

Staff Guide: Personal Prevention Plan

Whether a person has been in and out of treatment multiple repeatedly or is embarking on recovery for the first time, navigating the urge to use is a part of the journey. As a support person, you have a very important role in helping the individual be as prepared as possible when the urge to use strikes.

The **Personal Prevention Plan (PPP)** should be used as *both a communication and planning tool* that is completed in partnership between the staff and the individual – with the individual being the driver in developing the plan. The approach to completion of the plan should incorporate the following concepts:

Normalizing Conversations About the Urge to Use



Nearly every person in recovery has struggled with the urge to use at one point or another throughout their journey, and many also return to using – more than once. Helping the person you are supporting understand this is part of the recovery experience is key. When a return to use happens, it doesn't mean the person has failed in their recovery journey; it means they are dealing with the same struggles most people face in recovery. Besides feeling like a failure, other common feelings experienced in response to cravings to use, or use itself, are self-blame, guilt, shame, and hopelessness. After normalizing this experience, help the person see and embrace their **strengths** – the strengths that led them to seeking recovery in the first place.

Every Person Has Significant Strengths

The PPP process should be based in helping the person remember – or perhaps discover for the first time – the strengths they already have. As an example, the “What helps me feel better” section is a great opportunity to highlight all the skills the individual has already learned to help them support their recovery.

Note that many people who are entering recovery may have difficulty identifying ANY strengths. Keep in mind as you are facilitating this discussion that helping them find even one – what may seem to be a very small positive thing – is a great starting point!



Decreasing Shame and Stigma Regarding Returning to Use



Many people in recovery have experienced negative consequences from having cravings or urges to use. They may have been accused of “not wanting recovery bad enough” or not trying hard enough. They may have even had punitive action taken against them. This can lead to shame, which can increase the urge to return to use and stop honest communication.

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We want to ensure that when an individual discloses urges to use, it's met with understanding, compassion, and support. For example, instead of saying, "But I thought you were doing so well! What happened?" we say, "I'm so happy you are talking about this with me. This is a normal part of recovery, and seeking support is the best way to keep from using."

Hoping for the Best, and Planning for the Worst

It's important for you as the support person to help frame the purpose of the PPP. The purpose can be described as, "This plan is to help you have a safety net as you navigate life. You may never need to use it, but if you find yourself starting to feel off, that's when you need to pull it out!"



The Importance of Community



It helps to remember that people in recovery did not develop an addiction alone. Similarly, recovery is strengthened when the individual builds a recovery-positive community around them. This community can be made up of people in recovery, supportive staff, friends, faith leaders, and anyone else who is a healthy part of the individual's life.

Here are some tips for completing the PPP:

- The PPP should be completed in a conversation between the support person and the individual. The document is used to capture key points of the conversation and serves as a guide rather than a mandated structure.
- The individual may initially have difficulty answering some of the sections. That is ok. Feel free to move on to another section and then come back to ones that were more difficult.
- A copy of the PPP should be kept in the client's chart, and another should be given to the client to have on hand. It should be revisited and updated at least twice a year.