

# CareCertify LLC

## Substance Use Disorder Training Series

SUD-07

# Recovery Support & Relapse Prevention

## Participant Guide

Substance Use Disorder Training Series · Audience: Counselors · Technicians · Support Staff · Recovery Peers · CE Hours: 1.0

## Recovery Is Built, Not Just Begun

Stopping substance use is the start; building a life worth staying sober for is the work. Recovery support helps clients develop the skills, connections, and resources — the 'recovery capital' — that make recovery last. Front-line staff are central to that everyday building.

This guide covers recovery support, relapse prevention, coping and life skills, peer and mutual-aid support, and responding to setbacks. Throughout, the client's own goals and strengths lead the way.

### Learning Objectives — by the end of this module you will be able to:

- Explain what recovery support is and recovery capital
- Identify relapse warning signs and prevention strategies
- Support coping and life skills
- Connect clients to mutual-aid and peer support
- Respond to return to use with care and re-engagement

## Section 1: What Recovery Support Is

Recovery support helps clients build the skills, connections, and resources that make recovery last — beyond simply stopping substance use, toward a meaningful, self-directed life. It centers the client's own goals and strengths and is built on supportive relationships and genuine hope. Your everyday encouragement and practical help are part of recovery support.

## Section 2: Recovery Capital

Recovery capital is the sum of resources a person can draw on for recovery — personal (health, coping skills, hope), social (supportive relationships, family, peers), community (housing, employment, recovery community, services), and cultural (identity, faith, belonging). More recovery capital makes recovery more durable. Part of recovery support is helping clients build capital in each area, addressing the social determinants — like housing and employment — that shape recovery.

## Section 3: Relapse Prevention

Relapse prevention helps clients identify their triggers and high-risk situations and plan coping responses in advance. Common triggers include stress, certain people, places, and things, and difficult emotional states —

often remembered as HALT (hungry, angry, lonely, tired). Help clients build and use a relapse-prevention plan. A return to use often begins long before the actual use, in thinking and behavior changes.

## Section 4: Recognizing Warning Signs

Warning signs of an approaching return to use include isolation, skipping groups or support, romanticizing past use, overconfidence ('I've got this'), reconnecting with old people and places, mood changes, increased stress, and stopping self-care. Notice these and gently name them with the client without judgment. Early, supportive intervention can prevent a return to use.

## Section 5: Coping and Life Skills

Recovery is sustained by practical skills. Coping skills help clients manage cravings, stress, difficult emotions, and triggers. Life skills — building routines, finding employment, managing finances, repairing relationships, and caring for health — rebuild the life recovery is for. Support clients to practice and reinforce these skills within the treatment plan; skills turn good intentions into lasting change.

## Section 6: Mutual-Aid and Peer Support

Connection is one of the strongest supports for recovery. Mutual-aid groups (such as 12-step programs, SMART Recovery, and others) and peer support reduce isolation and build community. Help clients explore options that fit their values and needs — recovery has many paths, and no single one is right for everyone. Recovery communities and peer specialists with lived experience provide support that sustains long-term recovery.

## Section 7: Recovery-Oriented Language and Hope

Language and attitude shape recovery. Use person-first, hopeful, non-stigmatizing language, and convey genuine belief that the client can recover — people often borrow hope from staff before they can hold it themselves. Celebrate progress, normalize the hard parts, and keep the client in the driver's seat. Hope is not a nicety; it's part of the treatment.

## Section 8: Responding to Return to Use

Return to use is common in recovery and is not a moral failure. Respond with care, attention to safety (overdose risk is high after a period of abstinence), and re-engagement in treatment. Help the client learn what led to it and adjust their plan. Never shame or punish — shame drives people away from the help they need. A compassionate response keeps the door to recovery open.

### Keep the door open

How you respond to a return to use determines whether a client comes back. Care and re-engagement keep recovery within reach.

## Key Terms

Term	What it means
Recovery support	Helping clients build skills, connections, and resources for

	lasting recovery.
Recovery capital	The personal, social, community, and cultural resources for recovery.
Relapse prevention	Identifying triggers and planning coping responses.
HALT	Hungry, angry, lonely, tired — common relapse triggers.
Mutual-aid	Peer-led recovery groups (12-step, SMART Recovery, etc.).
Return to use	Resuming substance use; common and part of many recoveries.

## Check Your Understanding

1. What is recovery capital, and what are its types?
2. Name three relapse warning signs.
3. What does HALT stand for?
4. Why is mutual-aid and peer support important?
5. How should you respond to a return to use?

## What's Next

### Looking ahead

Next, SUD-08: Trauma-Informed & Culturally Responsive Care covers care that builds safety and respects each client's culture.