

Couples Therapy in Recovery

A Comprehensive Reading, Self-Assessment & Planning Worksheet for
Couples Navigating Substance Use Recovery Together

The Recovery Files — Embrace, Empower & Evolve

Educational Reading

- Educational Reading

Worksheet

- Sobriety Foundation
- Trust Rebuilding
- Emotional Literacy
- Couple Needs Assessment
- Finding a Therapist
- Therapy Modalities
- Goal Setting

EDUCATIONAL READING

Educational Reading

Welcome: Healing a Relationship While Healing Yourself

If you are reading this, something important has happened. Amid the exhausting, disorienting, and deeply personal process of early recovery from substance use disorder, you and your partner have also decided that your relationship matters enough to fight for. That is not a small thing. In fact, it may be one of the bravest decisions either of you has made.

This worksheet is designed for couples in which at least one partner is in early recovery from substance use disorder. It is written to be completed together — though you may find it helpful to read certain sections individually first and then come together to discuss your responses. The goal is not to produce perfect answers or to resolve every conflict on these pages. The goal is to begin the honest, sometimes uncomfortable, ultimately transformative process of understanding what your relationship needs, what each of you needs, and how couples therapy can support you both as you navigate the intersection of recovery and partnership.

Addiction does not happen in isolation, and neither does recovery. The substance use affected both of you — differently, but profoundly. The partner in recovery carries the weight of their own healing. The non-recovering partner carries a different but equally heavy weight: the accumulated pain of broken promises, hypervigilance, emotional exhaustion, grief, anger, and the complex guilt of loving someone through addiction. Couples therapy is not about assigning blame. It is about creating a space where both truths can coexist, where both sets of wounds can be tended, and where a new relationship — not a return to the old one — can begin to emerge.

An Important Foundation

Clinical research and best practice consistently recommend that the recovering partner establish a solid foundation of individual sobriety before couples therapy begins in earnest. This typically means a minimum of 60 to 90 days of sustained sobriety, active engagement in a personal recovery program, and ideally involvement in individual therapy. This is not a punishment or a delay — it is a protection. Couples therapy can surface intense emotions, and without a stable recovery foundation, those emotions become relapse triggers rather than growth opportunities. This worksheet will help you assess whether that foundation is in place.

How are each of you feeling about pursuing couples therapy at this point in recovery? (We encourage both partners to respond.)

Partner in Recovery

Supporting Partner

Why Couples Therapy in Recovery Is Different

Couples therapy during or after addiction recovery is not the same as standard couples counseling. Standard couples therapy assumes that both partners are operating with clear minds, stable emotional regulation, and the capacity to engage in difficult conversations without existential risk. When substance use disorder is part of the equation, these assumptions no longer hold. The stakes are higher, the emotional landscape is more volatile, and the therapeutic approach must account for the unique dynamics that addiction introduces into a relationship.

What Addiction Does to a Relationship

Addiction rewires the architecture of a relationship in ways that both partners may not fully understand until recovery begins. The substance becomes a third entity in the partnership — competing for attention, resources, time, honesty, and emotional availability. Over time, predictable patterns develop that become deeply entrenched. The using partner becomes increasingly secretive, manipulative, emotionally unavailable, and unreliable — not because they are a bad person, but because the disease of addiction hijacks the brain's reward system and fundamentally alters priorities, judgment, and behavior. The non-using partner, in response, often develops their own set of adaptive behaviors: hypervigilance, controlling behavior, emotional suppression, codependency, caretaking at the expense of their own needs, and chronic anxiety. Both partners lose themselves. Both partners suffer.

When the substance is removed, these entrenched patterns do not automatically disappear. In fact, early recovery often intensifies relational tension because the coping mechanisms both partners relied on — however dysfunctional — have been disrupted. The recovering partner is raw, emotionally volatile, and relearning how to exist without substances. The supporting partner may be cycling between hope and skepticism, relief and rage, desire to reconnect and a protective instinct to maintain distance. Both are grieving — the recovering partner is grieving the substance; the supporting partner is grieving the relationship they thought they had, the years they lost, and the trust that was destroyed.

Why You Can't Just "Go Back to Normal"

One of the most common and most dangerous misconceptions in early recovery is that once the substance use stops, the relationship will return to how it was before. This expectation sets both partners up for profound disappointment. The truth is that you cannot go back to the relationship you had before addiction — nor should you want to. That relationship, whatever its strengths, contained the conditions under which addiction developed and progressed. Recovery is not about restoration. It is about reconstruction. You are not repairing an old house; you are building a new one — on a different foundation, with different materials, according to a different blueprint.

Couples therapy provides the structured, professionally guided space in which this reconstruction can happen safely. Without it, couples often fall back into old patterns — the recovering partner

resumes their familiar role, the supporting partner resumes theirs, and the relationship dynamic that sustained the addiction quietly reinstalls itself. A skilled couples therapist disrupts these patterns, introduces new relational skills, and holds both partners accountable to a higher standard of honesty, vulnerability, and mutual respect.

Both Partners Need Healing

One of the most important things to understand about couples therapy in recovery is that it is not only for the benefit of the recovering partner. The supporting partner has their own deep wounds that require attention, validation, and professional support. Years of living with active addiction create their own form of trauma — characterized by chronic stress, anticipatory anxiety, emotional exhaustion, erosion of self-worth, grief, anger, and often a profound sense of loneliness even within the relationship. These wounds do not heal simply because the substance use has stopped. If anything, they often surface more intensely in early recovery as the supporting partner finally has the emotional space to feel what they have been suppressing.

Effective couples therapy in recovery honors both partners' experiences without creating a hierarchy of suffering. The recovering partner's addiction is not minimized, and the supporting partner's pain is not dismissed. Both truths coexist. Both deserve attention. Both are essential to the healing of the relationship.

Reflection

What resonated most with you in this section? Was there anything that surprised you or challenged a belief you have been carrying about your relationship?

Ten Core Benefits of Couples Therapy in Recovery

Understanding what couples therapy can specifically offer your relationship during recovery helps both partners commit to the process with clarity and intention. Below are ten core benefits, each explained within the context of substance use recovery.

1. Rebuilding Trust Through Structured Accountability

Trust is almost always the most damaged element of a relationship affected by addiction. The lies, the broken promises, the financial deceptions, the emotional betrayals — these accumulate over months and years into a wall of mistrust that cannot be dismantled by apologies alone. Couples therapy provides a structured framework for trust rebuilding that goes beyond words. Your therapist will help you establish transparent communication practices, develop concrete accountability agreements, create measurable benchmarks for trust restoration, and process the inevitable setbacks that occur along the way. Trust is rebuilt not through grand gestures but through small, consistent, observable actions over time — and couples therapy creates the accountability structure that makes this possible.

2. Creating a Shared Language for Emotions

Addiction suppresses emotional literacy. The recovering partner has spent months or years numbing their feelings with substances. The supporting partner has spent that same time suppressing their own emotions to survive. By the time recovery begins, neither partner may have the vocabulary, the practice, or the felt safety to accurately identify, name, and express what they are feeling. Couples therapy teaches both partners to develop a shared emotional language — a common framework for naming internal experiences, expressing needs, and responding to each other's emotional bids with empathy rather than defensiveness. This is not about becoming overly emotional or sentimental. It is about building the basic communication infrastructure that every healthy relationship requires.

3. Breaking the Cycle of Codependency and Enabling

In many relationships affected by addiction, one or both partners have developed codependent patterns. The supporting partner may have become the manager, the fixer, the shield — taking on responsibilities that belong to the recovering partner, making excuses, covering up consequences, and sacrificing their own needs in the process. The recovering partner, in turn, may have become comfortable with this dynamic, unconsciously relying on their partner to absorb the consequences of their use. Couples therapy brings these patterns into awareness and helps both partners establish healthier roles. The recovering partner learns to take full ownership of their recovery and its responsibilities. The supporting partner learns to release control, set boundaries, and reclaim their own identity.

4. Processing Resentment Before It Becomes Toxic

Resentment is one of the most dangerous emotions in a recovering relationship — for both partners. The supporting partner carries resentment over the years of pain, betrayal, and sacrifice. The recovering partner may carry their own resentment — over perceived judgment, lack of understanding, or the pressure of trying to prove themselves worthy of forgiveness. Left unaddressed, these resentments metastasize. They emerge as passive aggression, emotional withdrawal, contempt, or explosive conflict. Couples therapy provides a safe, mediated space to surface and process resentments before they become relationship-ending poisons. This is not about relitigating every past offense. It is about acknowledging the emotional reality both partners carry and developing a path forward that does not require either person to pretend the past did not happen.

5. Establishing Healthy Boundaries That Support Recovery

Boundaries are essential in any healthy relationship, but in a recovering relationship, they take on additional significance. Both partners need clear, mutually understood boundaries around substance-related environments and triggers, financial transparency and decision-making, communication expectations including honesty about cravings or struggles, the role of recovery activities such as meetings, sponsorship, and individual therapy, privacy and personal space needs, and expectations around accountability without surveillance. Couples therapy helps both partners negotiate these boundaries collaboratively rather than unilaterally, ensuring that boundaries are protective rather than punitive and supportive rather than controlling.

6. Learning to Fight Fair

Conflict is inevitable in any relationship — but in a relationship recovering from addiction, conflict carries heightened risk. Arguments can trigger cravings. Emotional escalation can destabilize recovery. Old patterns of manipulation, gaslighting, stonewalling, or emotional flooding can reassert themselves quickly under stress. Couples therapy teaches both partners constructive conflict resolution skills: how to raise concerns without attacking, how to listen without defending, how to take time-outs without abandoning, how to repair after rupture, and how to distinguish between productive disagreement and destructive fighting. Learning to fight fair is not about eliminating conflict — it is about transforming conflict from a threat into an opportunity for deeper understanding.

7. Rebuilding Intimacy at the Right Pace

Intimacy — emotional, physical, and sexual — is profoundly affected by addiction. The recovering partner may have been emotionally absent, physically unreliable, or sexually impaired during active use. The supporting partner may have developed protective walls, resentment around physical contact, or a deep sense of disconnection. In recovery, both partners often want to reconnect but find themselves uncertain about how to do so safely. Couples therapy provides guidance for rebuilding intimacy gradually, at a pace that respects both partners' readiness. This includes reestablishing emotional intimacy through honest communication and vulnerability, rebuilding physical affection without pressure or expectation, addressing sexual concerns with clinical support, and understanding that intimacy in recovery is earned through daily investment, not demanded through past history.

8. Supporting the Recovery Without Owning It

One of the most delicate balances in a recovering relationship is determining how the supporting partner participates in the recovering partner's sobriety without becoming its primary guardian. The supporting partner needs to be involved enough to feel safe but not so involved that they become the recovery police. The recovering partner needs to feel supported but not surveilled. Couples therapy helps both partners navigate this balance by establishing clear agreements about what support looks like, what monitoring is reasonable, when concern crosses into control, and how the recovering partner can take visible ownership of their recovery in ways that naturally build the supporting partner's confidence. The recovering partner's sobriety must ultimately be their own responsibility — but it exists within the context of a relationship, and both partners deserve input into how that context is shaped.

9. Healing the Family System

If the couple has children, the impact of addiction extends beyond the partnership. Children in families affected by substance use often carry their own wounds: anxiety, confusion, parentification, loyalty conflicts, fear, and a deep need for stability. Couples therapy can address how the partners co-parent through recovery, how they communicate about the addiction with their children in age-appropriate ways, how they create a home environment that is safe and predictable, and how they repair the trust that children may have lost. Even for couples without children, the broader family system — parents, siblings, in-laws — is often implicated in the addiction dynamic, and couples therapy provides a space to address these extended relational complexities.

10. Building a Shared Vision for the Future

Perhaps the most powerful benefit of couples therapy in recovery is the opportunity to create a shared vision for the future — not the future that was imagined before addiction, and not a future defined solely by the avoidance of relapse, but a genuinely new vision that reflects who both partners are becoming. This includes shared values and priorities, individual and joint goals, agreements about lifestyle, finances, and daily routines, plans for continued growth both individually and as a couple, and a mutual commitment to ongoing self-improvement and relational investment. Recovery is not just about surviving. It is about building a life that both partners find meaningful, fulfilling, and worth protecting. Couples therapy is where that shared life begins to take shape.

Couple Reflection

Discuss together: Which two or three benefits feel most urgently needed in your relationship right now? Do you agree on the priorities?

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Sobriety Foundation Assessment

Couples therapy is most effective — and safest — when built on a stable recovery foundation. This assessment helps you and your treatment team determine whether the foundation is strong enough to begin couples work, or whether additional individual stabilization is needed first. This is not a pass/fail test. It is a clinical readiness tool.

1 = Strongly Disagree 3 = Neutral 5 = Strongly Agree

1. The recovering partner has maintained continuous sobriety for at least 60 days.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. The recovering partner is actively engaged in a personal recovery program (meetings, sponsorship, step work).

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. The recovering partner is currently participating in individual therapy or counseling.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. The recovering partner has a relapse prevention plan in place.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. The recovering partner can identify their personal triggers and has strategies to manage them.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. The recovering partner can sit with uncomfortable emotions without immediately needing to escape or numb.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. The recovering partner takes full responsibility for their addiction and its impact on the relationship.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. The supporting partner has their own support system (individual therapy, Al-Anon, friends, family).

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

9. Both partners understand that couples therapy may surface intense emotions that could temporarily increase stress.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

10. Both partners are voluntarily choosing to pursue couples therapy — neither is being coerced or ultimatummed.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

11. The relationship is free from active domestic violence or threats of physical harm.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

12. Both partners are willing to be honest in therapy, even when it is uncomfortable.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

13. The recovering partner has a support network they can contact if couples sessions trigger cravings.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

14. Both partners understand that recovery is the non-negotiable foundation — the relationship cannot be prioritized over sobriety.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

15. Both partners are open to hearing things they may not want to hear about themselves.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Understanding Your Readiness

Scores mostly 4-5: You likely have a strong enough foundation to begin couples therapy. The recovery infrastructure is in place, both partners are willing, and the environment is safe.

Scores mostly 3: Some foundation elements are developing but not yet solid. Consider discussing timing with your individual therapist or treatment team. You may benefit from a few more weeks of individual stabilization before beginning couples work.

Scores of 1-2 on any item: These represent areas that need attention before couples therapy can be safe and effective. Items related to safety (domestic violence, coercion) and sobriety stability are particularly critical. If you scored low on item 11 (freedom from active domestic violence), please speak with a counselor individually before proceeding.

Based on this assessment, what concerns — if any — do you have about your readiness for couples therapy?

What additional supports might need to be in place before you begin couples therapy?

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Trust Rebuilding Assessment

Trust is rebuilt through consistent, observable actions over time — not through promises, declarations, or single grand gestures. This assessment helps both partners honestly evaluate where trust currently stands so you can set realistic expectations. Both partners should complete this independently, then compare and discuss your responses.

1 = Strongly Disagree 3 = Neutral 5 = Strongly Agree

1. I believe my partner is currently being honest with me about their day-to-day life.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. I feel safe expressing vulnerable emotions with my partner.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. I trust my partner's stated commitment to recovery / to the relationship.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. When my partner makes a promise, I believe they will follow through.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. I can have a disagreement with my partner without fearing retaliation, withdrawal, or relapse.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. I feel my partner understands the depth of pain their actions (or the addiction) caused me.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. I feel comfortable leaving my partner alone without monitoring their behavior.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. I believe my partner is telling me the full truth — not just a sanitized version.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

9. I trust that my partner prioritizes our relationship as a core part of their life.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

10. I feel that rebuilding trust is possible for us, even if it will take significant time.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

11. I am willing to take small risks of vulnerability to rebuild connection.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

12. I have forgiven (or am working toward forgiving) past hurts — not forgetting them, but releasing the desire to punish.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What is the most significant breach of trust that still affects your relationship today?

What specific actions from your partner would help you feel safer and begin to rebuild trust?

What does "trust" look like to you in practical terms? How will you know when it is growing?

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Emotional Identification & Verbalization Assessment

Emotional literacy — the ability to identify, name, and express emotions accurately — is the foundation of healthy communication. Addiction suppresses it in the using partner and distorts it in the supporting partner. This assessment measures where each of you currently stands. Rate how accurately each statement describes you right now.

1 = Never / Rarely 3 = Sometimes 5 = Almost Always

1. I can name what I am feeling in the moment (beyond "fine," "good," or "bad").

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. I can express my emotions to my partner without yelling, shutting down, or deflecting.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. I can listen to my partner express difficult emotions without becoming defensive.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. I can distinguish between anger and the emotions hiding underneath it (hurt, fear, shame, sadness).

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. I can sit with uncomfortable feelings without needing to immediately fix, escape, or numb them.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. I can recognize when my emotional reaction is disproportionate to the situation and trace it back to a deeper source.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. I can ask for what I need emotionally from my partner in clear, non-accusatory language.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. I can tell the difference between a current conflict and an old wound being triggered.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

9. I take responsibility for my own emotions rather than blaming my partner for causing them.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

10. I can validate my partner's feelings even when I disagree with their perspective.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

11. I can express sadness, fear, or vulnerability without viewing it as weakness.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

12. I can regulate my emotions enough to stay present in a difficult conversation rather than flooding or stonewalling.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

13. I notice physical sensations in my body when emotions arise and can use them as information.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

14. I feel emotionally connected to my partner at least some of the time.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

15. I believe both my partner and I are capable of growing in our emotional awareness and expression.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Expanding Your Emotional Vocabulary

Most people default to a handful of emotional words: mad, sad, happy, fine, stressed. In recovery and in relationships, precision matters. Below are emotion families. Circle or highlight the specific emotions you experience most often but rarely name aloud.

Anger Family

Frustrated, Irritated, Resentful, Bitter, Enraged, Indignant, Annoyed, Hostile, Contemptuous, Betrayed

Sadness Family

Disappointed, Grief-stricken, Lonely, Melancholy, Hopeless, Empty, Neglected, Abandoned, Heartbroken, Depleted

Fear Family

Anxious, Panicked, Insecure, Overwhelmed, Dread, Hypervigilant, Paranoid, Helpless, Vulnerable, Terrified

Shame Family

Humiliated, Worthless, Inadequate, Exposed, Defective, Disgraced, Guilty, Self-loathing, Embarrassed, Undeserving

Joy Family

Grateful, Hopeful, Content, Proud, Relieved, Peaceful, Connected, Inspired, Amused, Loved

Surprise Family

Shocked, Confused, Disoriented, Amazed, Stunned, Bewildered, Destabilized, Curious, Overwhelmed, Moved

What emotions do you most struggle to express to your partner? Why?

When your partner expresses strong emotions, what is your typical response? (e.g., shut down, get defensive, try to fix it, get angry, leave the room)

Complete this sentence: "The emotion I most need my partner to understand about me right now is _____ because _____."

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Couple Needs Assessment

This section helps you identify, as a couple, what your relationship most needs to address in therapy. Rate how strongly you agree that each item is a current need. Complete this together and notice where you agree and where you differ — the differences are often the most important data.

1 = Not a Need 3 = Moderate Need 5 = Urgent Need

Communication

We need to develop healthier ways to argue and resolve conflict.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to learn how to talk about the addiction and its effects without it escalating.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to establish daily check-in practices to stay emotionally connected.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to learn how to give and receive feedback constructively.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to be able to discuss recovery-related topics (meetings, cravings, triggers) openly.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Boundaries & Roles

We need to establish clear agreements about financial transparency and decision-making.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to define healthy boundaries around monitoring, privacy, and accountability.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to redefine household roles and responsibilities now that recovery changes the dynamic.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to address enabling or codependent patterns in our relationship.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need clear agreements about substance-related environments (social events, alcohol in the home, etc.).

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Emotional Connection & Intimacy

We need to rebuild emotional intimacy that was lost during active addiction.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to address sexual intimacy concerns openly and without shame.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to reestablish physical affection (non-sexual touch, closeness, presence).

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to find shared activities and interests that support our recovery lifestyle.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to grieve together what was lost during the addiction years.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Trust & Safety

We need a clear framework for how trust will be rebuilt over time.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to process specific incidents of betrayal, deception, or harm.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to establish what transparency looks like in practice (not just theory).

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to develop a shared understanding of what constitutes a relapse and what the plan is if it occurs.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need the supporting partner to feel safe enough to begin letting their guard down.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Family & External Relationships

We need to address how the addiction has affected our children and develop a co-parenting approach to healing.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to establish boundaries with extended family members who may complicate recovery.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to rebuild or restructure our social network to support a sober lifestyle together.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to address how we will handle social situations that involve substances.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

We need to decide how much of our story we share with others and present a united front.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Where did your ratings differ most from your partner's? What does that tell you?

What is the single most important need in your relationship right now that both of you agree on?

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What to Look for in a Couples Therapist

Not every couples therapist is equipped to work with addiction-affected relationships. The wrong therapist can inadvertently destabilize recovery, reinforce unhealthy dynamics, or minimize the impact of addiction on the relationship. Rate how important each criterion is to you as a couple.

1 = Not Important 3 = Moderately Important 5 = Essential

1. The therapist must have specific training and experience in treating couples where addiction is a factor.

Essential Qualifications

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. The therapist should understand the twelve-step model and/or other recovery frameworks.

Recovery Knowledge

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. The therapist should not take sides but should be able to challenge both partners when needed.

Therapeutic Style

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. It is important that the therapist holds the recovering partner's sobriety as non-negotiable.

Recovery Knowledge

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. The therapist should be comfortable working with both the addiction dynamics and the relational dynamics simultaneously.

Essential Qualifications

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. I/we want a therapist who assigns homework and gives us tools to practice between sessions.

Therapeutic Style

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. It is important that the therapist validates the supporting partner's pain without minimizing the recovering partner's journey.

Therapeutic Style

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. We want a therapist who is willing to coordinate with the recovering partner's individual therapist or treatment team.

Coordination

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

9. The therapist should be knowledgeable about trauma and how it intersects with both addiction and relational distress.

Essential Qualifications

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

10. We prefer a therapist who takes a structured, goal-oriented approach rather than unstructured exploration.

Therapeutic Style

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

11. Scheduling flexibility (evenings, weekends, telehealth) is very important to us.

Logistics

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

12. Cost and insurance coverage are significant factors in our therapist selection.

Logistics

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

13. We want a therapist who can address the impact of addiction on our children / family system.

Specialization

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

14. The therapist should understand the specific cultural or professional context of our lives.

Specialization

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

15. We want a therapist who is comfortable discussing the possibility that separation may be the healthiest outcome.

Therapeutic Style

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

Red Flags in a Couples Therapist

- Takes sides or consistently aligns with one partner
- Minimizes the addiction or treats it as resolved because sobriety has begun
- Has no training or experience in substance use disorders
- Pushes for deep emotional work before the recovery foundation is stable
- Dismisses the supporting partner's pain or tells them to "just forgive"
- Cannot coordinate with the recovering partner's individual care team
- Encourages the supporting partner to be more "understanding" without accountability

Green Flags in a Couples Therapist

- Has specific training in addiction and couples therapy
- Treats sobriety as the non-negotiable foundation for couples work
- Creates space for both partners to feel heard and validated
- Challenges both partners with compassion
- Uses a structured approach with clear goals and progress markers

- Is willing to communicate with individual therapists when appropriate
- Understands the difference between accountability and punishment

Describe what your ideal couples therapist would be like. What qualities and approach would help you both feel safe?

What questions will you ask a potential therapist in the first session to determine if they are the right fit?

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Exploring Couples Therapy Modalities

Different therapeutic approaches address different aspects of relational healing. Read through each modality, then rate your interest as a couple. Many skilled therapists integrate multiple approaches based on your needs.

1 = Not Interested 3 = Somewhat Interested 5 = Very Interested

Emotionally Focused Therapy (EFT)

EFT is one of the most researched and effective approaches for couples therapy, rooted in attachment theory — the science of how human beings form and maintain emotional bonds. EFT helps couples identify the negative interaction cycles that keep them stuck: the pursue-withdraw pattern, the attack-defend loop, the freeze-freeze dynamic. Rather than focusing on surface-level complaints, EFT goes deeper to the underlying attachment needs that drive those cycles: "I need to know you are there for me." "I need to know I matter to you." "I need to feel safe enough to be vulnerable with you." In the context of recovery, EFT is particularly powerful because addiction fundamentally disrupts attachment security. The recovering partner was emotionally unavailable during active use, and the supporting partner learned to protect themselves through emotional distance. EFT helps both partners understand these patterns not as character flaws but as desperate attempts to manage attachment fear — and then guides them toward creating new patterns based on accessibility, responsiveness, and engagement.

Best For

Couples where emotional disconnection, fear of vulnerability, and pursue-withdraw dynamics are central issues. Particularly effective when both partners want deeper emotional connection but don't know how to get there safely.

Key Techniques

Identifying negative interaction cycles, accessing primary emotions beneath reactive behaviors, creating corrective emotional experiences, attachment-oriented conversations, hold-me-tight dialogues.

How interested are you both in this approach?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What about this approach appeals to or concerns you?

The Gottman Method

Developed by Drs. John and Julie Gottman based on over 40 years of research with thousands of couples, the Gottman Method is a structured, assessment-driven approach that focuses on strengthening friendship, managing conflict, and creating shared meaning. The Gottmans

identified specific patterns — the "Four Horsemen" of criticism, contempt, defensiveness, and stonewalling — that predict relationship failure with striking accuracy. Their method teaches couples to replace these destructive patterns with healthy alternatives: turning complaints into requests, building cultures of appreciation and respect, learning to self-soothe during conflict, accepting influence from each other, and developing shared rituals of connection. For recovering couples, the Gottman Method provides a particularly strong framework because it offers concrete, research-backed tools that both partners can practice immediately. It emphasizes building a "sound relationship house" where both partners feel known, respected, and valued.

Best For

Couples who appreciate structure and research-based approaches, couples where contempt, criticism, or stonewalling have become entrenched patterns, and couples who want practical communication tools they can use right away.

Key Techniques

Love Maps (knowing your partner's world), turning toward bids for connection, managing the Four Horsemen, dreams-within-conflict conversations, building shared meaning, aftermath-of-a-fight processing, rituals of connection.

How interested are you both in this approach?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What about this approach appeals to or concerns you?

Behavioral Couples Therapy (BCT)

BCT was developed specifically for couples in which one partner has a substance use disorder, making it uniquely suited to your situation. BCT integrates substance abuse treatment directly with couples therapy by establishing a daily recovery contract — a structured agreement in which the recovering partner states their intention not to use that day and the supporting partner witnesses and acknowledges this commitment. This simple but powerful ritual transforms recovery from a solitary struggle into a shared daily practice. BCT also incorporates positive reinforcement strategies, communication skills training, and structured activities to increase relationship satisfaction. Research shows that BCT produces better outcomes than individual-based treatment for both substance use and relationship functioning. Partners who complete BCT report significantly lower relapse rates, higher relationship satisfaction, and reduced domestic conflict compared to those who receive only individual treatment.

Best For

Couples where integrating recovery directly into the couples work is a priority. Particularly effective in early recovery when establishing daily recovery rituals and accountability structures is essential.

Key Techniques

Daily sobriety contract, catch-your-partner-doing-something-nice exercises, communication skills training, positive activity scheduling, relapse prevention planning as a couple, trust-building assignments.

How interested are you both in this approach?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What about this approach appeals to or concerns you?

Narrative Therapy for Couples

Narrative therapy is built on the principle that human beings make meaning through stories — and that the stories we tell about ourselves, our partners, and our relationships powerfully shape our experiences and choices. In a relationship affected by addiction, both partners carry dominant narratives that may be limiting or damaging: "I am the addict who ruins everything." "I am the long-suffering spouse." "Our relationship is defined by addiction." "Trust is impossible." Narrative therapy helps couples externalize these problem-saturated stories — separating the person from the problem — and identify alternative narratives that are equally true but often overlooked. When was a time your partner surprised you? When did you handle conflict better than expected? What values have survived the crisis of addiction intact? By amplifying these alternative stories, narrative therapy helps couples construct a new, more complete and empowering account of who they are together — one that includes the pain of addiction but is not defined by it.

Best For

Couples who feel trapped by a single narrative about their relationship ("we're broken," "it's too late"), couples where shame and identity issues are central, and couples who respond well to reflective and creative approaches.

Key Techniques

Externalizing conversations, mapping the influence of the problem, identifying unique outcomes, re-authoring the relationship story, definitional ceremonies, outsider witness practices.

How interested are you both in this approach?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What about this approach appeals to or concerns you?

Cognitive Behavioral Couples Therapy (CBCT)

CBCT applies cognitive-behavioral principles to the relationship context, focusing on how each partner's thoughts, beliefs, and interpretations about the other partner and the relationship drive emotional reactions and behavioral patterns. In a recovering relationship, cognitive distortions are pervasive on both sides. The recovering partner may think: "They'll never forgive me," "Nothing I do will ever be enough," or "They only stayed because they're codependent." The supporting partner may think: "They'll relapse eventually," "I can't trust anything they say," or "If they really loved me, they wouldn't have used." CBCT helps both partners identify these automatic thoughts, examine the evidence for and against them, develop more balanced and accurate interpretations, and change the behaviors that reinforce negative cycles. It is a highly structured approach with clear homework assignments and measurable progress markers.

Best For

Couples who appreciate logical, structured approaches, couples where negative thinking patterns are driving disconnection, and couples who want clear homework and measurable progress.

Key Techniques

Identifying automatic thoughts about the partner, examining cognitive distortions, behavioral experiments, communication skills training, problem-solving frameworks, relapse prevention integration.

How interested are you both in this approach?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What about this approach appeals to or concerns you?

Trauma-Informed Couples Therapy

Trauma-informed couples therapy recognizes that in many relationships affected by addiction, both partners carry significant individual trauma histories — and the addiction itself has created relational trauma that compounds whatever each person brought into the relationship. This approach integrates understanding of how trauma affects the nervous system, attachment patterns, emotional regulation, and interpersonal behavior into the couples work. Both partners learn to recognize when they are operating from a triggered, survival-mode state rather than their present-day adult capacity. They learn to identify each other's trauma responses — not as intentional attacks or manipulations, but as the nervous system's attempts to protect against perceived threats. This understanding creates compassion without excusing harmful behavior. It helps both partners develop co-regulation skills — the ability to help each other return to a calm, connected state when one or both have been activated by a trigger.

Best For

Couples where one or both partners have trauma histories (childhood abuse/neglect, domestic violence, sexual assault, combat, or relational trauma from the addiction itself). Essential when triggers from the past are constantly infiltrating the present.

Key Techniques

Psychoeducation about trauma and the nervous system, window of tolerance work, co-regulation exercises, trigger identification and management, somatic awareness, safety planning, gradual trauma processing within the relational context.

How interested are you both in this approach?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What about this approach appeals to or concerns you?

Solution-Focused Brief Therapy (SFBT) for Couples

SFBT takes a fundamentally different approach from most other modalities. Rather than extensively exploring problems, patterns, and histories, SFBT focuses primarily on identifying what is already working, what the couple envisions as their preferred future, and what small, concrete steps can move them toward that vision. This does not mean problems are ignored — they are acknowledged and validated — but the therapeutic energy is directed toward solutions rather than problem analysis. For recovering couples who may feel overwhelmed by the sheer volume of issues to address, SFBT provides a refreshing and energizing alternative. Instead of asking "What went wrong?" SFBT asks "When things go right between you, what does that look like?" "What would be different if you woke up tomorrow and this problem was solved?" "On a scale of 1 to 10, where are you now, and what would move you one point higher?" This approach can be particularly effective as a complement to other modalities or for couples who need early wins to build motivation for deeper work.

Best For

Couples who feel stuck in problem-focused thinking, couples who need quick momentum and early wins, couples where both partners are future-oriented, and as a complement to deeper modalities.

Key Techniques

Miracle question, scaling questions, exception-finding, complimenting strengths, small-step goal setting, presuppositional questioning.

How interested are you both in this approach?

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What about this approach appeals to or concerns you?

Based on your reading, which one or two modalities feel most aligned with what your relationship needs right now?

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Embrace, Empower & Evolve

WORKSHEET

Setting Your Couples Therapy Goals

Goals give your therapy direction and help both partners stay aligned. Rate how important each area is, then describe specific goals you would like to pursue together. Remember: the best goals are specific, measurable, and focused on what you want to build — not just what you want to avoid.

Rebuilding Trust & Safety

How important is this area? (1 = Not important, 5 = Critical priority)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What specific goals would you like to work on together in this area?

Communication & Conflict Resolution

How important is this area? (1 = Not important, 5 = Critical priority)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What specific goals would you like to work on together in this area?

Emotional Connection & Intimacy

How important is this area? (1 = Not important, 5 = Critical priority)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What specific goals would you like to work on together in this area?

Healthy Boundaries & Roles

How important is this area? (1 = Not important, 5 = Critical priority)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What specific goals would you like to work on together in this area?

Supporting Recovery as a Couple

How important is this area? (1 = Not important, 5 = Critical priority)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What specific goals would you like to work on together in this area?

Family Healing & Co-Parenting

How important is this area? (1 = Not important, 5 = Critical priority)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What specific goals would you like to work on together in this area?

Individual Identity Within the Relationship

How important is this area? (1 = Not important, 5 = Critical priority)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What specific goals would you like to work on together in this area?

Shared Vision & Future Planning

How important is this area? (1 = Not important, 5 = Critical priority)

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

What specific goals would you like to work on together in this area?

If couples therapy could change one thing about your relationship in the next six months, what would both of you want that to be?

Describe the relationship you want to have one year from now. What does a thriving, recovery-supported partnership look like to you?

What are you most afraid will happen to your relationship if you do not pursue couples therapy?

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