

The Mask That Became the Cage

Intensive · The Recovery Files

Masking, Burnout & Substance Use in the Neurodivergent Brain

From Performance to Authenticity — The Recovery Files

Your progress 0 of 6 parts done · Masking · Perform, suppress, hide · Burnout · Depleted, crashed, lost · Substance · Fuel, relief, escape · Unmasking in Recovery · Breaking the cycle through authenticity, safety & sustainable living

In this workbook

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Each reading is followed by its check-in questions and exercises, in the same order as the app. Your scored results are shown in the app.

PART 1 OF 5 · READING

The Mask You Wear: Understanding Neurodivergent Masking

You have been performing your entire life — and you may not even know it.

If you have ADHD or another form of neurodivergence, there is a very high probability that you have spent years, possibly decades, engaging in a behavior that the neurodivergent community calls masking: the conscious or unconscious suppression of your natural neurodivergent traits in order to appear neurotypical, to fit in, to avoid punishment, rejection, or social exclusion.

Masking is not the same as ordinary social adaptation. Masking is a full-body, full-brain, full-time performance that requires enormous cognitive, emotional, and neurological resources to maintain.

Masking takes many forms. It is rehearsing every conversation before it happens and replaying every conversation after it ends. It is monitoring your facial expressions, your tone of voice, your body language, your eye contact, your volume, your enthusiasm level, your word choice — all simultaneously, all the time, in every interaction.

It is suppressing the fidgeting, the stimming, the movement that your nervous system needs. It is hiding your genuine emotional reactions — which are often too big, too fast, too intense for neurotypical comfort — and replacing them with carefully calibrated performances of "appropriate" emotion.

It is pretending to be interested in things that bore you and hiding the passions that light you up because you have learned they are "too much" or "weird." It is laughing at the right times, nodding at the right intervals, making the right amount of eye contact — not too much, not too little — while internally running a social-performance operating system that consumes massive amounts of cognitive bandwidth.

For many neurodivergent people, masking began in childhood — often before they had any conscious understanding of what they were doing or why. The feedback was clear and consistent: your natural way of being is wrong, disruptive, annoying, too much, not enough, inappropriate. Stop that. Sit still. Pay attention. Why can't you just be normal?

The child's developing brain absorbed these messages and constructed an adaptation: if who I am is unacceptable, I will become someone else.

The mask was born not from vanity but from survival — a sophisticated neurological response to environments that punished authenticity.

The tragedy is that the mask works. It works well enough to avoid the most immediate consequences of being visibly neurodivergent. It works well enough that many neurodivergent people — particularly those diagnosed late in life, particularly women and girls who are socialized to be accommodating — are never identified as neurodivergent at all because their mask is too convincing.

They pass as neurotypical, and everyone around them assumes the performance is effortless. No one sees the cost. No one sees the depletion. No one sees the person behind the mask slowly running out of the neurological resources required to maintain the illusion.

And no one sees how the substance enters the picture — not as recreation, not as rebellion, not as a character flaw — but as the only available technology for managing the unsustainable cost of a performance that never ends.

Reflection Questions

1. When did you first become aware that you were "performing" in social situations rather than simply being yourself? Can you trace this back to a specific age, event, or feedback you received?

2. Which aspects of masking do you engage in most heavily — social scripting, emotional camouflage, suppressing movement, hiding interests, or something else? Which takes the most energy?

3. Has your masking ever been so effective that it prevented people from recognizing your struggles — including professionals who might have helped? What was the cost of that invisibility?

4. How does the idea that masking began as a survival adaptation — not a choice — change how you feel about the exhaustion and substance use that followed?

5. On a scale of 1 to 10, how much of your daily life involves active masking? What would a "1" (complete authenticity) look like, and does it feel possible?

CHECK YOURSELF · CHECK-IN 1 OF 5**Social & Performance Masking**

Scale: 1 = Not at all · 2 = A little · 3 = Somewhat · 4 = Quite a bit · 5 = Very much

1. I regularly rehearse what I will say before social interactions and monitor my performance during them

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. I consciously adjust my facial expressions, tone of voice, and body language to match what I think others expect

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. I hide my genuine emotional reactions and replace them with reactions I have learned are "appropriate"

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. After social situations, I replay conversations in my mind looking for mistakes I made in my performance

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. I have developed a "public self" that is significantly different from who I am when alone

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. I feel like I am constantly acting, performing, or playing a role rather than simply being myself

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. I suppress stimming, fidgeting, and other natural body movements in order to appear "normal"

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. I hide my genuine interests and passions because I have learned they are "too much" or "weird"

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

YOUR EXERCISE**Masking-SUD Mirror**

Seeing How Masking Behaviors & Substance Use Serve the Same Purpose

Why This Matters

Masking and substance use are parallel coping strategies — both developed to manage the same core problem: a neurodivergent person in a neurotypical world. This mirror makes those parallels visible.

Performance masking

MASKING BEHAVIOR

Performance masking — rehearsing "normal" responses, scripting conversations, monitoring every word and expression

SUBSTANCE USE PARALLEL

Social drinking/using — needing substances to feel comfortable in social situations, to "be yourself" around others

THE SHARED FUNCTION

Both are strategies for surviving social environments that feel fundamentally unsafe. The mask is effortful performance; the substance is chemical shortcut to the same relief.

How does this specific parallel show up in YOUR life? Give a concrete example of when masking and substance use served the same purpose.

If both the mask and the substance were removed, what need would remain unmet? What is the core problem neither truly solves?

Emotional camouflage

MASKING BEHAVIOR

Emotional camouflage — hiding emotional intensity, dampening visible reactions, pretending feelings are smaller

SUBSTANCE USE PARALLEL

Emotional numbing through substances — using to flatten emotional spikes, reduce the volume of feelings that feel too big to show

THE SHARED FUNCTION

Both serve the same function: making your internal emotional experience invisible to the outside world.

How does this specific parallel show up in YOUR life? Give a concrete example of when masking and substance use served the same purpose.

If both the mask and the substance were removed, what need would remain unmet? What is the core problem neither truly solves?

Hypervigilance

MASKING BEHAVIOR

Hypervigilance — constant monitoring of social cues, reading the room obsessively, adjusting behavior in real time

SUBSTANCE USE PARALLEL

Using to quiet hypervigilance — substances that shut off the monitoring system, that allow you to stop scanning and performing

THE SHARED FUNCTION

Both reflect a nervous system that never feels safe enough to stop watching. The mask keeps monitoring running; the substance is the only off switch.

How does this specific parallel show up in YOUR life? Give a concrete example of when masking and substance use served the same purpose.

If both the mask and the substance were removed, what need would remain unmet? What is the core problem neither truly solves?

Suppressing stimming and movement

MASKING BEHAVIOR

Suppressing stimming and movement — forcing the body still, stopping fidgeting, hiding physical expressions

SUBSTANCE USE PARALLEL

Using to manage the body — substances that provide the physical regulation the body was denied through masking

THE SHARED FUNCTION

Both involve controlling the body's natural regulation system. Masking blocks the body's preferred methods; substances provide a replacement.

How does this specific parallel show up in YOUR life? Give a concrete example of when masking and substance use served the same purpose.

If both the mask and the substance were removed, what need would remain unmet? What is the core problem neither truly solves?

Identity concealment

MASKING BEHAVIOR

Identity concealment — hiding the neurodivergent self so thoroughly that you no longer know who you are

SUBSTANCE USE PARALLEL

Using to find yourself — substances that temporarily dissolve the mask, that let you contact the person underneath

THE SHARED FUNCTION

Both represent fundamental disconnection from authentic self. Masking buries the real person; substances promise access to them.

How does this specific parallel show up in YOUR life? Give a concrete example of when masking and substance use served the same purpose.

If both the mask and the substance were removed, what need would remain unmet? What is the core problem neither truly solves?

Mirror Summary

1. Which mirror pair was the most powerful recognition for you? Which parallel did you never see clearly until now?

2. If masking and substance use serve the same function, what does recovery look like when both coping strategies are addressed together?

3. How does seeing your substance use as a parallel to masking — rather than a separate moral failing — change your understanding of your addiction?

4. Write an integration statement: "My masking and my substance use were both trying to..."

YOUR EXERCISE

Exercise 2: Personal Masking Inventory

Seeing the mask clearly, one piece at a time

You cannot set down what you cannot see

Many people have masked for so long that it feels like personality, not effort. This inventory breaks the mask into six common parts. For each one, notice how often you do it, how much energy it takes, and where it happens. There are no right answers, and noticing a mask is not the same as having to take it off.

Scripting and rehearsing

Planning what to say before a conversation, watching every word during it, and replaying it afterward looking for mistakes.

How often do I do this?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Never 10 = All the time

How much energy does it cost me?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Drains me completely

Where I do this most:

☐ Work or school ☐ Family ☐ Partner ☐ Friends ☐ Recovery meetings ☐ Therapy or treatment ☐ Online ☐ Stores and public places ☐ Even when alone

A recent example:

What I am afraid would happen if I stopped:

Hiding my feelings

Making big feelings look small, putting on the "right" face, laughing when I am not amused, looking calm when I am not.

How often do I do this?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Never 10 = All the time

How much energy does it cost me?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Drains me completely

Where I do this most:

☐ Work or school ☐ Family ☐ Partner ☐ Friends ☐ Recovery meetings ☐ Therapy or treatment ☐ Online ☐ Stores and public places ☐ Even when alone

A recent example:

What I am afraid would happen if I stopped:

Holding my body still

Stopping fidgeting, rocking, tapping, pacing, or other movement my body needs. Forcing eye contact.

How often do I do this?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Never 10 = All the time

How much energy does it cost me?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Drains me completely

Where I do this most:

☐ Work or school ☐ Family ☐ Partner ☐ Friends ☐ Recovery meetings ☐ Therapy or treatment ☐ Online ☐ Stores and public places ☐ Even when alone

A recent example:

What I am afraid would happen if I stopped:

Hiding what I love

Keeping quiet about my real interests because I learned they were "too much," "weird," or boring to others.

How often do I do this?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Never 10 = All the time

How much energy does it cost me?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Drains me completely

Where I do this most:

☐ Work or school ☐ Family ☐ Partner ☐ Friends ☐ Recovery meetings ☐ Therapy or treatment ☐
Online ☐ Stores and public places ☐ Even when alone

A recent example:

What I am afraid would happen if I stopped:

Pretending I am comfortable

Acting fine with noise, lights, crowds, smells, or clothes that are actually hard for me to bear.

How often do I do this?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Never 10 = All the time

How much energy does it cost me?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Drains me completely

Where I do this most:

☐ Work or school ☐ Family ☐ Partner ☐ Friends ☐ Recovery meetings ☐ Therapy or treatment ☐
Online ☐ Stores and public places ☐ Even when alone

A recent example:

What I am afraid would happen if I stopped:

People-pleasing

Agreeing, going along, saying yes when I mean no, and copying other people so I will not stand out.

How often do I do this?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Never 10 = All the time

How much energy does it cost me?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Drains me completely

Where I do this most:

☐ Work or school ☐ Family ☐ Partner ☐ Friends ☐ Recovery meetings ☐ Therapy or treatment ☐ Online ☐ Stores and public places ☐ Even when alone

A recent example:

What I am afraid would happen if I stopped:

Where the Mask Came From

Messages I heard growing up (pick any that fit):

☐ Sit still ☐ You're too much ☐ Why can't you just be normal? ☐ Calm down ☐ You're so sensitive ☐ Look at me when I talk to you ☐ You're lazy ☐ Nobody cares about that ☐ You never listen

Other messages I heard, and who they came from:

The earliest time I remember changing myself to fit in:

What the mask protected me from back then:

What the Inventory Shows

1. Which part of the mask costs you the most energy? Is it also the one you do most often?

2. Where do you mask the most? Where do you mask the least? What is different about those places or people?

3. Did you mark "Even when alone" anywhere? What does it tell you that the mask stays on with no one watching?

4. Which part of your mask did your using make easier to wear, or easier to take off?

5. The mask helped you survive. Which part are you most ready to loosen, even a little?

PART 2 OF 5 · READING

The Burnout Beneath: What Masking Costs Your Brain and Body

Masking is not free. It is funded by your neurological reserves, and those reserves are finite.

Every moment you spend monitoring your social performance, suppressing your natural responses, and generating "appropriate" alternatives, you are drawing from the same limited pool of cognitive, emotional, and physiological resources that you need for everything else in your life: executive function, emotional regulation, decision-making, impulse control, attention, memory, and — critically for our purposes — the capacity to resist urges and maintain recovery.

When masking depletes those reserves, what remains is not simply tiredness. It is neurodivergent burnout — a state of profound, systemic depletion that differs fundamentally from ordinary stress or exhaustion.

Neurodivergent burnout is characterized by three overlapping dimensions:

****The first is chronic exhaustion that does not respond to rest.**** This is not the kind of tired that a good night's sleep or a vacation can fix. It is a deep, cellular-level depletion that reflects the accumulated neurological debt of sustained masking. The brain has been running at a deficit for so long that its recovery systems are themselves exhausted.

People in burnout describe feeling like their battery is not just empty but damaged — like the charger itself is broken.

****The second dimension is reduced functioning across multiple domains.**** Skills and capacities that were previously accessible begin to fail. Executive function, already compromised by ADHD, deteriorates further. Tasks that were manageable become impossible. Working memory shrinks. Emotional regulation collapses. Sensory sensitivities intensify.

The person who was "managing fine" — because the mask made it look that way — suddenly cannot manage at all. From the outside, this looks like a sudden decline. From the inside, it is the inevitable consequence of a system that was never sustainable finally reaching its breaking point.

****The third dimension is the most devastating: a loss of skills that the person genuinely possessed.**** Burnout does not just make things harder — it can temporarily eliminate capacities that were real. A person who could cook, drive, hold conversations, and manage a household may find themselves unable to do some or all of these things during a burnout episode.

This is not laziness. It is not "giving up." It is a neurological system that has been so profoundly overtaxed by the demands of masking that it has entered a state of protective shutdown — the brain's emergency brake, pulled when the engine has been redlined for too long.

For the neurodivergent person with a substance use history, burnout creates a perfect storm. The depletion removes the cognitive resources needed for recovery. The emotional collapse removes the capacity for emotional regulation that prevents relapse. The loss of functioning creates shame, isolation, and hopelessness — each a powerful relapse trigger.

And the experience of burnout itself — the crushing weight of it, the loss of everything that made life manageable — recreates the exact internal state that the substance originally treated: unbearable overwhelm with no available relief.

The substance was the solution to this kind of desperation before. Without deliberate, informed intervention, it will be the solution again.

Understanding burnout as a neurological consequence of masking — rather than a personal failure — is essential. You did not burn out because you are weak. You burned out because you were maintaining an unsustainable performance with a neurodivergent brain that was never designed to produce what the neurotypical world demands.

The burnout is not the problem. The system that required the mask in the first place is the problem. And recovery from both burnout and substance use disorder requires dismantling that system rather than simply finding more efficient ways to mask.

Reflection Questions

1. Have you experienced neurodivergent burnout as described above — the deep, rest-resistant exhaustion, the loss of functioning, the skill regression? Describe what it felt like and how long it lasted.

2. Can you trace a direct line between increased masking demands and the onset of burnout episodes? What was happening in your life that required more masking than usual?

3. How has burnout affected your recovery from substance use disorder? Have burnout episodes contributed to relapse or near-relapse? What was the mechanism?

4. Which of the three burnout dimensions — chronic exhaustion, reduced functioning, or loss of skills — has been most present in your experience? How did this specific dimension connect to your substance use?

5. If burnout is a neurological consequence of unsustainable masking rather than a personal failure, how does that reframe your experience? What does it tell you about what needs to change?

CHECK YOURSELF · CHECK-IN 2 OF 5

Burnout & Neurological Depletion

Scale: 1 = Not at all · 2 = A little · 3 = Somewhat · 4 = Quite a bit · 5 = Very much

1. I experience regular "crashes" where I am unable to function after periods of social or professional performance
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
2. I feel exhausted in a way that sleep does not fix — a deep, bone-level fatigue that goes beyond being tired
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
3. I have lost interest in things I used to enjoy, not because they are no longer appealing but because I have no energy left
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
4. I experience periods where I cannot speak, make decisions, or initiate even basic tasks (executive function shutdown)
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
5. My burnout cycles have become shorter and more severe over time — I crash faster and recover slower
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
6. I feel like I am running on empty most of the time, with no reserve for unexpected demands
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
7. I sometimes cannot distinguish between depression and burnout — the exhaustion feels total and hopeless
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5
8. I have experienced complete shutdown episodes where I could not maintain basic responsibilities for days or weeks
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

YOUR EXERCISE

Exercise 3: Energy Accounting

Where it all goes, and what puts it back

A bank account for your brain

Think of your energy as a bank account. Every activity is a withdrawal or a deposit. Masking adds a hidden fee to almost every withdrawal. When the account runs dry, you do not stop spending; you go into debt. For many people, using was a way to keep spending with an empty account. This exercise shows where your energy goes and what actually refills it.

Withdrawals: What Drains Me

Rate how much each activity costs you, counting the effort of masking during it.

Work or school meetings

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Phone calls

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Small talk

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Time with family

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Recovery meetings

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Therapy or group sessions

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Errands in busy stores

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Commuting or driving in traffic

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Texts, email, social media

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Housework and paperwork

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Costs nothing 10 = Wipes me out

Other big withdrawals in my life:

Hidden costs other people probably do not see:

Deposits: What Refills Me

Rate how much each one refills you when you actually get it.

Time alone with no demands

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Does nothing 10 = Fills me up

My special interests or hobbies

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Does nothing 10 = Fills me up

Moving or stimming freely

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Does nothing 10 = Fills me up

Being outside or in nature

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Does nothing 10 = Fills me up

Good sleep

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Does nothing 10 = Fills me up

Time with someone I do not have to mask around

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Does nothing 10 = Fills me up

A quiet, dim room

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Does nothing 10 = Fills me up

Music

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Does nothing 10 = Fills me up

Other things that refill me:

Which of these I actually get in a normal week, and how often:

A Typical Weekday

Morning: what drains me, what refills me

Afternoon: what drains me, what refills me

Evening: what drains me, what refills me

How much energy I usually have left at bedtime:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Empty 10 = Plenty

What I used to do with an empty tank when I was using:

Balancing the Account

1. Looking at your ratings, is your account usually overdrawn? By how much?

2. Which one withdrawal could you cut, shorten, or change so it costs less masking?

3. Which one deposit could you add to your week, starting now? When exactly?

4. Recovery itself costs energy. How can you protect enough energy to show up for it?

YOUR EXERCISE

Exercise 4: Burnout History & Pattern Mapping

Finding the pattern so the next one does not surprise you

Burnout leaves tracks

Burnout rarely comes out of nowhere. Looking back, most people can see the demands that piled up first, the early signs they pushed past, and what they reached for when it hit. Mapping two or three past episodes side by side often shows a pattern you can catch earlier next time.

Burnout and depression can look alike

Deep exhaustion, hopelessness, and losing interest in things can be burnout, depression, or both. Tell your counselor or doctor what you notice here. If you feel unsafe or have thoughts of harming

yourself, call or text 988 (Suicide & Crisis Lifeline), or call 911.

Burnout Episode 1

When was it? (age, year, or life season)

What was piling up before it hit (work, family, moves, losses, social demands):

Early warning signs I had:

☐ Sleep changes ☐ Snapping at people ☐ Can't make decisions ☐ Losing words ☐ Noise and light harder to bear ☐ Skipping meals ☐ Forgetting things ☐ Crying easily ☐ Cravings ☐ Feeling numb ☐ Staying in bed

What I lost the ability to do for a while:

How bad did it get?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Mild 10 = Could not function

How long it lasted:

What I used or did to get through it:

What actually helped me come back:

Burnout Episode 2

When was it? (age, year, or life season)

What was piling up before it hit (work, family, moves, losses, social demands):

Early warning signs I had:

- ☐ Sleep changes ☐ Snapping at people ☐ Can't make decisions ☐ Losing words ☐ Noise and light harder to bear ☐ Skipping meals ☐ Forgetting things ☐ Crying easily ☐ Cravings ☐ Feeling numb ☐ Staying in bed

What I lost the ability to do for a while:

How bad did it get?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Mild 10 = Could not function

How long it lasted:

What I used or did to get through it:

What actually helped me come back:

Burnout Episode 3

When was it? (age, year, or life season)

What was piling up before it hit (work, family, moves, losses, social demands):

Early warning signs I had:

☐ Sleep changes ☐ Snapping at people ☐ Can't make decisions ☐ Losing words ☐ Noise and light harder to bear ☐ Skipping meals ☐ Forgetting things ☐ Crying easily ☐ Cravings ☐ Feeling numb ☐ Staying in bed

What I lost the ability to do for a while:

How bad did it get?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Mild 10 = Could not function

How long it lasted:

What I used or did to get through it:

What actually helped me come back:

The Pattern

What the episodes have in common (what piled up, what I pushed past):

The warning sign that usually shows up first:

Have the episodes come closer together, lasted longer, or gotten worse?

When the next burnout starts, I am most at risk of:

- ☐ Using ☐ Isolating ☐ Quitting my job or program ☐ Skipping meetings ☐ Pushing through until I crash ☐ Ending relationships ☐ Not telling anyone

My Early Warning List

My top three early warning signs:

The person most likely to notice before I do, and what I want them to do or say:

The first thing I will cut back when I see these signs:

PART 3 OF 5 · READING

Chemical Masks: How Substances Replace, Reinforce, and Remove the Performance

The relationship between masking and substance use is not simple. Substances do not merely provide escape from the exhaustion of masking — they serve at least three distinct functions in the masking system.

****Function 1: Substances as Masking Fuel****

Stimulants — caffeine in enormous quantities, nicotine, cocaine, methamphetamine, misused prescription stimulants — can be used to power the masking performance when natural neurological resources have been depleted.

The morning coffee that allows you to face the office. The energy drink before the social event. The Adderall that makes it possible to sit through the meeting, organize the presentation, maintain the appearance of competence.

For many neurodivergent people, stimulant use began not as substance abuse but as performance support — the fuel that kept the mask running when the brain had nothing left to give.

****Function 2: Substances as Mask Removal****

This is the experience of using — often alcohol, cannabis, or other depressants — and feeling, for the first time, like the mask has dissolved. The monitoring stops. The performance ends. The real person, buried under years of calculated social presentation, surfaces and breathes.

Many neurodivergent people describe their first experience with a depressant substance as a revelation: "This is what other people feel like all the time. This is what it feels like to just exist without trying so hard."

The substance did not create a false state — it removed a false state, temporarily revealing the authentic person underneath.

This experience is profoundly compelling because it answers a desperate, often unspoken need: to exist without the exhausting mediation of the mask.

****Function 3: Substances as Burnout Intervention****

When the masking system has pushed the neurodivergent person into full burnout — when functioning has collapsed, when the exhaustion is total — the substance provides emergency relief.

Opioids numb the pain of a nervous system in crisis. Alcohol provides temporary sedation to a brain that cannot downregulate. Cannabis creates a buffer zone between the collapsed person and the overwhelming demands that triggered the collapse.

This is not recreational use. This is neurological emergency self-treatment — the equivalent of splinting a broken bone with whatever is available because professional help is not accessible, not affordable, or not informed enough to help.

Recovery that does not account for these three distinct functions of substance use within the masking system will fail — not because the person is "resistant" or "not ready" but because the recovery plan addresses a problem (substance dependence) while ignoring the system (masking and burnout) that made the substance necessary.

Removing the substance without addressing masking demands is like removing the oxygen mask from a person who is still in a smoke-filled room. The need does not disappear. It intensifies.

Effective recovery requires reducing masking demands, building sustainable alternatives to chemical masking support, creating environments where authenticity is safe, and developing the capacity to exist in the world as a neurodivergent person without the constant, depleting performance that made substances necessary in the first place.

Reflection Questions

1. Which of the three substance functions — masking fuel, mask removal, or burnout intervention — most accurately describes your primary relationship with substances? Give specific examples.

2. Have you ever experienced a substance as "mask removal" — the feeling of the performance dissolving and the real person surfacing? Describe that experience.

3. Have you used stimulants (including excessive caffeine) specifically to power your masking performance? What happened when the stimulant wore off?

4. If your substance use served a specific function in the masking system, what happens in recovery when that function is no longer served? What need remains unmet?

5. What would it look like to meet the need your substance was serving — social ease, authenticity, burnout relief — through means that do not destroy your life?

CHECK YOURSELF · CHECK-IN 3 OF 5

Substance Use as Masking Support

Scale: 1 = Not at all · 2 = A little · 3 = Somewhat · 4 = Quite a bit · 5 = Very much

1. I have used substances specifically to help me maintain my social mask — to be more comfortable performing "normal"

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. I use substances to recover from the exhaustion of masking — to manage the crash that comes after performing

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. Substances feel like the only thing that allows me to truly relax and drop the performance completely

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. I have used stimulants (including excessive caffeine) to prop up my executive function when masking has depleted it

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. I have used depressants or sedatives to shut down the hypervigilance and social monitoring that masking requires

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. My substance use increases in direct proportion to my masking demands — more social obligation means more use

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. I feel most "myself" when using substances, and I recognize this is because the substance removes the mask

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. Without substances, I do not know how to exist in social or professional environments without performing

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

YOUR EXERCISE

Exercise 5: Substance Function Analysis

What the substance was doing for the mask

Every substance had a job

The reading described three jobs a substance can do in the masking system: fuel that keeps the mask running, a way to take the mask off, and emergency relief when burnout hits. When the substance is gone, the job is still there. Naming the job is the first step toward finding a safer way to get it done.

About medication

If you take, or have taken, prescription medication for ADHD, anxiety, sleep, or pain, do not start, stop, or change it on your own. Tell your prescriber your full substance use history, including any time you took more than prescribed.

Substance or Behavior 1

What it was (a substance, or a behavior like gambling, gaming, or overworking):

The jobs it did for me:

- ☐ Fuel to keep the mask on ☐ Taking the mask off ☐ Emergency relief from burnout ☐ Quieting the constant watching ☐ Getting through social events ☐ Recovering after a crash ☐ Feeling like myself

When and where I usually used it:

What it gave me, honestly:

What it cost me:

The need underneath (rest, ease, being myself, relief):

A safer way to meet that need:

How strong is its pull on me today?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Very strong

Substance or Behavior 2

What it was (a substance, or a behavior like gambling, gaming, or overworking):

The jobs it did for me:

☐ Fuel to keep the mask on ☐ Taking the mask off ☐ Emergency relief from burnout ☐ Quieting the constant watching ☐ Getting through social events ☐ Recovering after a crash ☐ Feeling like myself

When and where I usually used it:

What it gave me, honestly:

What it cost me:

The need underneath (rest, ease, being myself, relief):

A safer way to meet that need:

How strong is its pull on me today?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Very strong

Substance or Behavior 3

What it was (a substance, or a behavior like gambling, gaming, or overworking):

The jobs it did for me:

☐ Fuel to keep the mask on ☐ Taking the mask off ☐ Emergency relief from burnout ☐ Quieting the constant watching ☐ Getting through social events ☐ Recovering after a crash ☐ Feeling like myself

When and where I usually used it:

What it gave me, honestly:

What it cost me:

The need underneath (rest, ease, being myself, relief):

A safer way to meet that need:

How strong is its pull on me today?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Very strong

Now That It Is Gone

The job that is going undone most in my recovery right now:

Where I notice that gap most (situations, times of day, people):

What I have tried so far to fill it, and how it is going:

Who on my support team I will talk to about this gap:

PART 4 OF 5 · READING

The Masking-Burnout-Substance Cycle: How the Three Systems Feed Each Other

Masking, burnout, and substance use do not exist as three separate problems. They form a self-reinforcing cycle — a closed loop in which each element drives the other two, creating a downward spiral that accelerates over time.

****The Cycle:****

****Stage 1: Masking Demands****

The neurodivergent person enters an environment that requires neurotypical performance. The mask goes on. Cognitive resources are diverted to monitoring, suppressing, performing, accommodating. The person appears to be functioning normally. Inside, the neurological meter is running, depleting reserves with every minute of sustained performance.

****Stage 2: Depletion Increases****

As masking continues, executive function degrades. Emotional regulation weakens. Sensory sensitivity heightens. The person becomes irritable, foggy, overwhelmed, and increasingly unable to maintain the performance at the same level of quality.

They begin to make "mistakes" — a mask slip, an emotional outburst, a missed social cue, a forgotten commitment. Each mistake generates feedback that increases the pressure to mask harder, which accelerates depletion.

****Stage 3: Burnout Arrives****

The person enters a state of profound exhaustion, reduced functioning, and potential skill loss. The mask becomes impossible to maintain. Work suffers. Relationships strain. Basic self-care tasks become overwhelming.

The person may be unable to attend meetings, maintain routines, fulfill commitments, or engage in the recovery activities that are supposed to protect their sobriety.

From the outside, this looks like non-compliance, regression, or "not working their program." From the inside, it is a neurological system that has been pushed past its breaking point.

****Stage 4: Substance Use****

Burnout creates the conditions for substance use. The person is depleted, struggling, often ashamed, and facing mounting demands with no remaining resources to meet them.

The substance offers what nothing else can: immediate, reliable, neurologically effective relief. If the substance served as masking fuel, the person uses to power through the burnout and resume functioning. If it served as mask removal, the person uses to experience the authentic rest their burned-out system is screaming for.

****Stage 5: Cycle Repeats****

Substance use temporarily relieves the burnout, which allows masking to resume, which restarts the depletion process, which leads to more burnout, which drives more substance use.

The cycle tightens with each revolution. Tolerance increases, so more substance is needed. Burnout episodes become longer and more severe. Masking capacity diminishes even as masking demands remain constant or increase. The person is caught in a contracting spiral with no obvious exit.

****Breaking the Cycle:****

Breaking the cycle requires intervention at multiple points simultaneously: reducing masking demands (not just "trying harder" to cope with them), building burnout recovery and prevention strategies, developing non-chemical alternatives for the functions substances served, and — fundamentally — creating conditions in which the neurodivergent person can exist with reduced masking.

Recovery from substance use disorder is necessary but not sufficient. Recovery from the masking-burnout cycle is where sustainable sobriety actually lives.

Reflection Questions

1. Can you trace the masking → burnout → substance use cycle in your own history? Walk through one complete cycle with specific examples from your life.

2. How many times has this cycle repeated? Has it accelerated — are the burnout episodes getting closer together, the substance use escalating, the masking capacity shrinking?

3. At which point in the cycle are you most vulnerable to relapse? Is it during the masking phase, the depletion phase, or the full burnout phase?

4. What happens in your current recovery when burnout hits? Do you have strategies for managing burnout without substances, or is this a gap in your recovery plan?

5. If breaking the cycle requires reducing masking demands — not just coping better with them — what specific masking demands in your life could be reduced, eliminated, or accommodated?

CHECK YOURSELF · CHECK-IN 4 OF 5

Identity Erosion & Authenticity Loss

Scale: 1 = Not at all · 2 = A little · 3 = Somewhat · 4 = Quite a bit · 5 = Very much

1. I am not sure who I actually am underneath all the masks I wear — my authentic self feels inaccessible

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. I have difficulty answering "What do you want?" because I have spent so long adapting to what others want

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. I sometimes realize I am masking even when I am alone — the performance has become automatic and involuntary

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. I have lost touch with my own preferences, needs, and boundaries because accommodating others became my default

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. I feel like a fraud or impostor because the person others know is not the person I actually am

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. I struggle to trust my own perceptions, judgments, and emotions because I have spent years overriding them to fit in

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. I fear that if people saw the real me — unmasked, unfiltered, neurodivergent — they would reject me

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. I used substances partly because they gave me temporary access to a version of myself that felt genuine

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

YOUR EXERCISE**Exercise 6: Mask vs. Self**

Who am I underneath?

Meeting yourself again

After years of masking, the question 'Who am I really?' can feel impossible to answer. You do not have to answer it all at once. Start small: in one area of life at a time, write what the mask does, then write what you think the person underneath would do. If you don't know yet, write 'I don't know yet.' That is an honest answer.

How I talk

With the mask on, I...

Underneath, I think I...

How I move and sit

With the mask on, I...

Underneath, I think I...

What I like and enjoy

With the mask on, I...

Underneath, I think I...

How I show feelings

With the mask on, I...

Underneath, I think I...

What I wear and what feels comfortable

With the mask on, I...

Underneath, I think I...

How much time I want with people

With the mask on, I...

Underneath, I think I...

What I say yes and no to

With the mask on, I...

Underneath, I think I...

What I find funny

With the mask on, I...

Underneath, I think I...

Clues to the Real Me

What I loved as a kid, before I learned to hide it:

What I do when I am sure no one is watching:

Things I would stop pretending to like:

A time in sobriety when I felt most like myself:

When I was using, what felt like 'me,' and is any of that worth keeping without the substance?

What the Mask Cost

Grief can come up here

Seeing what years of masking cost can bring grief. That grief is real and it makes sense. It can also be a strong craving trigger, so do this part when you have support nearby. If you feel unsafe or have thoughts of harming yourself, call or text 988 (Suicide & Crisis Lifeline), or call 911.

What I lost to years of performing:

What I want to say to the younger me who first put the mask on:

Putting It Together

1. In which area was the gap between mask and self the biggest?

2. Where did you write "I don't know yet"? What is one small way to find out?

3. Finish this sentence: "Underneath the mask, one thing I know for sure about myself is..."

YOUR EXERCISE

Exercise 9: Daily Masking & Depletion Tracker

Seven days of noticing

Two minutes each evening

Masking and burnout are easy to miss day by day and obvious over a week. Each evening, rate the day and jot a line or two. After seven days, look for the link between how much you masked, how drained you felt, and how strong your cravings were.

7-Day Log

☐ Day 1 ☐ Day 2 ☐ Day 3 ☐ Day 4 ☐ Day 5 ☐ Day 6 ☐ Day 7

Day 1

How much I masked today:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Not at all 10 = All day

Energy left tonight:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Empty 10 = Full

Burnout signs today:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Many

Strongest craving today:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None 10 = Intense

Where I masked most:

☐ Work or school ☐ Family ☐ Partner ☐ Friends ☐ Recovery meetings ☐ Therapy or treatment ☐ Online ☐ Stores and public places ☐ Even when alone

What refilled me:

☐ Time alone ☐ Special interest ☐ Moving or stimming ☐ Outside ☐ Nap or rest ☐ Safe person ☐ Music ☐ Meeting where I was real ☐ Nothing today

The moment I masked hardest, and a moment I got to be myself:

One change for tomorrow:

Week Review

1. On the days you masked most, what happened to your energy and cravings?

2. Which place or person took the most masking this week?

3. What refilled you most reliably?

4. What is one change you will carry into next week?

PART 5 OF 5 · READING

Unmasking in Recovery: Learning to Exist Without the Performance

Unmasking is not flipping a switch. It is not a single dramatic moment of revelation where you rip off the mask and declare your authentic self to the world.

It is a gradual, often terrifying process of reducing the performance — consciously, deliberately, in safe increments — and learning that you can survive, and even thrive, as the person you actually are rather than the person you have been pretending to be.

****The Process:****

****Step 1: Awareness****

You cannot remove a mask you do not know you are wearing. Many neurodivergent people have masked for so long that the performance has become involuntary. The first step is simply noticing: "I am masking right now." Not judging it, not trying to stop it, just observing it.

What are you suppressing? What are you performing? What is the mask doing that the authentic you would not do?

****Step 2: Selective Unmasking****

Choosing specific, safe contexts in which to reduce the performance. This might mean allowing yourself to stim in your therapist's office. It might mean telling your sponsor that you have ADHD and that your "non-compliance" is actually executive dysfunction.

It might mean attending a meeting without your "recovery performance" persona and sharing something that is genuinely, vulnerably true.

Each act of selective unmasking provides data: what happened? Was I rejected? Was I accepted? Was the response tolerable? This data gradually recalibrates the threat assessment system that has been running the mask for years.

****Step 3: Tolerating the Grief****

Unmasking frequently produces a grief response — grief for the years lost to performance, grief for the authentic self that was suppressed, grief for the relationships that were never real because only the mask was present, grief for what might have been different if the mask had not been necessary.

This grief is real, it is proportionate, and it is a healthy sign that the authentic self is emerging. But it is also a relapse risk, because grief is exactly the kind of overwhelming emotional experience that the substance used to manage.

****Step 4: Building a Life That Requires Less Masking****

This is structural, not just emotional. It means pursuing relationships where authenticity is valued rather than performance. It means seeking environments — work, social, recovery — that accommodate neurodivergent needs rather than demanding neurotypical presentation.

It means requesting and accepting accommodations without shame. It means redefining success not as "passing for neurotypical" but as "functioning sustainably as the neurodivergent person I am."

In recovery, unmasking is not a luxury or a self-improvement project. It is a survival strategy.

If the masking-burnout-substance cycle is one of the primary engines of your addiction, then reducing masking is relapse prevention. Every context in which you can exist authentically is a context in which the cycle cannot run. Every relationship in which you are known as you actually are is a relationship that does not deplete you.

Every moment of sustainable authenticity is a moment that does not require chemical management.

The goal is not to never mask again — that may not be realistic in a neurotypical world. The goal is to mask by choice rather than compulsion, for limited durations rather than indefinitely, with awareness rather than automaticity, and with recovery from the masking effort built into the plan rather than managed through substance use after the fact.

Reflection Questions

1. How does the idea of unmasking feel to you — liberating, terrifying, or both? What specifically feels dangerous about reducing the performance?

2. In which environments or relationships do you feel safest to be authentic? In which do you feel the most pressure to mask? What is different about these contexts?

3. Have you experienced the grief of unmasking — the recognition of what was lost to years of performance? How have you managed that grief, and how has it affected your recovery?

4. What is one specific context in which you could begin practicing selective unmasking this week? What would you unmask, and what is the realistic risk?

5. Write a statement of intention for your unmasking process: "I am learning to exist as my authentic self. Today, I will practice this by..."

CHECK YOURSELF · CHECK-IN 5 OF 5

Masking in Recovery Environments

Scale: 1 = Not at all · 2 = A little · 3 = Somewhat · 4 = Quite a bit · 5 = Very much

1. I mask in recovery settings — performing "good recovery" rather than doing genuine recovery work

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. I have difficulty being honest in meetings, therapy, or with my sponsor because authentic disclosure requires dropping the mask

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. I feel pressure to present as "doing well" in recovery even when I am struggling

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. I hide my neurodivergent traits in recovery environments because I fear being misunderstood or judged

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. The social demands of recovery (meetings, groups, sober socializing) trigger the same masking exhaustion that drove my substance use

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. I have noticed myself developing a "recovery mask" — a new performance persona designed to appear like a successful recovering person

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. I fear that if my treatment team truly understood how I experience the world as a neurodivergent person, they would not know how to help me

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. I recognize that masking in recovery is dangerous because it prevents me from getting the authentic support I need

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

YOUR EXERCISE**Exercise 7: Safety Mapping**

Where can I unmask?

Green, yellow, red

Unmasking is not something you do everywhere at once. It starts in places and with people where it is safe. Green means you can mostly be yourself. Yellow means you can loosen the mask a little. Red means masking is still the safer choice for now. The goal is to find your greens, test your yellows, and stop spending energy trying to be real in places that are not safe.

People

Person 1 (name or role):

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

One thing I could unmask with this person first:

Person 2 (name or role):

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

One thing I could unmask with this person first:

Person 3 (name or role):

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

One thing I could unmask with this person first:

Person 4 (name or role):

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

One thing I could unmask with this person first:

Person 5 (name or role):

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

One thing I could unmask with this person first:

Places

Home

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Work or school

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Family gatherings

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Recovery meetings

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Therapy or counseling

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Online recovery groups

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Faith community

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Friends' homes

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Stores and public places

☐ Green: I can be myself ☐ Yellow: partly ☐ Red: I have to mask

Small Unmasking Experiment 1

Pick something small, in a green or yellow place. For example: fidget openly, say "I need a minute," skip small talk, or share a real interest.

What I will unmask:

Where and with whom:

How scared I feel before trying:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Not at all 10 = Terrified

What actually happened:

How it went:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Badly 10 = Better than expected

What I learned:

Small Unmasking Experiment 2

Pick something small, in a green or yellow place. For example: fidget openly, say "I need a minute," skip small talk, or share a real interest.

What I will unmask:

Where and with whom:

How scared I feel before trying:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Not at all 10 = Terrified

What actually happened:

How it went:

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = Badly 10 = Better than expected

What I learned:

My Safety Rules

I do not owe unmasking to anyone who...

Signs a person or place is not safe for me to be myself:

How I will recover after masking I cannot avoid (work, court, family events):

YOUR EXERCISE

Exercise 8: Unmasking My Recovery

Dropping the recovery performance

A new mask with a recovery logo

Many people bring their masking skills straight into recovery. They learn what a 'good recovering person' looks and sounds like, and they perform it. From the outside, it looks like progress. On the inside, nobody knows what is really going on, so nobody can help. A recovery mask is dangerous because it hides exactly the struggles that lead back to using.

Signs of a Recovery Mask

Things I do (pick any that fit):

- ☐ Saying 'I'm good' when I'm not
- ☐ Sharing what I think people want to hear
- ☐ Using the right slogans
- ☐ Nodding along when I don't understand
- ☐ Agreeing to things I can't keep up with
- ☐ Hiding that meetings overwhelm me
- ☐ Not telling my sponsor about cravings
- ☐ Acting fine with my counselor
- ☐ Hiding ADHD or autistic traits
- ☐ Over-volunteering to look committed

How much of my recovery right now is performance?

☐ 0 ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10

0 = None, it is real 10 = Almost all of it

What I am most afraid people in recovery would think if they saw the real me:

Meetings

What I show here:

What I hide here:

What hiding it costs me:

One true thing I could say here:

My sponsor or mentor

What I show here:

What I hide here:

What hiding it costs me:

One true thing I could say here:

My counselor or therapist

What I show here:

What I hide here:

What hiding it costs me:

One true thing I could say here:

Treatment groups

What I show here:

What I hide here:

What hiding it costs me:

One true thing I could say here:

Sober friends and family

What I show here:

What I hide here:

What hiding it costs me:

One true thing I could say here:

Asking for What I Need

Changes that would help me show up as myself:

- ☐ Sit near the door ☐ Step out for breaks ☐ Fidget or stim ☐ Text instead of call ☐ Written instructions ☐ Camera off in online meetings ☐ Smaller meetings ☐ Not be called on to share ☐ Extra time to answer ☐ Shorter sessions

What I want to say to my sponsor or counselor. For example: "I'm neurodivergent, and I've been acting fine when I'm not. What would help me is..."

Who I will say it to, and by when:

Reflection

1. Where is the recovery mask thickest for you? Why there?

2. Has the recovery mask ever kept you from getting help when you were close to using?

3. What would change in your recovery if one person knew the full truth about how you are doing?

YOUR EXERCISE

Exercise 10: My Authentic Recovery Plan

A recovery that fits the person underneath the mask

Mask by choice, not by default

The goal is not to never mask again. Some places will still call for it. The goal is to mask less, to mask on purpose, to rest afterward, and to have enough places where you can be real that the substance is no longer the only way to take the mask off. Use what you learned in the earlier exercises to fill this in.

What I Know Now

My main ways of masking:

The jobs substances did for my mask:

My burnout warning signs:

Masking Less

Masking demands I will reduce or drop:

My green places and people, where I will spend more time:

Changes or accommodations I will ask for (work, meetings, treatment):

Protecting My Energy

Daily deposits I will build in:

My limit on high-cost activities each week:

My recovery time after masking I cannot avoid:

When Burnout Starts

If burnout brings cravings or dark thoughts

Burnout is a relapse risk. Reach out early rather than pushing through alone. If you feel unsafe or have thoughts of harming yourself, call or text 988 (Suicide & Crisis Lifeline), or call 911.

The steps I will take when I see my warning signs:

What I will cancel or put down first, without guilt:

Who I will tell, and how (call, text, in person):

My Treatment Team

What my counselor, sponsor, or doctor needs to know about my masking and burnout:

When and with whom I will have this conversation:

Commitment

"I am learning to live as myself in recovery. Today I will practice this by..."

Where I will keep this plan so I see it:

I will review this plan with ___ on ___ (date):
