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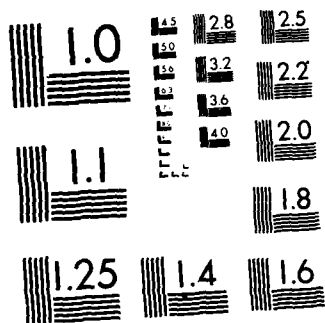
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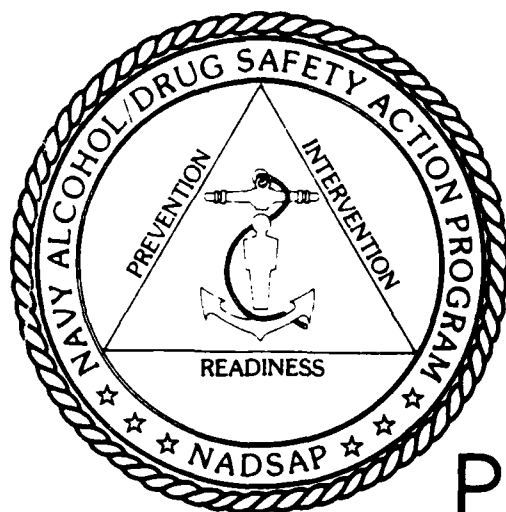
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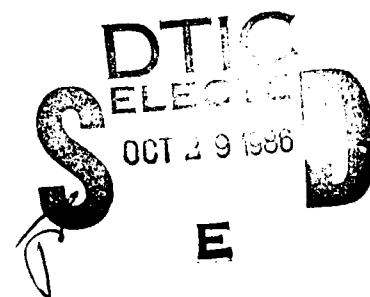
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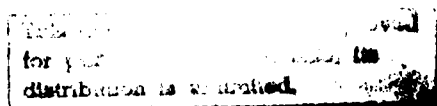
Toward Pride and Professionalism: Increasing Personal Responsibility

STUDENT WORKBOOK

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Prepared through funds by
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Barbara Reed Hartmann, Ph.D.
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This document presents a 36-hour curriculum of the Navy Alcohol and Drug Safety Action Program designed to reduce drug and alcohol related problems in the Navy by increasing resistance to addiction. The responsibility each person holds for his or her own health and well-being as a member of the United States Navy is emphasized throughout the course. The curriculum, which contains facts regarding alcohol, drugs, and stress, consists of supervised practice in communication and adaptability regarding values and decisions about drug practices and lifestyle. The course combines experiential and didactic exercises designed to help students examine the consequences of their choices and develop methods to implement behavioral change. The facilitator guide provides dialogues, reviews, application exercises, summaries, and worksheet assignments for each of the 12 sessions. The student workbook provides students with relevant information and assignments and includes a syllabus of the course which outlines sessions in personal responsibility, addiction, attitudes and values, stress, decision-making, and drug practices.					
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NAVY ALCOHOL AND DRUG SAFETY ACTION PROGRAM (NADSAP)
PRIDE AND PROFESSIONALISM
THROUGH
PERSONAL RESPONSIBILITY

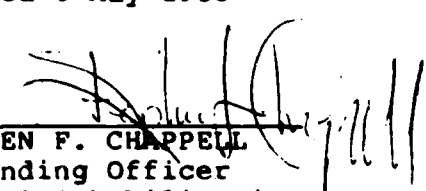
The abuse of alcohol and the illicit or improper use of drugs by Navy members can seriously damage physical and mental health. Lifestyles such as these are self-defeating for the individual and counterproductive to U.S. Navy readiness and retention. The continued abuse of alcohol, drugs or overindulgence in food are inappropriate coping mechanisms which can lead to life threatening diseases (i.e., alcoholism, drug addiction, obesity).

The Navy Alcohol and Drug Safety Action Program (NADSAP) is a secondary preventive education course designed to allow participants to recognize the potential hazards of adverse lifestyles and to make positive commitments toward a more productive and fulfilling quality of life plan. This concept, first explored by the U. S. Navy a decade ago, has undergone considerable change in order to ensure each Navy "family" member has the opportunity to grow into their own potential and become valued members of the service and society as a whole. NADSAP participants gain knowledge in stress management, values clarification, decision making, communications, and information on drugs and alcohol.

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Reviewed and Approved 6 May 1985

Approving Official


STEPHEN F. CHAPPELL
Commanding Officer
Alcohol Rehabilitation
and Training Center
NADSAP National Headquarters
San Diego, California

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SYLLABUS

- I. Personal Responsibility**
 - A. The Class**
 - 1. Establishing Learning Goals for Self
 - 2. Establishing Ground Rules for Class
 - B. The Navy**
 - 1. Navy Policy on Alcohol and Drugs
 - C. Self and Other**
 - 1. Self-Awareness
 - 2. Communication Skills
 - 3. Assertiveness
- II. Addiction**
 - A. The Concept of Addiction**
 - 1. Addiction and Values
 - 2. Addiction and Stress
 - 3. Tracking Personal Behavior
- III. Attitudes and Values**
 - A. Determining Personal Values**
 - 1. Values and Self-Awareness
 - 2. Values and Decisions
 - B. Values Conflicts**
 - 1. Conflicts Between Values and Behavior
 - 2. Values and the Use of Alcohol or Drugs
- IV. Stress**
 - A. The Concept of Stress**
 - 1. Responses to Stress
 - B. Stress Awareness**
 - 1. Personal Patterns of Response to Stress
 - 2. Use of Alcohol and Drugs to Manage Stress
 - C. Strategies for Managing Stress**
- V. Decision Making**
 - A. Decision Making Model**
 - 1. Problem Identification
 - 2. Examining Alternatives and Consequences
 - 3. Choosing Change and Maintaining Change
 - B. Personal Application of Model**
- VI. Drug Practices**
 - A. Why People Use Drugs**
 - 1. Family and Peers
 - 2. Consequences of Alcohol and Drug Use
 - B. Drug Information**
 - 1. Facts About Alcohol and Other Drugs
 - 2. Personal Decisions About Drinking and Driving

ASSIGNMENTS

The thirty six hour course includes several assignments. The assignments will be given by the facilitator and will be completed by the students outside the classroom. Worksheets are provided in the Student Workbook for each assignment. The assignments follow.

1. **Media and Myths**
Collect ads of alcohol, tobacco, coffee, or other substances which convey significant messages or portray appealing scenes to you.
2. **12 Hours Before**
Describe the 12 hours before your last encounter with alcohol or another substance of your choice.
3. **Observation**
Spend at least two hours in a place where people normally gather, and observe the behavior of those around you. Do not drink coffee or alcohol, smoke cigarettes, or use any other drug during this period of time.
4. **Questions for Supervisors**
Following each module, supervisors are to complete items 1 through 4 on the **Questions for Supervisors** Worksheet on a blank sheet. Supervisors are instructed to consider the skills learned in each module and identify how these skills may be applied to their supervisory assignments with subordinates.
5. **Independent Study**
Bring in a newspaper or magazine article about the issue you are working on in the class and the name, address, and phone number of a local resource (an agency, the Y, a self-help group) which you might find useful. Bring in the name, address, and telephone number of another local helping resource which you think other members of the class might find useful.

QUESTIONS FOR SUPERVISORS

The course includes questions for supervisors to answer periodically throughout the thirty six hours. These questions are designed to be answered outside the classroom and to be applied to the varied and complex situations supervisors encounter in their work.

1. How can this skill(s) be applied in your role as supervisor? _____

2. List specific examples: _____

3. Give one example in which you have used this skill(s) successfully: _____

4. Give one example in which you knew what you wanted to accomplish, but you were unable to achieve your goal and did not use the skill(s).

 - a. What was the barrier? _____

 - b. Does the barrier still exist? _____

 - c. What skill(s) might you have used, and how might these have made a difference? _____

 - d. What do you want to work on to improve your ability? _____

BACKGROUND OF THE PREVENTION PROGRAM

1. **The original prevention program** was developed and implemented in 1974 as a result of directives to reduce the number of operational readiness problems related to alcohol abuse and alcoholism within the Navy. In 1980, the Navy expanded the program to prevent problems related to drug use.
2. **The standardized prevention program** is offered as a thirty six hour course on Navy sites throughout the world. The standardized prevention program is subsumed under the Level I arm of the comprehensive Navy alcohol and drug program.
3. **The purpose of the prevention program** is to increase each individual's understanding of his or her own drug and alcohol related behavior, especially destructive behavior resulting from the use of drugs and misuse of alcohol.
4. **The general goals of this skill building course** are:
 - a. to promote the health, fitness, and well being of Naval personnel in order to increase Navy operational readiness;
 - b. to prevent problems that may develop associated with alcohol and drug use in the Navy and to recognize the potential hazards of adverse lifestyles by facilitating the acceptance of personal responsibility in making lifestyle choices;
 - c. to intervene at the earliest possible point to reduce existing problems associated with alcohol and drug use in the Navy by training for self-contracted learning in the class and self-contracted responsible drinking and/or abstinence from alcohol and drugs outside the class; and
 - d. to introduce resources available in the Navy for appropriate action on problems associated with alcohol and drug use with the ultimate goal of building addiction resistant people.

Getting Acquainted

Select a person in the class you want to get to know. Use the following questions as a guide, talk with and then introduce this person to the class.

1. How would you like to be addressed during the class?

2. What kind of work do you do?

3. What do you do after work?

4. How do you feel about your work?

5. How do you feel about your relationships with others?

6. What kinds of things excite you (for example, hobbies or interests)?

7. What kinds of things are problems to you?

8. What kind of life do you want to have?

9. What are 3 things that you like about yourself?
 - a. -----
 - b. -----
 - c. -----
10. What else would you like the class to know about you?

4. The person in this class I choose to help me achieve my learning goal is:

5. This person will provide help to me this week in the following ways:

- a. What I'd like this person to do is:

- b. What I'd like this person to say is:

- c. I'd like this person to offer helpful words or actions at the following times:

6. I will evaluate my results in the following ways at the following times:

7. When I have reached my goal, I will reward myself by:

Signature (Self)

Signature (Witness)

Date

SUMMARY OF POLICY DOCUMENTS ON DRUG AND ALCOHOL ABUSE

I. Basic Policy Documents

A. Public Law 92-129 (September, 1971)

Directed the Secretary of Defense to identify, treat, and rehabilitate members of the Armed Forces who are drug or alcohol dependent and to recommend additional legislative action necessary to combat alcohol and drug dependence in the Armed Forces.

B. DOD Instruction 1010.2 (March, 1972)

Directed the Secretaries of the various branches of the Armed Forces to establish programs for preventing alcohol abuse and alcoholism and for treating and rehabilitating alcohol abusers and alcoholics.

C. Uniform Code of Military Justice

1. Article 111--Drunken or Reckless Driving.
This article specifies that anyone who operates a vehicle while drunk will be punished in whatever way a court-martial directs.
2. Article 112--Drunk on Duty
Punishment is directed by court-martial.

D. U.S. Navy Regulations

1. Article 1150--Alcohol
This article prohibits the introduction, possession, or use of alcoholic beverages on board any ship, craft, aircraft, or vehicle of the Department of the Navy except as authorized by the Secretary of the Navy.
2. Article 1151--Marijuana, Narcotics, and Other Controlled Substances
Marijuana, narcotics, or other controlled

substances are prohibited for use, sale, or transfer on board any ship, craft, aircraft, or within any Naval station, except for authorized medicinal purposes. It is the responsibility of all personnel to prevent and eliminate unauthorized or illegal use of these substances.

II. Policy Documents Related to Alcoholism Prevention

A. SECNAVINST 5300.28 (June, 1981)

1. Promotes the Department of the Navy (DON) policies regarding alcohol and drug abuse and to establish responsibility for executing these policies.
2. States that alcohol and drug abuse is incompatible with the standards of performance, discipline, and readiness necessary in the DON. The goal of the DON is to be free of the effects of drug and alcohol abuse and of the illegal possession and trafficking of drugs and drug paraphernalia.
 - a. Counseling and rehabilitation to restore to full-time duty those members who have potential for further useful military service. Those who cannot or will not be rehabilitated are to be disciplined and/or discharged.
 - b. Training and education in drug and alcohol abuse at all levels within the DON, especially for supervisors and those identified as having drug and alcohol problems.

B. OPNAVINST 5350.4 (November, 1982)

1. Presents a comprehensive substance abuse policy in a unified Navy Alcohol and Drug Abuse Program (NADAP).
2. Re-emphasizes the importance of zero tolerance of drug and alcohol abuse in the DON and enhances detection and deterrence of drug and alcohol abuse at all levels.
3. Reorganizes treatment interventions into a three-level approach.

Level I

- a. The Local Command
Each command is to designate a Drug and Alcohol Program Advisor.

Level II

- b. Counseling and Assistance Centers (CAACs)

Level III

- c. Residential Rehabilitation Programs
 - (1) Alcohol Rehabilitation Centers (ARCs)
 - (2) Alcohol Rehabilitation Services (ARSS)
 - (3) Naval Drug Rehabilitation Center (NDRC)

4. Provides for:

- a. rehabilitation for those with bona fide abuse problems who show potential for further useful military service.
- b. urinalysis as a means of detection and deterrence.
- c. confidentiality. Information concerning alcohol and drug use which one gives to screening, counseling, or rehabilitation personnel for the purpose of seeking treatment is considered privileged information and will not be used against the person in a disciplinary manner.
- d. education and training of DON personnel concerning drug and alcohol abuse with an emphasis on prevention.

QUESTIONS ON POLICY DOCUMENTS

1. Public Law 92-129 (September, 1971) directed the Secretary of Defense to do what about members of the Armed Forces who are drug or alcohol dependent?

2. What are the Navy regulations about the use of alcohol, marijuana, narcotics, and other controlled substances on board ship, craft, aircraft, or within any Naval installation?

3. Article 111 of the Uniform Code of Military Justice states that anyone who operates a vehicle while drunk will be:

4. What does zero tolerance for drug use and alcohol abuse mean?

5. What are the three levels of treatment intervention in the Navy?

SELF-AWARENESS SKILLS

"I know what I want to say, but I'm not sure how to say it." If you've ever had that feeling, you may already know that self-awareness and effective communication are important parts of our daily lives. Whether you are on the job, at home with the family, or out with friends, you are constantly communicating. How well your communication is understood depends on awareness of what you want to say as well as how you say it.

The purpose of the **Self-Awareness Skills** portion of this course is to: better understand yourself and the beliefs and feelings you want to communicate; to learn to take responsibility for communicating your beliefs and feelings to others in a manner in which they can be heard and understood; and to learn to receive communication from others effectively and skillfully.

The **Self-Awareness Skills** section of this course is divided into four modules. Each module provides you with an opportunity to learn a skill, to talk about it with the others in the class, to do written exercises, and to practice using the skill.

Thoughts, Feelings, and Self-Talk

Thoughts, feelings, and self-talk all contribute to the decisions you make. Thoughts are ideas or opinions that you believe are true or right. Feelings are emotions that you experience in your body. Self-talk is the conversation you carry on in your head.

Fill out this worksheet listing your thoughts, feelings, and self-talk in response to each of situations described. An example is provided below:

SITUATION	INITIAL THOUGHT	INITIAL FEELING	ONGOING SELF-TALK
1. The server in the mess gives you spoiled food.	Here we go again...	Tightening in the shoulders.	This is par for the course... I always get the bad food.
1. Your best friend asks to borrow some money for an upcoming leave.			
2. Your supervisor compliments you on your work.			
3. It's the end of the workday. You've just had an argument with your supervisor and are about to leave for home.			
4. The driver in the car next to you abruptly cuts you off.			

5. The cashier at the exchange gives you too much change.

6. Your supervisor changes your duty section. Now you will have duty one day on the next three day weekend.

7. You are involved in what is going on, and the person next to you says, "Isn't this a waste of time?"

8. You just got home after a tiring day at work. Your friend calls and asks you out for a few beers.

Write down one frustrating situation that comes up again and again in your life. Add your thoughts, feelings, and self-talk.

SITUATION	INITIAL THOUGHT	INITIAL FEELING	ONGOING SELF-TALK

Observation to Inference

People make assumptions (inferences) about the meaning of other people's behavior. In this exercise, observe your partner for one minute. Write down four observations and two inferences for each observation.

1. Observation_____	1a. Inference_____
_____	_____
	1b. Inference_____

2. Observation_____	2a. Inference_____
_____	_____
	2b. Inference_____

3. Observation_____	3a. Inference_____
_____	_____
	3b. Inference_____

4. Observation_____	4a. Inference_____
_____	_____
	4b. Inference_____

The Assertiveness Questionnaire

In order to define situations in which you need to be more assertive, complete the following questionnaire.

Check
here if
the item
applies
to you

WHEN do you behave in a passive, aggressive,
or passive aggressive way?

- asking for help
- stating a difference of opinion
- receiving and expressing negative feelings
- receiving and expressing positive feelings
- dealing with someone who refuses to cooperate
- speaking up about something that annoys you
with a peer
- speaking up about something that annoys you
with a superior
- talking when all eyes are on you
- protesting a rip-off
- saying "no" to others
- responding to undeserved criticism
- making requests of authority figures
- negotiating for something you want
- having to take charge

----- asking for cooperation
 ----- proposing an idea
 ----- asking questions
 ----- dealing with attempts to make you feel guilty
 ----- asking for service
 ----- asking for a date or appointment
 ----- asking for favors
 ----- other -----
 WHO are the people with whom you are
 passive, aggressive, or passive aggressive?
 ----- parents
 ----- fellow workers, classmates
 ----- strangers
 ----- old friends
 ----- spouse or mate
 ----- employer, supervisor, or high ranking officer
 ----- relatives
 ----- children
 ----- acquaintances
 ----- sales people, clerks, hired help
 ----- more than two or three people in a group
 ----- other -----
 WHAT do you want that you have been unable to
 achieve passively, aggressively, or passive
 aggressively?
 ----- approval from superiors for things you have
 done well
 ----- to get help from your peers with certain tasks

- more attention, or time with your mate
- to be listened to and understood
- to make boring or frustrating situations more satisfying
- to not have to be nice all the time
- confidence in speaking up when something is important to you
- greater comfort with strangers, store clerks, mechanics
- confidence in making contact with people you find attractive
- getting a new job, asking for interviews, raises, or promotions
- comfort with people who supervise you, or work under you
- to not feel angry and bitter a lot of the time
- overcome a feeling of helplessness and the sense that nothing ever really changes
- initiating satisfying sexual experiences
- do something totally different
- getting time by yourself
- doing things that are fun or relaxing for you
- other -----

Look over your responses to the questionnaire, choose, and write down a situation to practice assertiveness in this class.

***Adapted from: Bower, S.A. and Bower, G.H. Asserting Your Self. Reading, Massachusetts: Addison-Wesley, 1976.**

ATTITUDE AND VALUES CLARIFICATION

Attitudes and values play a central role in our daily lives. Attitude refers to a person's point of view toward self, other, and/or the environment. A value is the guideline or blueprint for personal action which supports the attitude. Systems of attitudes and values vary by individual and among cultures.

The family is the primary agent in the formation of attitudes and value systems. As children grow and develop they learn what their families consider important and desirable. Gradually, children incorporate family values into their own lives and patterns of conduct. Their values do change, though, as their sphere of nonfamily contacts increases. The priority of particular values may also change over time, often to the point where what the individual's peers think becomes more important than the family value.

Sooner or later, you may find yourself wanting to identify what you believe is important in life. You may know in general terms what you want. Perhaps you'd like a new car or money in the bank. But what if you found out you only had a month to live? Would you look at the world in the same way? Or would you discover that you have some deep feelings about people and experiences in your life of which you hadn't been aware.

The **Attitude and Values Clarification** section of this course will provide you an opportunity to examine in detail what you believe to be important, how your beliefs influence your behavior, and how to respond when your beliefs conflict with one another or with those of other people.

Five Personal Values

A value is the guideline or blueprint for personal action which supports an attitude. Some examples of values are listed below.

- | | |
|-------------|--------------------|
| 1. Love | 7. Security |
| 2. Honesty | 8. Wisdom |
| 3. Peace | 9. Trust |
| 4. Beauty | 10. Achievement |
| 5. Equality | 11. Spiritual Life |
| 6. Freedom | 12. Creativity |

Now, write down five personal values of your own that you would like to share with others in the group. You can use the above examples if they apply to you, or list your own values if they are not included in the list.

1. _____
2. _____
3. _____
4. _____
5. _____

Personal Values

The activities you do reflect your personal values. At times, however, your values may conflict with your activities. Fill in the activities you currently do, and refer back to Worksheet AVC I-1, Five Personal Values, to complete the chart.

Activity you currently do.	How much time do you devote to it in a week?	What value or values are demonstrated by this activity?	What value or values are in conflict with this activity?
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Complete the rest of the worksheet in a similar manner.

Activity you would like to do.	How much time would you like to devote to it in a week?	What value or values are demonstrated by this activity?	What value or values are in conflict with this activity?
1. _____	_____	_____	_____
2. _____	_____	_____	_____
3. _____	_____	_____	_____
4. _____	_____	_____	_____
5. _____	_____	_____	_____

Value Conflicts

Refer to the last column of **Worksheet AVC II-1, Personal Values**, and write down your value conflicts below.

1. Value conflict _____

a. What I usually do _____

b. What I'd like to do _____

2. Value conflict _____

a. What I usually do _____

b. What I'd like to do _____

3. Value conflict _____

a. What I usually do _____

b. What I'd like to do _____

4. Value conflict _____

a. What I usually do _____

b. What I'd like to do _____

ADAPTABILITY SKILLS

The purpose of the Adaptability Skills portion of this course is to assist you in understanding and enhancing your adaptive capacities. To achieve this goal, you will learn the physiology of tension and explore the methods you have previously used to deal with it. Besides some techniques for managing stressors and the resulting tension, you will also gain understanding of how thoughts generate your emotions; of the value of directing the conversations inside your head to realistic, useful conclusions. You will also learn how to change your environment in order to reduce the number of demands as well as how to adapt to an environment which is not under your control.

The ordinary demands of living necessitate that people engage in continuous automatic expenditures of energy. These automatic outputs, which serve to maintain the individual's equilibrium or balance, are responses to internal and/or external stimuli.

A stimulus is any input that produces a temporary change in the activity of an organism or in any of its parts. A stressor is any stimulus which creates a demand that upsets the equilibrium, restoration of which depends upon voluntary and not readily available energy expanding action. Any stimulus may or may not become a stressor. The transition zone for a stimulus to become a stressor involves the meaning of the stimulus for the person and the readily available repertoire of adaptive mechanisms. The more meaning a stimulus holds and the lower the repertoire, the greater the probability that a stimulus will act as a stressor.

Stress is the composite demand created by the individual's stressors. Stressors may be an inevitable part of everyday life. In response to a stressor, the person reacts with a state of tension. This state may have destructive, neutral, or enhancing consequences. The actual outcomes depend upon the manner in which the tension is managed. Although the presence of stress acts as a precursor for breakdown, the weakest link in the chain seems to be the area which succumbs to unmanaged tension.

Stress Log

Record three recent events in your life which you experienced as stressful. Then, fill in the rest of the columns. As you fill in the columns, rate the event, the strength of your reaction to the event, and the length of time you felt stressed.

Event: What happened? 1 = Minor 5 = Major			
What was my self-talk?			
Reaction: How did I feel? What happened in my body?			
Strength of reaction 1 = Weak 5 = Strong			
Time: How long did I react? 1 = Short 5 = Long			
What did I do to change my reaction?			

Stressors

Stressors are anything, anyone, or any situation from which you experience pressure and tension.

Work Stressors

Make a list of things that are difficult for you to handle at work.

1. _____
2. _____
3. _____
4. _____
5. _____

Personal Stressors

Make a list of things that are difficult for you to handle in your personal life.

1. _____
2. _____
3. _____
4. _____
5. _____

Which stressors can be changed by you?

Which stressors can't be changed by you?

What are the consequences of being able or not being able to change these stressors?

When you can't change stressors, how can you change to cope?

Locus of Control

This exercise will help you increase awareness of yourself in relation to other people and your environment. It will also help you identify the sources of pressure you feel. All of the statements below reflect beliefs with which you may agree or disagree. Indicate beside each statement in Column I whether you Agree (A) or Disagree (D). There are no right or wrong answers. After the class has completed discussion, fill in Column II as you would like yourself to be.

A = AGREE

D = DISAGREE

I	II	
_____	_____	1. Much of how I react to a situation depends on what I tell myself about it.
_____	_____	2. When I feel calm, it is largely a matter of luck.
_____	_____	3. A lot of the stress I face in my life is caused by my environment, and I can do nothing about it.
_____	_____	4. I can learn how to reduce many of my daily physical complaints (such as headaches, backaches, tense muscles).
_____	_____	5. I prefer to use alcohol and other drugs as one way to relax.
_____	_____	6. When I am around nervous people, I'm bound to get nervous too.
_____	_____	7. When I am faced with a problem, I try different ways of solving it rather than waiting to see what will happen.
_____	_____	8. When I feel pressured, I know that nothing will help. I'll just have to wait until I feel better.
_____	_____	9. The length of my life depends on how I choose to live it.

Column I: Total Internal _____. Total External _____.

Column II: Total Internal _____. Total External _____.

Self-Talk

While listening to the song, jot down only those lyrics that you remember. When the facilitator gives you instructions to do so, write down the feelings you had while listening to the lyrics. When the facilitator gives you instructions to do so, write down your self-talk for each feeling. When the facilitator gives you instructions to do so, complete the last column.

Lyrics that I remember	
Feelings	
Self-Talk	

Coping Self-Talk

Fill out this worksheet in response to the situations described. An example is provided below:

SITUATION	INSULTING SELF-TALK	COPING SELF-TALK
I woke up late for watch.	Oh no! I've really blown it. I'm such an idiot.	Oh no! I've got to get out fast to relieve the watch. I better calm down so I can do my job.
1. I just damaged the fender of my friend's new car.		
2. I just had a fight with my date or spouse and we said goodnight with angry words.		
3.		
4.		

Thought Change

Choose a situation you believe you handled well.

1. Stressful event? _____

2. Your initial body reactions? _____

3. Your initial thoughts? _____

4. Your environment? _____

5. What is your self-talk about the situation now?
 - a. About self _____
 - b. About situation _____
 - c. About future _____
6. How did you arrive at your conclusion that you handled the stressful situation well? _____

Choose a situation you believe you did not handle well.

1. Stressful event? _____

2. Your initial body reactions? _____

3. Your initial thoughts? _____

4. Your environment? _____

5. What is your self-talk about the situation now?

a. About self _____

b. About situation _____

c. About future _____

6. How did you arrive at your conclusion that you did
not handle the stressful situation well? _____

7. What was your change in self-talk that affected
your ability to cope? _____

DRUG PRACTICES

People use drugs and alcohol for different reasons: to relieve discomfort such as pain, anxiety, or tension; to experiment with drug effects; to feel part of a peer group; to fight boredom; to relate to people better; and to help deal with life problems.

Many factors influence your attitudes, values, and decisions regarding drug and alcohol use. These factors include your early home life, your friends and peers, and the regulations of the Navy--the professional group to which you belong.

Even though alcohol and some drugs are generally accepted by society, they can be disruptive to your life. In the **Drug Practices** portion of this course you will examine the effects of drug and alcohol use in your life.

Dependency Log

Refer to your **Daily Activity Log**, and note any habitual behavior that you have logged, whether it is an activity, substance, or relationship. Use the worksheet below to track your attachment to this behavior.

Substance you want to track _____
Number of times used each day _____
Amount used each time _____

Trigger

Behavior

Self-Talk

Feelings

Strength of Attachment
1 = Weak
5 = Strong

Times Noticed

Survey

Please answer the questions to the best of your ability and memory. The final question will be discussed in this class, so answer that question with hints that will help you to talk about it.

1. Did your parents or guardians use alcohol?

2. What is your earliest memory of any kind of drug use in your home?

3. Was alcohol kept in your home?_____ If yes, what quantity?_____ When was alcohol used in your home?

4. What other drugs do you recall your family using? When were other drugs used?

5. What are your parents' attitudes about home remedies or over the counter drugs?

6. What are your parents' attitudes about alcohol?

7. What are your parents' attitudes about marijuana? Other "hard" drugs?

8. Do you have any close relatives whom you believe are alcohol dependent?_____ Brothers or Sisters_____ Mother or Father_____ Aunts or Uncles_____ Grandparents_____

9. Before you used any of these substances, what were your attitudes and beliefs about:

- a. alcohol? _____
 - b. marijuana? _____
 - c. caffeine? _____
 - d. nicotine? _____
 - e. any other drug(s)? _____
10. What was your first alcohol or drug experience? _____
- _____
- What were the circumstances? _____
- _____
- Who was present? _____
- What happened? _____
- _____
- Did you like it? _____
- Why/why not? _____
- _____
11. What are your attitudes and beliefs about the following substances now?
- a. alcohol _____
 - b. marijuana _____
 - c. caffeine _____
 - d. nicotine _____
 - e. any other drugs _____
12. What are the differences between your beliefs and your behavior concerning the following substances?
- a. alcohol _____
 - b. marijuana _____
 - c. caffeine _____
 - d. nicotine _____
 - e. any other drugs _____

Alcohol-Body Weight Interaction

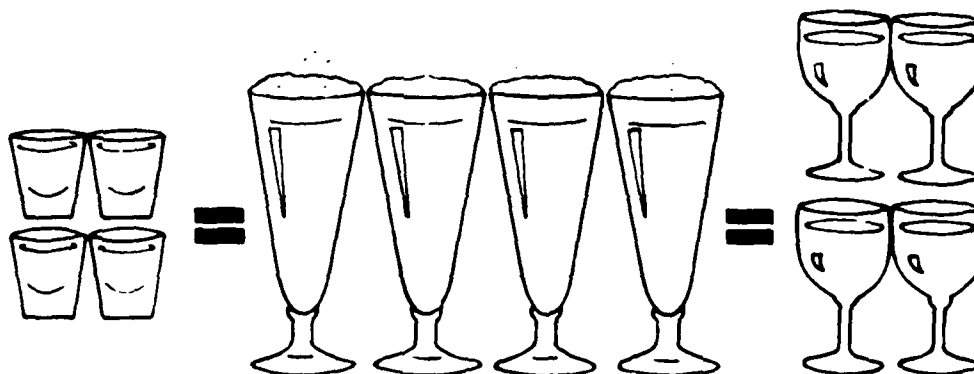
You can use this worksheet to determine your BAC over a 6 hour period of time. The formulas for calculating BAC at your specific weight are below.

BODY lbs. (w)	TIME hrs. (t)	NUMBER OF DRINKS (n)								
		1	2	3	4	5	6	8	10	12
100	1	0.04	0.08	0.12	0.16	0.20	0.25	0.33	0.41	0.49
	2	0.01	0.06	0.10	0.14	0.19	0.23	0.32	0.40	0.49
	3	----	0.04	0.08	0.13	0.17	0.21	0.30	0.39	0.47
	4	----	0.02	0.07	0.11	0.15	0.20	0.28	0.37	0.46
	5	----	0.01	0.05	0.09	0.14	0.18	0.27	0.36	0.44
	6	----	0.01	0.03	0.08	0.12	0.17	0.25	0.34	0.43
150	1	0.03	0.05	0.08	0.11	0.14	0.16	0.22	0.27	0.33
	2	----	0.03	0.06	0.08	0.11	0.14	0.20	0.26	0.32
	3	----	0.01	0.04	0.07	0.10	0.13	0.18	0.24	0.30
	4	----	----	0.02	0.05	0.08	0.11	0.17	0.23	0.28
	5	----	----	----	0.04	0.06	0.09	0.15	0.21	0.27
	6	----	----	----	0.02	0.05	0.08	0.14	0.19	0.25
200	1	0.02	0.04	0.06	0.08	0.10	0.12	0.16	0.21	0.25
	2	----	0.01	0.03	0.06	0.08	0.10	0.14	0.19	0.23
	3	----	----	0.02	0.04	0.06	0.08	0.13	0.17	0.21
	4	----	----	----	0.02	0.04	0.07	0.11	0.15	0.20
	5	----	----	----	0.01	0.03	0.05	0.09	0.14	0.18
	6	----	----	----	----	0.01	0.03	0.08	0.12	0.17
250	1	0.02	0.03	0.05	0.07	0.08	0.10	0.13	0.16	0.20
	2	----	----	0.02	0.04	0.06	0.07	0.11	0.14	0.18
	3	----	----	----	0.02	0.04	0.06	0.09	0.13	0.16
	4	----	----	----	0.01	0.02	0.04	0.08	0.11	0.14
	5	----	----	----	----	0.01	0.02	0.06	0.09	0.13
	6	----	----	----	----	----	0.01	0.04	0.08	0.11

At 1 hr: BAC = $\frac{4.1n}{w}$

At 2-6 hrs: BAC = $\frac{4.35n}{w} - 0.016t$

Defining a Drink



These one ounce jiggers of 80 proof spirits, ten ounce glasses of beer, and three ounce glasses of wine are equal in alcohol content. *

ALCOHOLIC BEVERAGE	PERCENT OF ALCOHOL BY VOLUME	PROOF
Beer	3-6%	6-12
Wine	10-22%	20-44
Liqueur	30-65%	60-130
Rum	34-46%	68-92
Rum 151	75%	151
Gin	37-50%	74-100
Vodka	37-50%	74-100
Brandy	40-50%	80-100
Whiskey	42-52%	84-104
Scotch	42-52%	84-104
Everclear	95%	190
Bilge Wine	?	?

* Courtesy of The House of Seagram

Experience of Pressure

There are times you experience pressure from your peers, and also from your supervisors, your spouse, and your children. Fill out the worksheet below describing from whom you feel pressure (Person), what you feel pressured to do (Activity), what you usually do, what you wish you would do, and how you could change your usual response to be your best response.

Person	
Activity	
Usual	
Best	
Change	

Peers and Substance Use

A peer is someone who is like you in some way. A peer may be someone that you work with or someone that you enjoy being with during your time off. A peer may be a close friend. List one or more people in your life you consider to be peers.-----

Spending time with peers is significant because acceptance by a group usually improves your sense of well being and self-esteem. How is being with your peers important to you?-----

In order to insure your being accepted by the group you may decide to act like others in the group even when you do not share their personal values. The motivation to act as you think a group expects is called peer pressure. What are your experiences with peer pressure?-----

Peer pressure does affect whether a person chooses to use substances. Peer pressure also affects choices about what kinds, how much, when, where, with whom substances are used, and the effect the substances produce. Think about how your different peers feel about drugs, alcohol, and other substances. You might find that you feel the same way. How do your peers currently influence your decisions to drink alcohol, to take drugs, to smoke, to overeat, to drink coffee?-----

Even though the need to be part of a peer group is important you may not always have to do everything that the group does. Sometimes, you might find that you feel uncomfortable following along with what everyone else is doing. You can choose not to follow your group, although one of the consequences may be rejection by the group. What kinds of options could you use to deal with peer pressure?-----

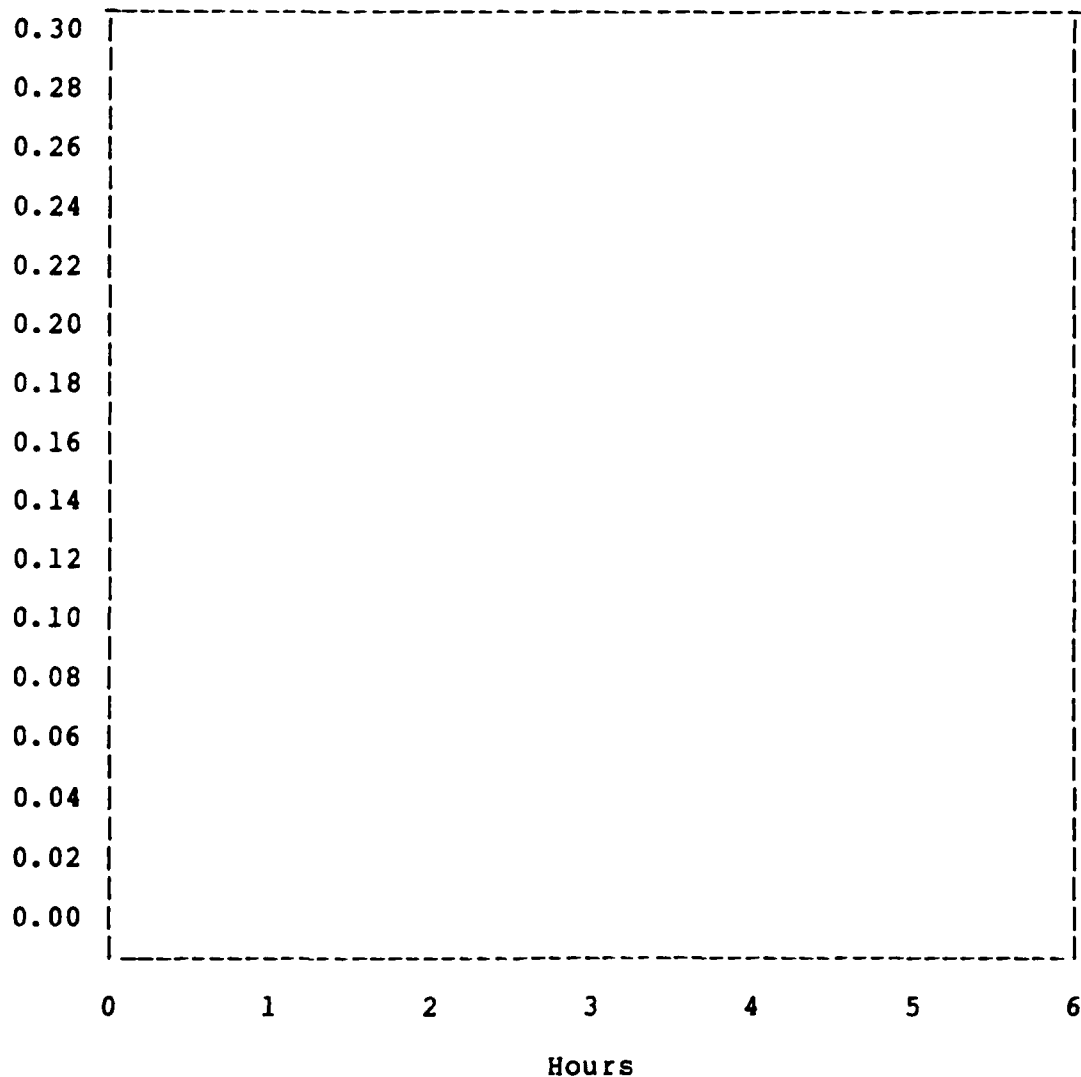
Profile of a Party

This worksheet allows you to track your BAC over a six hour period of time. By recalling an actual party or inventing a classroom party, fill in the columns below, as they apply to your experience. Use the Drink/Drive Calculator in order to compute your BAC.

Time	
Number of drinks in an hour	
Total number of hours since drinking began	
Total number of drinks since drinking began	
Feelings at this time	
Self-talk about decision to have or not have another drink	
BAC	

Blood Alcohol Concentration

Blood alcohol concentration (BAC) results from the rate of consumption of alcohol, as well as the alcohol content of the beverage consumed. In order to plot your BAC over a period of 6 hours, refer to **Worksheet DP III-3, Profile of a Party**, and enter your BAC level at each hour.



Sensing Effects

0.05	Lowered alertness (attention lapses), feeling of well being, release of inhibitions (talkativeness), impaired judgment (talking too loudly).				
0.10	Slowed reaction times and impaired motor functions, carelessness (spilling drinks).				
0.15	Large, consistent increases in reaction time (inability to stop a vehicle in order to avoid an accident).				
0.20	Marked depression in sensory and motor capability, decidedly intoxicated (inability to perform a field sobriety test).				
0.25		Severe motor disturbance (staggering), sensory perceptions greatly impaired (double vision).			
0.30		Stuporous but conscious (no comprehension of the surrounding world).			
0.35		Surgical anesthesia (almost complete loss of feeling and sensation), about LD 1 lethal dose; one of every one hundred persons die with a BAC level of 0.35.			
0.40		About LD 50 (in coma or stupor); one half of all people will die with a BAC level of 0.40.			

MESSAGE

TO: Drinking Drivers

FROM: Police Department

Sorry we missed you last night-- catch you in the morning if you drive.

If you went to bed last night with a blood alcohol concentration of .20 or more, you'll probably still be legally and physically impaired when you drive to work the next morning. You're not hung over--you're still drunk! People only experience the ascending part of BAC curve, not the descending part of the curve.

Self-Contract to Drive Without Drinking

This self-contract sets not drinking and driving as a goal. Everyone is different, and therefore reaches goals in different ways. The self-contract you develop will allow you to reach your goal in your own way.

1. By _____ I will have decided to drive without drinking.
(date) (specific goal)
2. The steps involved in reaching my goal are:
 - a. _____
 - b. _____
 - c. _____
 - d. _____
3. If I become intoxicated, what will I do instead of drive? _____
4. Reaching my goal:
 - a. What might stop me from attaining my goal?

 - b. What might I say that will stop myself from achieving my goal?

 - c. What can I do to help myself reach my goal?

Self-Contract for Responsible Action in a Drinking Situation

This self-contract sets taking responsible action in a drinking situation as a goal. Think of a particular drinking situation you have experienced and develop your goal of responsible action.

1. By _____, I will have _____.
(date) (specific goal)
2. I need to take these steps to reach my goal:
 - a. What I will do is:_____
 - b. When I will do it is:_____
 - c. What I will need is:_____
 - d. How I will do it is:_____
3. Reaching my goal:
 - a. What might stop me from attaining my goal?

 - b. What might I say to myself that will stop me from achieving my goal?

 - c. What can I do to help myself reach my goal?

4. The person I choose to help me achieve my goal is:

5. The person who will support my effort to achieve this goal is: _____
6. This person will provide support in the following ways:
- a. _____
- b. _____
- c. _____
7. I will evaluate my results in the following ways at the following times: _____
8. When I have reached my goal, I will reward myself by: _____

Signature (Self)

Signature (Witness)

Date

5. This person will provide support in the following ways:

a. _____

b. _____

c. _____

6. I will evaluate my results in the following ways at the following times:

7. When I have reached my goal, I will reward myself by:

Signature (Self)

Signature (Witness)

Date

Warning Signals

Some warning signals which indicate that the use of alcohol has become a problem in an individual's life are listed below. Their occurrence signals the need for action.

Review the following alcohol related problem list. Decide which signals apply to you, and mark yes or no. This is intended for your eyes only.

	YES	NO
you have concerns about your drinking	-----	-----
others have concerns about your drinking	-----	-----
miss days at work	-----	-----
driver's license suspended	-----	-----
increased number of family arguments	-----	-----
traffic tickets	-----	-----
neglect family or friends	-----	-----
take things out on your kids	-----	-----
frequent sick days	-----	-----
unable to stop once drinking starts	-----	-----
traffic accidents	-----	-----
going on the wagon	-----	-----
loss of friends	-----	-----
marital problems	-----	-----
morning drinking	-----	-----
use of alcohol to obtain relief from		
tension or other physical discomfort	-----	-----
use of alcohol to get through the		
day or to get to sleep at night	-----	-----
damage to your automobile	-----	-----
employer, supervisor, or coworker		
complains	-----	-----
blackouts	-----	-----
family member(s) alcohol dependent	-----	-----
fail Navy fitness standards	-----	-----
lie about drinking	-----	-----
hide supply	-----	-----
neglect to eat when drinking	-----	-----
difficult to get along with when		
drinking	-----	-----
drink until drunk	-----	-----
unable to pace drinks	-----	-----
annoyed when others refer to your		
drinking	-----	-----
afraid to stop drinking	-----	-----
	TOTAL	TOTAL

Debate

Are Americans becoming more moderate in their drinking practices?

Supporting Evidence

1. Low content alcoholic drinks (wine, light wine, beer, light beer and low alcohol beer) account for the greater proportion (61%) of all liquor sales.
2. Alcohol use has, since 1960, become an increasingly ordinary event in the American lifestyle. More women have become drinkers than before 1960, and most drinking occurs in the home.
3. In 1960, most of the "hard liquor" purchased was 86 proof with a significant proportion of 90 and 100 proof spirits made or sold. In 1980, most spirits purchased were only 80 proof.
4. When dividing sales figures for commercial and homemade liquors by the number of people 14 years of age and older, Americans consume much less alcohol than people in other countries do. Americans consume:
 - 50% less than the French and Portuguese,
 - 40% less than the Germans, and
 - 30% less than the Swiss or Italians.
5. According to the Alcohol Research Group, University of California at Berkeley, the majority of drinkers describe themselves as "moderate" or "light" drinkers, "occasional" rather than "frequent," and "sporadic" rather than "regular."
6. Research studies have shown (for example, Klatsky, Friedman, and Siegelau, 1981) that up to an ounce of alcohol per day may have positive effects on the body, such as increased levels of high density lipoproteins that assist the body

in keeping the circulatory system relatively free of problematic amounts of cholesterol (the fat like substance that sticks to the tissue inside the arteries and veins, resulting in deposits which may block the arteries and veins).

Opposing Evidence

1. A person drinking 3.6 ounces of table wine, 5.4 ounces of light wine, 11 ounces of beer, or 17 ounces of light beer is consuming the same amount of alcohol as the person who is drinking a 1 ounce cocktail. The sizes of the ordinary serving containers for wine and beer have increased since 1960. Most "wine" glasses on the market allow 8-10 ounces of liquid, most "beer" glasses 12 ounces, while mugs and steins hold 12-16 ounces.

At home, the drinks people make for themselves are usually larger than commercial drinks, although at some expensive restaurants and bars the practice is to provide generous quantities of alcohol per drink.

2. During the Fifties, the average annual consumption per drinker was 2 gallons of alcohol per person. By 1970, the average had increased by 25% to 2.5 gallons. And by 1980, based on figures from 1979 beverage sales, the average consumption per drinker was 2.82 gallons.

Since drinkers tend to observe the social customs around them, it appears that there has been continual movement toward heavier drinking since the Fifties, with the outcome that the heavy drinking of those times would be considered only moderate drinking now.

3. By 1980, alcoholic beverages had become easily available for purchase at grocery stores and convenience markets as well as through "drive in" and/or "all night" liquor store outlets.
4. Per capita consumption of alcohol is based on the total population of persons 14 years of age and older. However, approximately 30% of this population are total abstainers from alcohol. Another 40% are infrequent drinkers. The remaining drinkers, numbering 30% of the total population, account for the majority of the

beverages consumed. When calculated in this fashion, the American drinking population exceeds the number of people who drink in most other countries.

5. Respondents consistently report amounts equaling two or more times greater than their estimates of their own drinking when answering the question, "How much would a person have to drink to qualify as a heavy drinker?" While most drinkers tend to report socially appropriate consumption, regardless of their actual use, researchers believe that the greatest source of the underreporting exists in the population of abusive drinkers. However, when comparing self-report survey results to the taxed liquor sales in the United States (without considering homemade beverages) the reported volume of alcohol consumed averages close to 40% less than the sales revenues indicate.
6. People who drink three drinks (1 ounce alcohol per drink) three times a week are beginning a pattern of drinking that often leads to problem drinking. The distinction between nonproblem and problem drinking is not at all clear cut. Each person's habits, mental and physical health, and social circumstances must be considered before a safe drinking style can be determined.

Media and Myths

MYTH 1: YOU REALLY HAVE TO ADMIRE PEOPLE WHO CAN HOLD THEIR LIQUOR.

"Made for the way you really drink beer..."
Coors

"The only thing better than Sambuca Romana is another **Sambuca Romana**." Sambuca Romana

The person who can drink large quantities of alcohol without feeling the effects may have developed a tolerance to alcohol. Tolerance comes from regular use of alcohol which results in physical and psychological adaptation to its presence in the body. The development of tolerance is shown by an increase in the amount of alcohol required to produce the desired effects and frequently indicates the onset of physical dependence.

MYTH 2: ALCOHOL CAN BE USED AS A FOOD SUPPLEMENT.

"The Citrus and White Wine Cooler." Seagram's Cooler

"The Dream Comes True." Haagen-Dazs Cream Liqueur

Alcohol has no nutritional value. It contains no vitamins, minerals, or proteins. An ounce of pure grain alcohol does contain 160 calories, however. The calories provide an immediate source of energy which causes food that is normally used for energy production to be changed into fat and stored in the body for later use. Just one beer, 150 calories a day beyond the amount the body can burn up immediately, can

result in a ten pound or more weight gain in as short as eight months! Alcohol also prevents absorption of the vitamins and minerals contained in foods, especially the B complex group. It's common knowledge that the B vitamins are necessary to deal with stress--uncommonly ironic when many persons report that they drink to overcome stress.

MYTH 3: ALCOHOL WARMS THE BODY.

"I put my heart in to it." Johnnie Walker Scotch Whiskey

"Add passion to your punch with Everclear 190 proof grain alcohol." Everclear Alcohol

The direct action of alcohol causes a drop in the internal body temperature by the following process. The blood vessels are opened (dilated) on the skin surfaces and the blood is cooled by greater exposure to the outer environment. As the cooled blood circulates, the core temperature is lowered gradually, but significantly. This process is continued as long as alcohol is present in the body.

MYTH 4: ALCOHOL IS A STIMULANT DRUG.

"Bring Out Your Best." Budweiser Light

"Great Writing Starts With a Little Listening, a Little Beer, and a Lot of Legwork." Mickey Spillane, Miller Lite

Alcohol is a depressant; it sedates the central nervous system. One of the first areas of the brain to be affected is the cerebral cortex which controls judgment, self-control, and inhibitions. The depression of this part of the brain may result in excitable behavior as inhibitions are lost.

MYTH 5: HANGOVERS ARE CAUSED BY SWITCHING DRINKS.

"Good friends keep you going when all you want to do is stop." Lowenbrau

"Good friends won't leave you flat." Lowenbrau

Hangovers are caused by the amount and the rate, not by the kind of alcohol consumed. While metabolizing alcohol, the liver cannot perform its usual functions, one of which is keeping the blood sugar at a normal concentration. The result of this is a state called hypoglycemia, or lower than necessary blood sugar. Symptoms of hypoglycemia are hunger, weakness, nervousness, sweating, headache, and tremor. The change in blood vessels, as mentioned in Myth 3 above, can cause headache. Lastly, a hangover is actually a "mini-withdrawal." When the central nervous system is released from the depressed state, the opposite state develops--feeling edgy and irritable. This effect is known as "rebound."

MYTH 6: ALCOHOLICS DRINK EVERY DAY.

"Be a part of it." Canadian Club

"To every roommate about to become a friend."
Lowenbrau

Alcoholics are of many kinds: those who drink daily; those who drink every time they have liberty; those who drink on weekends; those who drink in binges which could occur weeks, months, or even years apart. The measure of alcoholism is not when or how often one drinks, but whether or not one can stop the drinking once it begins.

MYTH 7: YOU CAN'T BECOME AN ALCOHOLIC BY DRINKING ONLY BEER.

"Great ballplayers drink Lite because it's less filling. I know. I asked one." Bob Uecker, Miller Lite

"Michelob after work makes you glad there's a rush hour. Put a little weekend in your week."
Michelob

Actually, Americans drink almost ten times as much beer as they do "hard" liquor. Although the content of alcohol in beer is relatively low, this means that one half the alcohol drunk is consumed as beer. Given these facts, it seems reasonable to say that there are many alcoholics who are only beer drinkers. (How many people have you heard say "I can't be alcoholic, I only drink beer?").

MYTH 8: A SHOT OF VITAMINS, BLACK COFFEE, SWEATING, OR A COLD SHOWER ARE QUICK WAYS TO SOBER UP.

"The Finest Name in Coffee." Old Bushmills Irish Whiskey

"Enjoy Calvert Extra and Coke on ice. Perfect together." Calvert

Only time will rid the body of alcohol. Although research on preparations containing Vitamin C, zinc, and other nutrients which seem to cause faster breaking down of the molecules seems promising, there is no known way of speeding the metabolic process. Despite the fact that alcohol-consuming rats survived, "zinc before you drink" has not been demonstrated as true in producing beneficial effects in humans. Caffeine does appear to slow the absorption rate of alcohol into the small intestine by constricting the pyloric valve. Sweating causes cooling of the skin surface of the body, as do cold showers, both of which add to the lowering of body temperature explained in Myth 3.

Stages of Dependency and Addiction

Addiction follows certain stages. It is possible to be addicted to alcohol, cocaine, marijuana, coffee, activities, or a relationship with another person. On the worksheet below, decide on the order of the stages of addiction. Place a "1" to the left of the first stage, a "2" to the left of the second stage, a "3" to the left of the third stage and so on until all stages have been ranked.

- Needing the person, substance, or activity to feel normal.
- Denying that the substance, activity, or person is hurting one's life when other people point out the problems.
- First contact with the substance, person, or activity.
- Feeling great pleasure with the substance, person, or activity.
- Feeling miserable or uncomfortable when involved with the substance, person, or activity but not willing to let it or him/her go.
- Feeling anxious, depressed, angry, or physically ill when the substance, person, or activity is not available.
- Friendships, former interests, work, or health suffer because of one's relationship with the person, activity, or substance.
- Not being aware of the faults of the substance, person, or activity.
- Believing that the substance, person, or activity will improve one's life.

**STAGES OF DEPENDENCY AND ADDICTION
KEY**

1. First contact with substance, person, or activity.
2. Feeling great pleasure with substance, person, or activity.
3. Believing that the substance, person, or activity will improve one's life.
4. Not being aware of the faults of the substance, person, or activity.
5. Friendships, former interests, work, or health suffer because of one's relationship with the person, activity, or substance.
6. Needing the person, substance, or activity to feel normal.
7. Denying that the substance, activity, or person is hurting one's life when other people point out the problems.
8. Feeling anxious, depressed, angry, or physically ill when the substance, person, or activity is not available.
9. Feeling miserable or uncomfortable when involved with the substance, person, or activity but not willing to let it or him/her go.

Guidelines for Responsible Alcohol Consumption

Establishing personal guidelines for responsible drinking will in the end increase your sense of responsibility for self. The following criteria will help you decide your limit.

1. **DRINK ONLY WHEN YOU ARE IN A GOOD MOOD:** Avoid drinking alcohol or taking any drugs when you are feeling tense, stressed, angry, or depressed. During these kinds of moods, people are especially vulnerable to developing drinking or drug problems since the substance seems to take away the negative feelings.

2. **DRINK ONLY OCCASIONALLY:** Avoid daily drinking since the regularity will cause drinking to be considered an ordinary event rather than a special occasion. Also, daily drinkers often develop tolerance quickly and then increase their intake of alcohol without even noticing it.

3. **MEASURE YOUR ALCOHOL:** Pay attention to the size of container for beer and wine. Avoid providing kegs of beer for parties or using larger sized shot glasses.

4. **SIP YOUR DRINKS:** If you decide to drink longer than one hour, sip your drinks. Since most people drink to get high, sipping drinks is often disappointing because most people who drink regularly will have developed tolerance above a sip and will not feel that pleasant "high." However, do not consume any more alcohol than will keep your blood alcohol concentration at 0.05 or less.

5. **DRINK FOR NO MORE THAN ONE HOUR:** When you are at an event over several hours, decide which hour you will consume alcohol. Before and after this hour, drink other beverages.

6. **KNOW YOUR BAC:** The lower the blood alcohol concentration with which you are satisfied, the safer you will be. The most effective practice is to drink only the amount that will keep your blood alcohol concentration at 0.05 or below. For most people, this amounts to two to three drinks over a two hour period.

Facts About Responsible Drinking

Individuals who are concerned about preventing alcohol problems in their lives and in the lives of others can:

DO:

- decide what you want to gain from alcohol
- make rules for yourself to guide your drinking
- set a personal limit for drinking alcohol, stick to it, or drink less
- drink only when eating food
- support and encourage others to drink responsibly
- provide both alcoholic and nonalcoholic beverages for friends and guests
- support others' plans not to drink
- learn about the self-help approach to getting sober and living sober
- maintain healthy habits of exercising, eating, rest, and relaxation

DON'T:

- drink more than two 1 oz. drinks of alcohol per 24 hour day
- drive after drinking
- drink if pregnant or planning to become pregnant
- let people pressure you into drinking
- spend a lot of time with people who drink to excess
- drink a second drink before the effects of the first one have peaked and are no longer noticeable

Self-Contract for Responsible Drinking

Develop and state a goal of what responsible drinking means to you.

1. By _____ I will have defined what responsible
(date) (specific goal)
drinking is for me.
2. The steps involved in reaching my goal are:
 - a. How many drinks? _____
 - b. Over which period of time? _____
 - c. With whom will I drink? _____
 - d. When will I drink? _____
 - e. Where will I drink? _____
 - f. Why will I drink? _____
 - g. How will I monitor myself? _____

 - h. When I have consumed my limit, what will I do
instead of drink? _____

3. By _____ I will begin/continue to drink responsibly.
4. Reaching my goal:
 - a. What might stop me from attaining my goal?

b. What might I say that will stop myself from achieving my goal?

c. What can I do to help myself reach my goal?

5. The person who will support my effort to achieve this goal is:-----

6. This person will provide support in the following ways:

a. -----

b. -----

c. -----

7. I will evaluate my results in the following ways at the following times: -----

8. When I have reached my goal, I will reward myself by:

Signature (self)

Signature (support person)

Date

3. Reaching my goal:

a. What might stop me from attaining my goal?

b. What might I say that will stop myself from achieving my goal?

c. What can I do to help myself achieve my goal?

4. The person who will support my effort to achieve this goal is:-----

5. This person will provide support in the following ways:

a. -----

b. -----

c. -----

6. I will evaluate my results in the following ways at the following times: -----

7. When I have reached my goal, I will reward myself by:

Signature (self)

Signature (support person)

Date

12 Hours Before

Class assignment to be completed before _____.

Begin at a time 12 hours or so before your last encounter with alcohol, drugs, or food. Describe what you did, where you went, whom you were with, what and how much you consumed or used, why you chose to do so, and the details of the experience.

Use this sheet to record your experiences. Please bring it with you to class on _____.

What I did _____

Where I went _____

With whom _____

What I consumed _____

How much I consumed _____

Why I chose to do this _____

Thoughts about it _____

Feelings about it _____

Other details about it _____

Observation

Class assignment to be completed before _____.

Go to a place where people normally gather. Spend at least two hours there. Do not drink coffee or alcohol, smoke cigarettes, or use any other drug for this period of time. Your assignment is to observe the behavior of those around you. It may be helpful to take notes as soon as you return to your room so that you can share this experience at a later date.

Here are some possible processes you may observe: Notice what people are eating or drinking; notice activities in which others are engaging (playing cards, reading the paper, or others); notice the loudness of voices and/or music; notice what kinds of stories and/or jokes are told; notice people's behavior toward others; notice people's moods; notice what they talk about; try to pay attention to what people are concerned about. Remember to notice how you feel in the situation (How does your body feel? What are you thinking? What do you do?). Notice how you feel about being an observer.

Substance User Survey

We would appreciate your filling out the following questionnaire. It attempts to survey the experiences people had when they were using the drug or substance that they preferred. Select only one substance in order to answer the survey.

If you **always** had the experience listed, circle the number "5." If you **usually** had the experience listed, circle the number "4." If you **occasionally** had the experience, circle the number "3." If you **rarely** had the experience (or aren't sure if you did), circle the number "2." If you have **never** had the experience listed, please circle the number "1."

(Never=1) (Rarely=2) (Occasionally=3) (Usually=4) (Always=5)

When I was using the substance I preferred:

- | | | | | | |
|--|---|---|---|---|---|
| 1. New ways of thinking opened up for me... | 1 | 2 | 3 | 4 | 5 |
| 2. I had a hard time getting motivated to work... | 1 | 2 | 3 | 4 | 5 |
| 3. I was able to communicate my feelings better to people... | 1 | 2 | 3 | 4 | 5 |
| 4. Personal problems got exaggerated in my mind... | 1 | 2 | 3 | 4 | 5 |
| 5. I believed that life was a game and that I shouldn't take it too seriously... | 1 | 2 | 3 | 4 | 5 |
| 6. I felt safe, secure, and detached from the outside world... | 1 | 2 | 3 | 4 | 5 |
| 7. A thought or idea continued to bother me... | 1 | 2 | 3 | 4 | 5 |
| 8. The world seemed to slow down so that I could manage it better... | 1 | 2 | 3 | 4 | 5 |

(Never=1) (Rarely=2) (Occasionally=3) (Usually=4) (Always=5)

When I was using the substance I preferred:

- | | | | | | |
|---|---|---|---|---|---|
| 9. My memory got worse... | 1 | 2 | 3 | 4 | 5 |
| 10. My body felt heavier... | 1 | 2 | 3 | 4 | 5 |
| 11. I felt warm, glowing, and safe... | 1 | 2 | 3 | 4 | 5 |
| 12. I discovered connections between
ideas or events in the world that I
didn't see while straight... | 1 | 2 | 3 | 4 | 5 |
| 13. Food and drink tasted better... | 1 | 2 | 3 | 4 | 5 |
| 14. I worried about the impression
I made on others around me... | 1 | 2 | 3 | 4 | 5 |
| 15. Work, even boring work, became more
interesting or tolerable... | 1 | 2 | 3 | 4 | 5 |
| 16. Sexual intercourse seemed longer
and more enjoyable... | 1 | 2 | 3 | 4 | 5 |
| 17. Simple activities required more
effort... | 1 | 2 | 3 | 4 | 5 |
| 18. My thoughts seemed clearer and I
was able to speak better... | 1 | 2 | 3 | 4 | 5 |
| 19. It was harder to think straight and
speak correctly... | 1 | 2 | 3 | 4 | 5 |
| 20. I felt I could handle anything that
came my way... | 1 | 2 | 3 | 4 | 5 |
| 21. If you were in a situation where someone was forcing
you to use a drug, but you could choose the drug that
you used, which of the following would you select?
Number your responses from 1-12, with 1 being most
preferred to 12 being least preferred. | | | | | |

ALCOHOL	AMPHETAMINES (Speed)	PEYOTE	HEROIN
MARIJUANA	BARBITURATES (Downers)	MUSHROOMS	CAFFEINE
TOBACCO	COCAINE	CHOCOLATE	LSD

SUBSTANCE USER SURVEY KEY

In the Score column, write down the number you circled for each corresponding item. Then total your score under each category.

Item No.	Score	Item No.	Score
1	_____	4	_____
6	_____	7	_____
12	_____	10	_____
15	_____	14	_____

**Gain Personal
Insight Total:** | _____ |

**Induce Depression
Total:** | _____ |

Item No.	Score	Item No.	Score
2	_____	5	_____
9	_____	8	_____
17	_____	11	_____
19	_____	20	_____

**Escape Reality
Total:** | _____ |

**Increase Sense of
Security Total:** | _____ |

Item No.	Score
3	_____
13	_____
16	_____
18	_____

**Reduce Inhibition
Total:** | _____ |

Graph the totals for each category on the following chart.



Effects of Substance Use on Job Performance

Individuals' reactions to substances vary on the basis of a number of factors such as age, physical condition, personal expectations, as well as the nature of the substance itself. This worksheet lists some effects of selected substances. In the last column, fill in the affect your use of these substances could have on your job performance.

SUBSTANCE	EFFECTS	HOW could use of this substance affect your job performance?
Alcohol	slowed response time blurred vision difficulty judging distance slurred speech aggression or withdrawal headache upset stomach hangover thirst decrease in sex drive	
Other Depressants (Quaalude, Pentobarbital)	apathy clumsiness drowsiness or sleepiness loss of attention or concentration slurred speech irritability and depression	

SUBSTANCE	EFFECTS	HOW could use of this substance affect your job performance?
Nicotine	drowsiness or wakefulness irritability dizziness wired or lethargic shortness of breath	
Cannabis (Marijuana)	distortion of time and space slowed response time difficulty judging distances problems with short term memory problems with tracking moving objects	
Cocaine	decrease in appetite increase in mental activity trembling and chills restlessness irritation of nasal passages suspiciousness hallucinations	
Other Stimulants (Dexadrine, Benzedrine, Caffeine)	decrease in appetite dry mouth nervousness insomnia restlessness increase in mental activity unpredictable response time decrease in attention span wide mood swings	

SUBSTANCE	EFFECTS	HOW could use of this substance affect your job performance?
Hallucinogens	distortion of time and space and objects hallucinations overreactivity/hypersensitivity flashbacks fearfulness out of touch with ordinary environment	
Opiates	distortion of time and space apathy and numbness slowed response time dulled thinking problems with memory	
Organic Solvents	distortion of time and space poor control of body responses problems with judgment irritability drowsiness and lethargy nonpredictability of actions	
PCP Phencyclidine	unpredictability impulsivity inability to think clearly disrupted vision inability to control self clumsiness leading to accidents or injury disrupted ability to communicate	

Consequences of Substance Choices

Substances have different consequences for individuals over a period of time. Write down the consequences you experience with substances in the spaces provided below.

SUBSTANCE

CONSEQUENCES

	CONSEQUENCES				
	Immediate		Short Term	Day After	Long Term
	Choices Gained	Choices Lost	(1-12 Hours)	(Rebound Effect)	(Chronic)
Alcohol					
Other Depressants					
Caffeine					
Nicotine					
Other Stimulants					
Hallucinogens					
High Fat/Sugar Diet					

Plan of Action

The worksheet below allows you to select a personal goal and to develop a plan for reaching that goal.

A goal must be

- | | |
|-----------------|-------------------------------|
| 1. Conceivable | 5. Measurable |
| 2. Believable | 6. Desirable |
| 3. Achievable | 7. Stated with no alternative |
| 4. Controllable | 8. Growth facilitating |

1. Goal: _____

2. What, if anything, do you anticipate might make it especially difficult for you to achieve this goal?

1st OBSTACLE

2nd OBSTACLE

3rd OBSTACLE

3. Ways to Manage

Ways to Manage

Ways to Manage

4. End result in _____ (weeks, months, years)

5. What is the first step? _____

6. How do you do it? _____

7. Where? _____

8. Who? (Will you need other people to help?) _____

9. What do you need? (Materials, if any) _____

10. Cost? _____
11. Anything else? _____
12. When will you start? _____
13. Most critical things you will do the first week: _____

14. Most critical things to accomplish in the first month:

General Self-Contract

The worksheet below allows you to select a personal goal and to develop a contract for achieving that goal.

1. By _____, I will have _____.
(date) (specific goal)
2. I need to take these steps to reach my goal:
 - a. What I will do is: _____
 - b. When I will do it is: _____
 - c. What I will need is: _____
 - d. How I will do it is: _____
3. Reaching my goal:
 - a. What might stop me from attaining my goal?

 - b. What might I say to myself that will stop me from achieving my goal?

 - c. What can I do to help myself reach my goal?

4. The person I choose to help me achieve my goal is:

5. This person will provide support in the following ways:

a. -----

b. -----

c. -----

6. I will evaluate my results in the following ways at the following times:

7. When I have reached my goal, I will reward myself by:

Signature (Self)

Signature (Witness)

Date

DECISION MAKING

Like it or not, you have control over and must take personal responsibility for nearly every decision you make, from the simplest, such as what brand of toothpaste you will use, to the most important, such as whom you will marry and what your life's work will be.

Although decision making is a very ordinary activity, it is not easy to make wise decisions consistently without training and practice. If it were, corporation executives wouldn't be paid hundreds of thousands of dollars a year and it wouldn't take half a lifetime for a person to earn the authority to command a Navy vessel. There is no magic formula that can absolutely predict how a particular decision will finally work out. There are, however, ways to approach decisions that can insure that you have the elements under control before you act.

In the **Decision Making** portion of the course, you will examine the process successful decision makers follow, consciously at first, then more automatically as they gain skill. Even "split second" decisions follow the basic pattern. Three steps are involved: defining the problem, generating possible alternative solutions, and acting on the solution with the most positive and least negative consequences.

Personal Fitness Inventory*

INTRODUCTION

Over time, your body is either strengthened or weakened by what you do with it on a regular basis. The way you eat, your level of physical activity, how you handle stress and your control of dependencies all affect your continued health and well being. To a large extent, these aspects of your lifestyle determine the mileage you're likely to get out of your natural gifts. They either squander or preserve your basic genetic endowment.

What does it mean to be fit and to enjoy a high level of wellness? Beyond the absence of illness and pain, it means feeling really alive, with a genuine gusto for life, and having plenty of energy to enjoy it fully. It's a trim, flexible, well toned body, a twinkle in your eye, and a warm, friendly smile on your face. In short, fitness is your capacity to enjoy life and to live it fully.

On the other hand, a lack of fitness is often at the root of many common problems, such as:

- a lack of energy and vitality
- looking and feeling out of shape
- difficulty coping with daily pressures
- nagging aches and pains
- over or underweight
- shortness of breath
- frequent minor illnesses
- worry, anxiety, and depression
- loss of muscle tone and strength
- persistent lower back pain
- diminished work performance
- difficulty concentrating
- more frequent emotional upsets
- lowered endurance
- limited flexibility
- greater susceptibility to accidents

And, over the long haul, a lack of fitness may lead to the degeneration of critical body functions, greatly increasing your risk of major disease and eventual loss of ability.

The Personal Fitness Inventory provides you with a clear picture of how your current lifestyle is shaping your future well being.

In completing the Inventory, bear in mind that there are no right or wrong answers. The correct answer--indeed, the only useful answer--is the one which best reflects your real life situation today.

HOW YOU SEE YOURSELF

Take a look at the chart below.

From top to bottom, the scale ranges from what you might consider to be your ideal state of health, fitness and well being, at +10, to a minimum state of wellness at -10.

Mark the point on the scale to the right which you feel best represents your overall physical condition today--that is, your present state of wellness and vitality. Next, think back in time to a period about five years ago. Get an image of your physical condition at that time. Now, mark the point on the scale to the left which you feel best represents your overall physical condition as of five years ago. Connect these two points with an arrow directed from your past to your present condition. This arrow indicates the direction of your recent health history as you have experienced it.

The Lifestyle Inventory will assist you to project a greater measure of wellness into your future.

YOUR IDEAL PHYSICAL CONDITION

5 Y E A R S A G O	High Level Wellness	+10 -- --	-- -- +10	High Level Wellness	T O D A Y
		+8 - -	- - +8		
		+6 -- --	-- -- +6		
	Exceptional Wellness	+4 - -	- - +4	Exceptional Wellness	
		+2 -- --	-- -- +2		
	Average Wellness	0 - -	- - 0	Average Wellness	
A G O		-2 -- --	-- -- -2		
	Less Than Average Wellness	-4 - -	- - -4	Less Than Average Wellness	
		-6 -- --	-- -- -6		
	Low Level Wellness	-8 - -	- - -8	Low Level Wellness	
		-10 -- --	-- -- -10		

MINIMAL STATE OF WELL-BEING

MEASURE YOUR PRESENT CONDITION

Your Body Composition

The average person, if he or she is in good physical condition at the time, will achieve a desirable weight between the ages of 18 and 23. With this in mind, estimate how many pounds, if any, you are overweight now. If you believe you were overweight during that period, simply give your best estimate.

YOUR PRESENT WEIGHT _____

LESS YOUR IDEAL WEIGHT -_____

EQUALS POUNDS OVERWEIGHT =_____

Enter the score from the table
that matches your pounds overweight.

YOUR SCORE
from the table

Pounds Overweight	Your Score	Your Weight Tends to Support
0	50	High Level Wellness
1 to 3	47	
4 to 6	44	
7 to 9	41	Exceptional Wellness
10 to 14	38	
15 to 19	35	Average Wellness
20 to 29	32	
30 to 39	29	Less Than Average Wellness
40 to 49	26	
50 to 75	23	Low Level Wellness
over 75	20	

Your Resting Heart Rate

How fast your heart beats when you are at rest indicates how hard your heart has to work simply to maintain your basic body functions. This, in turn, is a useful indicator of the fitness of your heart, lungs, blood, and blood vessels.

Your resting heart rate may be measured after you have been sitting or lying in a relaxed state for five minutes or so. To determine your heart rate, place the second and third fingers along the thumb side of the opposite wrist, and count the pulsations for one minute:

YOUR RESTING HEART RATE _____

Enter the score from the table that matches your resting heart rate.

YOUR SCORE
from the table

Resting Heart Rate	Your Score	Your Rate Tends to Support
under 50	50	High Level Wellness
50 to 54	47	
55 to 59	44	Exceptional Wellness
60 to 64	41	
65 to 68	38	Average Wellness
69 to 72	35	
73 to 76	32	Less Than Average Wellness
77 to 80	29	
81 to 84	26	Low Level Wellness
85 to 88	23	
over 88	20	

Your Pulse Recovery Rate

How quickly your heart returns to its resting rate after a moderate exertion is another indicator of your overall state of fitness. This test, called the Kasch Pulse Recovery Test, measures your heart rate during the first minute following three minutes of mild exercise. Complete this test only if your heart is healthy.

To perform the test, first create a small, sturdy platform 12 inches high. Large books work fine.

Next carry out the exercise, which consists of stepping up to your 12 inch platform with both feet, one foot at a time, then down again. This is accomplished 24 times each minute for 3 minutes.

Then count the pulsations of your heart for the first minute immediately following completion of the three minute exercise.

YOUR RECOVERY HEART RATE _____

Enter the score from the table that matches your recovery heart rate.*

YOUR SCORE
from the table

Recovery Heart Rate	Your Score	Your Rate Tends to Support
under 77	50	
77 to 78	47	High Level Wellness
79 to 80	44	
81 to 83	41	Exceptional Wellness
84 to 90	38	
91 to 98	35	Average Wellness
99 to 102	32	
103 to 105	29	Less Than Average Wellness
106 to 107	26	
108 to 109	23	Low Level Wellness
over 109	20	

*If you can't complete this test, enter Your Resting Heart Rate Score here also.

YOUR HEALTH HISTORY

Circle the score beside the one statement that best describes your experience with smoking.

- 0 I have never smoked, or I quit smoking more than 15 years ago.
- 1 I quit smoking 10 to 15 years ago.
- 2 I quit smoking 5 to 10 years ago.
- 3 I quit smoking less than 5 years ago.
- 7 I presently smoke 1 to 7 tobacco cigarettes per day or 1 marijuana cigarette per week.
- 9 I presently smoke 8 to 14 cigarettes per day or I smoke cigars or a pipe.
- 11 I presently smoke 15 to 25 tobacco cigarettes or 1 marijuana cigarette per day.
- 14 I presently smoke more than 25 cigarettes per day.

Circle the score beside each statement that is true for you.

- 2 I have lived with a person who smokes during 2 or more of the past 4 years.
- 2 I have worked in a smoky area during 2 or more of the past 4 years.
- 1 I have lived in a high smog area during 2 or more of the past 4 years.

Circle the score beside each condition that you know you presently have.

- 10 heart or arterial disease
- 6 severe chest pain when exercising (angina)
- 6 diabetes
- 4 high blood pressure or hypertension
- 4 an abnormally high blood cholesterol level
- 4 emphysema
- 4 chronic bronchitis
- 3 kidney disorder
- 3 a thyroid disorder
- 3 gout
- 2 severe leg cramps when exercising
- 2 frequent headaches

Circle the score beside each condition of which you have a family history.

- 10 heart or arterial disease
- 7 alcohol dependency
- 6 cancer
- 6 diabetes
- 4 depression

Add up your health history scores and enter the total here.
SUMMARIZE YOUR PRESENT CONDITION

- _____ YOUR SCORE

Summarize your Present Condition by adding up the four scores you've developed so far.

Your BODY COMPOSITION SCORE	+_____
PLUS: Your RESTING HEART RATE SCORE	+_____
PLUS: Your PULSE RECOVERY RATE SCORE	+_____
EQUALS: Subtotal	=_____
MINUS: Your HEALTH HISTORY SCORE	-_____
YOUR PRESENT CONDITION SCORE	=_____

Mark Your Score Here	Your Patterns Tend To Support
118	High Level Wellness
102	Exceptional Wellness
86	Average Wellness
70	Less Than Average Wellness
	Low Level Wellness

The sections to follow explore a number of ways in which your Present Condition is being shaped by your lifestyle.

MEASURE YOUR LIFESTYLE

YOUR PHYSICAL ACTIVITY PATTERNS

For each of the following four activity levels, circle the score beside the one answer that most closely matches the number of days you exercise at that level each week. If you spend no time at some level, circle "1" for that level.

LEVEL A: Continuous running, swimming, or strenuous bicycling, dancercise, rowing etc. My average weekly activity is:

- 1 one day or less per week.
- 12 2-3 days per week.
- 20 3-4 days per week.
- 28 4-5 days per week.
- 36 more than 5 days per week.

LEVEL B: Vigorous courtsports, trimnastics etc. My average weekly activity is:

- 1 one day or less per week.
- 9 2-3 days per week.
- 16 3-4 days per week.
- 23 4-5 days per week.
- 30 more than 5 days per week.

LEVEL C: Brisk walking, 2-person volleyball, singles tennis etc. My average weekly activity is:

- 1 one day or less per week.
- 6 2-3 days per week.
- 12 3-4 days per week.
- 18 4-5 days per week.
- 24 more than 5 days per week.

LEVEL D: Light walking or bicycling, team volleyball, bowling, gardening, fishing etc. My average weekly activity is:

- 1 one day or less per week.
- 3 2-3 days per week.
- 6 3-4 days per week.
- 9 4-5 days per week.
- 12 more than 5 days per week.

For each of the following questions, circle the score beside the one answer that is most correct for you.

The intensity of my physical activity at work is:

- 1 almost no physical activity.
- 3 infrequent activity - not very strenuous.
- 6 occasional, moderately strenuous exertion.
- 12 frequent strenuous exertion.
- 18 almost continuous physical exertion.

I perform full body stretches to maintain my flexibility and range of motion:

- 1 infrequently.
- 6 occasionally - every few days or so.
- 14 almost every day.

I engage in activities which help me to maintain the strength of my major muscles and bones:

- 1 almost never.
- 5 occasionally - once a week or so.
- 11 regularly - at least twice a week.

Add up your physical activity scores and enter the total here.

YOUR PHYSICAL ACTIVITY SCORE _____

Mark Your Score Here	Your Patterns Tend To Support
70	High Level Wellness
55	Exceptional Wellness
30	Average Wellness
15	Less Than Average Wellness
	Low Level Wellness

YOUR NUTRITIONAL PATTERNS

I feel that the quantity of food I eat is:

- 1 frequently excessive--I usually don't stop eating until I feel full.
- 4 occasionally excessive.
- 8 rarely excessive--I usually finish eating before feeling full.

I eat fresh fruit:

- 1 infrequently--many days none at all.
- 3 occasionally--many days I get some.
- 6 once or twice almost every day.

I eat leafy green vegetables:

- 1 infrequently--many days none at all.
- 4 occasionally--many days I get some.
- 8 once or twice almost every day.

I eat other vegetables such as beans, potatoes, peas, lentils, squash, and yams.

- 1 infrequently--many days none at all.
- 3 occasionally--many days I get some.
- 6 almost every day.

The wheat and other grains I eat are mostly:

- 1 highly processed, bleached white.
- 3 medium processed, enriched whole wheat.
- 8 course ground, whole grain.

The dairy products I eat are mostly:

- 1 high fat--whole milk, cream, cheddar, and other full fat cheeses.
- 2 low fat.
- 4 skim milk, low fat cheeses, or no dairy products at all.

The meats that I eat are mainly:

- 1 high fat--pork, prime beef, hamburger, organ meats, duck, lamb, etc.
- 2 medium fat--lean beef, veal, chicken and turkey with skin.
- 6 lean--fish, chicken and turkey without skin, or no meat at all.

I eat fried foods, including most fast foods:

- 1 often--three or more times a week.
- 2 occasionally--about twice a week.
- 4 seldom--once a week or less.

Regarding fats such as butter, margarine, mayonnaise, salad dressings, and oils:

- 1 I don't control my intake.
- 2 I eat 3 or 4 teaspoons per day.
- 4 I eat 2 teaspoons or less per day.

I read package labels to minimize my intake of fats, sugars, and preservatives:

- 1 seldom.
- 2 occasionally.
- 4 often.

At the table, I salt my food:

- 1 usually--quite a bit.
- 2 occasionally--moderately.
- 4 rarely--very little if any.

My intake of sugars, honey, syrups, sweet foods, candy, and full calorie soft drinks is:

- 1 frequent--quite a bit.
- 4 occasional--moderate.
- 8 infrequent--very little if any.

Add up your nutritional scores and enter the total here.
 YOUR NUTRITIONAL SCORE _____

Mark Your Score Here	Your Patterns Tend To Support
57	High Level Wellness
50	Exceptional Wellness
39	Average Wellness
32	Less Than Average Wellness
	Low Level Wellness

YOUR STRESS MANAGEMENT PATTERNS

For each of the following questions, circle the score beside the one answer that is most correct for you.

In general, the pace at which I do things such as walking and talking is:

- 1 faster than most other people.
- 2 about the same as most other people.
- 3 slower than most other people.

When I'm in a situation where I have to wait:

- 1 I often feel uneasy, and anxious to get going again.
- 2 sometimes I'm uneasy; other times I'm relaxed.
- 3 I generally remain relaxed, able to enjoy whatever happens to be going on.

Regarding personal achievement, I am:

- 1 constantly driven to work harder in order to measure up to my own high standards.
- 2 somewhat pressured to work harder in order to measure up to my own standards.
- 3 relaxed, confident that I am responding appropriately to my circumstances.

When I am working against a tight schedule:

- 1 I am often nervous, and frequently become impatient with delays.
- 2 I am sometimes nervous, and occasionally become impatient with delays.
- 3 I generally remain calm, responding to delays with patience and renewed determination.

When working on tasks which demand concentration:

- 1 I am frequently distracted by other matters.
- 2 I have some difficulty staying focused on what I'm doing.
- 3 I can usually stay focused on what I'm doing without undue distraction.

In relationships with others:

- 1 I am highly competitive; I often envy the successes of others.
- 2 I am somewhat competitive; somewhat supportive.
- 3 I am highly supportive; I enjoy the successes of others.

When others are speaking to me:

- 1 I'm often thinking of what I'm going to say next, and frequently interrupt the speaker.
- 2 I listen intermittently, sometimes interrupting the speaker with my own thoughts.
- 3 I usually listen attentively, rarely interrupting the speaker.

With regard to expressing my feelings:

- 1 I keep my true feelings to myself in most situations.
- 2 I find it somewhat difficult to express my real feelings.
- 3 I find it easy to express my feelings in most situations.

In dealing with my deepest personal concerns:

- 1 I feel unable to discuss my most difficult problems with anyone.
- 2 sometimes I feel I have no one to talk with about what's really bothering me.
- 3 I have trusted persons with whom I can usually discuss whatever is on my mind.

The quality of my sleep is:

- 1 often disturbed by anxious thoughts or distressing dreams.
- 2 sometimes sound; other times disturbed.

- 3 sound, peaceful and refreshing; undisturbed by the concerns of the day.

When thinking of the past or the future:

- 1 I often dwell on unpleasant images which may reduce my present effectiveness.
- 2 I sometimes dwell on unpleasant images from the past or about the future.
- 3 I usually envision fulfilling experiences which support my present effectiveness.

Regarding my need for information:

- 1 I become very uncomfortable when I don't know exactly what is going on.
- 2 I feel somewhat uncomfortable with uncertainty and try hard to eliminate the unknowns.
- 3 I can live with uncertainty, even enjoying the adventure of facing the unknown.

In my present life situation:

- 1 I feel confined and unable to express myself as I would like.
- 2 I feel somewhat limited.
- 3 I am able to be the person I want to be, and to do the things I enjoy most.

My interests:

- 1 mostly confined to matters which are related to my work.
- 2 somewhat varied.
- 3 numerous and varied, including areas quite unrelated to my work.

Regarding obtaining rewards for my efforts:

- 1 I am very anxious and aggressive about obtaining the rewards and recognition I want.
- 2 I am somewhat anxious about receiving the rewards and recognition I feel I deserve.
- 3 I am secure in the confidence that somehow I am well rewarded for what I do.

I tend to evaluate my experience in terms of:

- 1 observable results, such as how much, how well, how long, how fast, etc.
- 2 observable results, tempered to some extent by my feelings.
- 3 my overall feelings about the experience, aside from any observable results.

My satisfaction and sense of accomplishment are derived from:

- 1 mainly the rewards and recognition I receive from others.
- 2 sometimes my own appreciation; other times the recognition I receive from others.
- 3 mainly the personal knowledge that I have performed to the best of my ability.

Regarding my sense of responsibility:

- 1 I generally feel responsible for everything that is going on.
- 2 I often feel responsible for situations and events that are beyond my control.
- 3 I feel responsible for assuring that my behavior is effective, and consistent with my values, feelings and intentions.

I reduce the effect of stress in my life by engaging in some method of conscious relaxation:

- 1 infrequently.
- 2 occasionally--every few days or so.
- 10 almost every day.

Add up your stress management scores and enter the total here.

YOUR STRESS MANAGEMENT SCORE _____

Mark Your Score Here	Your Patterns Tend To Support
54	High Level Wellness
49	Exceptional Wellness
42	Average Wellness
36	Less Than Average Wellness
	Low Level Wellness

POTENTIAL DEPENDENCIES

My average daily consumption of caffeine drinks, including coffee, non-herbal tea, and cola is:

- 0 one cup or less.
- 2 two or three cups.
- 6 four or more cups.

The amount of alcohol I consume averages:

- 0 one standard serving per day or less of any alcoholic beverage.
- 4 two standard servings per day.
- 12 three or more standard servings per day.

I use other mood altering substances:

- 0 seldom, if ever.
- 3 occasionally--less than once a week.
- 8 frequently--once a week or more.

With regard to both prescription and over the counter medications:

- 0 I take as little as possible, and then only as directed.
- 4 I take quite a bit, sometimes simply for "extra insurance."
- 10 I take a lot, whether or not it is clearly necessary at the time; or, I take them in unapproved combinations.

With regard to smoking:

- 0 I am a nonsmoker.
- 6 I smoke 1 to 7 tobacco cigarettes per day or 1 marijuana cigarette per week.
- 8 I smoke 8 to 14 cigarettes per day or I smoke cigars or a pipe.
- 12 I smoke 15 to 25 tobacco cigarettes or 1 marijuana cigarette per day.
- 18 I smoke over 25 cigarettes per day.

With regard to your ability to control your use of alcohol:

- 0 I have no problem (I can stop whenever I want to).
- 7 I have difficulty stopping at times--this is usually related to situations I'm in.
- 15 I can't stop drinking once I start (I end up getting totally drunk or passing out each time).
- 20 I have blackout periods (I can't remember what happened when I was drinking).

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TOWARD PRIDE AND PROFESSIONALISM: INCREASING PERSONAL
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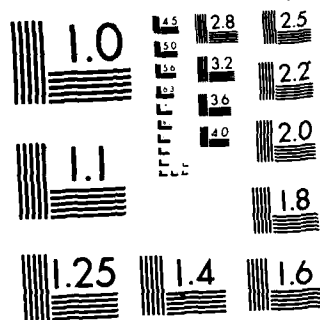
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MICROCOPY RESOLUTION TEST CHART
NATIONAL BUREAU OF STANDARDS-1963-A

With regard to the reactions of others to your use of alcohol or other drugs:

- 0 No one expresses concern over my use of alcohol/drugs.
- 10 My family members (e.g. spouse, parents, siblings) express concern over my use of alcohol/drugs.
- 10 Both my family members and friends express concern over my use of alcohol/drugs.
- 15 Family members, friends, and people at work express concern over my use of alcohol/drugs.
- 15 I, myself, think that I should cut back on my use of alcohol/drugs.

With regard to your reasons for using alcohol/drugs:

- 0 I don't use alcohol/drugs.
- 4 Alcohol/drugs help me to relax, loosen up some.
- 10 Alcohol/drugs help me handle stress, pressure, and tensions of everyday life.
- 14 Alcohol/drugs cheer me up when I'm in a bad mood.
- 16 Alcohol/drugs help me to forget everything.

With regard to problems related to your use of alcohol/drugs:

- 0 My use of alcohol/drugs has caused no problems in my life.
- 12 My use of alcohol/drugs has caused problems with my family (e.g. marital problems and arguments).
- 14 My use of alcohol/drugs has caused problems with my family and my friends.
- 20 My use of alcohol/drugs has caused problems in two or more of the following areas: family/friends, work, legal, health, finances.

Add up your dependencies scores and enter the total here.

Total: _____

Now multiply this total by .40.

Total: _____ x .40 = _____ (Your Dependency Score)

Mark Your Score Here	Your Patterns Tend To Support
0	High Level Wellness
- 3	Exceptional Wellness
-10	Average Wellness
-25	Less Than Average Wellness
	Low Level Wellness

SUMMARIZE YOUR LIFESTYLE

Summarize your Lifestyle Inventory by adding up your total scores from the preceding lifestyle measurements.

Your PHYSICAL ACTIVITY SCORE	+_____
PLUS: Your NUTRITIONAL SCORE	+_____
PLUS: Your STRESS MANAGEMENT SCORE	+_____
EQUALS: Subtotal	=_____
MINUS: Your POTENTIAL DEPENDENCIES SCORE	-_____
YOUR LIFESTYLE SCORE	=_____
Then enter your PRESENT CONDITION SCORE	_____

YOUR WELLNESS DIRECTION

Your Present Condition Score Supports	Your Present Condition Score	Your Lifestyle Score	Your Lifestyle Score Supports
High Level Wellness	124 - -	- - 180	High Level Wellness
	118 -- --	-- -- 168	
Exceptional Wellness	110 - -	- - 156	Exceptional Wellness
	102 -- --	-- -- 144	
Average Wellness	94 - -	- - 129	Average Wellness
	86 -- --	-- -- 114	
Less Than Average Wellness	78 - -	- - 97	Less Than Average Wellness
	70 -- --	-- -- 80	
Low Level Wellness	62 - -	- - 63	Low Level Wellness

Place a mark representing your PRESENT CONDITION SCORE on the scale to the left.

Place a second mark, representing your LIFESTYLE SCORE, on the scale to the right.

Connect these two points with an arrow pointing from your PRESENT CONDITION mark to your LIFESTYLE mark.

This arrow gives a general indication of the influence your present lifestyle might be expected to exert on your physical condition with the passage of time.

Your physical condition can be maintained and improved by developing these wellness-related factors in your lifestyle:

REGULAR PHYSICAL ACTIVITY

BALANCED NUTRITION

EFFECTIVE STRESS MANAGEMENT

REDUCTION OF DEPENDENCIES

Preserving your wellness is clearly a matter of making intelligent choices--choices based upon the best available information regarding the effects of your behavior on your personal health and wellbeing.

*Adapted from: Murphey, T. **The Personal Fitness Inventory.**
San Diego, California: Fitness Publications, 1981.

Specify the Problem

When you make a decision to change, you need to know what you want to change. Now that you have completed the **Personal Fitness Inventory**, you may want to change your use of certain substances, such as alcohol, nicotine, marijuana, or caffeine. You may want to change some of your activities, such as overeating, not exercising, or watching too much television. You may want to change how you relate to some of the people in your life.

1. Write a paragraph about a problem that you have. Limit your description of the problem to details you can observe.

2. Using your problem description as a guideline, answer the following questions:

- a. What people in addition to you are involved in the situation?

- b. Where does the problem generally occur (at your house, at the office, on board ship)?

c. When does the problem generally occur (time of day, how frequently, how long)? _____

3. When you find yourself in the situation you described,

a. What do you do? _____

b. What happens in your body (stomach churns, head aches)? _____

c. How do you feel? _____

d. What do you say to yourself (self-talk)? _____

Alternatives

Refer to the problem you described on **Worksheet DM I-2, Specify the Problem**. Write down at least three alternatives to solve the problem. Some useful questions to ask yourself might be:

1. What are some ways I can get what I want?
2. What can I do to alter the problem situation?
3. How can I think differently about the problem?
4. Where can I get more information about the problem?
5. What elements of the problem situation can I control?
6. Can I change those elements in any way to affect what happens?

Alternative 1: _____

Alternative 2: _____

Alternative 3: _____

Alternative 4: _____

Alternative 5: _____

Consequences

Review your list of alternatives from the **Worksheet, DM II-1, Alternatives**. Write down Alternative 1, then write down the first feeling that occurs to you in relation to that alternative. Continue listing the alternatives and your feeling about each one. Then, complete your list of positive and negative consequences. Write down at least 3 positive consequences and 3 negative consequences for each.

Alternative 1: _____

Feeling: _____

Positive Consequences

1. _____

2. _____

3. _____

Negative Consequences

1. _____

2. _____

3. _____

Alternative 2: _____

Feeling: _____

Positive Consequences

1. _____

2. _____

3. _____

Negative Consequences

1. _____
2. _____
3. _____

Alternative 3: _____

Feeling: _____

Positive Consequences

1. _____
2. _____
3. _____

Negative Consequences

1. _____
2. _____
3. _____

Self-Contract for Changing

Refer to **Worksheet DM I-1, Specify the Problem**, **Worksheet DM II-1, Alternatives**, and **Worksheet DM II-2, Consequences** in order to make the decision about your goal. Once you have decided upon your goal, fill out the self-contract below.

1. By _____, I will have _____.
(date) (specific goal)
2. I need to take these steps to reach my goal:
 - a. What I will do is:_____
 - b. When I will do it is:_____
 - c. What I will need is:_____
 - d. How I will do it is:_____
3. Reaching my goal:
 - a. What might stop me from attaining my goal?

 - b. What might I say to myself that will stop me from achieving my goal?

 - c. What can I do to help myself reach my goal?

4. The person in this class I choose to help me achieve my goal is:

5. This person will provide help to me this week in the following ways:

a. What I'd like this person to do is:

b. What I'd like this person to say is:

6. I will evaluate my results in the following ways at the following times:

7. When I have reached my goal, I will reward myself by:

Signature (Self)

Signature (Witness)

Date

Maintaining Change

Changing involves deciding on a goal and trying out new behavior. Once you have decided on a goal and established new behavior, you may find it useful to find ways to maintain change.

1. Refer to **Worksheet DM II-3, Self-Contract For Changing**, and write down your goal:

2. Once you have reached your goal, what are three things you can do to maintain the change?

a. -----
b. -----
c. -----

3. What are three things you can say to yourself to maintain the change?

a. -----
b. -----
c. -----

4. Who can provide you with some support in maintaining the new behavior?

5. If you do not maintain the change, how will you begin again?

6. When will you begin again? -----

GLOSSARY

Abstinence

Abstinence is a voluntary decision to hold back from doing something that a person might otherwise do.

Abstaining from drinking alcohol means making a conscious decision not to drink alcoholic beverages. The reasons for abstinence can include:

1. religious reasons (some religious denominations prohibit drinking alcohol);
2. health reasons (alcohol is a toxic substance and some people decide to abstain for their health);
3. pregnancy (a pregnant woman may abstain to prevent damage to her unborn baby); and
4. historical reasons (a person who has had a difficult history with alcohol can decide to make a commitment never to drink alcohol again).

Although it may be difficult in this society, a person has the right **not** to drink and to be free from harrassment because of that decision.

Active Listening

Active listening (demonstrating empathy) describes an open process in communication which calls for:

1. paying attention with one's body (putting down one's work, leaning toward the person, and making eye contact);
2. paying attention with one's words (repeating parts of what the person has said, asking questions to clarify); and
3. waiting to be sure that the person has finished.

as drinking alcohol, ethanol or ethyl alcohol, and carbon dioxide. Ethyl alcohol is sometimes written as ETOH in medical charts and scientific papers.

Alcoholic beverages in the United States and most other countries are legal drugs for people over a certain age, which is established by each country. The World Health Organization has labeled ethyl alcohol as a drug intermediate in kind and degree between habit forming and addictive drugs.

Alcohol Abuse

Alcohol abuse is any use of alcoholic beverages that results in one or more problems for a person, a person's family, the social environment, and/or the work environment. One does not have to be an alcoholic or have the illness called alcoholism to abuse alcohol. He or she can just drink too much. Alcohol abuse is by far the largest drug problem in our nation today. Alcohol related incidents, such as automobile accidents, are the third leading cause of death.

Alcohol Dependent

Alcohol dependent usually refers to a person's physiological requirement for alcohol. This means that the body has adjusted to the continued presence of alcohol and that it reacts to the removal of alcohol by getting tense or jittery. Some symptoms of alcohol dependence include:

1. withdrawal symptoms when alcohol consumption is decreased dramatically or interrupted;
Withdrawal can include:
 - a. tremors (trembling);
 - b. hallucinations (seeing or hearing things that are not there);
 - c. seizures; and
 - d. delirium tremens (DTs).
2. increased tolerance for alcohol, such as being able to drink a fifth of hard liquor with no apparent signs of drunkenness; and
3. occurrence of blackouts. A person is awake but later has no memory of what happened during that time period.

Addiction

Addiction comes from the Latin root, **addictus**, meaning "given over, one awarded to another as a slave." Addiction, in current usage, means the process through which one comes to depend physically, psychologically, or socially upon a very limited set of options to handle his or her life. A person may depend on alcohol to the point that it interferes with personal, family, social, or occupational functioning. Alcohol then has become the major coping strategy, to the exclusion of everything else. It is possible to be addicted to almost anything; if a substance or experience meets the conditions of reducing other options and interfering with personal, family, social, or occupational functioning, the term addiction may apply.

Adult Children of Alcoholics

Adults who have one or more parents or guardians who are alcoholic are known as adult children of alcoholics. There is recognition that adult children of alcoholics seem to demonstrate some characteristics in common, including an inordinate need for control, an overdeveloped sense of responsibility, a lack of trust, denial of feelings, and a sense of inadequacy.

Aggressive Behavior

Aggressive behavior is acting in a manner which allows a person to try to get what he or she wants, no matter what the cost to anyone else. A person who uses aggressive behavior feels angry or frustrated. Aggressive behavior includes threatening, accusing, fighting, and attacking behavior. This behavior can produce problems because other people tend to dislike or avoid those who act aggressively.

Alcohol

The word alcohol comes from Arabic roots, **al kohl**, meaning "the fine powder of antimony." As Europeans used the word, the meaning changed from "any finely divided substance" to "the essence of a thing," to "the essence of any beverage containing alcohol." Alcohol now refers to any beverage which is made by fermentation. Fermentation refers to the process whereby certain yeasts act on sugar in the presence of water. The yeasts recombine the carbon, hydrogen, and oxygen of sugar and water into what is known

Alcohol Use

Alcohol use is the drinking of alcoholic beverages by any individual. According to Kinney and Leaton in **Loosening The Grip**, two out of three people over the age of fourteen in the United States use alcohol. Alcohol use also implies responsible use, that is, the use of alcohol that does not cause damage to oneself or to society.

Alcoholic

There are about as many definitions of an alcoholic as there are people who have alcoholism. One good working definition is someone who uses alcohol to such a degree and in such a way that it interferes with his or her personal, family, social, or work behavior. This definition covers the consequences of alcohol use for the person and for society.

The term alcoholic can also have a personal definition. One can define oneself as an alcoholic at any point in his or her drinking history.

Alcoholism

Alcoholism is currently regarded as a medical diagnosis for "an illness which is characterized by significant impairment that is directly associated with persistent and excessive use of alcohol. Impairment may involve physiological, psychological, or social dysfunction." (American Medical Association. **Manual on Alcoholism**. Monroe, Wisconsin: AMA, 1977, p.4).

There is much controversy in the field of alcohol treatment and research about the definition of alcoholism. The important things for a person to do are:

1. examine his or her own personal definition of alcoholism (Where did it come from? Why do I believe it? Am I open to other definitions?);
2. be aware that the definition of alcoholism changes from setting to setting (The definition that works in a medical hospital may not work in a research laboratory.);
3. be aware that the definition of alcoholism has undergone and may still undergo many changes as more information becomes available; and
4. allow others the freedom to create a definition that will be most useful to them.

Assertive Behavior

Assertive behavior is acting in a manner which allows a person to obtain what he or she wants, but does not violate the rights of others. An assertive person often gives people feedback about how their behavior is affecting him or her ("When you cut in line in front of me, I get very angry."). Assertive behavior can also mean planning a course of action and sticking to it ("And if you don't go to the end of the line, I will talk to the manager."). Assertive behavior is a skill which a person can use, but will not always achieve what is wanted.

Attitude

Attitude refers to a person's point of view toward self, other, and/or the environment.

Attitudes may be disguised in feeling statements. **Example:** "All alcohol abusers are misfits and should be kicked out of the Navy." Possible translation: "I feel uncomfortable around people who I think are drinking too much. When I feel uncomfortable, I want to get away from these people, so I see them as bad or wrong. This attitude allows me to dismiss people who make me feel uncomfortable."

Behavior

A behavior is anything that a person can actually see someone do. Behavior is sometimes referred to as observable behavior just to emphasize the fact that if the behavior cannot be seen, a person cannot be sure what is happening.

Example: If a person saw someone holding a book opened to a particular page and looking at that particular page, one could describe that behavior. "The person was holding a book opened to a particular page, and was looking at that particular page." Is the person reading and understanding? One could guess that the person was probably reading, but could have been daydreaming, staring blankly, or anything else.

Belief

A belief in its broadest sense implies that a person accepts something as true whether it is based on reasoning, prejudice, emotion, or authority. A belief

usually consists of an object and some characteristic or attribute of the object, such as "All drug users started by smoking pot." A belief usually sounds like a fact or a piece of information.

The important issue is that a belief is something that a person thinks is true. A person will only examine and possibly change beliefs in an encouraging environment that feels safe.

Biofeedback

Biofeedback is the process through which a person learns to use some mechanical means (such as a scale) to obtain information about his or her body (weight in pounds), so that he or she can decide what to do (lose weight, gain weight, or remain the same weight). Biofeedback devices are frequently used in learning to manage stress because a person may have lived with a fairly high stress level for so long that he or she is no longer aware of how much stress is in his or her body. Biofeedback tools help one to become aware of stress by identifying stress, translating it into something one can understand (colors, numbers, or sound), and providing feedback about one's successes when trying to change the stress level.

Blood Alcohol Concentration (BAC)

BAC is the percent weight of alcohol in the blood based on the grams of alcohol per 100 milliliters of blood. ten percent equals one drop of alcohol per 1,000 drops of blood. This equals a BAC of 0.10, the level at which a person is legally presumed drunk in most states.

BAC can be affected by the amount of alcohol consumed, by food that is consumed, by a person's weight, and by the time between drinks.

Body Image

Body image is the mental picture people have of the size, shape, weight, and character of their bodies. When body image does not match body ideal, people sometimes adopt weight management strategies to bring image and ideal into closer alignment.

Anorexia is a weight management strategy designed to produce weight loss by fasting or starving. People who use

this weight management strategy believe themselves to be too heavy, no matter what their actual weight, and attempt to bring their body image into alignment with their body ideal by not eating. Over a period of time, this strategy can produce radical weight loss. Nonetheless, body image remains heavier than body ideal.

Bulimia is a weight management strategy designed to produce weight loss by purging or vomiting after periods of eating or bingeing. People who use this weight management strategy believe themselves to be too heavy and attempt to bring their body image into alignment with their body ideal by a combination of techniques, including fasting, eating irregularly, bingeing, and vomiting. This strategy rarely produces consistent weight loss, and body image remains heavier than body ideal.

Brainstorming

Brainstorming is a group problem solving technique which usually involves four main rules:

1. No evaluation of any kind is permitted.
2. Everyone is encouraged to think of the wildest ideas possible.
3. Class members are encouraged to come up with as many ideas as possible (quantity leads to quality).
4. Class members are encouraged to build upon, modify, or recombine the ideas of other class members.

Centering

Centering is a technique used to help someone pay attention to what is happening at the present moment. Too often a person comes into a new situation still thinking about what happened just before.

Centering usually involves some form of relaxation for a short period of time where one can listen to what is going on in one's mind and body. Participants can relax their muscles and examine their thoughts and feelings to determine whether to set them aside or to discuss them with the class.

Co-alcoholic

Co-alcoholic is a term applied to a person who may be regarded as having an instrumental relationship with an alcoholic.

Decision Making

Decision comes from Latin roots meaning to "cut off." Decision making means to cut off all the arguments, for and against, and to make up one's mind. It sounds fairly straightforward, but decision making actually involves several steps that are not necessarily ordered and not every decision requires each step. The basic steps involved in decision making are:

1. defining the problem;
2. generating alternatives;
3. exploring consequences;
4. exploring feelings;
5. choosing;
6. putting the choice into action; and
7. evaluating the results.

Denial

Denial is a restructuring of perceived internal or external conditions in order to change unpleasant thoughts, experiences, or actions. Frequently, the motive is to reduce the impact of--or avoid--expected consequences.

Drug

A drug is considered to be an active chemical that, once taken into the body, will have some effect on body systems other than the changes that occur from the ingestion of nutrients or water.

Enabler

An enabler is a person who renders another able or who assists another to achieve positive and negative goals.

Facilitator

A facilitator is a person within the class responsible for:

1. creating a nonjudgmental environment wherein members believe and feel that they may share their thoughts and feelings;
2. helping each member share thoughts and feelings in such a way that the whole class can empathize with the experience;
3. introducing new skill possibilities and information while providing members with the opportunity to test out new skills and new ideas, and receive encouragement in the form of feedback; and
4. participating in the experience as a class member.

Feedback

Feedback is any information that a person has received which lets him or her know how he or she is being perceived by others. Feedback can be neutral, negative, or positive.

Feedback is most helpful when it:

1. describes a specific behavior;
2. focuses on something that can be changed (a person's height cannot be changed, but blowing smoke in someone's face can be);
3. occurs as soon as possible after the behavior (finding out two years later that one did a good job may not be useful feedback); and
4. deals with one situation at a time.

If a person gets stuck when giving feedback, he or she can try this formula:

"When you did/said (describe a specific behavior), I felt (describe as best you can how you felt and/or what you thought)."

Feeling

A feeling is an awareness of an emotion. Often a person experiences a feeling even before finding words to describe it. That is the nature of feelings. As one becomes more self-aware, able to identify feelings when they are happening, one learns to describe feelings better. Words often seem vague and imprecise ways of describing what one feels. With practice, however, it becomes easier to be aware of feelings and to describe them to others.

"I" Statements

Too often a person speaks for other people when he or she wants to say something for himself or herself: "They say caffeine is not good for you," instead of "I don't think caffeine is good for me." "I" statements literally mean starting a sentence with "I" and then finishing it with how one feels or with what one believes. It means taking ownership of one's thoughts and feelings and making the ownership public.

Inference

An inference is a conclusion that a person draws from observable behavior.

Example: A person comes to work ten minutes late, with wrinkled and stained clothes, alcohol on his or her breath, and has red eyes. The behavior is not debatable. This person is late for work. The supervisor makes the inference (interpretation) on the basis of appearance that this person is drunk. Can the supervisor be sure? No. It is possible that something else is going on, although not very likely.

Locus of Control

Locus of control is a concept that identifies the sources of pressures that people feel. People differ in terms of how much control they feel they have over their lives. At one extreme, some people have a high internal locus of control, meaning that they believe that they are totally in control of themselves ("A man is in charge of his own destiny."). At the other extreme, a high external locus of control, some people feel that their lives are determined by factors outside of themselves ("A man is buffeted by the winds of fate."). Most people vacillate within an area between these two viewpoints depending upon their currently experienced well being.

What is important is that people differ in how they interpret their sense of self-control. A person's locus of control influences how that individual sees himself or herself in relationship to the world, as well as how much he or she feels able to function in that environment.

Marijuana

Evidence suggests that there are three species of marijuana plants: *Cannabis sativa*, *Cannabis indica*, and

Cannabis ruderalis. *Cannabis sativa* grows wild throughout the United States and Canada and typically contains less than 1% of the material that is known to make people feel high. It is commercially grown primarily because its fibers are used to make hemp rope. *Cannabis indica* is the plant usually grown for its ability to make people feel high. The composition of this marijuana is 2 to 5% psychoactive material. *Cannabis ruderalis* grows mainly in Russia and does not grow at all in the United States.

The primary psychoactive component of marijuana is Delta-9 tetrahydrocannabinol (THC). THC is found in the resin of the plant with the greatest concentration in the flowering parts, less in the leaves, and still less in the stems. Hash (or hashish) is a more concentrated form of marijuana because it is made from just the resins of the flowering parts of the marijuana plant.

Marijuana, as a drug, has had a long and colorful history. However, at the present time, possession, use, and sale of marijuana are illegal in almost every state in the United States. Although states vary in terms of the severity of the laws regulating use and possession of marijuana, the United States Navy has an official policy of "zero tolerance" for all illegal drugs. Marijuana is an illegal drug.

Passive Behavior

Passive behavior is acting in a manner which allows other people to get what they want at the expense of oneself. A person who uses only passive behavior feels helpless or out of control. Passive behavior includes waiting, receiving, and enduring without resistance what others impose. Sometimes, a person who acts passively becomes angry and then acts aggressively in an effort to regain control.

Passive Aggressive Behavior

Passive aggressive behavior is acting in a manner which allows a person to try to get what he or she wants by indirect, subtle means. A person who uses passive aggressive behavior may feel angry, but he or she also feels helpless. Passive aggressive behavior is an indirect effort to control others and is sometimes difficult to interpret. Passive aggressive behavior includes:

1. sarcasm or unkind words;
2. procrastination and dawdling; and/or
3. inefficiency or forgetfulness.

All of these behaviors are indirect expressions of hostility, indirect ways of resisting authority, or indirect means of controlling others.

Passive aggressive behavior is more common than either passive behavior or aggressive behavior. It is usually very subtle and appears more socially acceptable than aggressive behavior.

Problem Solving

Problem solving involves finding ways to get what one wants and needs or finding several ways to act effectively in situations. It is important to remember that a solution workable for one person may not work for someone else. All that anyone can do is to share his or her solution. It is up to the individual with the problem to actually choose the solution.

Rationalization

Rationalization is the process of justifying one's behavior (actions, attitudes, or beliefs) by offering only socially acceptable reasons for it, in order to avoid disclosing the authentic reasons.

Role Playing

Role playing is a dramatic technique which will enable a person to experience a situation (or a person) from another perspective. It means that the person either acts as if he or she is another person or places himself or herself in a new or different situation, identifies the feelings, and determines the appropriateness of them.

Participants all have several roles everyday: father or mother (family), friend (social), sailor, C.P.O., Airedale (occupational), and so forth. Role playing is a good way to practice, in a safe setting, some new ways to relate to others. If someone is going to do a role play, he or she should:

1. think about the role for a few minutes before beginning;
2. give other people information that they need in order to act or to watch the role play;
3. pay attention to how he or she is feeling and to what the others say;
4. ask for feedback; and

5. spend some time moving out of the role back to "self."

Self-Awareness

Self-awareness is the result of a process through which a person examines himself or herself in an effort to be more aware of how he or she feels, thinks, and acts. It does not mean that a person must change just because of this increased awareness. It does mean that one has the information about thinking, feeling, or behaving which will allow for the decision to make any changes or to continue doing the same thing(s).

Self-Confidence

Self-confidence is a result of a process through which individuals develop a sense of control over themselves and, to some degree, over the environment.

Self-confidence is usually developed as a person:

1. learns skills to help get what he or she wants;
2. learns skills to cope with situations where his or her needs cannot be met;
3. puts those skills into practice; and
4. has some successful experience with those new skills.

Self-Disclosure

Self-disclosure is a process in which a person tells others about himself or herself. Self-disclosure involves several parts:

1. the appropriate amount of time (It would not be a good idea to disclose one's marriage problems during a ten minute coffee break.);
2. an appropriate place (It may not be best to disclose one's drinking problems while standing in the checkout line of the exchange.); and
3. the appropriate person (It may not be such a great idea to disclose sexual problems to the unit "big mouth.").

When self-disclosing, a person should focus on how he or she is thinking and/or feeling at the moment. Self-disclosures that deal only with the past or with facts seem easier, but these do not clarify what is happening in the present.

Self-Esteem

A person with self-esteem respects himself or herself as a person who:

1. has a wide array of life skills from which to choose;
2. can use these skills effectively; and
3. can cope when things do not go as planned.

This does not mean that if a person has high self-esteem things never go wrong. It does mean that no matter what happens the individual will use skills that are appropriate to get through the situation.

Self-Talk

Self-talk refers to the conversations that a person carries on mentally about self, about others, and about the environment. A person's self-talk can be consistent or inconsistent with what other people have actually said. Sometimes a person receives praise ("Good job!") and turns it into criticism. ("But he didn't notice where I really screwed up the job. If he saw that, then he wouldn't have said that I did such a good job. He would think I am as sloppy as the rest of the crew.") There can be a big difference between what was said and the individual's self-talk about it.

Significant Other

Significant Other is a term used to describe a person who occupies an important position in an individual's life.

Stress

Stress is the response of any system to a demand made upon it. Stress is neither good nor bad; it is an inborn reaction which helps one to cope effectively with the environment. One experiences stress as feeling tense or pressured.

What a person does in response to stress, how he or she handles stress, or creates stress are factors which can be controlled. Stress is a requirement of any living system.

Stress Management

Stress management is a process through which a person learns a variety of activities to deal with stress. It is important to learn several stress management skills, because some skills may work in certain situations while others may not work.

Example: Let us say someone uses jogging to handle stress. What happens if that person breaks a leg? The person could still come to work, even with a cast, but how would stress be handled now, especially if no other stress management skills are available? This particular person would probably 1) feel out of sorts and edgy most of the time, or 2) spend a lot of time complaining while getting depressed.

A similar difficulty occurs when a person begins to use alcohol or drugs as the sole stress management technique. That person comes to depend on the drugs or alcohol and finds that other interests and opportunities slip away. Because that individual eventually uses fewer skills, he or she needs more alcohol or drugs to get through the day.

Stressors - External

Stressors are anything, anyone, or any situation which create pressure and tension. Like stress, stressors are neither good nor bad. External stressors are things, people, or situations outside of oneself to which one responds with stress. These stressors can be highly personal. What is an external stressor to one individual may not be a stressor to someone else. External stressors can be as close as one's roommate or friend, or as distant as the threat of nuclear war, the state of the economy, or the price of rice. As a rule of thumb, the more important the external stressor is to a person, the more stressful it becomes.

External stressors tend to fall along a continuum from those over which a person has total control to those over which he or she has absolutely no control. Most external stressors fall somewhere in between.

Stressors - Internal

Internal stressors are stressors which a person creates within himself or herself, such as deadlines ("I will lose 10 pounds by next week"), expectations ("I must

never be late for work"), self-doubt ("I am not sure that I know how to do the job"), fear of failure ("If I make any mistakes, it will be terrible"), and fear of success ("I'll never get promoted, I'm not good enough"). The list could go on and on.

Internal stressors are both good news and bad news. The good news is that because they are almost completely self-created, they are also almost completely under one's control. The bad news is that since they tend to be under one's control, the individual is the only one who can change them, and changing them is not always easy. Sometimes it is easier to complain about something "out there" that needs to change, so one would feel better, than it is to look inside to see what could be done differently.

Value

A value is the guideline or blueprint for personal action which supports an attitude or attitudes.

Daily Activity Log

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Page C

DAILY

List your daily activities and the foods
completed your list, notice which activi

	SUNDAY	MONDAY	TUESDAY
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0300			
0400			
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1700			
1800			
1900			
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2200			
2300			
2400			

ACTIVITY LOG

consumed for the last week. After you have you do and foods you eat on a regular basis.

[illegible]

**DATA
FILM**