

# My Autobiography and Assessment of my First Step

Name: \_\_\_\_\_

Date: \_\_\_\_\_

## 1<sup>st</sup> Step and Autobiography

### TIPS FOR WRITING YOUR AUTOBIOGRAPHY

- When and where were you born?
- Who are/were your parents? Where were they from? What did they do to earn a living? What were they like as people? How did they influence your life?
- Do you have any siblings? When were they born? What did you think of each one of them as a child? As an adult?
- What was it like growing up? Do you remember your childhood as happy or unhappy? Why? Give specific recollections: About how you felt you were treated by others. About family relationships. Friends. Important people in your life.
- How did/do you feel about school? Were there any teachers who had a particularly strong influence on you?
- Did/do you have any pets? If so, what part in your life did/do they play?
- Were you ever abused as a child, emotionally, physically, or sexually?
- How many years of school did you complete? Did you go as far as you would have liked?
- What do you remember about the first time you noticed alcohol/drugs being used in your home? Outside of it? How did you feel about this? What did you think when you saw your first drunk? What can you recall about your parents use of drugs and/or alcohol? Siblings? How did alcohol/drugs affect your life when you were growing up?
- Did your use of drugs/alcohol get you into trouble? Give specific examples (DUI, MIP, fights, school/work problems, overdoses, stealing, lying, etc...)
- How did your substance use affect your relationships? (Family, friends, significant others)

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- What about your social life? Who did you spend most of your time with? Where did you spend your time?
- Have you ever done something you were ashamed of while under the influence?
- What type of work do you do? Do you enjoy it? How was it affected by your use of substances?
- Have you ever tried to become clean and sober and then experienced a relapse? Describe the experience and what triggered the relapse. Describe any previous treatment experiences.













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G. Have I ever experienced a “blackout?” When did I first start having them? How many or how often since the first one? Give examples of blackouts, i.e., “I was told I did.....,” or, “My friends said I did.....,” etc. What about withdrawal signs such as depression, the shakes, seizures, mood swings, problems sleeping? Again, please be specific. \_\_\_\_\_

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H. How do I feel when others talk to me about my drinking or drug use? Who has confronted me or expressed concern over my substance use? How did I react when my use is brought up to me? How do I react now?\_



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K. How much has my drinking/using cost me or my parents in financial terms? Daily costs or amount per use, money spent on alcohol/drugs for myself and for others, cost of drug paraphernalia, buying things I don't need or can't afford when I was high/drunk. Be specific. \_\_\_\_\_

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How much have my drug-related legal fees financially cost myself/my parents? Include legal fees you paid for crimes you committed while you were high/drunk or committed in order to get the money for drugs or alcohol. \_\_\_\_\_

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How much have I or my parents paid for treatment, including transportation costs? Include the financial cost of any treatment fees for past substance abuse treatment you've received. \_\_\_\_\_

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### II: UNMANAGABILITY

Unmanageability has something to do with how we are coping with our life's problems as well as how we are coping with and facing the problems or consequences related to our substance use. It must be remembered that life's problems and coping abilities don't just take care of themselves simply because we stop drinking and using.

Consciously or unconsciously, frequently we decide to use drugs and/or alcohol when we are engaged in thinking habits or are experiencing certain feelings. This section is designed to shed some light on the thinking habits you most commonly use, as well as the feelings that you typically use over, in order to self-medicate. It is important to look closely at your thinking habits and emotions because not only will knowing about them help you learn about your reasons for past use, but will help you with preventing future relapses. Thinking habits are unconscious means of protecting yourself from the anxiety of confronting painful fears or problems. They keep you stuck in addiction or addict behaviors.

A: Thinking habits:

- 1) LYING: Three types...
  - a. By Omission: A lie that is told when you only tell part of the truth and intentionally leave out important details.
  - b. By Commission: A lie that is told when you completely make something up.
  - c. By Assent: A lie that is told when you attempt to make someone believe one way about what you think or feel, when you really feel something completely different.
- 2) BLAMING: When you want someone to believe that it was not you who "caused" whatever to happen.
- 3) JUSTIFYING: When you are trying to explain the reasons for your actions to avoid accountability.
- 4) ASSUMING: When you take something for granted or believe what someone tells you without checking to see if it's true or not.
- 5) MINIMIZING: When you want things to sound smaller, less significant, or less serious than what they really are. Key words to listen for are "just," "hardly," "ever," and "only."
- 6) CHANGING THE SUBJECT: When you intentionally steer the conversation away from what you are being confronted about so that you can avoid being questioned or consequences.

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- 7) **UNIQUENESS:** A thought you might have when you believe that you are better than others, believing that you are not responsible for following the same rules as everyone else, and/or believing that you can make up your own rules as you go along.
- 8) **VAGUENESS:** When you are intentionally trying to avoid giving a specific answer to someone's question. Your goal is to be unclear and to confuse others, perhaps hoping that whoever is questioning you will let it go at that. Key phrases to listen for are "I'm not sure," "It might have...," "I can't remember," and "I don't know."
- 9) **PUTDOWNS:** When you think you have to be better than someone else. They're used to build yourself up in front of other people at someone else's expense. Mimicking, bragging, or name calling are also forms of putdowns. For whatever reason putdowns are used, there is an intentional attempt to be cruel.
- 10) **REDEFINING:** Changing the meaning of events or situations so that they seem different than they really are. This is a great way to avoid responsibility.
- 11) **LACK OF EMPATHY:** When you say or do something to someone regardless of how it may hurt or upset them. You do not stop to think of how your behavior or attitude may affect others, or that you don't really care.
- 12) **INGRATIATING:** When you are trying to make people think that they are different from the way they really are. It is also a useful way for people to hide their motives. Other terms for ingratiating are "brown-nosing" and "sucking up."
- 13) **SUGGESTIBILITY:** Allowing yourself to be easily misled into doing something that you know you shouldn't do and at the same time, not putting much effort into trying to talk yourself out of doing whatever you're going to do.
- 14) **ENTITLEMENT:** Believing that you have the right to have something just because you want it. Though stealing is a typical example of entitlement, those who use others to get what they want are also using the entitlement thinking habit.
- 15) **VICTIM STANCE:** This is a way to get people to feel sorry for you instead of them holding you responsible for your decisions or actions.
- 16) **POWER PLAY:** This is a way to get others on your side for you to get your way. Often people will manipulate others as a form of power play, or use aggression to intimidate others.

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- 17) **CLOSED CHANNEL:** This is used when you use the following techniques: tuning out your surroundings, not answering when spoken to, turning up your music, plugging your ears, etc. This is used when you intentionally do not want to be confronted about your attitude or behavior, or when you are not receptive to feedback and you do not express that in a courteous way.
- 18) **BLACK AND WHITE THINKING:** This is a way of seeing things as one extreme or another. You can also take a singular incident and globalize it into a general rule. Listen for words like “always,” “never,” “totally,” and “completely.”
- 19) **DENIAL:** This is used when you refuse to believe or accept something that is true.
- 20) **RESCUING:** Used when you “rescue” others from their difficult feelings, and don’t allow them to deal with their own problems.
- 21) **INTELLECTUALIZATION:** When you use excessive reason as an unconscious means of protecting yourself from the anxiety of confronting painful fears or problems.

After reviewing this list, you may have realized that you have used these thought patterns while you were using drugs and alcohol. You may have also realized that you still continue to use these thinking habits though you are in recovery. This is important because once you are able to identify which thinking habits you use, and how you use them, you will be able to address each one and repair that lapse in logic. In the following section, please list 10 or your most frequently used thinking habits and include at least one example of how you have used it.

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Now that you are able to identify some of your thinking habits, what do you think you need to do in order to stop using them? What help do you need to be able to stop using them? \_\_\_\_\_  
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Now, in a different colored pen, go back and include the feelings that you have a hard time coping with now that you are clean and sober.

Do you notice any similarities? What are they? \_\_\_\_\_

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Congratulations! By completing the unmanageability section of your 1<sup>st</sup> Step, you have begun the important work of identifying your **internal relapse triggers**. Internal relapse triggers are those thoughts and feelings that we experience every day that make us feel like we want to use. By knowing what some of your internal relapse triggers are, you are better equipped to cope with the urge to use.

### III: REFLECTIONS

A. What have been the most significant consequences to you regarding your substance use?

1. Physical consequences: \_\_\_\_\_

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2. Mental consequences: \_\_\_\_\_

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3. Emotional consequences: \_\_\_\_\_

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4. Spiritual consequences: \_\_\_\_\_

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G. Are there ways that you are currently sabotaging your treatment experience (i.e.: still hanging out with using friends, not attending recovery meetings, not being honest in your recovery)? What do you need to do in order to stop doing this? What help do you need in order to be able to do that? \_\_\_\_\_

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H. What are some of your “high risk” situations: people, places and things that you know if you come in contact with it/them, you will be triggered to use AND that you’ll have a difficult time coping with the urge to use? These people, places, and things are called **external relapse triggers**. \_\_\_\_\_

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I. Which do you think will be harder to cope with: internal relapse triggers or external relapse triggers? Why? \_\_\_\_\_

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