

The Context for Learning and Implementing Awareness Skills

Below is a conception of the context in which a person who seeks amelioration of symptoms from substance use disorders and/or mental disorders currently must operate. Conceived as a series of concentric boxes representing pressures, limits, and/or requirements, the outermost layers are true for more people, more of the time. As the boxes become smaller, they represent a sequence of more specific pressures, limits, or requirements which a person with substance use or mental health challenges must manage. Many opposites are both true.

Caveat: Medical care is the necessary, first order of treatment for substance use disorders and mental disorders and may be sufficient.

Human condition.

Autonomy vs. automaticity. Acceptance of realities of playing mostly solitaire. Playing the cards we were dealt in the past, the cards currently present, and the cards that will keep coming in the future in a conscious, hopeful way, for the time we are given to live one, precious life.

Connection. Staying connected for the purposes of survival, physical and mental health, synergy and strategy, and a sense of well-being, meaning, and purpose.

Humanity. Kindness, compassion, empathy, mercy, and appreciation for all people everywhere *to include the self.* Mindful attachment and bonding with consciously selected "safe-enough" others.

Social context. Moralization, stigmatization, and criminalization of substance use and mental illness result in traumatization, ostracization, discrimination, and internalized stigma. Limited access to evidence-based care.

Language. Precise wording, definitions, labels, and identities through a common, accurate vocabulary must be used to assist and protect individuals and to increase efficiency of receipt of care. Imprecise language causes harm. See <https://www.changingthenarrative.news/>. Example: "a person with a substance use disorder" vs. "an addict" or a "substance abuser."

Self-care. See Self-Care Checklist.

Fundamental awareness skills: 1) attention management skills, 2) emotion adjustment skills, 3) "helpful" vs. "unhelpful" thought-sorting skills, 4) access to inner wisdom. See Awareness Skills Self-Assessment | Attention > Awareness of Feelings and Thoughts > Inner Wisdom

Acute, exact awareness of needs, wants, preferences, strengths, values, priorities.

Personal skills. Individualized use of synthesis of skills from CBT, DBT, CPT*, and other evidence-based protocols to uniquely and specifically assist people with substance use disorders and/or co-occurring mental disorders.

See Awareness + Action + Kindness Worksheet.

Interpersonal effectiveness skills. See The Dialogue.

Deeper awareness + action work. (optional)

Systemically identify + challenge cognitive distortions.

Identify + challenge core beliefs.

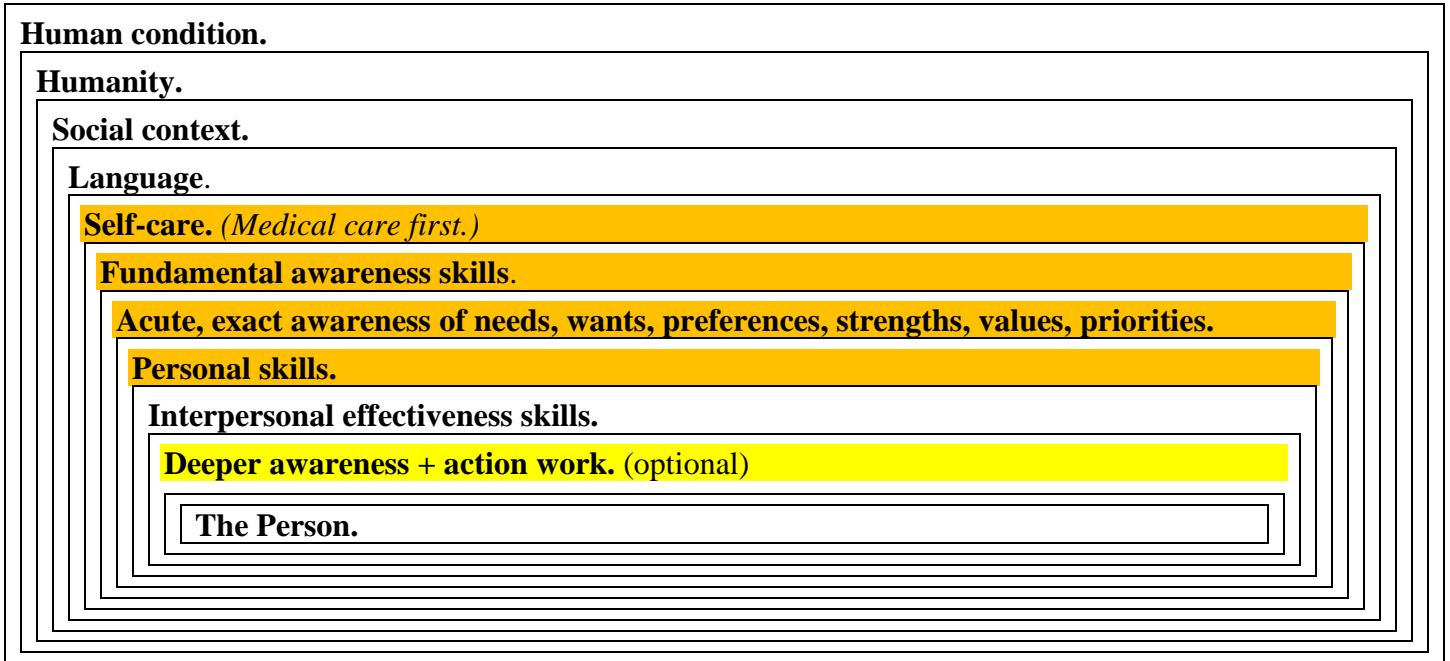
Optimize ways of thinking, feeling, behaving, interacting, relating, working.

The Person

Challenging to influence: The unique traits of this individual's singular brain with its estimated 100 billion brain cells; genetics, temperament, personality; chronic physical conditions; response to environment, experience, trauma, more.

Possible to influence: What the person a) sees to do, b) can and does decide to do, c) can and does take action upon.

In sum, each person with substance use and/or mental health challenges has and/or handles effectively:



Orange indicates content covered in Awareness Skills Group.

Yellow indicates content covered in Applied Awareness Skills Group.

For indicated and related exercises and handouts, please see: <http://www.annegiles.com/guide/>

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