

Craving and Urges Guidebook

Practical tools to notice the pull, create space
and choose the next helpful action.

One urge. One pause. One next step.

I can ask for support while this feeling is here.
I do not have to work through this alone.

A client workbook for alcohol, substance and sexual behaviour
recovery, with tools that can also support impulse-spending goals.

MY COPY

Name or initials

Started on

Break cycles. Heal patterns. Thrive.

Coaching and recovery support | Not therapy, medical care or crisis support

SECTION 01

Start here when an urge hits

I can use one tool at a time. I do not have to read or complete the whole guide while I am struggling.

1 Pause and make space

Step away from the trigger or easy access. Move somewhere safer.

2 Notice what is here

Name the urge and feel my feet. If I feel numb, orient to the room and seek connection.

3 Choose one tool

Grounding p5 | Breathing p6 | TIPP p7-8 | Urge surfing p9

4 Reach out and act

Tell someone what is happening. Choose one recovery action. My quick plan is on p19.

When physical symptoms need care

New or severe symptoms, intoxication or withdrawal need assessment. If I may depend on alcohol or benzodiazepines, I get medical advice before reducing or stopping. Urgent help: p20.

Finding my way

Understand and map p3-4 | Separate the story p10

Delay, needs and perspective p11-13 | Support and access p14-15

Prepare, reflect and practise p16-18 | My plan p19 | Support p20

SECTION 02

Understanding the pull

A craving can include thoughts, emotions and body sensations. Its strength can change. There is no fixed time by which it must disappear.

What I feel and what I conclude

The sensation is real. The explanation my mind offers may need checking. “I feel restless” and “I need a drink” are different observations.

A familiar example

I am doing an ordinary task and notice a ball of restless energy. My mind says, “A drink will get rid of it.” I can pause, check my physical safety, ground and ask for support before deciding what to do.

The Addict Mind or Alcohol Mind

These are names for learned thoughts and promises, such as “just one” or “I deserve this”. I can notice the story without treating it as an instruction or a diagnosis.

Keep the picture open

Restlessness, shaking or a racing heart can have several causes, including medication effects or withdrawal. I do not diagnose these sensations as “just an urge”. I seek medical advice when needed.

Sexual desire itself is normal. This guide focuses on patterns that conflict with my chosen goals or cause harm. My preferences and identity are not a diagnosis.

SECTION 03

Map my craving

I complete this when I have enough space to reflect. Short answers are enough. I am looking for an earlier point where I can get support.

What was happening

Place, time, people or situation

What I noticed in my body

Describe the sensation without diagnosing it

What I was feeling

For example pressure, loneliness, excitement or frustration

The story my mind offered

The promise, permission or bargain

What I felt pulled to do

Include planning, searching or contacting

What made access easier

A person, app, place, purchase or opportunity

What I may have needed

For example food, rest, support, safety or connection

Where I can interrupt next time

One action and one person who can help

SECTION 04

Ground through my senses

I orient to where I am now. I can keep my eyes open, feel my feet in my shoes and notice the weight of my body being supported.

5 Things I can see

Colours, shapes, light or everyday objects.

4 Things I can hear

Nearby sounds, distant sounds or my own movement.

3 Things I can touch or feel

My clothes, the chair or my feet on the floor.

2 Things I can smell

Notice what is available. I can skip a sense that is not accessible.

1 Thing I can taste

A sip of water or a mint, if safe and comfortable for me.

Make it workable

I can swap the order, repeat a sense or name just a few things. If looking inward feels overwhelming, I stay with the room and contact someone.

SECTION 05

Breathe gently and reconnect

I let my breathing stay comfortable. Small, steady breaths are enough. This is a practice I can rehearse when calm.

Simple breath

Sit or stand with support. Let my belly move naturally if comfortable. Breathe gently through my nose and let the breath leave easily. Try a few relaxed breaths.

A slightly longer out-breath

If comfortable, breathe in for 4 counts and out for 6. Try for a minute or two. Shorten the counts or return to natural breathing whenever I need to. There is no breath hold.

Add a gentle anchor

Feel my feet, soften my jaw or take a slow walk in a safe place. Quiet, familiar music may help if it does not trigger memories linked to using.

Comfort comes first

I avoid forcing, fast connected breathing or very large breaths here. If I feel dizzy, breathless or more distressed, I stop the exercise, breathe normally and orient to the room.

What felt manageable for me

Breathing, feet, movement, music or another anchor

SECTION 06

TIPP for strong activation

TIPP brings attention to the body when distress is high. I choose a step that is safe for me. I do not need to do all four.

T Temperature

Try cool water on my face or briefly rest a cold pack wrapped in a cloth against my cheeks. Avoid direct ice, pressure on my eyes, face immersion and breath-holding in this self-help guide.

I Intense exercise

If medically safe, try a brief burst of movement I already tolerate, such as jogging on the spot. Stay within my fitness level. A gentler walk is an alternative; I do not have to push hard.

Choose safely

Get medical advice before cold-temperature or intense-exercise steps if I have a heart or circulation condition, take medicines affecting heart rate, or am unsure. Avoid strenuous exercise while intoxicated, withdrawing or physically unwell.

The option that is safe and realistic for me

Include any advice or limits agreed with my healthcare professional

The two P skills are on the next page. If I feel shut down or disconnected, I can start with orienting, gentle movement and contact instead.

SECTION 07

TIPP breathing and release

These are the two P skills. I aim for a little more room to choose my response. I do not have to make every feeling disappear.

P Paced breathing

Slow the breath gently. If comfortable, breathe in for 4 and out for 6 for a minute or two. Keep the breath light. Use shorter counts or natural breathing if that feels easier.

P Paired muscle relaxation

Breathe in and gently tense one muscle group, such as my hands or shoulders, for a few seconds. Breathe out and release. Notice the difference. Repeat without straining or holding my breath.

Adapt to my body

Skip injured or painful areas. Stop if I feel pain, dizziness or more distress. I can simply soften my hands and shoulders while breathing naturally.

Which TIPP skill did I choose

Temperature, movement, breathing or muscle release

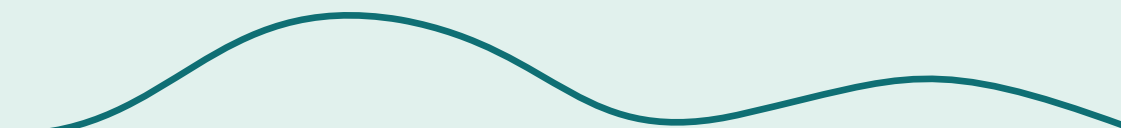
What did I notice and what comes next

A small change counts. I can reach out even if the urge is still strong.

SECTION 08

Ride the wave of an urge

Urge surfing means noticing the craving as an experience I can observe. Waves may rise, ease and return. I can get support throughout.



A wave is a helpful image, not a timetable.

1 Name it

"I am noticing an urge. I can feel it and choose what I do."

2 Find the sensation

Notice one area: pressure, warmth, tingling or restlessness.

3 Stay with this moment

Breathe naturally. Feel my feet. Return gently when my mind starts bargaining.

4 Watch for change

Observe without judging. Does the sensation shift, spread, soften or stay?

5 Choose support and action

Leave a trigger, contact someone or take a step that protects recovery.

What I noticed while staying with the urge

Brief observations about my body or thoughts

My next helpful action

I can change tools or reach out before the wave eases.

SECTION 09

Separate sensation from story

I name each part of the experience. This gives me a chance to respond with care, honesty and support.

The Addict Mind or Alcohol Mind says

What is the promise, bargain or permission?

My body feels

Where and how do I feel it? I avoid guessing the cause.

The emotion underneath may be

What feeling might need attention?

The need I can care for is

Rest, food, safety, support, comfort or connection?

My grounded response is

What do I know when I consider the whole picture?

My next honest action is

What protects my recovery now?

SECTION 10

Delay and change the situation

I can give myself a short pause while taking practical action. I do not have to wait until I feel calm to leave a risky setting.

Delay the decision

Choose a manageable pause, such as 10 minutes. Set a timer if helpful. This is a check-in point, not a promise that the urge will end or permission to act afterwards.

Redirect my attention

Use a safe, absorbing action: make food, shower, walk with someone, tidy one small area or do a familiar task away from the trigger.

Reduce easy access

Close the app or checkout, leave the risky setting, change the route or use an agreed block. Keep access to support. Follow medical advice about alcohol dependence and prescribed medicines.

For the next short pause I will

One activity and the safer place I will do it

If the urge is still strong I will

Name the next person or service I can contact

SECTION 11

Check what I may need

A craving may appear alongside an unmet need. I can explore this without assuming that every urge has one simple cause.

Hungry or thirsty

Have regular food and water.

Angry or under pressure

Name the feeling and take space.

Lonely or disconnected

Ask for a call, company or a meeting.

Tired or overloaded

Rest, simplify or pause one demand.

Bored or seeking intensity

Choose a meaningful, safer activity.

Hurt or needing comfort

Reach for care I do not have to hide.

The need that feels closest today

I can write "not sure" and explore it with support.

One way I can care for that need

Make it small, specific and available today

These are prompts for reflection. Persistent physical or emotional symptoms deserve professional support.

SECTION 12

See beyond the first promise

When my mind replays the appealing part, I can gently widen the picture. I keep this brief and non-graphic so I do not rehearse the trigger.

What is the urge promising me

Relief, excitement, confidence, connection or escape?

What tends to happen next

Based on my actual experience, later that day and the next morning

What becomes possible if I choose differently

Think about tomorrow, my relationships, money, health or self-respect

What matters enough for this next step

One value or reason in my own words

A grounded reminder

I can remember the consequences with compassion. I do not need to frighten, punish or shame myself into change.

SECTION 13

Bring someone into the moment

I can tell the truth early, even if I have not acted on the urge. I can ask for a specific kind of support.

A message I can send

"I am having an urge to _____. It feels _____ out of 10. I am at _____. Could you stay on the phone while I move somewhere safer and choose my next step?"

My first support person and how to reach them

Someone who has agreed to be part of my support

My backup person meeting or service

Who I can try if my first person is unavailable

The help I am asking for

For example a call, company, a walk or help making a plan

If nobody answers

I try my backup and move towards safety. Coaching messages may not be read immediately. For urgent help I use the services on p20; I do not wait for a reply.

SECTION 14

Close the route back

I look at the steps that make the pattern easier to follow. I choose boundaries that fit my recovery goals and respect everyone involved.

Compulsive sexual behaviour

Notice habitual apps, searches, secrecy or isolation. Agree digital boundaries and a route towards safer connection.

Sexualised substance use

Notice the linked chain: people, substances, apps, plans and places. Set boundaries around the earliest step and organise sober support.

Alcohol recovery

Plan for the first-drink situation, evening routine, shop route or social pressure. If dependence may be present, make changes with medical guidance.

Money and impulse shopping

Pause checkout, remove saved payment details or notifications, and review purchases against my spending plan.

The route I will interrupt and my first step

One practical boundary I can put in place today

SECTION 15

Prepare before the next urge

I put a few helpful things within reach while I am steady. I choose what fits my body, circumstances and recovery plan.

My grounding kit

Water, mints if suitable, a familiar object to feel, comfortable music, and the quick plan on p19. I use ordinary, safe sensations.

My everyday foundations

Regular food, sleep, manageable routines and honest check-ins can support my recovery. I practise one tool when calm so it feels more familiar.

The two tools I want to practise first

Choose from grounding, breathing, TIPP, surfing or another plan

What I will keep ready and where

A small kit, saved numbers, app blocks or a visible reminder

When I will practise and who I will tell

A realistic time and a person who can encourage me

SECTION 16

Take the data not the shame

After an urge or a setback, I can learn with honesty. I first check safety and get any medical help I need.

What happened before the urge

Keep to the facts and the early warning signs

What I tried and what happened next

Include any small pause, contact or boundary that helped

What I need now

Care, medical advice, honesty, repair, rest or support?

One adjustment I will make

A practical change for the next similar situation

If I acted on the urge

I can contact support and take the next protective step now. If substances were involved, I seek medical help for concerning symptoms and avoid driving while impaired. Urgent help is on p20.

SECTION 17

My craving practice record

A few words are enough. I can note the urge before and after a tool, even when the score stays the same. Choosing support still matters.

Urge strength: 0 = no urge | 10 = strongest I can imagine

Date	Trigger or feeling	Before / after	Tool I tried	Next action or support

A pattern I want to discuss with my coach or support

What seems to repeat, and what is worth trying next?

SECTION 18

My quick urge plan

I fill this in when calm. I can save a screenshot of the completed page or keep a printed copy somewhere easy to reach.

My earliest warning sign

What tells me the chain is beginning?

My first grounding or regulation tool

A safe action I can start straight away

The access or situation I will change

A boundary, exit or block that protects my next step

The person I will contact and my backup

Include phone numbers or another clear way to reach them

The next helpful action I will take

What I will do while I wait or while the urge is still here

The reason this next step matters to me

A phrase in my own words

If I cannot stay safe or have severe physical symptoms: 999 / A&E.
For urgent advice in England: NHS 111. More support on p20.

SECTION 19

Support and using this guide

These tools support recovery alongside appropriate care. Persistent or worsening cravings are a reason to review my support with a professional.

Get the right help

Immediate danger, suspected overdose, a seizure, severe confusion, severe withdrawal or chest pain that does not go away: call 999 or go to A&E. If I cannot keep myself or someone else safe, I seek emergency help.

Urgent advice in England: call NHS 111; for urgent mental health help, select the mental health option. I can also ask for an urgent GP appointment.

Someone to talk to: Samaritans 116 123, free day or night.

Before reducing or stopping alcohol or benzodiazepines if I may be dependent, I get medical advice. I do not change prescribed medicines using this guide.

Using the response spaces

PDF: open in a PDF app that supports forms, type in the boxes, then save a personal copy.

Word: select "Type here" to enter a short answer. Both versions can be printed. Keep completed copies private. Use extra paper or a separate note for longer reflections.

Sources and further reading

[DBT TIP skills | Linehan handout hosted by Kaiser Permanente](#)

[Urge surfing | US Department of Veterans Affairs](#)

[Recognising and coping with urges | NIAAA Rethinking Drinking](#)

[Grounding | NHS Inform](#)

[Breathing for stress | NHS](#)

[Alcohol withdrawal and support | NHS](#)

[Benzodiazepines and withdrawal | NHS Inform](#)

[Urgent mental health help | NHS](#)

Original coaching prompts by The Sober Truth Coach. Skills adapted in plain language; no endorsement implied. Guidance checked October 2026.

Coaching and mentoring support. Not medical treatment, therapy or crisis care.

COACHING AND MENTORING

Would it help to work through this together

Sometimes a workbook helps you see the pattern.
Putting it into practice can still feel difficult.

Your free clarity call

We have 30 minutes to talk about what is happening, what you want to change and whether working together feels right. Ask questions and share as much as feels manageable. There is no pressure or obligation.

Paid coaching and mentoring

I bring together practical recovery tools and learning from my own journey through addiction and recovery. We explore your patterns, agree useful actions and build supportive accountability around putting them into practice.

If we decide to work together, we agree the focus, cost and support included before you commit.

Book a free 30-minute clarity call

calendly.com/thesobertruthcoach/freeclaritycall

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The workbook remains free. Coaching and mentoring are optional.

Coaching is not therapy, medical care or crisis support.
For urgent help, use the support information in this guide.