Recovery Plan and Behavior Contract Part One

In exchange for being allowed to live i	n the home of,
l,	(Recovering Person's name
agree to the following:	
I agree to abstain from alcohol and facilitate sobriety, I agree to:	other mood altering drugs. To
a) attend 90 meetings/90 days of AA	or NA and to continue to attend
meetings at an adjusted rate depending b) find and begin to utilize an AA/NA	•
discharge from treatment.	
c) communicate openly and honestly activities with	(parent/family members).
d) establish lifestyle conditions consi	stent with maintaining my recovery
by:	nings, that have historically served as
triggers or context for my drinking/usi	· ·
• • •	ecifically avoid includes the following
people (names.):	
1	
2	
3	
4	
6	
7	
continuing to work to improve n following areas:	ny recovery and living skills in the
a) anger management	
b) learning how to have fu	
c) improving stress manag	gement
d)	
e)	
f)	

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participation ir are consistent taking care of physical exerc	ning healthy routines and structures, such as consistent paid employment, maintaining sleeping/wake hours that with the current structure and pattern in this household, my own laundry, housekeeping duties, etc., getting daily ise, establishing a morning meditation routine. Add any healthy routines and structures here:
_	
O. _.	
such as visiting eating meals v	personal responsibility for participating in family activities g grandparents, going on family outings and/or vacations, with the family. Add any other desired healthy family you agree to be a part of:
•	
b.	
UAs, answer c a. b.	ating in accountability structures (e.g. comply with random questions honestly about my activities, etc.) List them here:
I further agree begin on	to pay rent in the amount of per month/week to
activities in res Examples: (dis them here: 1)	to step up my level of care and increase my recovery sponse to exhibiting the following relapse symptoms: shonesty, manipulation, drinking, hostility/agitation.) List
,	
4)	
,	

Examples of how you might step up levels of care:

- a. Stepping up my level of care could involve increasing from once a week outpatient counseling to intensive outpatient counseling where I attend counseling several times a week for more than one hour at a time.
- b. It might involve going back to inpatient treatment.
- c. Attending more meetings.
- d. Using sponsor more; getting another sponsor, etc.

List ways you would step up your	r level of care here:
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1)	
2)	
3)	
4)	

The following are my plans to handle specific relapse symptoms so thatt they don't lead to relapse:

Symptom	Action I would take
Example: Not attending meetings or counseling.	Step up my attendance.
Example: Missing curfew.	Keep an earlier curfew. Set reminders on my phone.

My symptoms and my remedial action:

Symptom	Action I would take

I further agree to move out if I stop engaging in recovery activities as specified in my recovery plan of action, or if I relapse, or if I have an emotional/behavioral relapse that strongly contributes to the development and maintenance of an environment of turmoil, ongoing conflict and

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aggravated stress within the home.		
Signature of Recovering person	Date	

Date

Signature of Parent

Behavior Contract Part Two

l,	(parent/family member)
agree to allow	<u>"</u>
to live in my home under the above	conditions:
Examples provided in Part Or	ne.
a)	
b)	
c)	
d)	
e)	
I agree to provide emotional and ot	her support by:
a)	
b)	
c)	
d)	
e)	
,	

Examples:

I agree to provide emotional support by

- a) going to AlAnon
- b) by providing a listening ear when appropriate
- c) by providing feedback when I see relapse symptoms (e.g. return to old, thinking, feeling, and behaviors.)
- d) to provide an alcohol/drug free environment
- e) to work my own program and work on my own issues
- f) to assist financially with additional treatment opportunities

In case of relapse or a return to old relapsive	behavior,
I expect	to take specific corrective
action or find other lodging or move out with any of the following conditions occur:	in days/hours, should
a)	
b)	
c)	
d)	
e)	
Parent signature	Date
Recovering Person's signature	Date

Note: This is not "The Behavioral Contract." There is no "one size fits all" for behavioral contracts. This is merely an example of what you can do with a contract. Part A has incorporated a Recovery Plan or Action, Relapse Prevention Plan, or Continuing Care Plan. A Simpler Part A might look more like Part B, focusing more on bottom line expectations.

A Behavior Contract should have the input of everyone involved in it or affected by it.