

Recovery And Relapse Prevention For Eating Addiction: Based On The Eating Addiction Workbook

Presented By

Dr. Stephen F. Grinstead, LMFT, ACRPS

Director of Training For The Gorski-CENAPS® Corporation

Eating Addiction

- Otherwise Known As Binge Eating Disorder
- Not "Diagnosable"
- Not Reimbursable By Insurance Companies
- Not Parity Diagnosed As ED NOS



© Dr. Stephen F. Grinstead, 2016, 1996

Types Of Eating Addiction

- Food Addicts
- Binge Eaters
- Compulsive Overeaters



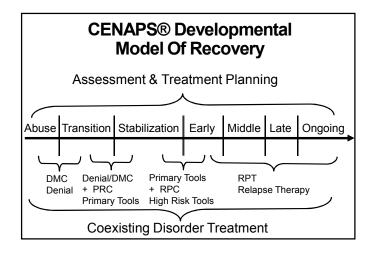
© Dr. Stephen F. Grinstead, 2016, 1996

Stages of Addiction

- Learning/Experimentation
- Social/Recreational
- Seeking/Reaching
- Habitual/Ritual
- Abuse/Dependency
- How Do You Think That This Applies To Eating Addiction?







Developmental Model Of Recovery

- Pretreatment (Using/Abusing)
- Transition
- Stabilization
- Early Recovery
- Middle, Late, And Ongoing Recovery
- How Do You Think That This Applies To Eating Addiction?

© Dr. Stephen F. Grinstead, 2016, 1996

Remember! You Have To Be In

Recovery Before You Can Relapse

Being in recovery requires...

- Understand eating addiction
- Apply that understanding to self
- Accept the painful feelings due to being addicted
- Having hope & belief recovery is possible & preferable than the old way
- Doing the B.P.S.S. recovery footwork needed
- Follow A Healthy Living Plan ~ 60 to 90 days

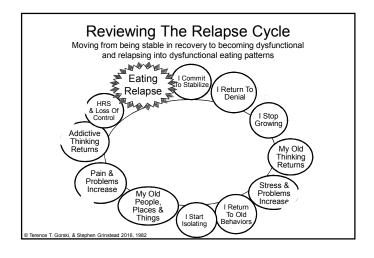
© Dr. Stephen F. Grinstead, 2016, 1996

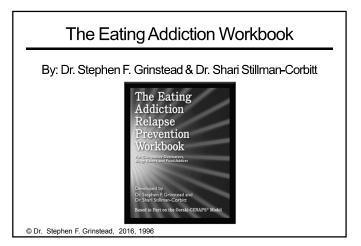
Tools For Moving Into Early Recovery

Moving from stabilization to early recovery requires...

- 1. Identifying and managing stress
- 2. Normalizing and managing cravings
- 3. Identifying and managing high risk situations
 - · Also know as Relapse Justifications







Goals of Eating Addiction RPC

- 1. Develop A Healthy Living Plan
- 2. Define Abstinence
- 3. Decision Making & Addiction Problem Checklist
- 4. Develop A Healthy Living Contract
- 5. Develop A Relapse Intervention Plan
- 6. Identify Eating Addiction High Risk Situations
- 7. Map Eating Addiction High Risk Situations
- 8. Manage Eating Addiction High Risk Situations
- 9. Manage Problematic Decision Points
- 10. Develop A Bio-Psycho-Social-Spiritual Recovery Plan

© Dr. Stephen F. Grinstead, 2016, 1996

Healthy Living Plan?

- Jumping Off The Diet Roller Coaster
 - Diets Don't Work
- Leaving the Magical, Spiritual Solution Behind
- Daily Balance—Sleep, Eat, Exercise, Sunlight
- Creating Accountability



Defining Abstinence Can Be Confusing

- What Does Abstinence Mean To You?
- Developing A Plan Of Eating
- Identifying Your Bottom Line(s)
- Developing A Healthy Living Plan

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

- 1. Problem Title: High Risk Situations
- 2. Problem Description:

The client has made a commitment to stop dysfunctional eating patterns for a period of time and is facing high risk situations that could cause them to start using those dysfunctional patterns again in spite of that commitment.

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

3. **Goal:**

The client will be able to follow a healthy living plan by identifying & effectively managing the immediate high risk situations that can cause going back into dysfunctional eating

Start Date: Date Tx Plan Was Started
 Target Date: Anticipated Completion Date
 Actual Date: Actual Date Of Completion

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

4. Action Plan:

The client will use the following activities to learn how to identify & manage their high risk situations...

- Education Classes
- Group Therapy
- Individual Therapy
- Supervised Study Halls
- Self-help Group Meetings



The RPC Treatment Plan

Step 1: Healthy Living Contract

Making The Commitment To Follow A Healthy Living Plan

The client will agree to ...

Stop using dysfunctional eating patterns for a specified period of time (often the duration of treatment)

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

Step 2: Relapse Intervention Plan

Planning To Stop Relapse Quickly

The client will have a plan for stopping a relapse episode quickly should it occur.

This plan will describe his or her responsibilities, and those of the clinician as well as at least three appropriate significant others.

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

Step 3: High Risk Situation Identification

Becoming Aware Of Slippery People, Places, & Things AKA Playmates, Playgrounds, & Playthings

Client will identify immediate high risk situations that can cause them to start a relapse process in spite of their commitment not to by:

- Reviewing A High Risk Situation List
- Identifying Immediate High Risk Situations
- Writing Personal Titles & Descriptions Of High Risk Situations for Use in Self-monitoring

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

Step 4: High Risk Situation Mapping

Identifying The Exact Sequence Of Events

The client will be able to objectively describe the sequence of events that are part of their personalized immediate high risk situations.



The RPC Treatment Plan

Step 5: High Risk Situation Management

Identifying Points For Change

The client will be able to identify three decision points within the high risk situation (near the beginning, middle, & end of the situation) where they can do something different to avoid using dysfunctional eating patterns.

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

Step 6: Decision Point Management

Learning New Coping Skills

The client will identify new and more effective ways of managing their thoughts, feelings, urges, actions, and relationships (TFUAR's) at each decision point in the high risk situation (HRS)

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

Step 7: Recovery Plan Development

The client will develop a schedule of recovery activities that supports the ongoing identification and healthy management of high risk situations

© Dr. Stephen F. Grinstead, 2016, 1996

The RPC Treatment Plan

Step 8: HRS Management Skill Evaluation

The client will complete a personal evaluation of current skills at managing high risk situations



Formula For Success A Rational, Directive, Supportive Approach	
Disaster	Success
Pre-Judgment_	Understanding
+ Insensitivity	+ Compassion
+ Confrontation	+ Challenge
Power Struggle	Collaboration

Active Listening		
1. Ask A Focused Question		
2. Listen To The Answer		
3. Give Same Word Feedback		
4. Do An Accuracy Check		
Rapport Is Developed		
5. Paraphrase (Give Feedback In Other Words)		
6. Do An Accuracy Check		
7. Ask The Next Question © Dr. Stephen F. Grinstead, 2016, 1996		

Making The Commitment To Stop

- 1. List Problems Forcing You Into Treatment
- 2. Clarify Relationship To Dysfunctional Eating
- 3. Clarify Consequences Of Continued Dysfunction
 - Best Worst Most Likely
- 4. Clarify Consequences Of Stopping Dysfunction
 - Best Worst Most Likely

© Dr. Stephen F. Grinstead, 2016, 1996

Making The Commitment To Stop

- 5. Ask For A Commitment To Follow A Healthy Plan
- 6. Identify High Risk Situations (HRS) That Could Cause Dysfunctional Eating Patterns
- 7. Get A Commitment To Manage Those High Risk Situations



Making The Commitment To Stop Relationship To Consequences Payoffs Of Current **Problems** Dysfucntion Of More Use Stopping Dysfunctional Eating.. 1. Best 1. Worst Problems Othe Caused The Probler People Want 2. Made An Existing Me To Solve. 2. Worst 2. Best Stopped Me From 2. Problems I Solving The Problem Want To Solve . Helped Me Cope 3. Most Likely Most Likely With The Problem Life Better.

- 1. What Do You Want Dysfunctional Eating To Do For You?
- 2. Are You Getting What You Want? If Yes, At What Cost?
- 3. Are You Willing To Stop Using These Until We Complete RPC?

© Dr. Stephen F. Grinstead, 2016, 1996

Healthy Living Contract

- Agree To ...
 - Abstain From Dysfunctional Eating Patterns
 - Report High Risk Situations
 - Report Desire To Stop Treatment
 - Report Relapse (Episodes of Using Dysfunctional Eating Patterns)
- Explain ...
 - Consequences of Getting Caught Using Dysfunctional Eating Patterns

© Dr. Stephen F. Grinstead, 2016, 1996

Relapse Prevention Counseling

- 1. Healthy Living Contract
- 2. Relapse Intervention Plan
 Planning To Stop Relapse Quickly
- 3.
- 4.
- 5.
- 6.
- 7.

© Dr. Stephen F. Grinstead, 2016, 1996

Relapse Intervention Plan

Goal

To Develop A Plan To Stop The Use Of Alcohol & Other Drug Use Quickly If Relapse Occurs



What Clients Can Do To Stop A Relapse

- Recognize That You Started Using Dysfunctional Eating Patterns
- Acknowledge That Dysfunctional Eating Patterns Can Lead To Serious Consequences
- 3. Stop Using Those Patterns Immediately
- 4. Get Out Of The Situation That Supports Dysfunction
- Immediately Call For Help & Get Into A Sobriety Supportive Environment

|--|

Planning To Stop Relapse Quickly

- The Client's Plan To Stop Relapse
 "What will you do if you start to use dysfunctional patterns and want to stop before having serious consequences?"
- The Counselor's Plan To Stop Relapse
 "What Am I (The Counselor) supposed to do if you start to
 use dysfunctional patterns?"
- Involving Significant Others
 Identify Appropriate Significant Others Who Support Your Sobriety "What are they supposed to do if you start to use dysfunctional patterns?"

© Dr. Stephen F. Grinstead, 2016, 1996

Intervention Letter Template

Dear ______, If you see me in trouble with my recovery or actually using addictive eating behaviors I want you to do the following:

- 1. X
- 2. Y
- 3. Z
- 4. Show me a copy of this letter

Signature: _____ Date: ____

© Dr. Stephen F. Grinstead, 2016, 1996

Relapse Prevention Counseling

- 1. Healthy Living Contract
- 2. Relapse Intervention
- 3. Situation Identification
 Becoming Aware Of Slippery
 People, Places, & Things
- 4.
- 5.
- 6.
- 7.



Identifying High Risk Situations

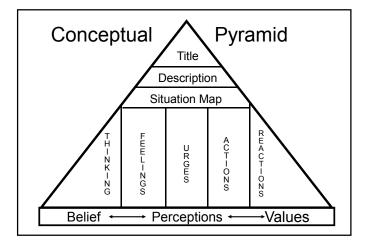
- Ask About High Risk Situations?
 What situations could cause you to use dysfunctional eating patterns in spite of your commitment not to?"
- Review The High Risk Situation List
 Review the list of common high risk situations
 that have caused others to use to use dysfunctional
 eating patterns."
- 3. Personalize The High Risk Situation
 Write a personal title and description
 Start Description With: I know I'm in a HRS when ...
 I think or do something that causes pain & problems and
 I want to deal with it by using dysfunctional eating patterns.

© Dr. Stephen F. Grinstead, 2016, 1996

How The Brain Works

- The Brain Is A Habit Forming Computer Automatic Thoughts
 Automatic Feelings
 Automatic Behaviors
- 2. The Brain Organizes Information Using A Conceptual Pyramid

© Dr. Stephen F. Grinstead, 2016, 1996



Self Awareness

- Most People Are Not Consciously Aware Of Their Inner Processes
 - Never Learned About It
 - Culturally Not Valued
 - Never Practiced The Habit Of Awareness
- Conscious Awareness Is Needed For ...
 - Judgment
 - Impulse Control
 - Self-Motivation



Teaching Self-Awareness

- Consciously ...
 - Notice The High Risk Situation
 - Label It (Give It A Title)
 - Reflect On It (Describe It)

© Dr. Stephen F. Grinstead, 2016, 1996

Teaching Self-Awareness (Continued)

- Consciously ...
 - Map It Into Sequential Steps (Tell The Story)
 - Identify Critical Decision Points
 - Break Decision Points Into Parts
 - · Thought Statements
 - · Feeling Statements
 - Urge Statements
 - Action Statements (Behavioral Descriptions)
 - · Relationship Statements

© Dr. Stephen F. Grinstead, 2016, 1996

Defining A High Risk Situation

Any Experience
That Can Activate The Urge
To Use Dysfunctional Eating Patterns
In Spite Of the Commitment Not To

© Dr. Stephen F. Grinstead, 2016, 1996

Testing A High Risk Situation

- It Occurs At A Specific Time
- It Has A Beginning, Middle, & End
- It Is Time Limited (Usually 24 Hours Or Less)
- It Involves Specific People, Places, Or Things
- It Activates Craving Or Using Dysfunctional Eating Patterns



Making The Distinction

- A Single High Risk Situation OR
- A General Sequence of Events

© Dr. Stephen F. Grinstead, 2016, 1996

Relapse Progression

Irrational Thinking (Unnecessary Pain)

Self-Defeating Behaviors (Unnecessary Problems)

Addictive Thinking (Dysfunctional Eating As Solution)

Addiction-Seeking Behavior (Acting Out)

High Risk Situation That Activates Craving

Eventual Dysfunctional Eating Patterns

Relapse Prevention Counseling

- Healthy Living Contract
- Relapse Intervention
- Situation Identification
- Situation Mapping
 - Identifying The Sequence Of Events
- **●** 5.
- **●** 6.
- **⊌** 7.

© Dr. Stephen F. Grinstead, 2016, 1996

Each HRS Is Composed Of ...

- 1. Internal Factors
 - Biological States
 - Beliefs
 - Perceptions
 - Thoughts
 - Feelings
 - Urges
 - Actions

- 2. External Factors
 - People
 - Places
 - Things
 - Situations
 - Grave Illness
 - Death & Loss
 - Homelessness
 - Joblessness
 - Poverty



Mapping High Risk Situations

- What Situations Should Be Mapped:
 - Immediate Future High Risk Situation
 - Past High Risk Situations
 - That Are Similar To The Identified HRS
 - One That Ended In Dysfunctional Eating
 - One That Was Managed Without Relapsing

© Dr. Stephen F. Grinstead, 2016, 1996

How To Create A Situation Map

- Describe The Exact Sequence Of Events And Behaviors
 - Go Visual, See It In Your Mind
- Clarify All Aspects Of the Situation
 - Who? What? When? Where? Why? How?
- What Did You Want To Accomplish?
 - Getting Into Bad Situations For Good Reasons
- Did You Get What You Wanted?
 - What Did It Cost?

© Dr. Stephen F. Grinstead, 2016, 1996

Clarifying The Big Picture

- What Did You Want To Accomplish By Managing The Situation The Way You Did?
- Did You Get What You Wanted?
- What Was The Price You Paid?
- What Could You Do Differently To Get Your Needs Met In A Healthy Way?

© Dr. Stephen F. Grinstead, 2016, 1996

Testing A High Risk Situation

- It Occurs At A Specific Time
- It Has A Beginning, Middle, & End
- It Is Time Limited (Usually 24 Hours Or Less)
- It Involves Specific People, Places, Or Things
- It Activates Craving Or Dysfunctional Eating
- Has only 6-8 Bullets



Beginning Get Invited To Wedding Decide To Go Show Up Alone Sit With People Who Overeat Refuse To Overeat Refuse To Overeat Get Criticized & Feel Bad Stay Late Of Events Ending © Dr. Stephen F. Grinstead, 2016, 1996

Call To Action Exercise

- What Is The Most Important Thing That You Learned In This Section That Will Improve Your Ability To Help Your Clients?
- What Are You Going To Do Differently As A Result Of What You Learned?
- What Obstacles Could Get In Your Way & What Is Your Plan To Overcome Them?
- Are You Willing To Make That Commitment?

© Dr. Stephen F. Grinstead, 2016, 1996

Relapse Prevention Counseling

- Healthy Living Contract
- Relapse Intervention Plan
- Situation Identification
- Situations Mapping
- Situation Management
 - Identifying Decision Points

© Dr. Stephen F. Grinstead, 2016, 1996

Situation Management

- Identify 3 Decision Points Where More Effective Strategies Could Be Used
 - Near The Beginning
 - Near The Middle
 - Near The End
- What Can You Do Differently At Each Decision Point
- How Will That New Behavior Change The Outcome (Best? Worst? Most Likely?)



Situation Management

- Explore How To Responsibly Avoid The Situation.
- Explore How Stop Dysfunctional Eating Quickly Should It Occur As A Result Of The Situation

© Dr. Stephen F. Grinstead, 2016, 1996

What Can You Do Differently To Avoid Using

Dysfunctional Eating Patterns?

- How Can You ...
 - Avoid The Situation?
 - Change Something Near The Beginning?
 - Change Something Near The Middle?
 - Change Something Near The End?
 - Stop Quickly Should It Occur?

© Dr. Stephen F. Grinstead, 2016, 1996

Relapse Prevention Counseling

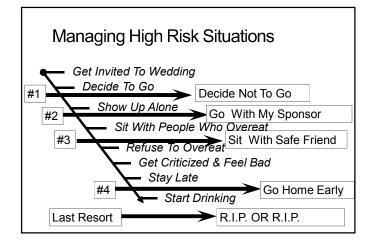
- Healthy Living Contract
- Relapse Intervention Plan
- Situation Identification
- Situations Mapping
- Situation Management
- Decision Point Management
 - Managing TFUARs

© Dr. Stephen F. Grinstead, 2016, 1996

People Who Relapse

- Can't Tell Difference Thoughts & Feelings
- Can't Tell Difference Feelings & Urges
- Can't Tell Difference Urges & Actions
- Can't Control Impulses
- Can't Tell Difference Actions & Reactions

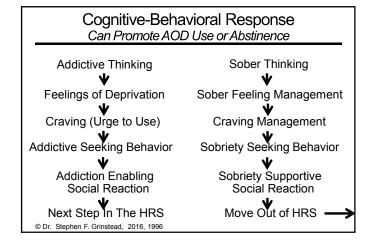


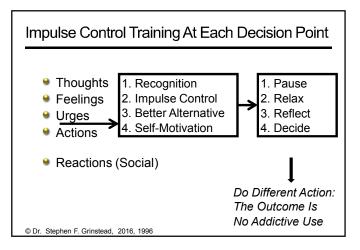


TFUARs That Promote Addictive Use

At Each Decision Point

- Thoughts → That Support Addictive Use
- Feelings → Deprivation Anxiety (F.E.A.R.)
- Urges → Craving That Make You Want To Use In Spite of the Negative Consequences
- Actions → Dysfunctional Behaviors That Lead You Closer To Dysfunctional Eating Patterns
- Reactions → Social & Situational Responses To Addiction Seeking Behavior That Support Your Movement Toward Your Dysfunctional Eating Patterns







Making Sober Decisions

- <u>Pause</u> and notice the urge without doing anything about it;
- <u>Relax</u> by taking a deep breath, slowly exhaling, and consciously imagining the stress draining from your body;
- <u>Reflect</u> upon what you are experiencing by asking yourself: "What do I have an urge to do? What has happened when I have done similar things in the past? What is likely to happen if I do that now?"; and then...

© Dr. Stephen F. Grinstead, 2016, 1996

Making Sober Decisions

- <u>Decide</u> what you are going to do about the urge. Make a conscious choice instead of acting out in an automatic an unconscious way.
- <u>Do It!</u> When making the choice about what you are going to do, remind yourself that you will be responsible for both the action and its consequences.

© Dr. Stephen F. Grinstead, 2016, 1996

TFUAR Management Keep It Simple

Problem	Solution
Thinking ———	
Feeling ———	→
Urges ———	
Actions —	→
Reactions(Social)	R.I.P. or R.I.P.

Relapse Prevention Counseling

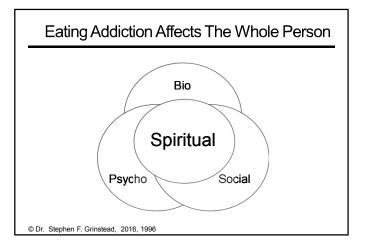
- Healthy Living Contract
- Relapse Intervention Plan
- Situation Identification
- Situations Mapping
- Situation Management
- Decision Point Management
- Recovery Planning
 - Addressing The Whole Person



A Recovery Plan

- Scheduled Activities
 - A Schedule of Activities That Can Help A Person To Identify and Manage High Risk Situations.
- Behavioral Guidelines
 - A Set of Instructions That Shows What A Person Needs To Say & Do During Each Activity To Focus Upon Identifying & Managing High Risk Situations
- Must Include Bio-Psycho-Social-Spiritual

© Dr. Stephen F. Grinstead, 2016, 1996



Treatment Outcomes

Clients Will Understand...

- Eating Addiction
- What Constitutes Healthy Living
- The Recovery Process
- The Relapse Process
- How To Develop A Recovery Plan
- How To Develop A Relapse Prevention Plan

© Dr. Stephen F. Grinstead, 2016, 1996

Web Site Resources

- www.FreedomFromSufferingNow.com
- www.facebook.com/drstevegrinstead
- www.youtube.com/drstevegrinstead
- www.terrygorski.com
- www.cenaps.com
- www.relapse.org

Dr. Grinstead's Contact Information Email: sgrinstead@cenaps.com Phone: (916) 575-9961

