

Relapse Prevention Plan

NAME: _____

DATE: _____

- The most important aspect of this is that the plan is custom-tailored to YOU. This worksheet is designed to help you do this – it should help you become clear on what specific steps you need to take to avoid a relapse.

Instructions: Please respond to the following questions honestly, realistically, and thoroughly.

1. Describe what a relapse would be for you:

2. What motivates you to avoid a relapse? What are the consequences of a relapse?

3. What specific beliefs have been “behind” prior relapses?

4. What warning signs (behaviors, thoughts, feelings, circumstances) would you expect to see in your life prior to a relapse?

5. When you notice such warning signs, what will you do to get “back on course” ?

6. What specific, measurable actions can you take to stay firmly in your recovery?

7. What are the most challenging things you've learned in therapy and why?

8. What are the most helpful things you've learned or experienced in therapy and why?

9. Having accountability partners in your life will greatly help you – these are people who have read and understood this relapse plan and who you will accept feedback from to help you with awareness of any warning signs. Please list at least three people (one cannot be a relative or spouse).

1.

2.

3.