- hygeine
28/01/22	0	7	Nothing	I will start a new training course and speak to a friend if I'm struggling with cravings

Further Alcohol Support

Speak to your practitioner for further advice around alcohol support on offer at GDAS! For example, they can help with a referral for clinical support or rehab.

> Your practitioner can refer you to the Wellbeing College where you can access group support including SMART Recovery and Alcohol Anonymous

Alternatively, you can speak to your GP about your alcohol use, or research rehabs / recovery groups in your area online! Your practitioner can help you with this if needed.